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DLN: 93493211007203

Department of the Treasury

Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

Open to Public Inspection

The organization may have to use a copy of this return to satisfy state reporting requirements Internal Revenue Service , 2012, and ending 12-31-2012 A For the 2012 calendar year, or tax year beginning 01-01-2012 D Employer identification number B Check if applicable NATIONAL FIRE PROTECTION ASSOCIATION Address change 04-1653090 Doing Business As Initial return Number and street (or P O box if mail is not delivered to street address) Room/suite E Telephone number 1 BATTERYMARCH PARK Terminated (617)770-3000 City or town, state or country, and ZIP + 4 QUINCY, MA 02169 Amended return Application pending G Gross receipts \$ 193,934,891 Name and address of principal officer Is this a group return for JAMES SHANNON affiliates? 1 BATTERYMARCH PARK QUINCY, MA 02169 **H(b)** Are all affiliates included? ✓ Yes ✓ No If "No," attach a list (see instructions) Tax-exempt status **▼** 501(c)(3) **H(c)** Group exemption number ▶ Website: ► WWW NFPA ORG L Year of formation 1896 M State of legal domicile MA Part I Summary Briefly describe the organization's mission or most significant activities TO PROMOTE SAFETY IN FIRE, ELECTRICAL AND RELATED AREAS Activities & Governance 2 Check this box 🔭 if the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) . 26 Number of independent voting members of the governing body (Part VI, line 1b) 4 25 Total number of individuals employed in calendar year 2012 (Part V, line 2a) 5 379 6 5,119 Total number of volunteers (estimate if necessary) . . . 1,288,711 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a \boldsymbol{b} Net unrelated business taxable income from Form 990-T, line 34 $\,$ 7b 0 **Prior Year Current Year** Contributions and grants (Part VIII, line 1h) . . 13.384.272 12,191,292 12,404,782 12,801,799 Program service revenue (Part VIII, line 2g) . . . 13,492,727 5,752,039 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . 41,439,883 38,440,820 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 80,721,664 69,185,950 13 395,725 472,497 Grants and similar amounts paid (Part IX, column (A), lines 1-3). 0 0 14 Benefits paid to or for members (Part IX, column (A), line 4) . . Salaries, other compensation, employee benefits (Part IX, column (A), lines **15 Expenses** 26,219,394 28,508,925 16a Professional fundraising fees (Part IX, column (A), line 11e) . 0 b Total fundraising expenses (Part IX, column (D), line 25) $\blacktriangleright 0$ **17** Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . . . 38,973,022 34,444,430 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 65,588,141 63,425,852 18 5,760,098 19 Revenue less expenses Subtract line 18 from line 12 15,133,523 t Assets or id Balances **Beginning of Current End of Year** Year 257,885,604 20 Total assets (Part X, line 16) . 239,473,110 21 50,270,464 52,432,143 Total liabilities (Part X, line 26) . . 22 Net assets or fund balances Subtract line 21 from line 20 189,202,646 205,453,461 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 2013-07-24 Signature of office Sign Here BRUCE MULLEN EXECUTIVE VICE PRESIDENT & CFO Type or print name and title

Preparer's signature

Firm's address > 500 BOYLSTON STREET

BOSTON, MA 02116 May the IRS discuss this return with the preparer shown above? (see instructions)

Print/Type preparer's name JOSEPH GISO

Firm's name ► CBIZ TOFIAS

Paid

Preparer

Use Only

Check

self-employed

Firm's EIN > 26-3753134

Phone no (617) 761-0600

P00030126

✓ Yes ☐ No

Par			_	ervice Accomp response to any qu		III	·
1	Briefly	describe the	organization's mis	sion			
							ALITY OF LIFE BY PROVIDING
AND	ADVOC	ATING CON	SENSUS CODES	AND STANDARDS	, RESEARCH, IRA	ININGAND EDUCATION	
2			undertake any sig r 990-EZ?	nıfıcant program se	rvices during the y	ear which were not listed	on □ Yes ▽ No
	•		ese new services (on Schedule O			1 1 1 1 103 1 110
3	Did the	organization		, or make significan	t changes in how i	conducts, any program	
	If "Yes,	" describe the	ese changes on So	hedule O			
4	expense	es Section 5	01(c)(3) and 501		are required to re	s three largest program se port the amount of grants	ervices, as measured by and allocations to others,
4a							nue \$ 33,898,282) TRUM IN ADDITION TO CODES AND CKET GUIDES AND TRAINING MANUALS
Al.	/Codo		\ /Evnoncos d	12 546 014	including grants of t	242 600 \ (Paya	nuo t
4b	(Code STANDA	RDS AND CODE) (Expenses \$ S DEVELOPMENT-A MA	12,546,014 10R FOCUS OF THE ASS	including grants of \$ SOCIATION IS THE DEV	343,600) (Reve	nue \$ 0) DISSEMINATION OF TIMELY CONSENSUS
	CODES /	AND STANDARD S IN ALL ASPEC	S ADOPTION, USE, AN	D ENFORCEMENT OF T Y ACTIVITY NFPA CODE	HESE DOCUMENTS SEF		ITY AND EFFECTS OF FIRE AND OTHER
4c	(Code) (Expenses \$	8,196,674	including grants of \$		 nue \$ 8,989,683)
	TRAININ TRAININ LICENSI	NG IS PROVIDED	FOCUS, NFPA TRAINS ANNUALLY AT BOTH F NE LEARNING MANANG	BETWEEN 5,000 - 10,0 ACE-TO-FACE SEMINAR	00 MEMBER AND NON- S AND ONLINE EVENTS	MEMBERS IN CODE NAVIGATIO THIS INCLUDES WORLDWIDE	N, APPLICATION AND AUDITING THE CUSTOMER REACH THROUGH THE VICE AND BUILDING PROFESSIONALS
	(Code) (Expenses \$	6,686,176	including grants of \$	27,400) (Reve	nue \$ 2,610,376)
	MEMBEF MEMBEF	RS REPRESENT :	MEMBERSHIP IS COME	RISED OF OVER 67,000	INDIVIDUALS THE MA	, , ,	IDE IN THE UNITED STATES, OVERALL
	(Code) (Expenses \$	2,233,210	including grants of \$) (Rever	nue \$
	PUBLIC		HE PUBLIC EDUCATION		HE TECHNICAL FOUND	ATION FOR NFPA'S FIRE AND L	IFE SAFETY EDUCATION MESSAGES AND
	(Code) (Expenses \$	1,125,317	including grants of \$) (Rever	nue \$
	INTERN		HAS ESTABLISHED OF	FICES IN CANADA, CHI	NA, MEXICO AND EURO	, ,	AKES THE TRANSLATION OF KEY CODES
	(Codo		\ (Evnances &	2,469,810	ıncludıng grants of \$) (Rever	nue \$
	PROJEC	T THROUGH TH		R OF CONTRACTS WITH ERGY AND FIREWISE C	THE FEDERAL GOVER	NMENT THE TWO LARGEST CO	NTRACTS ARE THE ELECTRICAL VEHICLE VICE, THE US DEPARTMENT OF THE
	(Code) (Expenses \$	101,496	including grants of \$	101,496) (Reve	nue \$
	•	RSHIPS \$40,000	GENERAL CONTRIBUT		g g 0, ψ	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	(Code MISCELI	LANEOUS INCOM) (Expenses \$	0	including grants of \$	0) (Reve	nue \$ 302,496)
4d	Other (Exper		rices (Describe in	Schedule O) including grants o	f¢ 1	28,896) (Revenue \$	2 912 872 \
46		•	ice expenses ►	49,935,995	ιφ Ι	20,090) (Revenue \$	2,912,872)
4e	iorai	program servi	ce exhelises F	47,733,735			

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

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Νo
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		Νo
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33	Yes	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section $512(b)(13)$? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Fal	Statements Regarding Other IRS Filings and Tax Compliance			_
	Check if Schedule O contains a response to any question in this Part V	-	Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 155			110
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0	1		
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	1 }		
	gaming (gambling) winnings to prize winners?	1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
ь	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	1 1	V	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Yes	
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		Νo
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts	1		
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νo
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
_		5c		N.
	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 as charitable contributions?	6a		No
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).	_		
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		No
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		Νo
d	If "Yes," indicate the number of Forms 8282 filed during the year			
		1		
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Νo
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess			
	business holdings at any time during the year?	8		
	Sponsoring organizations maintaining donor advised funds.			
	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a	-		
Ь	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	-		
	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders	-		
Ь	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	_		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
L3	Section 501(c)(29) qualified nonprofit health insurance issuers.	1		
а	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
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			
L4a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Νo
	If "Yes " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule 0	14h		

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

Check if Schedule O contains a response to any question in this Part VI															.[고
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Se	ection A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3		3		No
4		4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
6	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8				
а	The governing body?	8a	Yes	
ь	Each committee with authority to act on behalf of the governing body?	8b	Yes	
	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	Revent	ue Cod	e.)
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	Reveni	ue Cod Yes	e.) No
	Did the organization have local chapters, branches, or affiliates?	10a		
10a				No
10a b	Did the organization have local chapters, branches, or affiliates?	10a 10b		No
10a b 11a	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	No
10a b 11a b	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	No
10a b 11a b 12a	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a	Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a	Yes Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b	Yes Yes Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates? 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	10a 10b 11a 12a 12b	Yes Yes Yes Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c 13 14	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates? 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes Yes	No

Section C. Disclosure

- 17 List the States with which a copy of this Form 990 is required to be filed ►CA , MA
- 18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply Own website Another's website Upon request Other (explain in Schedule O)
 - 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
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization ►BRUCE MULLEN 1 BATTERYMARCH PARK QUINCY, MA (617)770-3000

Form	990	(2012)
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Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

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

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

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

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

	1	(C)								
(A) Name and Title	(A) Name and Title A verage hours per week (list any hours for related					heck unless officer stee)		(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the
	organizations below dotted line)	Individual trustae or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	MISC)	organization and related organizations
See Additional Data Table										
	•	•	•							Form 990 (2012)

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

	(A) Name and Title	A verage hours per week (list any hours any hours for related							Reportable compensation from related organizations (W	-	(F) Estima imount o compens from t	ited fother ation the	
		for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated	Former	2/1099-MISC)	2/1099-MISC)		rganizati relati organiza	ed
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						<u> </u>	<u> </u>				+		
	Col. Total							 			+		
1b c	Sub-Total	sto Part VII, S	ection /	Δ.	•			F			+		
d	Total (add lines 1b and 1c) .	_						Þ	2,458,777	189,63	35		996,030
2	Total number of individuals (in \$100,000 of reportable comp						d abov	e) w	ho received more th	nan			
												Yes	No
3	Did the organization list any f oon line 1a? <i>If</i> "Yes," complete 5					key •	emplo	yee, •	or highest compen	sated employee	3		No
4	For any individual listed on lin organization and related organ individual										4	Yes	
5	Did any person listed on line 1									or individual for			<u> </u>
	services rendered to the organ	nization <i>' It "Yes</i>	," compi	ete S	chea	iule J) for su	ch pe	erson	[5		No
Se	ection B. Independent Co	ntractors											
1	Complete this table for your fire											tav vear	

(A) Name and business address	(B) Description of services	(C) Compensation
QUAD GRAPHICS 160 RIDGEWOOD ROAD PINEHURST NC 28374	PRINTING	1,557,093
FIELD COMPANIES 385 PLEASANT ST WATERTOWN MA 02472	PRINTING	1,169,322
UNITED PARCEL SERVICE PO BOX 7247-0244 PHILADELPHIA PA 19170	FREIGHT	1,155,789
GLOBAL VILLAGE PUBLISHING 901 NWASHINGTON ST SUITE 703 ALEXANDRA VA 22314	INTERNET/WEB SERVICES	852,373
SCHOLASTIC 55 BROADWAY NEW YORK NY 10012	PUBLISHING	790,000
Table work and an advantage to the state of	- t - d - l \	

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization \(\blacktriangle 64\)

Part V		Statement of Revenue Check if Schedule O contains a respon	nse to any question	n this Part VIII . (A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513,or 514
u 22	1a	Federated campaigns 1a					
Contributions, Giffs, Grants and Other Similar Amounts	ь	Membership dues 1b	9,775,160				
9 E	c c	Fundraising events 1c					
£, Ā	d	Related organizations 1d					
<u>.</u>			2,072,910				
ns, Sirr	e			ļ	ļ		
ë ë	f	All other contributions, gifts, grants, and similar amounts not included above	343,222				
듗욑	g	Noncash contributions included in lines		i	İ		
Conti and (1a-1f \$		12,191,292			
ರಹ	_ n	Total. Add lines 1a-1f	P-	12,171,272			
alle Tile	_		Business Code				
Хеп	2a	TRAINING	611430	8,989,683	8,989,683		
<u>æ</u>	Ь	MEETINGS & SEMINARS	611710	2,610,376	2,610,376		
956	C	MEMBERS MAGAZINE	541800	1,201,740		1,201,740	
Program Serwce Ravenue	d						
Ē	e						
∑ 23	f	All other program service revenue					
ž	g	Total. Add lines 2a-2f	<u> ▶</u>	12,801,799			
	3	Investment income (including dividen		2.545.000			2.515.005
		and other similar amounts)		2,615,993			2,615,993
	4	Income from investment of tax-exempt bond	· · · · · · · · · · · · · · · · · · ·	2,496,820			2,496,820
	5	Royalties		2,430,820			2,490,620
	6a	(1) Real Gross rents 9,267,804	(II) Personal				
	Ь	Less rental 7,611,553					
		expenses Rental income 1,656,251					
	C	or (loss)					
	d	Net rental income or (loss)		1,656,251			1,656,251
	7.	(1) Securities Gross amount	(II) O ther				
	7a	from sales of 113,826,964 assets other than inventory	713				
	ь	Less cost or other basis and 110,690,439	1,192				
	_	sales expenses Gain or (loss) 3,136,525	-479				
	C			3,136,046			3,136,046
	d 8a	Net gain or (loss)		3,130,040			3,130,040
Other Revenue		events (not including \$ of contributions reported on line 1c) See Part IV, line 18					
īē.	ь	Less direct expenses b					
₹	c	Net income or (loss) from fundraising	∟ events ⊾				
	9a	Gross income from gaming activities See Part IV , line 19	-				
	Ь	Less direct expenses b					
	c	Net income or (loss) from gaming acti	vities				
		Gross sales of inventory, less					
		returns and allowances .	<u>,</u>				
	١.	a	40,344,039				
	b	Less cost of goods sold b	6,445,757	33,898,282	33,898,282		
	С	Net income or (loss) from sales of invi Miscellaneous Revenue	entory . Business Code	33,070,202	33,030,202		
	11a		900099	302,496	302,496		
	_	MISCELLANEOUS REVENUE	541800	86,971	332,133	86,971	
	b	ADVERTISING, OTHER	341000	50,571		50,571	
	C	All other reverus					
	d	All other revenue	<u> </u>				
	е	Total. Add lines 11a-11d	•	389,467			
	12	Total revenue. See Instructions .	🖊	69,185,950	45,800,837	1,288,711	9,905,110

		Statement of Functional Expenses									
ectio	ction 501(c)(3) and 501(c)(4) organizations must complete all columns All other organizations must complete column (A)										
	(Check if Schedule O contains a response to any question in this Pa	rt IX			<u> </u>					
		ude amounts reported on lines 6b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses					
1		ts and other assistance to governments and organizations e United States See Part IV, line 21	409,597	409,597							
2		ts and other assistance to individuals in the ed States See Part IV, line 22	62,900	62,900							
3	orgar	ts and other assistance to governments, nizations, and individuals outside the United es See Part IV, lines 15 and 16	02,300	02,300							
4	Bene	fits paid to or for members									
5		pensation of current officers, directors, trustees, and employees	2,249,868		2,249,868						
6	(as d	pensation not included above, to disqualified persons efined under section 4958(f)(1)) and persons ribed in section 4958(c)(3)(B)									
7	Othe	r salarıes and wages	17,470,482	14,345,198	3,125,284						
8		on plan accruals and contributions (include section 401(k) 03(b) employer contributions)	4,466,551	2,916,627	1,549,924						
9	Othe	r employee benefits	2,610,502	1,880,165	730,337						
10	Payro	oll taxes	1,711,522	1,232,707	478,815						
11	Fees	for services (non-employees)									
а	Mana	gement									
b	Legal		19,028		19,028						
c	Acco	unting	83,500		83,500						
d	Lobb	yıng									
e	Profe	ssional fundraising services See Part IV, line 17									
f		stment management fees	288,544		288,544						
g	O the colun	r (If line 11g amount exceeds 10% of line 25, nn (A) amount, list line 11g expenses on	,		,						
	Sche	dule O)	1,254,890	282,895	971,995						
12		rtising and promotion	241,260	241,260							
13	Offic	e expenses	1,571,749	1,280,988	290,761						
14	Infor	mation technology									
15	Roya	lties	297,172	297,172							
16	Occu	ıpancy	106,561	106,561							
17	Trave	el	2,098,587	1,712,360	386,227						
18		nents of travel or entertainment expenses for any federal,									
19	Confe	erences, conventions, and meetings	4,555,079	4,290,707	264,372						
20	Inter	est	36		36						
21	Paym	nents to affiliates									
22	Depr	eciation, depletion, and amortization	1,443,934	818,230	625,704						
23	Insur	rance	412,710	290,311	122,399						
24	misc	r expenses Itemize expenses not covered above (List ellaneous expenses in line 24e If line 24e amount exceeds 10% e 25, column (A) amount, list line 24e expenses on Schedule O)									
а		SIDE SERVICES	11,571,784	9,670,940	1,900,844						
b		TAGE,FRT,MAIL	5,024,625	4,968,567	56,058						
c		TING & PAPER	2,764,188	2,727,319	36,869						
d		TRACTS EXPENSE	2,031,263	2,031,263	, 1						
-		ther expenses	679,520	370,228	309,292						
25		functional expenses. Add lines 1 through 24e	63,425,852	49,935,995	13,489,857	(
26	Joint repor educa	costs. Complete this line only if the organization ted in column (B) joint costs from a combined ational campaign and fundraising solicitation. Check	35, 123,032	.5,555,555	25,133,037						

Part X Balance Sheet

Cash-mone-interest-bearing Beginning fives End fives	Pai	rt X	Balance Sheet Check if Schedule O contains a response to any question in this Part X			
2 Savings and temporary cash investments 24,464,575 2 10,491,340 3 Pledges and grants receivable, net 3 3 4 Accounts receivable, net 4,465,000 4 Accounts receivables from current and former officers, directors, trustees, key employees, and highly set compensated employees (and highly set compensated employees) and highly set compensated employees (and highly set compensated employees) and sponsoring organizations of section 501 (c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L 6 7 5 Notes and loans receivable, net 7 7 5 Notes and loans receivable, net 7 7 5 Notes and loans receivable in section 4958(c)(3)(8), and contributing employers and sponsoring organizations of section 501 (c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L 6 7 6 Notes and loans receivable, net 7 7 6 Notes and loans receivable, net 7 7 7 Notes and loans receivable in section 4958(c)(3)(8), and contributing employers and sponsoring organizations of section 501 (c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L 6 7 7 Notes and loans receivable, net 7 7 7 7 7 7 7 7 7				(A)		• •
3 Pledges and grants receivable, net		1	Cash—non-interest-bearing	6,290,508	1	6,436,099
A Accounts receivable, net A 4,665,505 A 3,045,060		2	Savings and temporary cash investments	24,464,575	2	10,491,340
Solution Complete Family Complete F		3	Pledges and grants receivable, net		3	
### Schedule L S S S S S S S S S		4	Accounts receivable, net	4,495,585	4	3,045,093
1		5	employees, and highest compensated employees Complete Part II of		5	
9 Prepale expenses and deferred charges	ts	6	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		_	
9 Prepale expenses and deferred charges	Se	_				
9 Prepaid expenses and deferred charges 1.342,568 9 2.822,867 10a Land, buildings, and equipment cost or other basis 10a 106,752,248 10b S8,315,418 50,159,152 10c 48,436,833 11 Investments—publicly traded securities 137,149,863 11 170,626,832 12 Investments—publicly traded securities 133 143 170,626,832 13 Investments—publicly traded securities 133 143 170,626,832 14 Intangible assets 14 133 144 15 Other assets See Part IV, line 11 13 145 145 16 Total assets, Add lines 1 through 15 (must equal line 34) 239,473,110 16 257,885,604 17 Accounts payable and accrued expenses 7,617,834 17 8,911,001 18 Grants payable 18 18 18 18 18 19 Deferred revenue 16,312,464 19 15,910,470 20 Tax-exempt bond liabilities 20 12 12 21 Escrow or custodial account liability Complete Part IV of Schedule 22 23 24 22 Loans and other laabilities (including federal income tax, payables to related third parties 23 23 23 Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable to unrelated third parties 23 24 25 27,610,672 25 Total liabilities. Add lines 17 through 25 7,240,672	AS			0.440.777	-	40.744.400
10a					-	
Complete Part VI of Schedule D 10a 106,752,249 10b 88,315,416 50,159,152 10c 48,438,838 11 1 1 1 1 1 1 1 1		-		1,342,583	9	2,822,867
11 Investments—publicly traded securities 137,149,893 11 170,626,832 12 Investments—other securities See Part IV, line 11 12 13 114 114 13 114 114 114 114 114 114 114 114 114 114 114 114 114 114 114 115 114 114 115 11		10a	Complete Part VI of Schedule D 106,752,249			
12 Investments—other securities See Part IV, line 11 12 13 14 14 15 15 15 15 14 15 15		b		· · · ·		<u>' ' '</u>
13 Investments—program-related See Part IV, line 11 13 14 Intangible assets 14 15 Other assets See Part IV, line 11 6,122,037 15 5,282,107 16 Total assets. Add lines 1 through 15 (must equal line 34) 239,473,110 16 257,885,604 17 8,911,001 18 Grants payable and accrued expenses 7,617,834 17 8,911,001 18 Grants payable 18 16,312,464 19 15,910,470 19 Deferred revenue 16,312,464 19 15,910,470 19 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability Complete Part IV of Schedule D 21 22 22 22 23 24 24 25 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 24 25 Other liabilities (including federal income tax, payables to related third parties 26,340,166 25 27,610,672 26 Total liabilities. Add lines 17 through 25 50,270,464 26 52,432,143 27 26,349,143 28 27 205,389,461 29 81,000 28 3,000 28 3,000 29 Permanently restricted net assets 93,000 28 3,000 29 91,000 29 91,000 20 91,000 31 91,000 31 91,000 31 91,000 31 91,000 31 91,000 31 91,000 31 91,000 31 91,000 31 91,000 32 33 70,000 32 33 70,000 33 70,000 34 30 70,000			•	137,149,893		170,626,832
14		12			12	
15			,			
16 Total assets. Add lines 1 through 15 (must equal line 34) 239,473,110 16 257,885,604 17					14	
17		15		6,122,037	15	5,282,107
18 Grants payable 18 18 19 Deferred revenue 16,312,464 19 15,910,470 20 Tax-exempt bond liabilities 20 21 22 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 22 23 24 Unsecured notes and loans payable to unrelated third parties 23 24 Unsecured notes and loans payable to unrelated third parties 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24 Complete Part X of Schedule D 26,340,166 25 27,610,672 26 Total liabilities, Add lines 17 through 25 50,270,464 26 52,432,143 27 Unrestricted net assets 189,109,646 27 205,369,461 28 Temporarily restricted net assets 189,109,646 27 205,369,461 29 Permanently restricted net assets 29 81,000 29 Permanently restricted net assets 30 30 29 81,000 31 Paid-in or capital surplus, or land, building or equipment fund 31 Paid-in or capital surplus, or land, building or equipment fund 31 32 Retained earnings, endowment, accumulated income, or other funds 189,202,646 33 205,453,461		16				
Poetried revenue		17		7,617,834		8,911,001
20 Tax-exempt bond liabilities 20		18				
21 Escrow or custodial account liability Complete Part IV of Schedule D		19		16,312,464		15,910,470
Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		20			20	
Unsecured notes and loans payable to unrelated third parties	2.0	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
Unsecured notes and loans payable to unrelated third parties	ij	22				
Unsecured notes and loans payable to unrelated third parties	ge		persons Complete Part II of Schedule L		22	
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		23	Secured mortgages and notes payable to unrelated third parties		23	
and other liabilities not included on lines 17-24) Complete Part X of Schedule D		24	Unsecured notes and loans payable to unrelated third parties		24	
26 Total liabilities. Add lines 17 through 25		25	and other liabilities not included on lines 17-24) Complete Part X of Schedule			
Organizations that follow SFAS 117 (ASC 958), check here F and complete lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets				· · · ·		
lines 27 through 29, and lines 33 and 34. 189,109,646 27 205,369,461 28 Temporarily restricted net assets		26		50,270,464	26	52,432,143
30 Capital stock or trust principal, or current funds	on do					
30 Capital stock or trust principal, or current funds	ĕ	27		189 109 646	27	205 369 461
30 Capital stock or trust principal, or current funds	<u>ଅ</u>					
30 Capital stock or trust principal, or current funds	<u> </u>			00,000		<u> </u>
30 Capital stock or trust principal, or current funds	ŭ	29	·		29	
30 Capital stock or trust principal, or current funds	ш.		- · · · · · · · · · · · · · · · · · · ·			
31 Paid-in or capital surplus, or land, building or equipment fund 31	9	30	•		30	
33 Total net assets or fund balances	Ř	31			31	
33 Total net assets or fund balances	ΑS	32			32	
34 Total liabilities and net assets/fund balances	ቑ	33	Total net assets or fund balances	189,202,646	33	205,453,461
	Z	34	Total liabilities and net assets/fund balances	239,473,110	34	257,885,604

Pai	Reconcilliation of Net Assets Check if Schedule O contains a response to any question in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		69,1	.85,950
2	Total expenses (must equal Part IX, column (A), line 25)	2 63,425,8			125,852
3	Revenue less expenses Subtract line 2 from line 1	3		5,7	60,098
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		189,2	202,646
5	Net unrealized gains (losses) on investments	5		12,7	24,421
6	Donated services and use of facilities	6			· ·
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9		-2,2	233,704
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		205,4	53,461
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				. $ abla$
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Νo
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review a separate basis, consolidated basis, or both	wed on			
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepa basis, consolidated basis, or both	rate			_
	▼ Separate basis				
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight audit, review, or compilation of its financial statements and selection of an independent accountant?	t of the	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	ו			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	е	За	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the reaudit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	equired	3b	Yes	

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493211007203

Employer identification number

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Name of the organization

NATIONAL FIRE PROTECTION ASSOCIATION

Department of the Treasury Internal Revenue Service

Total

Public Charity Status and Public Support

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

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

2012

Open to Public Inspection

					163	140	103	110	163	140	
s) Nam suppoi ganiz		(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see instructions))	(iv) Is to organization col (i) listo your gove docume	on in ted in rning	(v) Did you the organi in col (i) c suppor	zation of your	(vi) Is organiza col (i) or in the l	tion in ganized	(vii) A mount of monetary support
h				ng information about			· · ·		T		T. m.
		(iii) A	35% contro	er of a person descri lled entity of a perso	n described	ın (ı) or (ıı)					g(ii)
		•		governing body of th		5	n '				lg(i)
		. , .		rectly or indirectly o	•		5	persons de	escribed in (ii	· —	Yes No
9		followin	ig persons?	, ,	•	, 5			,		
g			this box August 17. 2	2006, has the organi	zation accer	nted any ouf	or contributi	on from an	v of the		Г
f		If the o	rganization	received a written de	etermination	from the IR	S that it is a	Type I, Ty	pe II, or Type	e III suppo	rtıng organızatıo <u>n,</u>
e	Γ	By checother the	cking this b	ox, I certify that the on managers and otl	organızatıon	ıs not cont	rolled directly	y or indirec	tly by one or	more dısqu	alıfıed persons
11	Γ	one or the box	more publici that descri	ganized and operated ly supported organiz bes the type of supp b Type II c	ations descr orting organ	ibed in sect ization and	ion 509(a)(1 complete line) or section es 11e thro	n 509(a)(2) \$ ugh 11h	See section	509(a)(3). Check
10	Γ	-	-	, ganızed and operated	-			-	-		
				ganization after June						, •	
				oss investment inco	•	-			` ,		*
9	10	_		at normally receives Itles related to its ex					•	•	
8 9	। 		•	described in sectior at normally receives				•	ibutions man	nharchin fo	es and aross
	, 	describ	ed in sectio	n 170(b)(1)(A)(vi).	(Complete P	art II)					c. ar pabric
6 7	<u>'</u>		•	at normally receives	-					from the ge	neral public
6	_			A)(iv). (Complete P local government or	· ·	al unit doca	ribad in sast i	ion 170(h)/	(1)(4)(4)		
5	ı	_	•	erated for the benefi	=	or universi	ty owned or o	perated by	a governme	ntal unit de:	scribed in
_	_			ty, and state							
4	Ė	•		n organization operat	_					(1)(A)(iii).	. Enter the
3	,			perative hospital se			•	on 170(b)(1	L)(A)(iii).		
2	<u>'</u>		•	d in section 170(b)(1				ection 170	(D)(I)(A)(I).		
1 ne o	rgani.			on of churches, or as							
	rt I			blic Charity Starte foundation because						instruction	ns.
					. / . !!				104-1653		

Sch	edule A (Form 990 or 990-EZ) 2012							Page 2
Pa	(Complete only if you o	hecked the bo	x on line 5, 7,	or 8 of Part I o	r if the organiza	ation faile	ed to q	
	Part III. If the organiza ection A. Public Support	tion fails to qu	alify under the	tests listed bel	ow, please com	<u>iplete Pa</u>	rt III.)	
	ection A. Public Support endar year (or fiscal year beginning					1		
	in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2	312	(f) Total
1	Gifts, grants, contributions, and							
	membership fees received (Do not include any "unusual							
	grants ")							
2	Tax revenues levied for the							
	organization's benefit and either							
	paid to or expended on its behalf							
3	The value of services or facilities							
•	furnished by a governmental unit to							
	the organization without charge							
4	Total. Add lines 1 through 3							
5	The portion of total contributions by each person (other than a							
	governmental unit or publicly							
	supported organization) included on							
	line 1 that exceeds 2% of the							
	amount shown on line 11, column							
6	(f) Public support. Subtract line 5 from							
	line 4							
S	ection B. Total Support							
Cal	endar year (or fiscal year beginning	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 20)12	(f) Total
_	in) ► A mounts from line 4		. ,		. ,	, ,		. ,
7 8	Gross income from interest,							
0	dividends, payments received on							
	securities loans, rents, royalties							
	and income from similar							
9	sources Net income from unrelated							
9	business activities, whether or not							
	the business is regularly carried							
	on							
10	Other income Do not include gain or loss from the sale of capital							
	assets (Explain in Part IV)							
11	Total support (Add lines 7 through							
4.0	10)		<u> </u>					
12	Gross receipts from related activitie					12		
13	First five years. If the Form 990 is this box and stop here							ization, check
	ection C. Computation of Pub				<u> </u>	<u> </u>		
14	Public support percentage for 2012			11, column (f))		14		
15	Public support percentage for 2011			, , , , , , ,		15		
	33 1/3% support test—2012. If the o	· ·	•	on line 13 and l	ine 14 is 33 1/20%		chack ti	nie hov
104	and stop here. The organization qua				me 1 1 13 33 1/3/0	or more,	JIICCK CI	► □
b	33 1/3% support test—2011. If the				and line 15 is 33	3 1/3% or n	nore, ch	eck this
	box and stop here. The organization						. 4 4	▶□
1/a	10%-facts-and-circumstances test- is 10% or more, and if the organizat							•
	in Part IV how the organization mee							
	organization				4	r	,	▶ □
b	10%-facts-and-circumstances test-							
	15 is 10% or more, and if the organ Explain in Part IV how the organizat							lv
	supported organization	ion meets the T	acts-ana-cncum:	stances test III	ic organization qu	uiiiiE5 45 i	a public	·y ▶□
18	Private foundation. If the organizat	on did not check	c a box on line 13	, 16a, 16b, 17a,	or 17b, check thi	s box and	see	·
	instructions							▶ ┌

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

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

Se	ction A. Public Support		•		•		
Cale	ndar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual	14,816,306	12,124,100	14,142,723	13,384,272	12,191,292	66,658,693
2	grants ") 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	67,956,993	52,770,918	72,250,284	54,743,698	51,944,098	299,665,991
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	82,773,299	64,895,018	86,393,007	68,127,970	64,135,390	366,324,684
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						0
b	A mounts 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	4,581,498	4,821,299	20,663,676	3,660,817	2,892,113	36,619,403
c	Add lines 7a and 7b	4,581,498	4,821,299	20,663,676	3,660,817	2,892,113	36,619,403
8	Public support (Subtract line 7c						329,705,281
Se	from line 6) ction B. Total Support	<u> </u>					
	ndar year (or fiscal year	(2) 2009	(b) 2000	(a) 2010	(4) 2011	(a) 2012	(5) Total
	beginning in) 🟲	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9	A mounts from line 6	82,773,299	64,895,018	86,393,007	68,127,970	64,135,390	366,324,684
l0a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	15,678,523	15,780,854	16,154,756	14,987,879	14,380,617	76,982,629
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	391,406	262,323	222,643	397,729	302,495	1,576,596
c	Add lines 10a and 10b	16,069,929	16,043,177	16,377,399	15,385,608	14,683,112	78,559,225
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	2,054,266	1,652,409	1,617,792	1,693,300	1,288,711	8,306,478
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)	100,897,494	82,590,604	104,388,198	85,206,878	80,107,213	453,190,387
14	First five years. If the Form 990 is check this box and stop here			, thırd, fourth, or	fifth tax year as a	a 501(c)(3) organ	ızatıon, ▶┌
<u>5e</u> 15	ction C. Computation of Pul Public support percentage for 201			13 column (f))		15	72.750.0/
16	Public support percentage from 20	•	• •	10, column (i))		15	72 750 %
	ction D. Computation of Inv			7.0		16	70 520 %
<u>5e</u> 17	Investment income percentage for				nn (f))	17	 17 330 %
18	Investment income percentage fro	•			. , ,	18	16 520 %
	33 1/3% support tests—2012. If th				line 15 is more t		
	more than 33 1/2% check this hove						

^{33 1/3%} support tests—2011. 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

Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2012

DLN: 93493211007203

OMB No 1545-0047

Inspection

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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.

Political Campaign and Lobbying Activities

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 the organization **Employer identification number** NATIONAL FIRE PROTECTION ASSOCIATION 04-1653090 Complete if the organization is exempt under section 501(c) or is a section 527 organization. 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). 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 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes 3 Was a correction made? ☐ Yes □ No If "Yes," describe in Part IV Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function activities Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b Did the filing organization file Form 1120-POL for this year? 4 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 **(c)** EIN (e) A mount of political (a) Name (b) Address (d) A mount paid from contributions received filing organization's and promptly and funds If none, enter -0directly delivered to a separate political organization If none, enter-0-

e Grassroots ceiling amount (150% of line 2d, column (e))

f Grassroots lobbying expenditures

Sch	nedule C (Form 990 or 990-EZ) 2012					Page 2
Pa	art II-A Complete if the organization	is exempt under	section 501(c)(3) and fil	ed Form 5768	(election
_	under section 501(h)). Check ► if the filing organization belongs to a	an affiliated group (and	lict in Part IV os	ach affiliated are	un mambar's nam	o addross EIN
	expenses, and share of excess lobb	ying expenditures)		_	up member s nam	e, address, LTN
<u>B</u>	Check Frifthe filing organization checked box	x A and "limited contro	ıl" provisions apı	oly		
	Limits on Lobbying E (The term "expenditures" means an		l .)		(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence public o	pınıon (grass roots lob	bying)			
b	Total lobbying expenditures to influence a legisla	ative body (direct lobb	yıng)			
c	Total lobbying expenditures (add lines 1a and 1b	o)				
d	O ther exempt purpose expenditures					
e	Total exempt purpose expenditures (add lines 1c	c and 1d)				
f	Lobbying nontaxable amount Enter the amount fo	rom the following table	ın both			
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontax	able amount is:			
	Not over \$500,000	20% of the amount on li	ne 1e			
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the	e excess over \$500,0	000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the	e excess over \$1,000	0,000		
	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				
	Grassroots nontaxable amount (enter 25% of lin	e 1f)				
_	Subtract line 1g from line 1a If zero or less, ente	•		-		
i	Subtract line 1f from line 1c If zero or less, ente			-		
_	If there is an amount other than zero on either lin		organization file	Form 4720 rep	ortina	1
-	section 4911 tax for this year?					┌ Yes ┌ No
_	4-Voor Av	veraging Period U	Inder Section	F01/b)		
	(Some organizations that made a scolumns below. See the	section 501(h) el	ection do not	have to cor		ne five
	Lobbying Expe	enditures During	4-Year Avera	ging Period		1
	Calendar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) Total
2a	Lobbying nontaxable amount					
b	Lobbying ceiling amount (150% of line 2a, column(e))					
c	Total lobbying expenditures					
d	Grassroots nontavable amount					

		organization is exempt un	der section 501(c)(3) and has	NOT			P	age :
	filed Form 5768	(election under section 50	01(h)).	1 (a)		(b)	
For e	•	ough 11 below, provide in Part IV a de	etailed description of the lobbying	Yes	No		Amour	nt
1		rganization attempt to influence fo npt to influence public opinion on a						
a	Volunteers?				No			
b c	Paid staff or management (incl Media advertisements?	ude compensation in expenses rep	oorted on lines 1c through 11)?	Yes	No			
d	Mailings to members, legislato Publications, or published or b				No No			
e f	Grants to other organizations f				No			
g h	<u>-</u>	, their staffs, government officials, iars, conventions, speeches, lectu	- ·	Yes	No		1	1,36
i	O ther activities?	,	, ,	Yes				
j 2a	Total Add lines 1c through 1i Did the activities in line 1 caus	se the organization to be not descr	ribed in section 501(c)(3)?		No		1	1,36
b c		ny tax incurred under section 491 ny tax incurred by organization ma				_		
d	If the filing organization incurre	ed a section 4912 tax, did it file Fo	orm 4720 for this year?					
Pai	t III-A Complete if the 501(c)(6).	organization is exempt un	der section 501(c)(4), section	1 501(c	(5), c	or s	ectio	n
1		more) dues received nondeductib	le by members?		Г	1	Yes	No
2	Did the organization make only	ın-house lobbyıng expenditures o	f\$2,000 or less?			2		
3 Par		arry over lobbying and political ex organization is exempt un	penditures from the prior year? der section 501(c)(4), section	501(c	(5),	3 or s	ectio	n
		either (a) BOTH Part III-A	A, lines 1 and 2, are answered					
1	Dues, assessments and simila	r amounts from members	. (de not include amounts of notities)	1				
2	expenses for which the section		s (do not include amounts of political	2a				
a b	Current year Carryover from last year			2a 2b				
с 3	Total	section 6033(e)(1)(A) notices of	nondeductible section 162(e) dues	2c 3				
4	If notices were sent and the ar	nount on line 2c exceeds the amou	unt on line 3, what portion of the exces					
	political expenditure next year		· ·	4				
5 P	Taxable amount of lobbying an art IV Supplemental Ir	d political expenditures (see instru nformation	uctions)	5				
		escriptions required for Part I-A, li 1 Also, complete this part for any	ne 1, Part I-B, line 4, Part I-C, line 5,	Part II-A	(affiliat	ted g	roup li	st),
ı u	Identifier	Return Reference		nation				
\$CT	IVITIES	PART II-B, LINE 1	IN NON-DEFENSE, NON-HOMING VETERANS AFFAIRS DISCRET FISCAL YEARS 2011 & 2012 FISCAL YEARS 2012 HR 95 TO MAKE 15% RECISSIONS IN NON-DEFENS SECURITY, AND NON-VETERAL SPENDING FOR THE FISCAL YEASTER ACTION SAFETY TEAL ACT 2011 S 646 NATURAL HALACT HR 1242 NUCLEAR POWING 113 ANGELS & SAN BERNADIN PROTECTION ACT S 220 ORE RESTORATION, OLD GROWTH S 268 FOREST JOBS & RECREAL LOAF FIRE PROTECTION DISTED TO EXCLUDE TRADE OF TIME DETERMINATION OF OVERTICAL REAUTHORIZATION HR 643 SPROTECTION DISTED TO EXCLUDE TRADE OF TIME DETERMINATION OF OVERTICAL REAUTHORIZATION HR 643 SPROTECTION DISTRICT LAND POLICE FAIRNESS ACT HR 13 REDUCTION HR 5744 CATAS PREVENTION ACT OF 2012 SWILDFIRE PREVENTION ACT OF 2012 SWILDFIRE PREVENTION ACT OF STEWARDSHIP AND FIRE FUE HR 4331 NATIONAL FOREST HR 199 PROTECT'S AMERICAL JOBS ACT OF 2011 HR 1685 INDUSTRIAL COMPETITIVEN ALTERNATIVE FUEL VEHICLE ENERGY SECURITY ACT OF 2011 SEDUCATION ACT OF 2011 SEDUCATION ACT OF 2011 SEDUCATION ACT OF 2011 SEDUCATION ACT OF 2011 HR EDUCATION ACT OF 2011 SEDUCATION ACT OF 2011 SEDUCATION ACT OF 2011 HR EDUCATION ACT OF 2011 HR EDUCATION ACT OF 2011 HR	IONARY IONARY IONARY ION-DEF ON-VET O	SPENDO MAKE FENSE, FERANA FISCAL FISC	PINGS	FOR ACRO ACRO IRS ARS 2 TION S 589 CTION CT OF OF 20 2011 REST REST RANGE RANT 48 FIF ROM RANT ROM ROM RANT ROM ROM RANT ROM ROM RANT ROM ROM RANT	THE SS ON THE STAND THE ST

STRENGTHENING COMMUNITY SAFETY ACT OF 2011 S 709
SECURE CHEMICAL FACILITIES ACT S 487 BURN AREA
FLOOD PREVENTION ACT H R 1066 FEDERAL FIRE
FIGHTERS FAIRNESS ACT H R 1068 FEDERAL FIRE
FIGHTERS PAY EQUITY ACT S 453 MOTORCOACH
ENHANCES SAFETY ACT OF 2011 S 902 SCHOOL
BUILDINGS FAIRNESS ACT H R 1792 FIRE SPRINKLER
INCENTIVE ACT S 1035 SPRINKLER INCENTIVE ACT OF
2011 H R 716 FIRE ACT H R 6436/S 3573 FOREIGN PRISON

CONDITIONS IMPROVEMENT ACT

DLN: 93493211007203

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

SCHEDULE D (Form 990)

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.

Name of the organization
NATIONAL FIRE PROTECTION ASSOCIATION

Employer identification number

				04-	1653090		
Part I	Organizations Maintaining Donor Advorganization answered "Yes" to Form 990		Other Similar Fu	unds	or Account	s. Comple	te if the
		(a) Donor a	dvised funds		(b) Funds and	other acco	unts
Total	number at end of year						
A ggre	egate contributions to (during year)						
Aggre	egate grants from (during year)						
Aggre	egate value at end of year						
	he organization inform all donors and donor adviso are the organization's property, subject to the or			or adv	ısed	┌ Yes	┌ No
used	he organization inform all grantees, donors, and do only for charitable purposes and not for the benef erring impermissible private benefit?					┌ Yes	┌ No
art II	Conservation Easements. Complete if	the organization	answered "Yes" to	o Forr	n 990, Part I	V, line 7.	
□ Pι□ Pι□ Comp	ose(s) of conservation easements held by the orgoneservation of land for public use (e.g., recreation rotection of natural habitat reservation of open space plete lines 2a through 2d if the organization held a	or education)	Preservation of an Preservation of a c	ertifie	d historic stru	cture	
easer	ment on the last day of the tax year		ı		11-14 -4 41	- FJ -6 Ab-	
Total	number of conservation easements		•	2a	Heid at th	e End of the	e Year
	acreage restricted by conservation easements			2a 2b			
	per of conservation easements on a certified histo	oric structure includ	ed in (a)				
	per of conservation easements included in (c) acq		` '	2c			
	ric structure listed in the National Register	dired alter 5/17/00	, and not on a	2d			
Numb	ber of conservation easements modified, transferr	ed, released, exting	uished, or terminate	d by th	ne organizatior	n during	
the ta	ax year ▶						
Numb	ber of states where property subject to conservati	ion easement is loc	ated ►				
	the organization have a written policy regarding t cement of the conservation easements it holds?	the periodic monitor	ing, inspection, hand	dling of	f violations, an	d Yes	┌ No
Staff ►	and volunteer hours devoted to monitoring, inspe	cting, and enforcing	conservation easen	nents (during the year		
A mou	unt of expenses incurred in monitoring, inspecting	, and enforcing con	servation easements	durın	g the year		
► \$_							
	each conservation easement reported on line 2(o ection 170(h)(4)(B)(ii)?	d) above satisfy the	requirements of sec	tion 1	70(h)(4)(B)(ı)	☐ Yes	┌ No
balan	ort XIII, describe how the organization reports cor nce sheet, and include, if applicable, the text of the rganization's accounting for conservation easeme	e footnote to the org					
rt III	Organizations Maintaining Collection Complete if the organization answered "Y			or Ot	her Similar	Assets.	
works	organization elected, as permitted under SFAS 1 s of art, historical treasures, or other similar asse ce, provide, in Part XIII, the text of the footnote t	16 (ASC 958), not ts held for public ex	to report in its rever hibition, education,	or rese	earch in furthei		
works	e organization elected, as permitted under SFAS 1 s of art, historical treasures, or other similar asse ce, provide the following amounts relating to thes	ts held for public ex					lıc
(i) _{Re}	evenues included in Form 990, Part VIII, line 1				► \$		
	ssets included in Form 990, Part X						
	e organization received or held works of art, histori ving amounts required to be reported under SFAS			r finan			

Revenues included in Form 990, Part VIII, line 1

b Assets included in Form 990, Part X

3 (IIII Organizations Maintaining Co	Hections of Art,	, 1115	LUII	<u>cai ii</u>	casu	res, or o	une	ı əlilili	ASSE	LS (CC	<u>intinuea)</u>
	Using the organization's acquisition, access collection items (check all that apply)	ion, and other record	ds, ch	eck	any of t	he foll	owing that a	are a	significant	use of	ıts	
а	Public exhibition		d	Γ	Loan	orexcl	nange progr	ams	•			
ь「	Scholarly research		e	Γ	Other	=						
c 「	Preservation for future generations											
	Provide a description of the organization's co Part XIII	ollections and explai	ın how	the	y furthe	r the o	rganızatıon	's ex	empt purpo	se in		
	During the year, did the organization solicit								nılar	_		_
Part	assets to be sold to raise funds rather than to IV Escrow and Custodial Arrang								'ac" ta Farr		Yes	│ No
Рагс	Part IV, line 9, or reported an ar						i aliswere	u r	es to ron	וו פפנ	',	
	Is the organization an agent, trustee, custoc included on Form 990, Part X?						or other ass	ets	not	Г	Yes	┌ No
b 1	If "Yes," explain the arrangement in Part XI:	I and complete the	follow	ıng t	able		_					
							-			Amou	int	
C	Beginning balance							1 c				
	Additions during the year						-	1d				
_	Distributions during the year						-	1e				
	Ending balance						L	1f				
2a [Did the organization include an amount on Fo	orm 990, Part X, line	21?							Г	Yes	□ No
_ ь 1	If "Yes," explain the arrangement in Part XII											<u> </u>
Part	EV Endowment Funds. Complete								rt IV, line 1 Three years ba		\	aara baali
1a [Beginning of year balance	(a)Current year 10,197,062	(D)F	Prior y 10.	648,842	b (c)iv	6,393,22	+	4,987,6		rour ye	ears back 177,505
	Contributions	,,		,	,		4,000,000	+-	-,,-			6,000,000
	Net investment earnings, gains, and losses									+		
		1,210,304			-33,780		495,618	3	1,405,5	30	-	-1,189,811
	Grants or scholarships							-		+		
	Other expenditures for facilities	401,000			418,000		240,000					
f /	Administrative expenses											
g E	End of year balance	11,006,366		10,	197,062		10,648,842		6,393,2	24		4,987,694
2 F	Provide the estimated percentage of the cur	rent year end balanc	e (line	e 1g	, colum	n (a)) ł	neld as					
a [Board designated or quasi-endowment 🕨											
Ь	Permanent endowment 🕨 82 000 %											
		000 %										
	The percentages in lines 2a, 2b, and 2c sho	uld equal 100%										
	Are there endowment funds not in the posse	ssion of the organiza	ation t	hat a	are helo	d and a	dmınıstere	d for	the			
	organization by								Г	2-(:)	Yes	No
	(i) unrelated organizations			•				•	<u> </u>	3a(i) 3a(ii)	Yes	No
	If "Yes" to 3a(ii), are the related organizatio				· · Iule R?			٠.	`. `. <u>`</u>	3b	Yes	<u> </u>
	Describe in Part XIII the intended uses of the	•							_		l	<u> </u>
Part		ent. See Form 99	0, Pa	rt X	, line 1	LO.						
	Description of property) Cost or sis (inves		(b) Cost or of basis (othe		(c) Accumulat depreciation		(d) Boo	ok value
1-	and				1,9	19,353						1,919,353
Ta FS	uildings				68,8	36,459			31,565	254	2	
	5			_				_				7,271,205
b Bu	easehold improvements				17,4	64,547			11,768	899		7,271,205 5,695,648
b Bu c Le	easehold improvements					64,547			11,768 14,156	_		
b Bu c Le d Ed e O	"				16,4 2,0	62,102 069,788				301		5,695,648

Part VIII Investments—Other Securities. Sec	<u>3 Form 990, Part X, line 12.</u>	
(a) Description of security or category	(b)Book value	(c) Method of valuation
(including name of security)		Cost or end-of-year market value
.)Financial derivatives		
)Closely-held equity interests		
ther		
tilei		
	+	
	+	
otal. (Column (b) must equal Form 990, Part X, col (B) line 12)	F	
art VIII Investments—Program Related. Se		
(a) Description of investment type	(b) Book value	(c) Method of valuation
		Cost or end-of-year market value
	+	
	+ +	
	+ +	
	+	
otal. (Column (b) must equal Form 990, Part X, col (B) line 13)	+	
Part IX Other Assets. See Form 990, Part X, I	line 15.	(b) Book value
	line 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, I	line 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, I	line 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, I	line 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, I	line 15.	(b) Book value
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Part IX Other Assets. See Form 990, Part X, I	line 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, I	line 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, I	line 15.	(b) Book value
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Part IX Other Assets. See Form 990, Part X, I	line 15.	(b) Book value
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Part IX Other Assets. See Form 990, Part X, I	line 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, I	line 15.	(b) Book value
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Total. (Column (b) must equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part	(5.) X, line 25. (b) Book value 27,610,672	

Part	ule D (Form 990) 2012 Reconciliation of Revenue per Audited Financial Statements With Revenue p	er F	Page 4 Return
1	Total revenue, gains, and other support per audited financial statements	1	95,967,681
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIII)		
e	Add lines 2a through 2d	2e	26,781,731
3	Subtract line 2e from line 1	3	69,185,950
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIII) 4b		
c	Add lines 4a and 4b	4c	0
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	69,185,950
Part	XII Reconciliation of Expenses per Audited Financial Statements With Expenses	per	Return
1	Total expenses and losses per audited financial statements	1	79,716,868
2	A mounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments		
C	Other losses		
d	Other (Describe in Part XIII)		
e	Add lines 2a through 2d	2e	16,291,016
3	Subtract line 2e from line 1	3	63,425,852
4	A mounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII)		
C	Add lines 4a and 4b	4c	0
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	63,425,852
Part	Supplemental Information		
Part	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, P V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to mation		

Identifier	Return Reference	Explanation
DESCRIPTION OF INTENDED USE OF ENDOWMENT FUNDS	PART V, LINE 4	AT ALL TIMES THE ENDOWMENT FUND SHALL BE USED EXCLUSIVELY FOR THE ACCOMPLISHMENT AND SUPPORT OF CHARITABLE, EDUCATIONAL, SCIENTIFIC, AND LITERARY PURPOSES THE ENDOWMENT IS HELD BY THE FIRE PROTECTION RESEARCH FOUNDATION, A RELATED ENTITY LISTED ON SCHEDULE R
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48	PART X, LINE 2	NFPA IS RECOGNIZED BY THE INTERNAL REVENUE SERVICE AS AN ORGANIZATION DESCRIBED IN SECTION 501 (C)(3) OF THE INTERNAL REVENUE CODE (THE "CODE") AND IS GENERALLY EXEMPT FROM FEDERAL AND STATE INCOME TAXES ON RELATED INCOME A PROVISION FOR TAXES IS CONSIDERED TO THE EXTENT THAT NFPA HAS UNRELATED ACTIVITIES, BUT SUCH CONSIDERATIONS ARE NOT SIGNIFICANT ACCORDINGLY, NO PROVISION FOR INCOME TAXES IS MADE IN THE FINANCIAL STATEMENTS NFPA ACCOUNTS FOR THE EFFECT OF ANY UNCERTAIN TAX POSITIONS BASED ON A "MORE LIKELY THAN NOT" THRESHOLD TO THE RECOGNITION OF THE TAX POSITIONS BEING SUSTAINED BASED ON THE TECHNICAL MERITS OF THE POSITION UNDER SCRUTINY BY THE APPLICABLE TAXING AUTHORITY IF A TAX POSITION OR POSITIONS ARE DEEMED TO RESULT IN UNCERTAINTIES OF THOSE POSITIONS, THE UNRECOGNIZED TAX BENEFIT IS ESTIMATED BASED ON A "CUMULATIVE PROBABILITY ASSESSMENT" THAT AGGREGATES THE ESTIMATED TAX LIABILITY FOR ALL UNCERTAIN TAX POSITIONS INTEREST AND PENALITIES ASSESSED, IF ANY, ARE ACCRUED AS INCOME TAX EXPENSE NFPA HAS IDENTIFIED ITS TAX STATUS AS A TAX EXEMPT ENTITY AS A TAX POSITION, HOWEVER, NFPA HAS DETERMINED THAT SUCH TAX POSITION DOES NOT RESULT IN AN UNCERTAINITY REQUIRING RECOGNITION IN ADDITION TO ITS TAX STATUS,NFPA HAS OTHER TAX POSITIONS THAT HAVE BEEN DETERMINED TO BE HIGHLY CERTAIN AND, THEREFORE, NO RESERVE FOR UNRECOGNIZED TAX LIABILITY IS DEEMED NECESSARY NFPA IS NOT CURRENTLY UNDER EXAMINATION BY ANY TAX JURISDICTION ITS FEDERAL AND STATE INCOME TAX RETURNS ARE GENERALLY OPEN FOR EXAMINATION THREE YEARS FOLLOWING THE DATE FILED
PART XI, LINE 2D - OTHER ADJUSTMENTS		BATTERYMARCH 1 REAL ESTATE EXPENSES 1,185,599 REAL ESTATE INVESTMENT EXPENSES 6,425,954 COST OF GOODS SOLD 6,445,757
PART XII, LINE 2D - OTHER ADJUSTMENTS		BATTERYMARCH 1 REAL ESTATE EXPENSES 1,185,599 REAL ESTATE INVESTMENT EXPENSES 6,425,954 COST OF GOODS SOLD 6,445,757 PENSION COST ADJUSTMENT 2,233,706

DLN: 93493211007203

OMB No 1545-0047

SCHEDULE F (Form 990)

Department of the Treasury

Statement of Activities Outside the United States

► Complete if the organization answered "Yes" to Form 990. Part IV, line 14b, 15, or 16.

▶ Attach to Form 990. ▶ See separate instructions.

Open to Public **Inspection**

Name of the organization	Employer ident if ica
NATIONAL FIRE PROTECTION ASSOCIATION	 I
· · · · · · · · · · · · · · · · · · ·	04-1653090

Internal Revenue Service tion number General Information on Activities Outside the United States. Complete if the organization answered Part I "Yes" to Form 990, Part IV, line 14b. For grantmakers. 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 No For grantmakers. Describe in Part V the organization's procedures for monitoring the use of grant funds outside the United States. Activites per Region (The following Part I, line 3 table can be duplicated if additional space is needed) (a) Region (b) Number of (c) Number of (d) Activities conducted in (e) If activity listed in (d) is a (f) Total expenditures offices in the employees, region (by type) (e g , program service, describe for and investments region agents, and fundraising, program specific type of in region ındependent services, investments, grants service(s) in region contractors in to recipients located in the region region) NORTH AMERICA 1 1 PROGRAM SERVICES THE PROMOTION OF 151,963 AND ADOPTION OF NFPA CODES & STAN<u>DARDS</u> NORTH AMERICA 1 1 PROGRAM SERVICES THE PROMOTION OF 188,736 AND ADOPTION OF NFPA CODES & STANDARDS EUROPE (INCLUDING 1 1 PROGRAM SERVICES THE PROMOTION OF 51,477 ICELAND & GREENLAND) AND ADOPTION OF NFPA CODES & STANDARDS EAST ASIA AND THE 3 3 PROGRAM SERVICES THE PROMOTION OF 59,673 PACIFIC AND ADOPTION OF NFPA CODES & STANDARDS

3a Sub-total **b** Total from continuation sheets to Part I c Totals (add lines 3a and 3b)

6

Cat No 50082W

Schedule F (Form 990) 2012

451,849

451,849

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Part I	Grants Part IV,	and Other As line 15, for any	sistance to Organ y recipient who rece	izations or Entiti ived more than \$5,	es Outside the Ur 000. Part II can be	nited States. Comp duplicated if addition	olete if the organizational space is needed	tion answered "Yes' l.	' to Form 990,
	Name of anization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
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2 Er ta	iter total nu x-exempt b	mber of recipie y the IRS, or fo	ent organizations list or which the grantee	ed above that are in or counsel has pro	recognized as charit ovided a section 501	ties by the foreign c 1(c)(3) equivalency	ountry, recognized letter	as 	
3 Er	nter total nu	mber of other	organizations or ent	cities					
								Schedule F	(Form 990) 2012

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

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

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

Schedule F (Form 990) 2012

Complete this part to provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

		additional information (see instructions).
I dentifier	ReturnReference	Explanation
	SCHEDULE F, PART 1, LINE 3	NFPA AUDITS THE EXPENSE REPORTS TO MAKE SURE THERE ARE RECEIPTS ATTACHED THE FEES ARE NEGOIATED AT THE START OF THE YEAR
		Schedule F (Form 990) 20:

Schedule I

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

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

OMB No 1545-0047

DLN: 93493211007203

Inspection

Department of the Treasury Internal Revenue Service Name of the organization

(Form 990)

NATIONAL FIRE PROTECTION ASSOCIATION

Employer identification number

						04-1653090	
	nation on Grants						
1 Does the organization ma the selection criteria used							✓ Yes 「N
2 Describe in Part IV the or							
		Governments and recipient that receive					d "Yes" to
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) HOME FIRE SPRINKLER COALITION ONE BATTERYMARCH PARK QUINCY, MA 02169	51-0620405	501 (C)(3)	133,600				PRO GRAM CONTRIBUTION
(2) CENTER FOR CAMPUS FIRE SAFETY 10 STATE STREET NEWBURYPORT, MD 01950	14-1916059	501 (C)(3)	10,000				CONTRIBUTION
(3) THE FIRE PROTECTION RESEARCH FOUNDATION ONE BATTERYMARCH PARK QUINCY, MA 02169	52-1256543	501 (C)(3)	210,000				CONTRIBUTION
(4) NATIONAL FALLEN FIRE FIGHTERS 16825 S SETON AVENUE EMMITSBURG,MD 21727	52-1832634	501 (C)(3)	10,000				CONTRIBUTION
(5) NATIONAL VOLUNTEER FIRE COUNCIL 7852 WALKER DRIVE GREENBELT,MD 20770	39-1274172	501 (C)(3)	15,000				CONTRIBUTION
(6) SOUTH SHORE YMCA 79 CODDINGTON STREET QUINCY,MA 02169	04-2105881	501 (C)(3)	10,000				CONTRIBUTION
(7) SOCIETY OF FIRE PROTECTION 7315 WISCONSIN AVENUE BETHESDA,MD 20814	06-1059016	501 (C)(3)	7,500				CONTRIBUTION

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

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

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

(a)Type of grant or assistance	(b)Number of recipients	(c) A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) HARVARD FELLOW SCHOLARSHIPINTERNATIONAL ASSOCIATION OF FIRE CHIEFS	6	22,900			
(2) SCHOLARSHIPS	8	40,000			

Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information

Identifier	Return Reference	Explanation
		SCHEDULE I, PART I, LINE 2 NFPA REQUIRES PERIODIC REPORTS FROM RECIPIENTS THROUGHOUT THE YEAR SCHEDULE I, PART III GRANTS AND OTHER ASSISTANCE TO INDIVIDUALS IN THE UNITED STATES NFPA ISSUES A NUMBER OF SCHOLARSHIPS EACH YEAR FOR OUTSTANDING ACHIEVEMENTS THE FOLLOWING ARE THE
		SCHOLARSHIPS ISSUED THIS YEAR THE ART COTE SCHOLARSHIP, \$5,000, THE FRANK FEE SCHOLARSHIP, \$5,000, THE J JABLONSKY SCHOLARSHIP, \$5,000, THE WARREN ISMAN SCHOLARSHIP, \$5,000, THE P BUGBEE SCHOLARSHIP, \$5,000, THE GEORGE MILLER SCHOLARSHIP, \$5,000, THE C MORGAN SCHOLARSHIP, \$5,000, THE DAVID GRATZ SCHOLARSHIP, \$5,000 AND THE HARVARD FELLOW SCHOLARSHIP, \$22,900

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

DLN: 93493211007203

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

Internal Revenue Service

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

Compensation Information

Part IV, question 23. ► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

Name of the organization NATIONAL FIRE PROTECTION ASSOCIATION

Employer identification number

04-1653090

Pai	rt I Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items			
	First-class or charter travel Housing allowance or residence for personal use			
	✓ Travel for companions			
	Tax idemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b	Yes	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2	Yes	
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III			
	✓ Compensation committee ✓ Written employment contract			
	✓ Independent compensation consultant ✓ Compensation survey or study			
	Form 990 of other organizations Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization			
а	Receive a severance payment or change-of-control payment?	4a		No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	Yes	
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		No
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of			
а	The organization?	5a	Yes	
b	Any related organization?	5b		No
	If "Yes," to line 5a or 5b, describe in Part III			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of			
а	The organization?	6a	Yes	
b	Any related organization?	6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7	Yes	
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was			
	subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe			
	ın Part III	8		Νo
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	9		

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

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

Note. The sum of columns (B)(1)-(111) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

(A) Name and Title	(B) Breakdown of	f W-2 and/or 1099-MI:	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of	(F) Compensation
	(i) Base compensation	(ii) Bonus & ıncentıve compensatıon	(iii) Other reportable compensation	other deferred compensation	benefits	columns (B)(ı)-(D)	reported as deferred in prior Form 990
See Additional Data Table							

Schedule J (Form 990) 2012

Part III Supplemental Information

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

Also complete this part for any additional information

A 150 Complete this part for any a	duitional iniormation	
Identifier	Return Reference	Explanation
	PART I, LINE 1A	NFPA'S POLICY IS TO BE REIMBURSED FOR APPROVED TRAVEL WITH COMPANIONS
	PART I, LINE 4B	MR JAMES SHANNON,PRESIDENT OF NATIONAL FIRE PROTECTION ASSOCIATION, PARTICIPATED IN THE SERP RETIREMENT PLAN IN 2012 MR SHANNON ACCRUED \$278,032 IN THE PLAN HE ALSO PARTICIPATED IN THE 457(B) PLAN AND ACCRUED \$13,780 MR BRUCE MULLEN, EXECUTIVE VP & CFO OF NATIONAL FIRE PROTECTION ASSOCIATION PARTICIPATED IN THE SERP RETIREMENT PLAN IN 2012 MR MULLEN ACCRUED \$93,526 IN THE PLAN HE ALSO PARTICIPATED IN THE 457(B) PLAN AND ACCRUED \$10,341
	PART I, LINE 5	15% OF SENIOR MANAGEMENT BONUSES ARE BASED ON ACTUAL REVENUES COMPARED TO THE BUDGET EACH YEAR
	PART I, LINE 6	15% OF SENIOR MANAGEMENT BONUSES ARE BASED ON ACTUAL NET EARNINGS COMPARED TO THE BUDGET EACH YEAR
	PART I, LINE 7	70% OF SENIOR MANAGEMENT BONUSES ARE BASED ON MISSION GOALS ESTABLISHED AT THE BEGINNING OF THE YEAR

Schedule J (Form 990) 2012

Software ID: Software Version:

EIN: 04-1653090

Name: NATIONAL FIRE PROTECTION ASSOCIATION

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name		(B) Breakdown of	f W-2 and/or 1099-MIS	SC compensation	(C) Deferred	(D) Nontaxable	(E) Total of columns	(F) Compensation
		(i) Base Compensation (ii) Bonus & Incentive compensation		(iii) Other compensation	compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
JAMES SHANNON	(1) (11)	1 ' 1	137,281 0	17,023 0	343,029 0	17,315 0	960,036 0	0
BRUCE MULLEN	(I) (II)	· · ·	75,357 0	7,677 0	151,166 0	14,881 0	563,425 0	0
DENNIS J BERRY	(I) (II)	I	1,378 0	849 0	25,235 0	12,867 0	197,265 0	0
PAUL CROSSMAN	(I) (II)		37,592 0	601 0	33,721 0	20,366 0	311,804 0	0
CHRISTIAN DUBAY	(I) (II)		25,234 0	156 0	24,193 0	20,366 0	217,337 0	0
MAUREEN B BRODOFF	(1) (11)	1	37,774 0	12,993 0	127,079 0	22,537 0	422,581 0	0
GARY S KEITH	(I) (II)		34,999 0	554 0	56,278 0	20,366 0	318,041 0	0
KATHLEEN ALMAND	(I) (II)		0 27,446	0 759	0 42,730	0 7,063	0 239,428	0
LORRAINE CARLI	(1) (11)		26,963 0	393 0	35,537 0	935 0	222,426 0	0
LISA A YARUSSI	(I) (II)		12,722	135 0	0	20,366 0	192,099	0

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As Filed Data -

DLN: 93493211007203

OMB No 1545-0047

2012

Open to Public Inspection

Department of the Treasury Internal Revenue Service

SCHEDULE 0

(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

Name of the organization NATIONAL FIRE PROTECTION ASSOCIATION Employer identification number

04-1653090

ldentifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 11	ONCE THE RETURNS ARE COMPLETED THEY ARE REVIEWED AT LEAST TWICE BY THE CFO AND ACCOUNTING STAFF OF NFPA THE RETURN IS THEN SENT TO OUR AUDITING FIRM FOR A FINAL REVIEW AND ANY CHANGES IF NEEDED THE 990 IS THEN MADE AVAILABLE TO THE FULL BOARD OF DIRECTORS AND REVIEWED BY THE AUDIT COMMITTEE PRIOR TO FILING
	FORM 990, PART VI, SECTION B, LINE 12C	EACH OFFICER, DIRECTOR AND TRUSTEE AND KEY EMPLOYEE HAS AN ONGOING DUTY TO DISCLOSE ANY CONFLICTS OF INTEREST OR POSSIBLE CONFLICTS OF INTEREST TO THE GENERAL COUNCIL OR PRESIDENT IN ADDITION, EACH KEY EMPLOYEE SHALL FILE AN ANNUAL DISCLOSURE STATEMENT INCLUDING A QUESTIONNAIRE WHICH SHALL BE PROVIDED BY THE COMPANY THE PRESIDENT SHALL TAKE ACTION AS HE OR SHE CONSIDERS APPROPRIATE REGARDING MANAGING CONFLICTS OF INTEREST AND HANDLING ANY POSSIBLE VIOLATION OR INFRINGEMENT OF THE CONFLICT OF INTEREST POLICY
	FORM 990, PART VI, SECTION B, LINE 15	THE PROCESS FOR DETERMINING COMPENSATION OF THE OFFICERS AND KEY EMPLOYEES IS AS FOLLOWS, THE COMPENSATION COMMITTEE OF THE BOARD REVIEWS AND APPROVES ALL FORMS OF COMPENSATION FOR THE PRESIDENT & EXECUTIVE VICE PRESIDENT THE COMPENSATION COMMITTEE REPORTS TO THE BOARD ALL DECISIONS MADE. COMPARABILITY DATA IS GATHERED BY AN INDEPENDANT CONSULTANT EVERY THREE YEARS. THIS INFORMATION IS GIVEN TO THE COMPENSATION COMMITTEE TO GUIDE THEIR DECISIONS OTHER OFFICERS AND KEY EMPLOYEES SALARIES ARE REVIEWED AND AUTHORIZED BY THE PRESIDENT
	FORM 990, PART VI, SECTION C, LINE 19	NFPA MAKES AVAILABLE ON ITS WEBSITE A COPY OF THEIR BY LAWS NFPA ALSO PUBLISHES A FINANCIAL SUMMARY IN THE JOURNAL FOR ITS MEMBERS THE CONFLICT OF INTEREST DOCUMENT IS NOT PUBLISHED BUT IS RETAINED AS AN INTERNAL DOCUMENT BY THE COMPANY THE FORM 990 AND FINANCIAL STATEMENTS ARE AVAILABLE VIA WWW GUIDESTAR COM AND THE MASSACHUSETTS ATTORNEY GENERAL'S WEBSITE
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 9	PENSION COST ADJUSTMENT -2,233,706 MISCELLANEOUS ADJUSTMENT - ROUNDING 2

DLN: 93493211007203

OMB No 1545-0047

Open to Public Inspection

Related Organizations and Unrelated Partnerships

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

Department of the Treasury Internal Revenue Service

(Form 990)

SCHEDULE R

Name of the organization **Employer identification number** NATIONAL FIRE PROTECTION ASSOCIATION 04-1653090

Part I Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.)

(a) Name, address, and EIN (if applicable) of disregarded entity	Primary activity	Legal domicile (state or foreign country)	Total income	(e) End-of-year assets	(T) Direct controlling entity		
(1) TWO BATTERYMARCH LLC 2 BATTERYMARCH PARK QUINCY, MA 02169 04-1653090	LEASED PROPERTY	МА	-181,310	17,468,386	NATIONAL FIRE PROTECTION ASSOCIATION		
(2) THREE BATTERYMARCH LLC 3 BATTERYMARCH PARK QUINCY, MA 02169 20-0580136	LEASED PROPERTY	МА	690,560	10,131,696	NATIONAL FIRE PROTECTION ASSOCIATION		
Part II Identification of Related Tax-Exempt Organiz or more related tax-exempt organizations during the		f the organization a	answered "Yes	" to Form 990, Pa	art IV, line 34 because it	had o	те
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code sect	(e) Public charity sta (if section 501(c)		Section (13) co	ontrolle tity?
1 BATTERYMARCH PARK QUINCY, MA 02169	TO PROMOTE RESEARCH DEVELOPMENT	MA	501 (C) 3	LINE 9	NATIONAL FIRE PROTECTION ASSOCIATION	Yes	No
52-1256543							
							<u> </u>

(a) Name, address, and EIN o related organization	(a) Name, address, and EIN of related organization		(c) Legal domicile (state or foreign country)	entity	(e) Predominant Income(related, unrelated, excluded from tax under sections 512-	(f) Share of total income	(g) Share of end-of-yea assets	(h Disprop r allocat	ortionate	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	mana part	ral or	(k) Percentae ownersh
					514)			Yes	No		Yes	No	
V Identification of Related Or line 34 because it had one or r	ganizations Taxa nore related organi	ble as a Corpo zations treated a	ration s a cor	or Trust (poration or	Complete if t	the organi the tax ye	zatıon ar ar.)	swere	ed "Ye	s" to Form	990,	Part	IV,
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domıcıle (state or foreign country)		(d) Direct controlli entity	(e) Type of entro (C corp, S corp, or trust)		otal Share e of	(g) e of end- year ssets		(h) ercentage wnership	Section (b) conti	(13)	
		,,			,						Yes		No

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule

Yes

1 0	uring the tax year, did the orgranization engage in any of the following transactions with one or more	related organizations	listed in Parts II-I	V ?			
а	Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity				1a	Yes	
Ь	Gift, grant, or capital contribution to related organization(s)				1b	Yes	
C	Gift, grant, or capital contribution from related organization(s)				1 c		No
d	Loans or loan guarantees to or for related organization(s)				1d		No
е	Loans or loan guarantees by related organization(s)				1e		No
f	Dividends from related organization(s)				1f		No
g	Sale of assets to related organization(s)				1 g		No
h	Purchase of assets from related organization(s)				1h		No
i	Exchange of assets with related organization(s)				1i		No
j	Lease of facilities, equipment, or other assets to related organization(s)				1j	Yes	
k	Lease of facilities, equipment, or other assets from related organization(s)				1k		No
1	Performance of services or membership or fundraising solicitations for related organization(s)				11	Yes	
m	Performance of services or membership or fundraising solicitations by related organization(s)				1m	Yes	,
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n	Yes	
0	Sharing of paid employees with related organization(s)				10	Yes	
р	Reimbursement paid to related organization(s) for expenses				1 p		No
q	Reimbursement paid by related organization(s) for expenses				1q	Yes	
_					1r		No
	Other transfer of cash or property to related organization(s)				1s		No
S	Other transfer of cash or property from related organization(s)				15		
2	If the answer to any of the above is "Yes," see the instructions for information on who must comple	te this line, including	covered relationshi	ps and transaction thresholds			
	(a) Name of other organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amou	ınt ınv	olved	
1)(2) THE FIRE PROTECTION RESEARCH FOUNDATION	В	210,000	CODE FUND			
2) (6) THE FIRE PROTECTION RESEARCH FOUNDATION	Q	751,500	PAYROLL_EXPENSES_RENT			
		I	I				

Part V Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35b, or 36.)

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

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross)

revenue) that was not a related organization See instructions re	garding exclu	sion for ce		nent	partnerships				`	,		_	
(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under section 512- 514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionat allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
			514)	Yes	No			Yes	No		Yes	No	
												1	

Part VII Supplemental Information

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

Identifier Return Reference Explanation

Additional Data Return to Form

Software ID: Software Version:

EIN: 04-1653090

Name: NATIONAL FIRE PROTECTION ASSOCIATION

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Software ID: **Software Version:**

EIN: 04-1653090

Name: NATIONAL FIRE PROTECTION ASSOCIATION

Form 990, Part VII - Compensation of Compensated Employees, and Independent	Officers, Dir	ectors	,Tru	uste	ees,	, Key	/ En	Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors (A) (B) (C) (D) (E) (F)													
(A) Name and Title	(B) Average hours per week (list any	Positio more unless an dire	n (do than	onot one son is er an trust	box s bo d a tee)	th	T	(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											
	hours for related organizations below dotted line)	Individual trustee or director	Institutional Trustee		Key employee	Highest compensated employee	Former			organizations											
PHILLIP STITTLEBERG CHAIRMAN	1 00	х		х				0	0	0											
ERNEST GRANT 1ST VICE CHAIR	1 00	х		х				0	0	0											
PHILLIP DINENNO 2ND CHAIR	1 00	х		х				0	0	0											
TOM JAEGER PAST CHAIR	1 00	х						0	0	0											
WAYNE BOYD TREASURER	1 00	х		х				0	0	0											
RANDY TUCKER SECRETARY	1 00	х		х				0	0	0											
JAMES SHANNON PRESIDENT NFPA	37 50	х		х				599,692	0	360,344											
PAUL FITZGERALD DIRECTOR	1 00	х						0	0	0											
TOM NORTON DIRECTOR	1 00	х						0	0	0											
WILLIAM MCCAMMON DIRECTOR	1 00	х						0	0	0											
BRIAN HURLEY DIRECTOR	1 00	х						0	0	0											
PETER HOLLAND DIRECTOR	1 00	х						0	0	0											
THOMAS GROOS DIRECTOR	1 00	х						0	0	0											
KEITH WILLIAMS ASSISTANT TREASURER	1 00	х		х				0	0	0											
JOHN DEAN DIRECTOR	1 00	х						0	0	0											
REBECCA DENLINGER DIRECTOR	1 00	х						0	0	0											
JAMES CLARK DIRECTOR	1 00	х						0	0	0											
DEAN SEAVERS DIRECTOR	1 00	х						0	0	0											
DONALD COOK DIRECTOR	1 00	х						0	0	0											
NED PETTUS DIRECTOR	1 00	х						0	0	0											
AMY ACTON DIRECTOR	1 00	х						0	0	0											
KWAME COOPER DIRECTOR	1 00	х						0	0	0											
JULIE ROCHMAN DIRECTOR	1 00	х						0	0	0											
HAROLD SCHAITBERGER DIRECTOR	1 00	х						0	0	0											
WILLIAM STEWART DIRECTOR	1 00	х						0	0	0											

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

(B)

(A)

VICE PRESIDENT

Name and Title	A verage hours per week (list any hours for related organizations below dotted line)		than	not one on i r an trust	box s bot d a tee)	,	Former	Reportable compensation from the organization (W- 2/1099-MISC)	Reportable compensation from related organizations (W- 2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
PETER WILLSE DIRECTOR	1 00	×						0	0	0
BRUCE MULLEN EXECUTIVE VP & CFO NFPA	37 50			х				397,378	0	166,047
DENNIS J BERRY ASSISTANT SECRETARY NFPA	37 50			х				159,163	0	38,102
PAUL CROSSMAN VICE PRESIDENT	37 50				х			257,717	0	54,087
CHRISTIAN DUBAY VICE PRESIDENT	37 50				х			172,778	0	44,559
MAUREEN B BRODOFF VICE PRESIDENT	37 50					х		272,965	0	149,616
GARY S KEITH VICE PRESIDENT	37 50					х		241,397	0	76,644
KATHLEEN ALMAND VICE PRESIDENT	37 50					х		0	189,635	49,793
LORRAINE CARLI VICE PRESIDENT	37 50					х		185,954	0	36,472
LISA A YARUSSI	37 50							171 722	0	20.266

(C)

(D)

171,733

(F)

20,366

0