

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



Internal Revenue Service

### **Return of Organization Exempt From Income Tax**

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

OMB No 1545-0047

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

Open to Public Inspection

AF	or the	2012 calendar year, or tax year beginning OCT 1, 2012 and endi	ng SE	P 30, 2013		
B c	heck if oplicable	C Name of organization INTELLIGENCE AND NATIONAL SECURITY		D Employer ide	ntificat	tion number
	Address change	ALLIANCE, INC.				
	Name change	Doing Business As		52-	11617	57
	Initial return		n/suite	E Telephone nur	nber	
	Termin- ated	901 NORTH STUART STREET 205		•		-4672
	Amende return	City, town, or post office, state, and ZIP code		G Gross receipts \$		2,542,914
	Applica-			H(a) Is this a grou	ıp retu	······································
	pending	F Name and address of principal officer: JOSEPH R. DETRANI		for affiliates?	•	Yes X No
		SAME AS C ABOVE		H(b) Are all affiliate		
TT	ax-exer	mpt status501(c)(3) _x501(c)( _6) ◀ (Insert no.) 4947(a)(1) or	527			t (see instructions)
		www.insaonline.org		H(c) Group exem		
			L Year o	of formation: 1979		tate of legal domicile: MD
		Summary			1 111	
Ч		riefly describe the organization's mission or most significant activities: SEE SCHEDU	LE O			
Governance						
ı,	2 0	Check this box  if the organization discontinued its operations or disposed of	of more	than 25% of its ne	t asse	ıts
Ş		lumber of voting members of the governing body (Part VI, line 1a)	,,,,,,,,	1	3	1
ဗိ		lumber of independent voting members of the governing body (Part VI, line 1b)			4	1
જ		otal number of individuals employed in calendar year 2012 (Part V, line 2a)			5	
ŧ		otal number of individuals employed in calendar year 2012 (rait v, line 2a)			6	20
Activities &		otal number of volunteers (estimate in necessary) otal unrelated business revenue from Part VIII, column (C), line 12			7a	0
ĕ		let unrelated business taxable income from Form 990-T, line 34			7b	0
-	או מ	let differated business taxable income from Form 550-1, life 34	7	Prior Year	<del>'''</del>	
		Contributions and greats (Part VIII June 1h)		Prior rear	0.	Current Year
an l	i	Contributions and grants (Part VIII, line 1h)		2,492,3		2,539,742
Revenue		rogram service revenue (Part VIII, line 2g)		<24,1		3,172
æ		nvestment income (Part VIII, column (A), lines 3, 4, and 7d)	-	42,7		3,172
		other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-		<del></del>	
		otal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		2,511,0		2,542,914
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		20,0	0.	0
		denefits paid to or for members (Part IX, column (A), line 4)		24.0	—∔—	
Expenses		dalaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		24,0	0.	1,219,205
Ë		Professional fundraising fees (Part IX, column (A), line 11e)			<del>" </del>	U
x		otal fundraising expenses (Part IX, column (D), line 25)	-	0.300.0	<u> </u>	4 400 533
_		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	-	2,390,0	_	1,408,733
	18	otal expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		2,434,0		2,627,938
- 0	19 H	Revenue less expenses Subtractine 18 (4m) 156 2	-	76,9	_	<85,024
ts or			Red	jinning of Current Yo	_	End of Year
Sse	20 T	otal assets (Part X, line 16	$\vdash$	1,356,8		1,332,413
Net Assets Fund Balar	21 T	otal liabilities (Part X, line 26) MAY 0'8 2014	-	748,5		809,126
	22 N	let assets or fund balances. Subtract line 21 from line 20		608,3	· · · · ·	523,287
_		Signature Block OGDEN UT		man and as the book		andada and bababa
	•	nes of perjury, I declare that I have examined this tetuhr, including accompanying schedules and		•	or my Kr	nowledge and belief, it is
true,	correct,	and complete. Declaration of preparer (other than officer) is based on all information of which p	reparer			
		Signature of officer		Date 7	2,20	014
Sign				Date		
Her	e	JOSEPH R. DETRANI, PRESIDENT	-			<del></del>
		Type or print name and title		ata . I		CI DTIN
		Print/Type preparer's name		ate Check		PTIN
Paid	L-	OYCE M. UNDERWOOD STEELLISTENDED	_ 7	<del></del>	nployed	P00022361
		Firm's name BDO USA, LLP		Firm's EIN	<u> </u>	3-5381590
Use	Only	Firm's address 7101 WISCONSIN AVE., SUITE 800				
		BETHESDA, MD 20814-4827		Phone no.	(301	)654-4900
May	the IR	S discuss this return with the preparer shown above? (see instructions)				X Yes No

232001 12-10-12 LHA For Paperwork Reduction Act Notice, see the separate instructions.

#### INTELLIGENCE AND NATIONAL SECURITY

Form	990 (2012) ALLIANCE, INC.	52-1161757	Page 2
Pai	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response to any question in this Part III		
1	Briefly describe the organization's mission.		
	TO PROVIDE THE INTELLIGENCE AND NATIONAL SECURITY COMMUNITIES WITH A		
	NON-PARTISAN CATALYST FOR PUBLIC-PRIVATE PARTNERSHIPS WHICH IDENTIFY,		
	DEVELOP AND PROMOTE CREATIVE SOLUTIONS THROUGH ACCESS TO COMMITTED		
	EXPERTS IN AND OUT OF GOVERNMENT.		
2	Did the organization undertake any significant program services during the year which were not listed on		
	the prior Form 990 or 990-EZ?	,	Yes X No
	If "Yes," describe these new services on Schedule O.		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	,	Yes X No
	If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three largest program services, as	measured by	expenses
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other		
	revenue, if any, for each program service reported.	·	•
4a	· · · · · · · · · · · · · · · · · · ·	ue \$	)
	REGISTRATION FEES CHARGED TO ATTEND CONFERENCES, SYMPOSIUMS, AND OTHER		
	EVENTS HELD BY THE ORGANIZATION TO ACCOMPLISH ITS EXEMPT PURPOSE.		
			·
		<del></del>	<del></del>
			· · · · · · · · · · · · · · · · · · ·
			<del> </del>
		<del></del>	<del></del>
	10.		<u>,</u>
4b	(Code) (Expenses \$) (Reven	ue \$	<i>'</i>
		<del></del>	
	<u></u>		<del> </del>
		<del> </del>	
4c	(Code) (Expenses \$) (Reven	ue \$	)
			<del></del>
			<del></del>
		<del></del> -	
		<del></del>	
			٠.
4d	Other program services (Describe in Schedule O)		_
	(Expenses \$ including grants of \$ ) (Revenue \$		)
4e	Total program service expenses ▶		
	•		Form <b>990</b> (2012)
23200 12-10-			

ALLIANCE, INC.

Form 990 (2012) ALLIANCE, INC.

Part IV Checklist of Required Schedules

			•
757		P.	age <b>3</b>
		Yes	No
	1		х
	2		х
	3		x
ect	4		
r	5	х	
rt I	6		х
	7		х
	8		<u>x</u>
	9		х
ent	10		х
		-	
	11a	х	
	11b		<u>x</u>
	11c		х
-	11d 11e		x
	11f	х	<del></del>
	12a	х	
	12b		x
	13 14a		x
)	1/15		x
	14b		<u>х</u>
	15	$\vdash$	

1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		Yes	No
•	If "Yes," complete Schedule A	1		х
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		х
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		
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	х	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	_		
_	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	⊢—		
0	Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for	۲		
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X			
	as applicable.		-	
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,		.	
	Part VI	11a	х	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			х
_	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII  Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	11b		<del>^</del>
C	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		х
А	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	<del>ان</del>		
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		x
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		х
	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	х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?	۱		v
40	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		x
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E  Did the organization maintain an office, employees, or agents outside of the United States?	13 14a		<u>x</u>
14a h	Did the organization maintain an onice, employees, or agents obtained in the original states?  Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	1-1-0		<del></del>
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		x
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			
	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	1		
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	ا		v
40	1c and 8a? If "Yes," complete Schedule G, Part II	18	ļ	<u> </u>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		x
202	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		<u>x</u>
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
			990	2012)

57 Page **4** 

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

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the			
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		х
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		х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			İ
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J .	23	Х	
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		Х
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		
	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			1
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		ļ <u>.</u>
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		
26	Was a loan to or by a current or former officer, director, trustee, key employee, 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		Х
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			ļ ,,
	of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
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):	00-		x
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV  A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		x
b	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	200		
С	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
•	contributions? If "Yes," complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
٠.	If "Yes," complete Schedule N, Part I	31		х
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		х
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		х
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		х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
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		
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		х
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	Х	
		Form	990	(2012)

	, <u>, , , , , , , , , , , , , , , , , , </u>	-1161757	P	age :
Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response to any question in this Part V			Ŀ
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	11		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	0		1
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gamin	ng		<i></i> .
	(gambling) winnings to prize winners?	1c	Х	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			ŀ
	filed for the calendar year ending with or within the year covered by this return  2a	0		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	<b>_</b>	L
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		* /	<b>.</b>
3a		3a		Х
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	<b>↓</b>	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	a		
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	1	Х
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.	_		
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	<b></b>	
b	, , , , , , , , , , , , , , , , , , , ,	5b		Х
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	<u>5c</u>	<u> </u>	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization			
	any contributions that were not tax deductible as charitable contributions?	6a	-	Х
D	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	}		
7	were not tax deductible?	6b	10.7	
7	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 naver?		
a		the payor? 7a	$\vdash$	
		/B		
·	to file Form 8282?	7c		
ч	If "Yes," indicate the number of Forms 8282 filed during the year 7d	10	1	
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		*
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	71		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as rec	<del></del>		
h				
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting	1000 01 111		
	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the	he year? 8		
9	Sponsoring organizations maintaining donor advised funds.	_		
а	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:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against	İ		
	amounts due or received from them)			
12a	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 12b		1 1	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	<u> </u>	$\sqcup$	
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	ļļ	
	Note. See the instructions for additional information the organization must report on Schedule O			
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans			
			Щ	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	l 14a	1 1	X

232005 12-10-12

**b** If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

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

	Check if Schedule O contains a response to any question in this Part VI			Х					
Sec	tion A. Governing Body and Management								
			Yes	No					
1a	Enter the number of voting members of the governing body at the end of the tax year 16								
	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 1b 15								
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?								
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision								
	of officers, directors, or trustees, or key employees to a management company or other person?	3		х					
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		х					
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		х					
6	Did the organization have members or stockholders?	6	Х						
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?								
b	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		х					
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:								
а	The governing body?	8a	х						
b	Each committee with authority to act on behalf of the governing body?	8b		х					
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the								
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		x					
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)								
			Yes	No					
10a	Did the organization have local chapters, branches, or affiliates?	10a		x					
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,								
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b							
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х						
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			-					
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	х						
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	х						
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe		l						
	ın Schedule O how this was done	12c	Х						
13	Did the organization have a written whistleblower policy?	13	х						
14	Did the organization have a written document retention and destruction policy?	14		X					
15	Did the process for determining compensation of the following persons include a review and approval by independent								
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?								
	The organization's CEO, Executive Director, or top management official	15a		<u> </u>					
b	Other officers or key employees of the organization	15b		X					
40	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		1						
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a								
	taxable entity during the year?	16a	<u>i</u>	Х					
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation		I						
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's	-							
`	exempt status with respect to such arrangements?	16b							
	tion C. Disclosure								
17 10	List the states with which a copy of this Form 990 is required to be filed NONE		•						
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) at face public inspectation, Indicate however, made these smallests. Charlest that control	vailab	le						
	for public inspection. Indicate how you made these available. Check all that apply								
40	Own website Another's website Upon request Other (explain in Schedule O)								
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and	i finan	cial						
~	statements available to the public during the tax year.								
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person of	ion: 🕨	· —						
	JEFFREY LAVINE - (703)224-4672 901 NORTH STILDET STREET NO 205 ADLINGTON VA 22203								
	901 NORTH STUART STREET, NO. 205, ARLINGTON, VA 22203								

232006 12-10-12

Form 990 (2012)

ALLIANCE, INC.

52-1161757

Page 7

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
  - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Check this box if neither the organization (A)	(B)			(0	C)			(D)	(E)	(F)
Name and Title	Average	(40	not c	Pos	rtion			Reportable	Reportable	Estimated
	hours per	box	, unle	ss pe	rson	ıs bot	h an	compensation	compensation	amount of
	week		cer an	io a o	recto	or/trus	itee)	from	from related	other
	(list any	Individual trustee or director		ļ				the	organizations	compensation
	hours for related	e or d	tee		ļ	sated		organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the
	organizations	ruste	Institutional trustee	Ì	eg.	Highest compensated employee		(11-2/1039-111100)		organization and related
	below	dual	ution	<u> </u>	Key employee	sst co	l e			organizations
	line)	Indiv	Instit	Officer	Keye	E E	Former	•		Ü
(1) JIM ALLEN	1.00									
DIRECTOR		x						0.	0.	o
(2) LYNN DUGLE	1.00			П						
DIRECTOR		x						0.	0.	0
(3) DEETTE GRAY	1.00									
DIRECTOR		x				}		0.	0.	0
(4) ROBERT GRIFFIN	1.00					Г				
DIRECTOR		x				l		0.	0.	o
(5) BERNARD GUERRY	1.00				Г					
DIRECTOR		x			1			0.	0.	0
(6) DEWEY HOUCK	1.00					Г				-
DIRECTOR		х					li	0.	0.	o
(7) JAKE JACOBY	1.00					Г			1	
DIRECTOR		х						0.	0.	0
(8) JOSE JIMENEZ	1.00						П	********		-
DIRECTOR		х						0.	0.	o
(9) JOHN JOLLY	1,00									-
DIRECTOR		x			ŀ			0.	0.	0
(10) DEBORAH OLIVER	1.00									
DIRECTOR		х						0.	0.	0
(11) FOSTER PAYNE	1.00									<del></del>
DIRECTOR		x						0.	0.	0
(12) KATHY PHERSON	1.00									-
DIRECTOR		x						0.	0.	0
(13) TIMOTHY REARDON	1.00		П					<del></del>		
DIRECTOR		x						0.	0.	0
(14) ALLAN SONSTEBY	1.00									
DIRECTOR		х						0.	0.	o
(15) SCOTT WHITE	1.00		П		_		П			
DIRECTOR		х						0.	0.	0
(16) FRAN TOWNSEND	1,00							** *-**-		-
OUTGOING CHAIRWOMAN		х		х				24,000.	0.	0
(17) JOHN NEGROPONTE	1.00									<del>-</del>
CHAIRMAN	<u> </u>	x		х				0.	0.	0

232007 12-10-12

ALLIANCE, INC. Form 990 (2012) 52-1161757 Page 8 Part VII | Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) (A) (B) (C) (D) (E) (F) Position (do not check more than one Average Name and title Reportable Reportable Estimated hours per box, unless person is both an compensation compensation amount of officer and a director/trustee) week from from related other (list any the organizations compensation hours for organization (W-2/1099-MISC) from the related Institutional trustee (W-2/1099-MISC) trustee c organization organizations Key employee and related helow organizations line) 40.00 (18) ELLEN MCCARTHY OUTGOING PRESIDENT х 189,876 0 26,880. (19) JOSEPH R. DETRANI 40.00 PRESIDENT x O n 0. (20) CHARLES W. ALSUP 40,00 VICE PRESIDENT X 183,100 n 25,578. (21) SUZANNE WILSON-HOUCK 40.00 VICE PRESIDENT x 35,000 0 5,050. 431,976 0 57 508. 1b Sub-total 0 0. c Total from continuation sheets to Part VII, Section A d Total (add lines 1b and 1c) 431,976 0. 57,508. Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization Yes No Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual 3 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual X Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person Section B. Independent Contractors Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year. (B) (C) Name and business address Description of services Compensation INSPERITY, 19001 CRESCENT SPRINGS DRIVE, KINGWOOD, TX 77339 LEASED EMPLOYEES 972,752. MARRIOT BUSINESS SERVICES PO BOX 402642, ATLANTA, GA 30384 EVENT SPACE RENTAL/SERVICES

INSPERITY, 19001 CRESCENT SPRINGS DRIVE,

KINGWOOD, TX 77339

MARRIOT BUSINESS SERVICES

PO BOX 402642, ATLANTA, GA 30384

RIPPLE COMMUNICATIONS, LLC, 1110 VERMONT

AVENUE, NW, STE 100, WASHINGTON, DC 20005

PR CONSULTING

149,576.

Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization 3

Form 990 (2012) Part VIII Statement of Revenue Check if Schedule O contains a response to any question in this Part VIII (B) (D) Revenue excluded Related or Unrelated Total revenue from tax under sections 512, 513, or 514 exempt function business revenue revenue Contributions, Gifts, Grants and Other Similar Amounts 1 a Federated campaigns 1a Membership dues 1b 1c c Fundraising events d Related organizations Government grants (contributions) All other contributions, gifts, grants, and similar amounts not included above Q Noncash contributions included in lines 1a-1f \$ Total. Add lines 1a-1f **Business Code** 2 a MEETINGS/PROGRAMS 541900 1,408,890 3,287. Program Service Revenue 1,405,603 b MEMBERSHIP DUES 541900 1,130,852 1,130,852 C d All other program service revenue 2,539,742 Total. Add lines 2a-2f Investment income (including dividends, interest, and 3,172 other similar amounts) Income from investment of tax-exempt bond proceeds Royalties (i) Real (ii) Personal 6 a Gross rents b Less rental expenses c Rental income or (loss) d Net rental income or (loss) (i) Securities 7 a Gross amount from sales of (II) Other assets other than inventory b Less. cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue contributions reported on line 1c). See Part IV, line 18 b Less: direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities See Part IV, line 19 b Less: direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold Net income or (loss) from sales of inventory Miscellaneous Revenue **Business Code** 11 a d All other revenue Total. Add lines 11a-11d 2,542,914 2,536,455 Total revenue. See instructions. 6,459. 232009 12-10-12 Form 990 (2012) Form 990 (2012)

ALLIANCE, INC.

Part IX	Statement o	f Functional	Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns All other organizations must complete column (A). X. Check if Schedule O contains a response to any question in this Part IX Do not include amounts reported on lines 6b, Total expenses Program service Management and Fundraising 7b, 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to governments and organizations in the United States. See Part IV, line 21 Grants and other assistance to individuals in the United States See Part IV, line 22 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, 542,230 trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 497,813 7 Other salaries and wages 8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 6.899 96,229 Other employee benefits 76,034 10 Payroll taxes Fees for services (non-employees): 11 Management 9,626 Legal b 93,837 C Accounting d Lobbying Professional fundraising services. See Part IV, line 17 125 Investment management fees Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.) 104,107 91,241 Advertising and promotion 12 25,604 13 Office expenses 84,174 Information technology 14 15 Royalties 178,770 Occupancy 16 15,193 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings 726,961 19 Interest 20 Payments to affiliates 21 40,450 22 Depreciation, depletion, and amortization 11,194 23 Insurance Other expenses. Itemize expenses not covered 24 above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) BANK/CREDIT CARD FEES 27,451 b All other expenses 2,627,938. Total functional expenses. Add lines 1 through 24e 25 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here If following SOP 98-2 (ASC 958-720)

Form 990 (2012)
Part X Balance Sheet

Cash - non-interest-bearing Savings and temporary cash investments Pledges and grants receivable, net Accounts receivable, net Loans and other receivables from current and for trustees, key employees, and highest compensate Part II of Schedule L Loans and other receivables from other disquals section 4958(f)(1)), persons described in section employers and sponsoring organizations of section employees' beneficiary organizations (see instr). Notes and loans receivable, net Inventories for sale or use Prepaid expenses and deferred charges Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D Less: accumulated depreciation Investments - publicly traded securities Investments - other securities. See Part IV, line Intangible assets Other assets See Part IV, line 11 Total assets. Add lines 1 through 15 (must equ	ated employee  Ified persons (a n 4958(c)(3)(B), Ition 501(c)(9) v n Complete Par  10a 10b	s Complete s defined under and contributing	(A) Beginning of year 406,276. 733,554. 88,631.	1 2 3 4 5 5 6 7 8 9 10c 11 12 13	(B) End of year  123,332. 886,601.  131,820.  45,962.
Savings and temporary cash investments Pledges and grants receivable, net Accounts receivable, net Loans and other receivables from current and for trustees, key employees, and highest compensate Part II of Schedule L Loans and other receivables from other disquals section 4958(f)(1)), persons described in section employers and sponsoring organizations of section employers and sponsoring organizations (see instr). Notes and loans receivable, net Inventories for sale or use Prepaid expenses and deferred charges Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D Less: accumulated depreciation Investments - publicly traded securities Investments - other securities. See Part IV, line Intangible assets Other assets See Part IV, line 11	ated employee  Ified persons (a n 4958(c)(3)(B), Ition 501(c)(9) v n Complete Par  10a 10b	s Complete s defined under and contributing bluntary III of Sch L	733,554. 88,631. 20,986.	2 3 4 5 7 8 9 10c 11 12	886,601. 131,820.
Pledges and grants receivable, net Accounts receivable, net Loans and other receivables from current and for trustees, key employees, and highest compensations. Part II of Schedule L Loans and other receivables from other disquals section 4958(f)(1)), persons described in section employers and sponsoring organizations of sect employees' beneficiary organizations (see instr). Notes and loans receivable, net Inventories for sale or use Prepaid expenses and deferred charges Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D Less: accumulated depreciation Investments - publicly traded securities Investments - other securities. See Part IV, line Intangible assets Other assets See Part IV, line 11	ated employee  Ified persons (a n 4958(c)(3)(B), Ition 501(c)(9) v n Complete Par  10a 10b	s Complete s defined under and contributing bluntary III of Sch L	20,986.	3 4 5 7 8 9 10c 11 12	131,820. 45,962.
Accounts receivable, net Loans and other receivables from current and for trustees, key employees, and highest compensations. Part II of Schedule L Loans and other receivables from other disquals section 4958(f)(1)), persons described in section employers and sponsoring organizations of sect employees' beneficiary organizations (see instr). Notes and loans receivable, net Inventories for sale or use Prepaid expenses and deferred charges Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D Less: accumulated depreciation Investments - publicly traded securities Investments - other securities. See Part IV, line Investments - program-related See Part IV, line Intangible assets Other assets See Part IV, line 11	ated employee  Ified persons (a n 4958(c)(3)(B), Ition 501(c)(9) v n Complete Par  10a 10b	s Complete s defined under and contributing bluntary III of Sch L	20,986.	6 7 8 9 10c 11 12	45,962.
Loans and other receivables from current and for trustees, key employees, and highest compensions. Part II of Schedule L  Loans and other receivables from other disqualities section 4958(f)(1)), persons described in section employers and sponsoring organizations of section employees' beneficiary organizations (see instriction). Notes and loans receivable, net Inventories for sale or use. Prepaid expenses and deferred charges. Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D. Less: accumulated depreciation. Investments - publicly traded securities. Investments - other securities. See Part IV, line Intangible assets. Other assets. See Part IV, line 11.	ated employee  Ified persons (a n 4958(c)(3)(B), Ition 501(c)(9) v n Complete Par  10a 10b	s Complete s defined under and contributing bluntary III of Sch L	20,986.	6 7 8 9 10c 11 12	45,962.
trustees, key employees, and highest compensations. Part II of Schedule L Loans and other receivables from other disquals section 4958(f)(1)), persons described in section employers and sponsoring organizations of section employees' beneficiary organizations (see instr). Notes and loans receivable, net Inventories for sale or use Prepaid expenses and deferred charges Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D Less: accumulated depreciation Investments - publicly traded securities Investments - other securities. See Part IV, line Investments - program-related See Part IV, line Intangible assets Other assets See Part IV, line 11	ated employee  Ified persons (a n 4958(c)(3)(B), Ition 501(c)(9) v n Complete Par  10a 10b	s Complete s defined under and contributing bluntary III of Sch L	84,004.	6 7 8 9 10c 11 12	
Part II of Schedule L Loans and other receivables from other disquals section 4958(f)(1)), persons described in section employers and sponsoring organizations of sectemployees' beneficiary organizations (see instr). Notes and loans receivable, net Inventories for sale or use Prepaid expenses and deferred charges Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D Less: accumulated depreciation Investments - publicly traded securities Investments - other securities. See Part IV, line Intangible assets Other assets See Part IV, line 11	10a 11	s defined under and contributing pluntary II of Sch L	84,004.	6 7 8 9 10c 11 12	·
Loans and other receivables from other disquality section 4958(f)(1)), persons described in section employers and sponsoring organizations of section employees' beneficiary organizations (see instr). Notes and loans receivable, net Inventories for sale or use. Prepaid expenses and deferred charges. Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D. Less: accumulated depreciation. Investments - publicly traded securities. Investments - other securities. See Part IV, line. Investments - program-related. See Part IV, line. Intangible assets.  Other assets. See Part IV, line 11.	10a 11	and contributing bluntary II of Sch L	84,004.	6 7 8 9 10c 11 12	·
section 4958(f)(1)), persons described in section employers and sponsoring organizations of section employees' beneficiary organizations (see instr). Notes and loans receivable, net Inventories for sale or use. Prepaid expenses and deferred charges. Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D. Less: accumulated depreciation. Investments - publicly traded securities. Investments - other securities. See Part IV, line. Intangible assets. Other assets. See Part IV, line 11.	10a 11	and contributing bluntary II of Sch L	84,004.	7 8 9 10c 11 12	
employers and sponsoring organizations of section employees' beneficiary organizations (see instrictions). Notes and loans receivable, net Inventories for sale or use. Prepaid expenses and deferred charges. Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D. Less: accumulated depreciation. Investments - publicly traded securities. Investments - other securities. See Part IV, line. Investments - program-related. See Part IV, line. Intangible assets. Other assets. See Part IV, line 11.	10a 10b	oluntary II of Sch L 197,622.	84,004.	7 8 9 10c 11 12	·
employees' beneficiary organizations (see instr).  Notes and loans receivable, net Inventories for sale or use Prepaid expenses and deferred charges Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D Less: accumulated depreciation Investments - publicly traded securities Investments - other securities. See Part IV, line Investments - program-related See Part IV, line Intangible assets Other assets See Part IV, line 11	10a 10b	II of Sch L 197,622.	84,004.	7 8 9 10c 11 12	·
Notes and loans receivable, net Inventories for sale or use Prepaid expenses and deferred charges Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D Less: accumulated depreciation Investments - publicly traded securities Investments - other securities. See Part IV, line Investments - program-related See Part IV, line Intangible assets Other assets See Part IV, line 11	10a 10b	197,622.	84,004.	7 8 9 10c 11 12	·
Notes and loans receivable, net Inventories for sale or use Prepaid expenses and deferred charges Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D Less: accumulated depreciation Investments - publicly traded securities Investments - other securities. See Part IV, line Investments - program-related See Part IV, line Intangible assets Other assets See Part IV, line 11	10a 10b	197,622.	84,004.	8 9 10c 11 12	·
Prepaid expenses and deferred charges Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D Less: accumulated depreciation Investments - publicly traded securities Investments - other securities. See Part IV, line Investments - program-related See Part IV, line Intangible assets Other assets See Part IV, line 11	10b		84,004.	9 10c 11 12	
Prepaid expenses and deferred charges Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D Less: accumulated depreciation Investments - publicly traded securities Investments - other securities. See Part IV, line Investments - program-related See Part IV, line Intangible assets Other assets See Part IV, line 11	10b		84,004.	10c 11 12	
Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D Less: accumulated depreciation Investments - publicly traded securities Investments - other securities. See Part IV, line Investments - program-related See Part IV, line Intangible assets Other assets See Part IV, line 11	10b			11 12	126,414.
basis. Complete Part VI of Schedule D Less: accumulated depreciation Investments - publicly traded securities Investments - other securities. See Part IV, line Investments - program-related See Part IV, line Intangible assets Other assets See Part IV, line 11	10b			11 12	126,414.
Investments - publicly traded securities Investments - other securities. See Part IV, line Investments - program-related See Part IV, line Intangible assets Other assets See Part IV, line 11	10b	71,208.		11 12	126,414.
Investments - other securities. See Part IV, line Investments - program-related See Part IV, line Intangible assets  Other assets See Part IV, line 11	11		23 434	11 12	
Investments - program-related See Part IV, line Intangible assets Other assets See Part IV, line 11	11		23 434	12	
Intangible assets Other assets See Part IV, line 11			23 434	<del> </del>	
Intangible assets Other assets See Part IV, line 11		F	23 434		
	ial line 34)	r		14	18,284.
	ial line 34)			15	
	Ja: 11115 J4)		1,356,885.	16	1,332,413.
Accounts payable and accrued expenses			236,561.	17	300,779.
Grants payable	Ī		18	·	
Deferred revenue	· · ·	512,013.	19	508,347.	
Tax-exempt bond liabilities				20	· · · · · · · · · · · · · · · · · · ·
Escrow or custodial account liability. Complete		21			
	_			· · · · · · · · · · · · · · · · · · ·	
	•	·		22	
	ated third parti	es l		$\vdash$	
-		·		$\vdash$	
		d third			
	-				
Schedule D	, .			25	
Total liabilities. Add lines 17 through 25	-	Γ	748,574.	26	809,126.
	3), check here	x and			
Unrestricted net assets			608,311.	27	523,287.
Temporarily restricted net assets		[		28	
•		Ī		29	
Organizations that do not follow SFAS 117 (A	NSC 958), chec	k here ▶□			
and complete lines 30 through 34.	-	1			
	<b>:</b>	1		30	
				31	1
- · · · · · · · · · · · · · · · · · · ·		funds		32	· <del>-</del>
	• •	<b>-</b>	608,311.	33	523,287.
		1			
	Loans and other payables to current and forme key employees, highest compensated employee Complete Part II of Schedule L Secured mortgages and notes payable to unrelate Unsecured notes and loans payable to unrelate Other liabilities (including federal income tax, payarties, and other liabilities not included on line Schedule D Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 95) complete lines 27 through 29, and lines 33 and Unrestricted net assets Temporarily restricted net assets Permanently restricted net assets Organizations that do not follow SFAS 117 (Asc 95) and complete lines 30 through 34. Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, or executions and complete lines and complete lines are principal, or current funds paid-in or capital surplus, or land, building, or executions.	Loans and other payables to current and former officers, direct key employees, highest compensated employees, and disqualic Complete Part II of Schedule L.  Secured mortgages and notes payable to unrelated third parties. Unsecured notes and loans payable to unrelated third parties. Other liabilities (including federal income tax, payables to relate parties, and other liabilities not included on lines 17-24). Completedule D.  Total liabilities. Add lines 17 through 25.  Organizations that follow SFAS 117 (ASC 958), check here complete lines 27 through 29, and lines 33 and 34.  Unrestricted net assets.  Temporarily restricted net assets.  Permanently restricted net assets.  Organizations that do not follow SFAS 117 (ASC 958), check and complete lines 30 through 34.  Capital stock or trust principal, or current funds.  Paid-in or capital surplus, or land, building, or equipment fund.  Retained earnings, endowment, accumulated income, or other	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  Secured mortgages and notes payable to unrelated third parties  Unsecured notes and loans payable to unrelated third parties  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  Total liabilities. Add lines 17 through 25  Organizations that follow SFAS 117 (ASC 958), check here   X and complete lines 27 through 29, and lines 33 and 34.  Unrestricted net assets  Temporarily restricted net assets  Permanently restricted net assets  Organizations that do not follow SFAS 117 (ASC 958), check here   and complete lines 30 through 34.  Capital stock or trust principal, or current funds  Paid-in or capital surplus, or land, building, or equipment fund  Retained earnings, endowment, accumulated income, or other funds	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  Secured mortgages and notes payable to unrelated third parties  Unsecured notes and loans payable to unrelated third parties  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  Total liabilities. Add lines 17 through 25  Organizations that follow SFAS 117 (ASC 958), check here   X and complete lines 27 through 29, and lines 33 and 34.  Unrestricted net assets  Permanently restricted net assets  Organizations that do not follow SFAS 117 (ASC 958), check here   and complete lines 30 through 34.  Capital stock or trust principal, or current funds  Paid in or capital surplus, or land, building, or equipment fund	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  Secured mortgages and notes payable to unrelated third parties  Unsecured notes and loans payable to unrelated third parties  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  Total liabilities. Add lines 17 through 25  Organizations that follow SFAS 117 (ASC 958), check here ▶ X and complete lines 27 through 29, and lines 33 and 34.  Unrestricted net assets  Permanently restricted net assets  Permanently restricted net assets  Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 30 through 34.  Capital stock or trust principal, or current funds  Paid-in or capital surplus, or land, building, or equipment fund  Retained earnings, endowment, accumulated income, or other funds  32

If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit

or audits, explain why in Schedule O and describe any steps taken to undergo such audits

#### **SCHEDULE C**

(Form 990 or 990-EZ)

**Political Campaign and Lobbying Activities** 

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

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. See separate instructions.

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

ALLIANCE, INC.  Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.  1 Provide a description of the organization's direct and indirect political campaign activities in Part IV. 2 Political expenditures 3 Volunteer hours  Part I-B Complete if the organization is exempt under section 501(c)(3). 1 Enter the amount of any excise tax incurred by the organization under section 4955 2 Enter the amount of any excise tax incurred by organization managers under section 4955 3 if the organization incurred a section 4955 tax, did it file Form 4720 for this year? 4 Was a correction made? 5 If 'Yes,' describe in Part IV. 1 Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b 4 Did the filing organization file Form 1120-POL for this year? 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.  (a) Name (b) Address (c) EIN (d) Amount paid from (e) Amount of political		6) organizations. Complete Part III.		-	
Part I-A   Complete if the organization is exempt under section 501(c) or is a section 527 organization.  1 Provide a description of the organization's direct and indirect political campaign activities in Part IV. 2 Political expenditures 3 Volunteer hours    Part I-B   Complete if the organization is exempt under section 501(c)(3). 1 Enter the amount of any excise tax incurred by the organization under section 4955 2 Enter the amount of any excise tax incurred by organization managers under section 4955 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? 4 Was a correction made? 4 Was a correction made? 5 If 'Yes,' describe in Part IV.  Part I-C   Complete if the organization is exempt under section 501(c), except section 501(c)(3). 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b 4 Did the filing organization file Form 1120-POL for this year? 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political organization. Sunds. If none, enter 0.  (a) Name (b) Address (c) EIN (d) Amount paid from filing organization orthoritions received an promptly and directly delivered to a separate political organization. Sunds. If none, enter 0.	Name of organization INT	FELLIGENCE AND NATIONAL SECURITY	,	Empl	oyer identification number
1 Provide a description of the organization's direct and indirect political campaign activities in Part IV. 2 Political expenditures 3 Volunteer hours  Part I-B Complete if the organization is exempt under section 501(c)(3). 1 Enter the amount of any excise tax incurred by the organization under section 4955 2 Enter the amount of any excise tax incurred by organization managers under section 4955 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? 4 Was a correction made? 5 If 'Yes,' describe in Part IV.  Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b 4 Did the filing organization file Form 1120-POL for this year? 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.  (a) Name  (b) Address  (c) EIN  (d) Amount paid from filing organization's funds. If none, enter 0.  (e) Amount of political contributions received an promptly and directly delivered to a separate political organization.					
2 Political expenditures 3 Volunteer hours  Part I-B Complete if the organization is exempt under section 501(c)(3).  1 Enter the amount of any excise tax incurred by the organization under section 4955 2 Enter the amount of any excise tax incurred by organization managers under section 4955 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? 4a Was a correction made? b If "Yes," describe in Part IV.  Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).  1 Enter the amount directly expended by the filing organization for section 527 exempt function activities 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b 4 Did the filing organization file Form 1120-POL for this year?  5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization and payments For each organization listed, enter the amount paid from the filing organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.  (a) Name  (b) Address (c) EIN (d) Amount paid from filing organization's funds. If none, enter 0 Contributions received an promptly and directly delivered to a separate political organization's funds. If none, enter 0	Part I-A Complete i	f the organization is exempt un	der section 501(c	or is a section 527 o	rganization.
1 Enter the amount of any excise tax incurred by the organization under section 4955 2 Enter the amount of any excise tax incurred by organization managers under section 4955 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? 4a Was a correction made? b If "Yes," describe in Part IV.  Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).  1 Enter the amount directly expended by the filing organization for section 527 exempt function activities 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b 4 Did the filing organization file Form 1120-POL for this year? 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.  (a) Name (b) Address (c) EIN (d) Amount paid from filing organizations for enter 40. If additions received an promptly and directly delivered to a separate political organization.	2 Political expenditures	the organization's direct and indirect politi	cal campaign activities		
1 Enter the amount of any excise tax incurred by the organization under section 4955 2 Enter the amount of any excise tax incurred by organization managers under section 4955 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? 4 Was a correction made? b If "Yes," describe in Part IV.  Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).  1 Enter the amount directly expended by the filing organization for section 527 exempt function activities 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b 4 Did the filing organization file Form 1120-POL for this year? 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.  (a) Name  (b) Address (c) EIN (d) Amount paid from filing organizations for political contributions received an promptly and directly delivered to a separate political organization.	Part I-B Complete i	f the organization is exempt und	der section 501(c	)(3).	
2 Enter the amount of any excise tax incurred by organization managers under section 4955 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? 4a Was a correction made? b If "Yes," describe in Part IV.    Part I-C   Complete if the organization is exempt under section 501(c), except section 501(c)(3).  1 Enter the amount directly expended by the filing organization for section 527 exempt function activities 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b 4 Did the filing organization file Form 1120-POL for this year? 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.  (a) Name  (b) Address (c) EIN (d) Amount paid from filing organization's funds. If none, enter -0- filing organization's foothibutions received an promptly and directly delivered to a separate political organization's foothibutions received an promptly and directly delivered to a separate political organization's funds. If none, enter -0-	<u> </u>		<del></del>	<del></del>	· · · · · · · · · · · · · · · · · · ·
4a Was a correction made?    D 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   S	2 Enter the amount of any	excise tax incurred by organization manage	gers under section 495		
b If "Yes," describe in Part IV.  Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).  1 Enter the amount directly expended by the filing organization for section 527 exempt function activities  2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities  3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b  4 Did the filing organization file Form 1120-POL for this year?  5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.  (a) Name  (b) Address  (c) EIN  (d) Amount paid from filing organization's funds. If none, enter -0. delivered to a separate political organization or	3 If the organization incurr	ed a section 4955 tax, did it file Form 4720	) for this year?		Yes No
Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).  1 Enter the amount directly expended by the filing organization for section 527 exempt function activities  2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities  3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b  4 Did the filing organization file Form 1120-POL for this year?  5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.  (a) Name  (b) Address  (c) EIN  (d) Amount paid from filing organization's funds. If none, enter -0.  (e) Amount of political contributions received an promptly and directly delivered to a separate political organization.	4a Was a correction made?				Yes No
1 Enter the amount directly expended by the filing organization for section 527 exempt function activities 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b 4 Did the filing organization file Form 1120-POL for this year? 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.  (a) Name (b) Address (c) EIN (d) Amount paid from filing organization's funds. If none, enter -0. (e) Amount of political contributions received an promptly and directly delivered to a separate political organization.	b If "Yes," describe in Part	IV.			
2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities  3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b  4 Did the filing organization file Form 1120-POL for this year?  5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.  (a) Name  (b) Address  (c) EIN  (d) Amount paid from filing organization's funds. If none, enter -0- contributions received an promptly and directly delivered to a separate political organization.	Part I-C Complete i	f the organization is exempt un	der section 501(c	), except section 501(	c)(3).
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?  Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.  (a) Name  (b) Address  (c) EIN  (d) Amount paid from filing organization's funds. If none, enter -0. promptly and directly delivered to a separate political organization.	•		•		
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?  Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.  (a) Name  (b) Address  (c) EIN  (d) Amount paid from filing organization's funds. If none, enter -0- delivered to a separate political organization.			ther organizations for s	section 527	
Inne 17b  4 Did the filing organization file Form 1120-POL for this year?  5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.  (a) Name  (b) Address  (c) EIN  (d) Amount paid from filing organization's funds. If none, enter -0- delivered to a separate political organization.	•			▶\$	
Did the filing organization file Form 1120-POL for this year?  Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.  (a) Name  (b) Address  (c) EIN  (d) Amount paid from filing organization's funds. If none, enter -0.  (e) Amount of political contributions received an promptly and directly delivered to a separate political organization.		penditures. Add lines 1 and 2. Enter here	and on Form 1120-POI		
5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.  (a) Name  (b) Address  (c) EIN  (d) Amount paid from filing organization's funds. If none, enter -0 delivered to a separate political organization.		(1.5. 4400 001 ( ))		▶\$	
made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.  (a) Name  (b) Address  (c) EIN  (d) Amount paid from filing organization's funds. If none, enter -0 (e) Amount of political contributions received an promptly and directly delivered to a separate political organization.	• •	-	'IN' of all access 507 -		
filing organization's contributions received an funds. If none, enter -0- promptly and directly delivered to a separate political organization.	made payments For eac contributions received the	th organization listed, enter the amount pa hat were promptly and directly delivered to	id from the filing organ a separate political org	ization's funds. Also enter th ganization, such as a separa	ne amount of political
	(a) Name	(b) Address	(c) EIN	filing organization's	contributions received and promptly and directly delivered to a separate political organization.
	<del></del>				
				ļ	V.J1
For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.  Schedule C (Form 990 or 990-EZ) 201	For Penerguark Paduation A	ot Notice cos the Instructions for F	000 or 000 57	0.5.1.1.0	/F 000 000 FT 00 10

LHA

Schedule C (Form 990 or 990-EZ) 2012

Schedule C (Form 990 or 990-EZ) 2012

f Grassroots lobbying expenditures

Schedule C (Form 990 or 990-EZ) 2012 ALLIANCE, INC.

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

For $\epsilon$	ach "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description	(	a)	(1	o)
	e lobbying activity.	Yes	No	Ame	ount
1	During the year, did the filing organization attempt to influence foreign, national, state or	1			-
	local legislation, including any attempt to influence public opinion on a legislative matter				
	or referendum, through the use of:		_		
а	Volunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		ļ	·	
С	Media advertisements?				
	Mailings to members, legislators, or the public?				
	Publications, or published or broadcast statements?				
f	Grants to other organizations for lobbying purposes?				
9		ļ	<b> </b>		
n	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		<b>.</b>		
	Other activities?		-		
1	Total. Add lines 1c through 1i	<u> </u>	<del></del>		
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
	If "Yes," enter the amount of any tax incurred under section 4912				
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912		<del> </del>		
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?  t III-A   Complete if the organization is exempt under section 501(c)(4), section 501(c)(4).	on 501/c	1/5) or se	ction	
	501(c)(6).	011 30 NC	)(J), UI 36	CUOII	
	ου τ(ο)(ο).			Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		1		x
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2	х	
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?	-	2		x
	t III-B Complete if the organization is exempt under section 501(c)(4), section	on 501(c	(5), or se	ction	
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered	• •			ne 3, is
	answered "Yes."				
1	Dues, assessments and similar amounts from members		1		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures)	ical			•
	expenses for which the section 527(f) tax was paid).				
а	Current year		2a		
b	Carryover from last year		2b		
С	Total		2c		
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3		
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the ex	cess			-
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and	political			
	expenditure next year?		4		
5	Taxable amount of lobbying and political expenditures (see instructions)		. 5		
Par			<u></u>		
Com	plete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5; P	art II-A (affil	ated group	list), Part II	A, line 2,
and I	Part II-B, line 1 Also, complete this part for any additional information.				
		_			
					_
		<u> </u>	<del></del>		

#### **SCHEDULE D**

(Form 990)

Department of the Treasury Internal Revenue Service

#### **Supplemental Financial Statements**

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

2012
Open to Public Inspection

Name of the organization

INTELLIGENCE AND NATIONAL SECURITY

Employer identification number

	ALLIANCE, INC.		52-1161757		
Par	t I Organizations Maintaining Donor Advise	ed Funds or Other Similar Funds or	Accounts.Complete if the		
	organization answered "Yes" to Form 990, Part IV, lin	e 6.			
		(b) Funds and other accounts			
1	Total number at end of year				
2	Aggregate contributions to (during year)				
3	Aggregate grants from (during year)				
	Aggregate value at end of year				
	Did the organization inform all donors and donor advisors in	writing that the accepts hold in donor advised f	inde		
5	_		Yes No		
_	are the organization's property, subject to the organization's	_			
6	Did the organization inform all grantees, donors, and donor a				
	for charitable purposes and not for the benefit of the donor of	or donor advisor, or for any other purpose con	[]		
<b>D</b>	impermissible private benefit?		Yes No		
Par			IV, line 7.		
1	Purpose(s) of conservation easements held by the organizat	· — — · · · · · · · · · · · · · · · · ·			
	Preservation of land for public use (e.g., recreation or	education) Preservation of an historic	cally important land area		
	Protection of natural habitat	Preservation of a certified	historic structure		
	Preservation of open space				
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form of a	conservation easement on the last		
	day of the tax year.				
			Held at the End of the Tax Year		
а	Total number of conservation easements		2a		
b	Total acreage restricted by conservation easements		2b		
С	Number of conservation easements on a certified historic sti	ructure included in (a)	2c		
d	Number of conservation easements included in (c) acquired	after 8/17/06, and not on a historic structure			
	listed in the National Register		2d		
3	Number of conservation easements modified, transferred, re	eleased, extinguished, or terminated by the org	ganization during the tax		
	year >				
4	Number of states where property subject to conservation ea	sement is located			
5	Does the organization have a written policy regarding the pe	riodic monitoring, inspection, handling of			
	violations, and enforcement of the conservation easements	rt holds?	Yes No		
6	Staff and volunteer hours devoted to monitoring, inspecting	, and enforcing conservation easements during	g the year 🕨		
7	Amount of expenses incurred in monitoring, inspecting, and	<del>-</del>			
8	Does each conservation easement reported on line 2(d) abo	<u>-</u>	·		
	and section 170(h)(4)(B)(ii)?	, , ,	Yes No		
9	In Part XIII, describe how the organization reports conservat	ion easements in its revenue and expense sta	tement, and balance sheet, and		
	include, if applicable, the text of the footnote to the organiza				
	conservation easements.		3		
Pai	t III Organizations Maintaining Collections of	of Art, Historical Treasures, or Othe	er Similar Assets.		
	Complete if the organization answered "Yes" to Form	ı 990, Part IV, line 8			
1a	If the organization elected, as permitted under SFAS 116 (A	SC 958), not to report in its revenue statement	t and balance sheet works of art,		
	historical treasures, or other similar assets held for public ex				
	the text of the footnote to its financial statements that descri				
h	If the organization elected, as permitted under SFAS 116 (A		d balance sheet works of art, historical		
_	treasures, or other similar assets held for public exhibition, e				
	relating to these items.	public	and the same and t		
	(i) Revenues included in Form 990, Part VIII, line 1		<b>▶</b> \$		
	(ii) Assets included in Form 990, Part X		► \$ ► \$		
•		pacurae, or other similar senate for financial as			
2	If the organization received or held works of art, historical tree	_	iri, provide		
_	the following amounts required to be reported under SFAS	To pac soo, reading to these items.	<b>b</b> ¢		
a	Revenues included in Form 990, Part VIII, line 1	► \$ ► \$			
b	Assets included in Form 990, Part X		<b>&gt;</b> \$		

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 232051

Schedule D (Form 990) 2012

Sche	dule D (Form 990) 2012 ALLIANCE, I	NC.					5	2-1161	757	Page 2
Par	t III Organizations Maintaining C	ollections of A	rt, His	torical Tr	easures,	or Othe	r Simila	ar Asse	ts(contin	ued)
3	3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items									
	(check all that apply)									
а	Public exhibition	d	ı 🗀	Loan or exc	hange progra	ams				
b	Scholarly research	е	, 🔲	Other						
С	Preservation for future generations									
4	Provide a description of the organization's co	ollections and explai	n how th	hey further t	he organizati	ion's exem	npt purpo	se in Par	t XIII	
5										
	to be sold to raise funds rather than to be maintained as part of the organization's collection?									
Par	t IV Escrow and Custodial Arran	gements. Comple	ete if the	e organizatio	n answered	"Yes" to F	orm 990,	, Part IV,	line 9, or	
	reported an amount on Form 990, Par	rt X, line 21.								
1a	Is the organization an agent, trustee, custod	an or other intermed	diary for	contribution	s or other as	ssets not i	ncluded		_	
	on Form 990, Part X?								Yes	☐ No
b	if "Yes," explain the arrangement in Part XIII	and complete the fo	llowing	table:						
	·								Amount	
С	Beginning balance						1c			
d	Additions during the year	_					1d			
е	Distributions during the year						1e			
f	Ending balance						1f			
2a	Did the organization include an amount on Fe	orm 990, Part X, line	217						Yes	No
b	If "Yes," explain the arrangement in Part XIII.	Check here if the ex	xplanation	on has been	provided in	Part XIII				
Par	t V Endowment Funds. Complete i	f the organization ar	nswered	"Yes" to Fo	rm 990, Part	IV, line 10	)			
		(a) Current year	(b) F	Prior year	(c) Two yea	rs back (	J) Three y	ears back	(e) Four	years back
1a	Beginning of year balance									
b	Contributions									
С	Net investment earnings, gains, and losses									
d	Grants or scholarships									
е	Other expenditures for facilities									
	and programs									
f	Administrative expenses									
g	End of year balance									
2	Provide the estimated percentage of the curr	rent year end baland	ce (line 1	g, column (a	a)) held as:					
а	Board designated or quasi-endowment	•	%	•						
b	Permanent endowment	%	_							
С	Temporarily restricted endowment ▶	<del></del>								
	The percentages in lines 2a, 2b, and 2c shou	uld equal 100%.								
3a	Are there endowment funds not in the posse	ssion of the organiz	ation th	at are held a	ind administe	ered for th	e organız	ation		
	by:	J					J		Γ	Yes No
	(i) unrelated organizations								3a(i)	
	(ii) related organizations						•		3a(ii)	
b	If "Yes" to 3a(ii), are the related organizations	s listed as required o	on Sche	dule R?					3b	
4										
Pai	t VI Land, Buildings, and Equipm								· · · · ·	<del> </del>
	Description of property	(a) Cost or o			or other	(c) Ac	cumulate	d T	(d) Book	value
	. , , ,	basis (investr			(other)		reciation			
	Land					·		1		
	Buildings					-				
C	Leasehold improvements								-	
d	Equipment				40,109.		17,	068.		23,041.
	Other				157,513.		54,	140.		103,373.
	l. Add lines 1a through 1e (Column (d) must e	qual Form 990, Part	X, colui	mn (B), line 1	10(c).)			<b>&gt;</b>		126,414.

Schedule D (Form 990) 2012

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

2. FIN 48 (ASC 740) Footnote. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2012

232053 12-10-12

(10)

Schedule D (Form 990) 2012

#### SCHEDULE J (Form 990)

**Compensation Information** 

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

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

**ZU IZ** 

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

► Attach to Form 990. ► See separate instructions.

INTELLIGENCE AND NATIONAL SECURITY

ALLIANCE INC.

Employer identification number 52-1161757

Pa	art I Questions Regarding Compensation					
			Yes	No		
<b>1</b> a	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			İ		
	Travel for companions Payments for business use of personal residence					
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			<b>1</b>		
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)					
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or					
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		<u> </u>		
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		ļ		
_						
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					
	X Compensation committee  X Written employment contract  Independent compensation consultant  X Compensation survey or study					
	Independent compensation consultant  X Compensation survey or study  X Approval by the board or compensation committee					
	Point 990 of other organizations Approvar by the board of 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		х		
	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		х		
	c Participate in, or receive payment from, an equity-based compensation arrangement?					
	c Participate in, or receive payment from, an equity-based compensation arrangement?  If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.					
in 165 to drift of lines to of list the persons and provide the applicable amounts for each term in 1 archite						
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.					
5	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	a The organization?					
b	b Any related organization?					
	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.	_				
	The organization?	6a		<u> </u>		
b	Any related organization?	6b		<del></del>		
_	If "Yes" to line 6a or 6b, describe in Part III.			ĺ		
1	7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments					
c	not described in lines 5 and 6? If "Yes," describe in Part III					
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			1		
a	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III  8  9  If "Yes," to line 8, did the exception dee follow the rebutteble programming proceeding described in					
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in	9		1		
	Regulations section 53 4958-6(c)?	9				

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

Schedule J (Form 990) 2012

Page 2

Schedule J (Form 990) 2012

ALLIANCE, INC.

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

Do not list any individuals that are not listed on Form 990, Part VII.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization or row (i) and from related organizations, described in the instructions, on row (ii)

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

Total of columns (B)(I)-(D) Ш

(C) Retirement and

(B) Breakdown of W-2 and/or 1099-MISC compensation

other deferred

reported as deferred (F) Compensation

In prior Form 990

216,756.

781

20

678.

208

365, ö

20

ö

Schedule J (Form 990) 2012

21

232112 12-12-12

(D) Nontaxable benefits

(iii) Other reportable compensation

(ii) Bonus & incentive compensation

(i) Base compensation

(A) Name and Title

compensation

660 9

。 ٥. 0

100.

23,

000

160,

 $\equiv$ 

CHARLES W. ALSUP

(2)

VICE PRESIDENT

ELLEN MCCARTHY OUTGOING PRESIDENT  $\equiv$  $\epsilon$   $\Xi$ 

€

 $\Xi$ 

 $\Xi$ 

ΞΞ  $\equiv$ (ii)  $\Xi$   $\in$ 

 $\Xi$ 

 $\Xi$ 

 $\Xi$ 

37,400

152,476

INIEDIZORNCE AND NATIONAL SECONTII	52-1161757
Complete this part to provide the information, explanation, or descriptions required for Part II lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any	
additional information.	
	Schedule J (Form 990) 2012

#### **SCHEDULE 0**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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

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

Attach to Form 990 or 990-EZ.

2012
Open to Public Inspection

Name of the organization

INTELLIGENCE AND NATIONAL SECURITY

Employer identification number

ALLIANCE, INC.	52-1161757				
ORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:					
TO PROVIDE THE INTELLIGENCE AND NATIONAL SECURITY COMMUNITIES WITH A					
ON-PARTISAN CATALYST FOR PUBLIC-PRIVATE PARTNERSHIPS WHICH IDENTIFY,					
DEVELOP AND PROMOTE CREATIVE SOLUTIONS THROUGH ACCESS TO COMMITTED					
EXPERTS IN AND OUT OF GOVERNMENT.					
FORM 990, PART VI, SECTION A, LINE 6: THIS IS A MEMBERSHIP BASED					
ORGANIZATION WITH ONE CLASS OF MEMBERS.					
FORM 990, PART VI, SECTION A, LINE 7A: MEMBERS ELECT THE BOARD OF					
DIRECTORS FROM A SLATE OF NOMINEES.					
FORM 990, PART VI, SECTION A, LINE 8B: NO COMMITTEES.					
FORM 990, PART VI, SECTION B, LINE 11: FEDERAL FORM 990 IS PREPARED BY AN					
OUTSIDE ACCOUNTING FIRM AND INITIALLY REVIEWED BY THE PRESIDENT. FORM 990					
IS THEN PROVIDED TO THE BOARD OF DIRECTORS FOR REVIEW PRIOR TO BEING FILED					
WITH THE IRS.					
FORM 990, PART VI, SECTION B, LINE 12C: THE BOARD OF DIRECTORS ADMINISTERS	· · · · · · · · · · · · · · · · · · ·				
AND MONITORS ALL PROCEDURES IN EXECUTING THE STATEMENT OF POLICY WITH					
RESPECT TO POTENTIAL CONFLICTS OF INTEREST OF OFFICERS AND DIRECTORS OF THE					
ORGANIZATION. EACH OFFICER AND DIRECTOR PROVIDES AN ANNUAL DISCLOSURE					
STATEMENT TO THE BOARD OF DIRECTORS.					
	<del></del>				

FORM 990, PART VI, SECTION C, LINE 19: UPON REQUEST, THE ORGANIZATION

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 232211 01-04-13

Schedule O (Form 990 or 990-EZ) (2012)

Schedule O (Form 990 or 990-EZ) (2012)	Page 2
Name of the organization INTELLIGENCE AND NATIONAL SECURITY  ALLIANCE, INC.	Employer identification number 52-1161757
MAKES ITS FORM 990, GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND	
FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC.	
FORM 990, PART IX, LINE 5 - 10	
COMPENSATION OF LEASED EMPLOYEES:	
INSA LEASES ITS STAFF FROM INSPERITY, INC. (INSPERITY), AN INDEPENDENT	
THIRD PARTY. ALL COSTS OF SALARY, BENEFITS AND PAYROLL TAXES ARE THE	
RESPONSIBILITY OF INSPERITY AS WELL AS EMPLOYEE PAYROLL REPORTING	
REQUIREMENTS. INSA PAYS A FEE EQUAL TO THE COST OF GROSS SALARY, TAXES,	
BENEFITS, AND OTHER EXPENSES PLUS A SERVICE FEE. STARTING WITH THE YEAR	
ENDING SEPTEMBER 30, 2013, THE ORGANIZATION IS TREATING EMPLOYEES OF	
THE EMPLOYEE LEASING COMPANY AS THE ORGANIZATION'S OWN EMPLOYEES.	
SALARY, BENEFITS AND PAYROLL TAX COSTS HAVE BEEN REPORTED ON FORM 990	
PART IX, SCHEDULE OF FUNCTIONAL EXPENSES, ON LINES 5 THROUGH 10. IN	
PRIOR YEARS, SALARY, BENEFITS AND PAYROLL TAX COSTS FOR THE EMPLOYEE	
LEASING COMPANY WERE REPORTED AS OTHER FEES FOR SERVICES ON FORM 990,	
PART IX, SCHEDULE OF FUNCTIONAL EXPENSES, LINE 11G. COMPENSATION PAID	
BY INSPERITY UNDER THE LEASED EMPLOYEE AGREEMENT HAS BEEN DISCLOSED,	
WHERE REQUIRED, ON FORM 990 PART VII AND FORM 990 SCHEDULE J.	
FORM 990, PART XII, LINE 2C	
AUDIT COMMITTEE OVERSIGHT:	
THE PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR.	

#### Form **8868**

(Rev. January 2013)

Department of the Treasury Internal Revenue Service

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

File a separate application for each return.

OMB No 1545-1709

<ul> <li>If you are filing for an Automatic 3</li> <li>If you are filing for an Additional (I Do not complete Part II unless you Electronic filing (e-file). You can elerquired to file Form 990-T), or an adof time to file any of the forms listed in the forms of the forms of the forms listed in the forms of th</li></ul>	Not Automatic) 3-Month Ext have already been granted a ectronically file Form 8868 if you ditional (not automatic) 3-mon in Part I or Part II with the exc	tension, on automa ou need a other extension of	complete only Part II (on page 2 of attic 3-month extension on a previous a 3-month automatic extension of tingsion of time. You can electronically fill Form 8870, Information Return for 1	this form) by filed Fone to file ( le Form 8 Fransfers	orm 8868. 6 months for a corp 868 to request an e Associated With Ce	xtension ertain	
Personal Benefit Contracts, which m visit www.irs.gov/efile and click on e-			(see instructions). For more details o	on the ele	ctronic filing of this f	om,	
			submit original (no copies ne	eded).			
A corporation required to file Form 99	30-T and requesting an autorr	natic 6-mo	onth extension - check this box and	complete	<del></del>		
Part I only	 )-C filers), partnerships, REMI	 'Cs, and ti	rusts must use Form 7004 to reques	 t an exter	▶ nsion of time		
Type or Name of exempt organiz	ation or other filer, see instruc	ctions.		Employe	r identification numl	ber (EIN) or	
print INTELLIGENCE	AND NATIONAL S	ECUR	ITY				
ALLIANCE, IN	3				52-116175	57	
filing your 901 NORTH ST	n or suite no If a P.O. box, se UART STREET, NO			Social se	cunty number (SSN	I)	
return, see	state, and ZIP code. For a for						
Enter the Return code for the return	hat this application is for (file	a separa	te application for each return)			01	
Application		Return	Application			Return	
Is For		Code	Is For			Code	
Form 990 or Form 990-EZ		01	Form 990-T (corporation)			07	
Form 990-BL		02	Form 1041-A				
Form 4720 (individual)		03	Form 4720				
Form 990-PF		04	Form 5227 Form 6069				
Form 990-T (sec. 401(a) or 408(a) trus	st)	05	Form 6069				
Form 990-T (trust other than above)	JEFFREY LAVINE	06	Form 8870			12	
<ul> <li>The books are in the care of ► 1/2</li> <li>Telephone No. ► (703)22</li> <li>If the organization does not have a</li> <li>If this is for a Group Return, enter</li> </ul>	901 NORTH STUAR $4-4672$ an office or place of business the organization's four digit G	in the Un Group Exe	FAX No. >	 this is fo		check this	
MAY 15, 2014  Is for the organization's return to calendar year  ► X tax year beginning (	to file the exempt for: or OCT 1, 2012	organizat	to file Form 990-T) extension of time tion return for the organization name dending SEP 30, 2013	d above.	_ ·		
2 If the tax year entered in line 1 Change in accounting pe	•	eck reaso	on: Initial return I	Final retur	n		
3a If this application is for Form 99		r 6069, er	nter the tentative tax, less any			_	
nonrefundable credits. See instructions.  3a \$					0.		
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.  3b \$						^	
		•		3b	\$	0.	
c Balance due. Subtract line 3b			•			Λ	
by using EFTPS (Electronic Fed Caution. If you are going to make an				3c	EO for payment just	0.	
	ork Reduction Act Notice, s			0013	Form 8868 (Re		