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<i>'\</i> { <i>f</i>	O	a	Λ
Form	J	J	V

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the internal Revenue Code (except private foundations)

Do not enter social security numbers on this form as it may be made public. ➤ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

$\overline{\lambda}$	or the	2017	calendar year, or tax year beginning 05/01, 2017, and	d ending			04/30,2	18	
_			C Name of organization		DE	imployer iden	lification num	ber	
В	heck if as	pitette:	NATIONAL ROAD SAFETY FOUNDATION, INC.			13-6128	274		
	Addre	<u>.</u>	Coing business as						
	7 T	charge	Number and street (or P.O. box if mail is not delivered to street address)	om/suite	ET	elephone nurr	ber		
-	┪	return	18 EAST 50TH STREET		12	12) 837	-4R00		
	† Final d	return	City or town, state or province, country, and ZIP or foreign postal code		- ``			_	
<u> </u>	Amen		NEW YORK, NY 10022		ام	irosa receipta :	. 16	, 296, 9	506
\vdash	return Applic	١ إ	F Name and address of principal officer: EDWARD ACKERMAN) is this a group			
Ļ	pendi	70			4	subordinates?	<u> </u>	√ ⊢	×I∾
			18 EAST 50TH STREET NEW YORK, NY 10022	` (,) -	—— M(P	Are all subordin] Yes [_	No
<u> </u>		empt sta		527	_		ch a list. (see ins	-	
_		to: 🕨		, 			don number		
<u>K</u>	Form c	organ	tzation: X Corporation Trust Association Other	L Year of f	ormation:	1961 M S	tate of legal d	omicie:	<u>NY</u>
Р	art I		mmary						
	1	Briefly	describe the organization's mission or most significant activities: THE FOUN	NDATION	IS D	EDICATE	TO RED	UCING	
8	İ	CRAS	SHES, DEATH AND DISABILITY ON OUR NATION'S ROADS	S BY PR	OMOTI	NG		_	
ş	ŀ	SAFE	E DRIVING HABITS.						
Governance	2	Check	this box if the organization discontinued its operations or disposed of	f more than	25% of i	ls net assets		_	
ě			er of voting members of the governing body (Part VI, line 1a)				3		12.
			er of independent voting members of the governing body (Part VI, line 1b)				4		4.
ctivities &			number of individuals employed in calendar year 2017 (Part V, line 2a).				5		4.
3			number of volunteers (estimate if necessary).				6		
Ş			unrelated business revenue from Part VIII, column (¢), line 12, FCFIVE.		• • • •	r	7a		0.
			related business taxable income from Form 990-T. [line/34		• • • •		7b		
_				िं	P	for Year		rent Yea	
	ا ا	C4-	buttons and grants (Part VIII, line 1h)			380,128		,793,6	
3	8	Contri	outions and grants (Part VIII, line 1n)	· · · (v)			0.	, 193, 6	
Revenue			um sarvica ravenus (Part VIII, line 2g)	<u></u>				050	0.
2	10	Invest	ment income (Part VIII, column (A), lines 3, 4, and 7d)	JŦ· · · H		,064,468	-	852,4	
					ــــــــــــــــــــــــــــــــــــــ		0.		0.
	_		evenue - add lines 8 through 11 (must equal Part Vill, column (A), line 12),		1	,444,59		, 646, 1	
			s and similar amounts paid (Part IX, column (A), lines 1-3)			428,83	1.	352,0	<u> </u>
	14	Benef	its paid to or for members (Part IX, column (A), line 4)				0.		<u>o.</u>
9	15	Salari	es, other compensation, employee benefits (Part IX, column (A), lines 5-10), 🔒 .			159,47	5.	189,4	<u> 144.</u>
	16a	Profes	sional fundraising fees (Part IX, column (A), line 11e)	L			0.		0.
Ž	ь	Total f	undraising expenses (Part IX, column (D), line 25)						
ш	17	Other	expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	[859,36	7.	859,6	378.
			expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		1	,447,673	3. 1	,401,4	103.
			ua less expenses. Subtract line 18 from line 12			-3,07		,244,7	
ò					Beginning	of Current Yo		d of Year	
45		Total s	assets (Part X, line 16)		35	,296,513	36.	, 282, 8	355.
33			labilities (Part X, line 26)			105,942		16,5	
= 5			sets or fund balances. Subtract line 21 from line 20.		75	,190,571		266,3	
	пШ		nature Block			, 130, 37.		2007	,,,,
				and statema	unte nod t	o the heet of	my knowledou	and ball	-d 13 le
tru	в. соле	ct. and	f porjury, I doctore that I have examined this return, including eccompanying echedules complete. Declaration of preparer (other than officer) is based on all information of which p	preparer has	any knowl	edge.	m) moments		u
		١.	20601			03/15	/2010	,	
Sig	m)	Signature of officer Child School -			Date	/2019		
He		Ι΄.		_		-40			
	-		EDWARD ACKERMAN TREASURER	K			<u>.</u>		
_		_	Type or print name and title Type prepared hismature Prepared hismature Type prepared hismature Type prepared hismature	8-4-			I many i		
Pak	4			Date		Chack	II PIIN		
Preparate Waltry Golden								48248	
							3-048507		
_		Firm's	address ▶360 MADISON AVE NEW YORK, NY 10017		Pho	ne no. 21	12-832-0	400	
Ma	y the	IRS di	scuss this return with the preparer shown above? (see instructions)				X Y		No
For	Paper	rwerk !	Reduction Act Notice, see the separate instructions.					m 990 (

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V 17-7.10

PAGE 1

	n ⁹ ,60 (201		Page 2
Pa	art III	Statement of Program Service Accomplishments	
_		Check if Schedule O contains a response or note to any line in this Part III	
	-	escribe the organization's mission'	
		DUNDATION IS DEDICATED TO REDUCING CRASHES, DEATH AND DISABILITY	
		R NATION'S ROADS BY PROMOTING SAFE DRIVING HABITS. IT PRODUCES	
	DOCUME	ENTARIES, EDUCATIONAL PROGRAMS AND PUBLIC SERVICE BROADCASTS.	
_	Did the	organization undertake any significant program services during the year which were not listed on the	
4		rm 990 or 990-EZ?	x X No
	PHOLEO	describe these new services on Schedule O.	140
•		organization cease conducting, or make significant changes in how it conducts, any program	
3		?Yes	x X No
		describe these changes on Schedule O.	., ., ., .,
4		e the organization's program service accomplishments for each of its three largest program services, as m	easured by
·		is. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations	
	the tota	expenses, and revenue, if any, for each program service reported.	
4a	(Code:) (Expenses \$ 1,238,317 including grants of \$ 352,081.) (Revenue \$)
	•	DUNDATION PRODUCES DOCUMENTARIES, EDUCATIONAL PROGRAMS,	—′
		SERVICE CAMPAIGNS FOR BROADCAST AND USE IN SAFETY,	
		TIONAL AND DRIVER ENFORCEMENT PROGRAMS; AND DISTRIBUTES THEM	
		OF CHARGE.	
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
	` -		
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
4d	Other p	rogram services (Describe in Schedule O.)	
_	(Expens		
4e	Total pr	ogram service expenses ▶ 1,238,317.	
JSA 7E1	020 1 000	Form	990 (2017)
. = 1	4GR	0QK 1608 V 17-7.10	PAGE 2

Form **990** (2017) PAGE 2

Part	Checklist of Required Schedules		Yes	No
	Is the association described as social E04/o/(2) or 4047/o/(4) /other them a private foundation/2 if IIVon II	_	168	NO
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		v	
_	complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		
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		Х
		<u> </u>		_^_
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)		х	
_	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,			Х
_	Part III.	5		_^_
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			Х
_	"Yes," complete Schedule D, Part I	6		
7		,	х	
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"	7		
8	•	8		х
	complete Schedule D, Part III	l •		
9	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or	1		
	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	-		
10	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,	· · ·		-1
••	VII, VIII, IX, or X as applicable			,
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
u	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	- T		
-	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		х
c	Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more	112		
•	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			
_	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
е	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? If			
	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional.	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		_ <u>X</u>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		<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		<u>X</u>

Part	V Checklist of Required Schedules (continued)			,
			Yes	No
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	L
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	X	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		х
24.5	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
24 a	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
		24a		x
	through 24d and complete Schedule K If "No," go to line 25a	24b		 ^` -
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	240		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			١.,
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		_X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any			İ
	current or former officers, directors, trustees, key employees, highest compensated employees, or			
	disqualified persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	X	
ь	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
•	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		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			
50	conservation contributions? If "Yes," complete Schedule M	30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
V I	Part I	31		х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
32	complete Schedule N, Part II	32		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	- -		<u> </u>
33	sections 301.7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		х
	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,	- 33		
34		34		х
	or IV, and Part V, line 1	35a		X
35 a		JJa		
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a	256		
	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			٠,
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		<u> </u>
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		X
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	(2017)

Par				
	Check if Schedule O contains a response or note to any line in this Part V	<u></u>		للسلخ
		\longrightarrow	Yes	No
1 a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			i İ
C	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	i l		
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 4			ا ـ ـــا
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	<u> </u>
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			اـــا
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		<u> </u>
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		X
b	If "Yes," enter the name of the foreign country: ▶			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts	i i		
	(FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	i i		
	gifts were not tax deductible?	6b		<u> </u>
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			J
	and services provided to the payor?	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year			
0	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		_X_
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		Х
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		X
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		<u> </u>
9	Sponsoring organizations maintaining donor advised funds.			اـــا
	Did the sponsoring organization make any taxable distributions under section 4966?	9a		<u> </u>
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities [10b]			
11	Section 501(c)(12) organizations. Enter:			
а	į į			
þ	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)	[]		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			<u> </u>
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	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			
	Enter the amount of reserves on hand	\sqcup		
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

Form **990** (2017) PAGE 5

NATIONAL ROAD SAFETY FOUNDATION, INC. 13-6128274 Form 990 (2017) Part Vi Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Section A. Governing Body and Management Yes No 12 1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O b Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with X 2 Did the organization delegate control over management duties customarily performed by or under the direct 3 supervision of officers, directors, or trustees, or key employees to a management company or other person? . . Х 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?..... 5 lх Did the organization become aware during the year of a significant diversion of the organization's assets?.... 5 x 6 R 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint Х 7a Are any governance decisions of the organization reserved to (or subject to approval by) members, 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: Х 8a Х 8b Each committee with authority to act on behalf of the governing body?............ 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 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code., No Х 10a b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, 10b affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? . . . Х 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? . b Describe in Schedule O the process, if any, used by the organization to review this Form 990 Х 12a 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give Х 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," Х 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 Did the process for determining compensation of the following persons include a review and approval by 15 independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? Х 15a Х 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed \triangleright NY, 17 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) 18 available for public inspection. Indicate how you made these available. Check all that apply. X Upon request Other (explain in Schedule O) Own website Another's website Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records. ▶

EDWARD ACKERMAN 18 EAST 50TH STREET NEW YORK, NY 10022 212-837-4800

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PAGE 6

Part VII	Compensa
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Form 990 (2017)

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

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

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

Check this box if neither the organization nor	any related	orga	niza	tion	COI	npen	sate	d any current offic	er, director, or trus	stee
(A) Name and Title	(B) Average hours per week (list any	(do r box,	not c unle:	Pos heck ss pe d a d	C) sition more irson	tion more than one rson is both ar irector/trustee		(D) Reportable compensation from the	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
	related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
(1)KIMBERLY MANOCHERIAN	5.00									
VICE PRESIDENT	0.	х	İ	Х				0.	0.	0.
(2) JOHN MANOCHERIAN	5.00									
PRESIDENT	0.	х		Х				0.	0.	0.
(3)EDWARD ACKERMAN	40.00									
TREASURER	0.	х		Х	ļ			0.	0.	0.
(4)CAROLINE M. MANOCHERIAN	5.00	-								
VICE PRESIDENT	0.	х		Х				0.	0.	0.
(5)SCOTT SOLOMON	5.00									
SECRETARY	0.	х		Х				0.	0.	0.
(6)BEHROOZ SHOKATI	20.00									
EXECUTIVE DIRECTOR	0.	Х						51,350.	0.	<u>o</u> .
(7)ANTHONY PORTERA	5.00									_
INDEPENDENT TRUSTEE	0.	Х						0.	0.	0.
(8)DAVID REICH	5.00									
INDEPENDENT TRUSTEE	0.	Х						0.	0.	0.
(9)ANDREW SABIN	VAR							-	·	
INDEPENDENT TRUSTEE	0.	Х						0.	0.	0.
(10) DR. FREDERICK SIMEONE	VAR							,		
INDEPENDENT TRUSTEE	0.	Х						0.	0.	0.
(11)MICHELLE ANDERSON	0.									
DIRECTOR OF OPERATIONS	40.00	х			L			90,216.	0.	0.
(12)GERALD CRAMER	0.							-		
DIRECTOR	0.	Х						0.	0.	0.
(13)										
]								
(14)										
					L		L			

Form 990 (2017)

Page	8

Part VII Section A. Officers, Directors, Tru		y Em	ıpıc			and h	lig			ees (d			
(A) Name and title	(B) Average hours per week (list any hours for	box, office	unle:	Pos heck ss pe d a d	rson	e than o is both tor/trust	an ee)	(D) Reportable compensation from the	(E) Reportab compensation related organization	n from ons	Est am- c comp	(F) imated ount of other pensation	ì
	related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-l	MISC)	orga and	m the inization related nizations	
										_			
												_	
													
									,				
1b Sub-total	ection A						>	141,566. 0.		0.	-		0
d Total (add lines 1b and 1c)	limited to t	hose	liste	 ed a	bov	e) who	o re	141,566. ceived more than	\$100,000 o	0. f			0
3 Did the organization list any former office employee on line 1a? If "Yes," complete Sched.	er, directo	or, or	trı								3	Yes	X
For any individual listed on line 1a, is the organization and related organizations grandvidual	sum of repeater than	oortab	le 6	com	ipei	nsatio	n ai	nd other compens complete Schedu	sation from le J for s	the uch	4		x
5 Did any person listed on line 1a receive or for services rendered to the organization? If "Yo	accrue co	mpen	satı	on	fror	n any	un	related organization	on or individ	lual	5		Х
Section B. Independent Contractors													
 Complete this table for your five highest com- compensation from the organization. Report of year. 													
(A) Name and business add	dress							(B) Description of se	rvices	C	(C) compens	ation	
NONE							\bot						_
							$^{+}$						_
													_
2 Total number of independent contractors (in more than \$100,000 in compensation from the	ncluding bi ie organiza	ut not	l lin ▶	nite		thos	e li	sted above) who	received				_
SA E 1055 1 000 4 GROQK 1608		V	17	-7.	.10	ı					Form	9 90 (2 PAGE	

Par	t VIII	Statement of Revenue Check if Schedule O contains a response or note	to any line in this Part	VIİ		
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a b c d e f	Federated campaigns 1a Membership dues 1b Fundraising events 1c Related organizations 1d Government grants (contributions) . 1e All other contributions, gifts, grants,				
Contril and Ot	9	and similar amounts not included above . 1f 1,793, Noncash contributions included in lines 1a-1f \$ 1,686, Total. Add lines 1a-1f	305.	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
venue	n	Business (a final prince and the second	1 3 3 3 3 4 5 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	الله الله الله الله الله الله الله الله
Program Service Revenue	b c d e	All other program service revenue				
<u>-</u>	g 3	Total Add lines 2a-2f		1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	The same of the standard	is is a second of the second o
	4 5	and other similar amounts). ATTACHMENT 1	. ► <u> </u>	i incata	The same of the sa	1,048,445
	6a b c	Gross rents				12 P. 1 P. 1 P. 1 P. 1 P. 1 P. 1 P. 1 P.
	d 7a . b	Ret rental income or (loss)				
	c d	Net gain or (loss)	134 195,962			
Other Revenue	8a b	events (not including \$ of contributions reported on line 1c) See Part IV, line 18				
		Ret income or (loss) from fundraising events Gross income from gaming activities See Part IV, line 19	** O	1 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	$ \begin{array}{cccccccccccccccccccccccccccccccccccc$	1
	b c 10a	Less direct expenses	• • • • • • • • • • • • • • • • • • •	3 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 -	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	The state of the s
	b	returns and allowances	Part of the state		The first section of the section of	1 3 1 1 2 1 3 1 3 1 3 1 3 1 1 1 1 1 1 1
-	,	Miscellaneous Revenue Business (Code		- 11 11 12 13 14 14 14	Ran Li, January Trans
•	11a b c		* * * * * * * * * * * * * * * * * * * *			
	d e 12	All other revenue	. D 0 2,646;153	1 1 1 1 2 2 2 3 2 2 2 2 2 2 2 2 3 3 3 3	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1,048,445
JSA 75104	1 1 000	•				Form 990 (2017

Part IX Statement of Functional Expenses

Sec	tion 501(c)(3) and 501(c)(4) organizations mu				
	Check if Schedule O contains a resp				
	not include amounts reported on lines 6b, 7b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments See Part IV, line 21	337,081.	337,081.		
2	Grants and other assistance to domestic				!
	ındividuals See Part IV, line 22	15,000.	15,000.		· · · · · · · · · · · · · · · · · · ·
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals See Part IV, lines 15 and 16	0.			
4	Benefits paid to or for members	0.			
5	Compensation of current officers, directors,				
	trustees, and key employees	0.			
6	Compensation not included above, to disqualified		ļ		
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	0.	170 000		
7	Other salaries and wages	170,888.	170,888.		
8	Pension plan accruals and contributions (include	ا			
	section 401(k) and 403(b) employer contributions)	0.			
9	Other employee benefits	0.	10 FFC		
10	Payroll taxes	18,556.	18,556.		
11		0.			
	Management	3,311.		3,311.	
	Legal	7,000.		7,000.	
	Accounting	7,000.		- ,,,,,,,,,	
	Lobbying	0.			
	Professional fundraising services See Part IV, line 17. Investment management fees	63,241.		63,241.	
	Other (If line 11g amount exceeds 10% of line 25, column	-:::-			
8	(A) amount, list line 11g expenses on Schedule O)	0.			
12	Advertising and promotion	376,815.	376,815.		
13	Office expenses	6,369.		6,369.	
14	Information technology	0.			
15	Royalties	0.			
16	Occupancy	0.			
17	Travel	0.			
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	0.			
19	Conferences, conventions, and meetings	0.			
20	Interest	0.			
21	Payments to affiliates	0.			
22	Depreciation, depletion, and amortization	0.	07.007		
23	Insurance	27,087.	27,087.		
24	·		İ		
	above (List miscellaneous expenses in line 24e If		İ		Į.
	line 24e amount exceeds 10% of line 25, column				İ
	(A) amount, list line 24e expenses on Schedule O)	7 600	7 600		
_	POSTAGE AND MESSENGER	7,688.	7,688.		
	VIDEO & BOOK PRODUCTION	285,202.	285,202.	38,153.	
•	REAL ESTATE TAXES	38,153. 45,012.		45,012.	
_	MISCELLANEOUS	45,012.		45,012.	
	All other expenses	1,401,403.	1,238,317.	163,086.	
	Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the	1,401,403.	1,230,3171		
•	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)	0.			

PAGE 10

Part X Balance		
Pallux Dalance	Х Ва	lance S

art X						
	Check if Schedule O contains a response or	r note	to any line in this Pa	art X		
				(A) Beginning of year		(B) End of year
1	Cash - non-interest-bearing			2,057,729.	1	2,700,800
2	Savings and temporary cash investments			0.	2	0
3	Pledges and grants receivable, net			0.	3	0
4	Accounts receivable, net			0.	4	C
5	Loans and other receivables from current and for	ormer	officers, directors,			
	trustees, key employees, and highest co	mpen	sated employees.			In
6	Complete Part II of Schedule L Loans and other receivables from other disqualified perso 4958(f)(1)), persons described in section 4958(c)(3)(B), and sponsoring organizations of section 501(c)(9) volut organizations (see instructions) Complete Part II of Sched	ons (as and c ntary e	defined under section ontributing employers mployees' beneficiary	0.	5 6	C
SSets	Notes and loans receivable, net			0.	7	C
8 3	Inventories for sale or use			0.	8	C
9	Prepaid expenses and deferred charges			0.	9	(
1 -	Land, buildings, and equipment: cost or					
	other basis. Complete Part VI of Schedule D	10a	3,043,412.			
b	Less: accumulated depreciation	10b	13,531.	2,445,354.	10c	3,029,881
11	Investments - publicly traded securities		ATCH 2	30,631,798.		30,389,630
12	Investments - other securities. See Part IV, line 11				12	
13	Investments - program-related. See Part IV, line 11				13	(
14					14	
15	Intangible assets			161,632.		162,544
16	Total assets. Add lines 1 through 15 (must equal l			35,296,513.	16	36,282,855
_				0.	17	30,202,033
17	Accounts payable and accrued expenses			0.	18	(
18	Grants payable				19	
19	Deferred revenue			0.	20	(
20	Tax-exempt bond liabilities	 			21	(
21	Escrow or custodial account liability. Complete Pa			<u> </u>	21	•
22 2	Loans and other payables to current and fo					
Labilities	trustees, key employees, highest compens					
별	disqualified persons. Complete Part II of Schedule				22	
- 23	Secured mortgages and notes payable to unrelate			0.	23	(
24	Unsecured notes and loans payable to unrelated to			0.	24	(
25	Other liabilities (including federal income tax, p					
	parties, and other liabilities not included on lines			105 040		1.0 540
	of Schedule D			105,942.		16,548
26	Total liabilities. Add lines 17 through 25			105,942.	26	16,548
SE SE	Organizations that follow SFAS 117 (ASC 958), complete lines 27 through 29, and lines 33 and 3		here ► X and			I namen whateness or seconds as seller on
E 27	Unrestricted net assets			35,190,571.	27	36,266,307
28	Temporarily restricted net assets		[0.	28	C
29	Permanently restricted net assets		<u></u> <u>.</u>	0.	29	(
Net Assets of Fund Balances 2 2 2 2 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3	Organizations that do not follow SFAS 117 (ASC 958), complete lines 30 through 34.	check	there and			,
ا ع 20	Capital stock or trust principal, or current funds				30	
g 31	Paid-in or capital surplus, or land, building, or equi	 Ipmen	t fund		31	-
32	Retained earnings, endowment, accumulated inco				32	
33	Total net assets or fund balances			35,190,571.	33	36,266,307
34	Total liabilities and net assets/fund balances		•••••	35,296,513.	34	36,282,855
	Total liabilities and not assets/fully balariess,		<u></u>	55,250,515.	- - -	Form 990 (201

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

JSA

3h

Form **990** (2017)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. ► Attach to Form 990 or Form 990-EZ.

▶ Go to www.lrs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047 Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer Identification number

NA:	rion	AL ROAD SAFETY FOU	NDATION, INC.				13-61282	74	
Pa	rt I	Reason for Public Cha	rity Status (All o	organizations must o	omplete	this pa	rt.) See instructions	. (//	
		nization is not a private fou	ndation because it	is: (For lines 1 through	h 12, ch	eck only	one box.)	1	
1	_	A church, convention of chi						1 \ 1	
2	П	A school described in secti	on 170(b)(1)(A)(ii)	. (Attach Schedule E	(Form 99	0 or 990	-EZ).)	1) 1	
3	$\overline{}$	A hospital or a cooperative		•	-			1/ '	
4	$\overline{}$	A medical research organiz	-	-				(iii). Enter the	
	$\overline{}$	hospital's name, city, and st	· ·	•					
5		An organization operated t		a college or universit	y owned	or ope	rated by a governme	ntal unit described in	
		section 170(b)(1)(A)(iv). (C		•	•				
6	A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).								
7	X An organization that normally receives a substantial part of its support from a governmental unit or from the general public								
	_	described in section 170(b)	-						
8		A community trust describe	ed in section 170(b)(1)(A)(vi). (Complete	Part II.)				
9		An agricultural research org	ganization describe	ed in section 170(b)(1)(A)(ix) d	perated	in conjunction with a	land-grant college	
	_	or university or a non-land-	grant college of ag	griculture (see instruct	ions). Er	nter the r	name, city, and state o	f the college or	
		university	-						
10		An organization that norma	lly receives: (1) m	ore than 331/3 % of its	support	from co	ntributions, membersl	nip fees, and gross	
		receipts from activities rela support from gross investing	ted to its exempt f	functions - subject to (certain e	xception:	s, and (2) no more that	n 331/3 %of its	
		acquired by the organizatio	n after June 30, 1	975. See section 509	(a)(2). (C	complete	Part III.)	Dusiliesses	
11		An organization organized	and operated excl	usively to test for publi	c safety.	See sec	tion 509(a)(4).		
12		An organization organized	and operated exclu	usively for the benefit	of, to pe	rform th	e functions of, or to o	carry out the purposes	
		of one or more publicly su							
		Check the box in lines 12a t	hrough 12d that d	escribes the type of s	upporting	g organiz	ation and complete lii	nes 12e, 12f, and 12g.	
а	L	Type I. A supporting orga	anization operated	, supervised, or contr	olled by	its supp	orted organization(s),	typically by giving	
		the supported organization	on(s) the power to	regularly appoint or e	lect a ma	ajority of	the directors or truste	es of the	
	_	_ supporting organization. \							
b									
		control or management of			the sam	e person	s that control or man	age the supported	
	_	ຸ organization(s). You must							
C		☐ Type III functionally integ						lly integrated with,	
	_	ıts supported organization							
d	L	☐ Type III non-functionally							
		that is not functionally into	-					d an attentiveness	
	_	$_{\neg}$ requirement (see instruct							
θ	L	Check this box if the orga						I, Type III	
_		functionally integrated, or					ion.		
T		er the number of supported			• • • • •			•••••	
<u>g</u>		vide the following information			I 0: 3 4 . 11		(A A	full Amount of	
	(I) Na	ame of supported organization	(ii) EIN		listed in you		(v) Amount of monetary support (see	(vi) Amount of other support (see	
				above (see instructions))		nent?	instructions)	instructions)	
					Yes	No			
(A)									
									
(B)									
(C)			_						
(D)									
,-,				l	I			1	

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

Schedule A (Form 990 or 990-EZ) 2017

(E)

Pại	Support Schedule for Orga (Complete only if you checke Part III. If the organization fai	ed the box on l	ine 5, 7, or 8	of Part I or if th	ne organizatio	n failed to qual	vi) ify under
Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	1,632,455.	234,949.	134,914.	380,128.	1,793,670	4,176,116
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0.
4	Total. Add lines 1 through 3	1,632,455.	234,949.	134,914	380,128	1,793,670.	4,176,116
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount						
6	Shown on line 11, column (f) Public support. Subtract line 5 from line 4						2,858,504.
	tion B. Total Support	<u> </u>	l			l	1,317,612
	indar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
7	Amounts from line 4	1,632,455	234,949.	134,914	380,128	1,793,670	4,176,116
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	1,079,461	993, 962	1,165,110	1,092,355	1,048,445	5,379,333
9	Net income from unrelated business activities, whether or not the business is regularly carried on						0.
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)						0_
11	Total support. Add lines 7 through 10		L			40	9,555,449
12	Gross receipts from related activities, etc. (12	
13	First five years. If the Form 990 is forganization, check this box and stop here	or the organizat	tion's first, secor	id, third, fourth,	or fifth tax ye	ar as a section	501(c)(3)
Sec	tion C. Computation of Public Sup						
14	Public support percentage for 2017 (I			11, column (f)).		14	13.79 %
15	Public support percentage from 2016	Schedule A, Pa	art II, line 14			15	11.71%
16a	331/3% support test - 2017. If the or						neck this
	box and stop here. The organization q						
b	331/3% support test - 2016. If the or						
	this box and stop here. The organization						
	10%-facts-and-circumstances test - 10% or more, and if the organization Part VI how the organization meets organization	n meets the "fa the "facts-and-o	cts-and-circums circumstances" t	tances" test, cheest. The organia	eck this box ai zation qualifies	nd stop here. E as a publicly su 	xplain in upported ► X
b	10%-facts-and-circumstances test - 15 is 10% or more, and if the org						

Schedule A (Form 990 or 990-EZ) 2017

	rt III Support Schedule for Organ	nizations De	scribed in Sec	tion 509(a)(2)	animation faile	d to avalify you	Page
	(Complete only if you checked if the organization fails to quantum fails fails to quantum fails to quantum fails to quantum fails fai	ed the box of lify under the	e tests listed b	rt i or if the org elow, please c	anization faile omplete Part I	d to qualify und	der Part II.
Sec	ction A. Public Support						
Cale	endar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received (Do not include any "unusual grants ")						
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities				/	4	
	furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an				/		
	unrelated trade or business under section 513 .				1		
4	Tax revenues levied for the						
	organization's benefit and either paid to			/			
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the		ĺ				
	organization without charge L						
6	Total. Add lines 1 through 5			/			
7 a	Amounts included on lines 1, 2, and 3		1	ľ			
	received from disqualified persons		/				
ŧ	Amounts Included on lines 2 and 3			•			
	received from other than disqualified persons that exceed the greater of \$5,000				1		
	or 1% of the amount on line 13 for the year						
	: Add lines 7a and 7b						
8	Public support. (Subtract line 7c from		/				
	line 6)	,	d				
Se	ction B. Total Support						
Cale	endar year (or fiscal year beginning in) 🕨	(a) 201,3 ²	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9	Amounts from line 6,						
10 a	Gross income from interest, dividends,						
	payments received on securities loans, rents, royalties, and income from similar						
	sources	/					
ŧ	Unrelated business taxable income (less	/					
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
(: Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b,						
	whether or not the business is regularly carried on						
12							
-	loss from the sale of capital assets						
	(Explain in Part VI)				l	I	
13				1			
	and 12)						
14	First five years. If the Form 990 is for	r the organiz	ation's first, seco	ond, third, fourth	, or fifth tax y	ear as a section	501(c)(3)
	organization, check this box and stop here.						
Se	ction C. Computation of Public Supp						•
15	Public support percentage for 2017 (line 8,	column (f) divid	led by line 13, colu	mn (f))		15	9
16	Public support percentage from 2016 Schei					16	9/
_	ction D. Computation of Investment					1 1	
17	Investment income percentage for 2017 (lin			13 column (f))		17	9/
18	Investment income percentage from 2016 S		• •				9,
	33,//3% support tests - 2017. If the org						
	1/7 is not more than 331/3%, check this						_
			•				
,	/331/3% support tests - 2016. If the orgal line 18 is not more than 331/3%, check						
[Private foundation. If the organization of						
Z U	Thrate foundation. If the organization t	IN THE CHECK	G 504 011 11118	. , , , , , , , , , , , , , , , , , , ,		Schedule A (Form 9	

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Secu	on A. All Supporting Organizations		Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	Зс		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
C	Substitutions only. Was the substitution the result of an event beyond the organization's control?	<u>5c</u>	<u> </u>	ļ
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.	9a		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI .	9b		
С	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .	 9c		
10 a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to	 40h		

tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year. 1 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization. 2

Section C. Type II Supporting Organizations

Yes No Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s). 1

Section D. All Type III Supporting Organizations

- Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?
- Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s)
- By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.

Section E. Type III Functionally Integrated Supporting Organizations

- Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).
- The organization satisfied the Activities Test. Complete line 2 below. а
- The organization is the parent of each of its supported organizations. Complete line 3 below. b
 - The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions)

2 Activities Test. Answer (a) and (b) below.

- Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement
- Parent of Supported Organizations. Answer (a) and (b) below.
- a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.
- Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard

Schedule A (Form 990 or 990-EZ) 2017

4GR0QK 1608

C

Yes No

Yes No

1

2

3

2a

2b

3<u>a</u>

3b

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organ	ization	s	
1 Check here if the organization satisfied the Integral Part Test as a qualifying			
instructions. All other Type III non-functionally integrated supporting organization	zations r	nust complete Section	
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or			
collection of gross income or for management, conservation, or			
maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4).	8		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see			
instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other			
factors (explain in detail in Part VI):	- 1		
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to			
emergency temporary reduction (see instructions).	6		
7 Check here if the current year is the organization's first as a non-functionall	y integra	ated Type III supportin	g organization (see

Schedule A (Form 990 or 990-EZ) 2017

Part	V Type III Non-Functionally Integrated 509(a)(3)	Supporting Organizat	tions (continued)	
	on D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish ex	xempt purposes		
2	Amounts paid to perform activity that directly furthers exer		ed	
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpo	ses of supported organi	zations	
4	Amounts paid to acquire exempt-use assets	-		
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which	the organization is resp	onsive	
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2017 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
:	Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017
1	Distributable amount for 2017 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2017			
	(reasonable cause required-explain in Part VI). See			
	ınstructions			
_3	Excess distributions carryover, if any, to 2017			
a				
b	From 2013			
c	From 2014			
d	From 2015			
	From 2016			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h_	Applied to 2017 distributable amount			
	Carryover from 2012 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.	. <u></u>		
4	Distributions for 2017 from			
	Section D, line 7:			
a	Applied to underdistributions of prior years			. <u>-</u>
b	Applied to 2017 distributable amount			,
C	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2017, if			
	any. Subtract lines 3g and 4a from line 2. For result			ĺ
	greater than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2017. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI See instructions.			
7	Excess distributions carryover to 2018. Add lines 3j			
	and 4c			
	Breakdown of line 7:		<u> </u>	
a	Excess from 2013			
b	Excess from 2014			<u> </u>
<u>c</u>	Excess from 2015			
d	Excess from 2016			
	Excess from 2017			A (Form 990 or 990-EZ) 2017

Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

SUPPLEMENTAL INFORMATION TO PART II, LINE 17A:

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

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

► Attach to Form 990 or Form 990-EZ. ► Complete If the organization is described below. ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

If the organization answered "Yes," on 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," on 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.

		that have med I offit of to (election di			pioto i dri ii Bi
•	Section 501(c)(3) organizations	that have NOT filed Form 5768 (elect	ion under section 501(h)) Complete Part II-B Do no	t complete Part II-A.
Tax)	(see separate instructions), ther		Tax) (see separate li	nstructions) or Form 990-i	EZ, Part V, line 35c (Proxy
	Section 501(c)(4), (5), or (6) organization	anizations Complete Part III		Employer ide	ntification number
	•	NINDAMION INC		13-612	
	IONAL ROAD SAFETY FO	organization is exempt under	costion 501/o\ or		
		<u> </u>			
1		organization's direct and indirect	political campaign a	ctivities in Part IV. (see in	istructions for
	definition of "political campa				
2		xpenditures (see instructions)			
		campaign activities (see instruction			
		organization is exempt under			
1		cise tax incurred by the organization			
2		cise tax incurred by organization in			
3	•	a section 4955 tax, did it file Form	=		
	· · · · · · · · · · · · · · · · · · ·				Yes No
_	If "Yes," describe in Part IV.	organization is exempt under	coation FO1/a) as	roomt coation E01/a\/3	1
Par					<u> </u>
1	activities	expended by the filing organization		▶\$	
2		ng organization's funds contribute			
3		enditures. Add lines 1 and 2. E			
4 5	Did the filing organization file Enter the names, addresses organization made payment the amount of political cont	e Form 1120-POL for this year? . and employer identification numbers. For each organization listed, eaributions received that were prond or a political action committee.	per (EIN) of all section of the amount pain optly and directly de		ations to which the filing cation's funds. Also enter ditical organization, such
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-
(1)					
(2)					
(3)			-		
(4)					
(5)					
(6)			-		
			L	<u> </u>	<u> </u>

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

Schedule C (Form 990 or 990-EZ) 2017

Schedule C (Form 990 or 990-EZ) 2017

4GROOK 1608

f Grassroots lobbying expenditures

	(election under section 501(h)).	(a)			(b)	
	each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed cription of the lobbying activity.	Yes	No		Am	ount	
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:						
а	Volunteers?	"					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?.] .			_
c	Media advertisements?	1		Ì			
d	Mailings to members, legislators, or the public?						
0	Publications, or published or broadcast statements?				_		
f	Grants to other organizations for lobbying purposes?						
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	<u></u>					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	L					
i	Other activities?						
j	Total. Add lines 1c through 1i						
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?						
þ	If "Yes," enter the amount of any tax incurred under section 4912	1					
c d	If "Yes," enter the amount of any tax incurred by organization managers under section 4912 If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		,			_	
Pa	rt III-A Complete if the organization is exempt under section 501(c)(4), section 501 501(c)(6).	(c)(5)	, or	ectio	n		
						Yes	N.
1	Were substantially all (90% or more) dues received nondeductible by members?				1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?						
3	Did the organization agree to carry over lobbying and political campaign activity expenditures fro						Ī
Da	the Complete if the aggoritation is exempt under coation 504/g)(4) coation 504						
	rt III-B Complete if the organization is exempt under section 501(c)(4), section 501						
F	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No,"					e 3, is	;
r d	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," answered "Yes."	OR (b) Pa	rt III-A		e 3, is	.
.,	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No,"	OR (b) Pa			e 3, is	5
1	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," answered "Yes." Dues, assessments and similar amounts from members	OR (b) Pa	rt III-A		e 3, is	.
1 2	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," answered "Yes." Dues, assessments and similar amounts from members	OR (b) Pa of	rt III-A		e 3, is	•
1 2	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," answered "Yes." Dues, assessments and similar amounts from members	OR (b) Pa	1		e 3, is	
1 2 a b	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," answered "Yes." Dues, assessments and similar amounts from members	OR (b) Pa	1 2a 2b		e 3, is	
1 2 a b	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amou political expenses for which the section 527(f) tax was paid). Current year	OR (b) Pa	1 2a 2b		e 3, is	
1 2 a b	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," answered "Yes." Dues, assessments and similar amounts from members	OR (b) Pa	1 2a 2b 2c		e 3, is	
1 2 a b c	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amou political expenses for which the section 527(f) tax was paid). Current year	OR (b) Pa	1 2a 2b 2c		e 3, is	
1 2 a b c	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amount political expenses for which the section 527(f) tax was paid). Current year	OR (b) Pa	1 2a 2b 2c		e 3, is	
1 2 a b c 3 4	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," answered "Yes." Dues, assessments and similar amounts from members	OR (b) Pa	1 2a 2b 2c 3		e 3, is	
1 2 a b c 3 4	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," answered "Yes." Dues, assessments and similar amounts from members	OR (b) Pa	1 2a 2b 2c 3 4 5	A, lin		
1 2 a b c 3 4	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amount political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) due if notices were sent and the amount on line 2c exceeds the amount on line 3, what portion excess does the organization agree to carryover to the reasonable estimate of nondeductible for and political expenditure next year? Taxable amount of lobbying and political expenditures (see instructions) Texable amount of lobbying and political expenditures (see instructions)	OR (b) Pa	1 2a 2b 2c 3 4 5	A, lin		
1 2 a b c 3 4	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," answered "Yes." Dues, assessments and similar amounts from members	OR (b) Pa	1 2a 2b 2c 3 4 5	A, lin		
1 2 a b c 3 4	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amount political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) due if notices were sent and the amount on line 2c exceeds the amount on line 3, what portion excess does the organization agree to carryover to the reasonable estimate of nondeductible for and political expenditure next year? Taxable amount of lobbying and political expenditures (see instructions) Texable amount of lobbying and political expenditures (see instructions)	OR (b) Pa	1 2a 2b 2c 3 4 5	A, lin		
1 2 a b c 3 4 5 Prov	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amount political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) due if notices were sent and the amount on line 2c exceeds the amount on line 3, what portion excess does the organization agree to carryover to the reasonable estimate of nondeductible for and political expenditure next year? Taxable amount of lobbying and political expenditures (see instructions) Texable amount of lobbying and political expenditures (see instructions)	OR (b) Pa	1 2a 2b 2c 3 4 5	A, lin		
1 2 a b c 3 4	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amount political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) due if notices were sent and the amount on line 2c exceeds the amount on line 3, what portion excess does the organization agree to carryover to the reasonable estimate of nondeductible for and political expenditure next year? Taxable amount of lobbying and political expenditures (see instructions) Texable amount of lobbying and political expenditures (see instructions)	OR (b) Pa	1 2a 2b 2c 3 4 5	A, lin		
1 2 a b c 3 4	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amount political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) due if notices were sent and the amount on line 2c exceeds the amount on line 3, what portion excess does the organization agree to carryover to the reasonable estimate of nondeductible for and political expenditure next year? Taxable amount of lobbying and political expenditures (see instructions) Texable amount of lobbying and political expenditures (see instructions)	OR (b) Pa	1 2a 2b 2c 3 4 5	A, lin		
1 2 a b c 3 4	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amount political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) due if notices were sent and the amount on line 2c exceeds the amount on line 3, what portion excess does the organization agree to carryover to the reasonable estimate of nondeductible for and political expenditure next year? Taxable amount of lobbying and political expenditures (see instructions) Texable amount of lobbying and political expenditures (see instructions)	OR (b) Pa	1 2a 2b 2c 3 4 5	A, lin		
1 2 a b c 3 4	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amount political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) due if notices were sent and the amount on line 2c exceeds the amount on line 3, what portion excess does the organization agree to carryover to the reasonable estimate of nondeductible for and political expenditure next year? Taxable amount of lobbying and political expenditures (see instructions) Texable amount of lobbying and political expenditures (see instructions)	OR (b) Pa	1 2a 2b 2c 3 4 5	A, lin		
1 2 a b c 3 4	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amount political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) due if notices were sent and the amount on line 2c exceeds the amount on line 3, what portion excess does the organization agree to carryover to the reasonable estimate of nondeductible for and political expenditure next year? Taxable amount of lobbying and political expenditures (see instructions) Texable amount of lobbying and political expenditures (see instructions)	OR (b) Pa	1 2a 2b 2c 3 4 5	A, lin		
1 2 a b c 3 4	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amount political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) due if notices were sent and the amount on line 2c exceeds the amount on line 3, what portion excess does the organization agree to carryover to the reasonable estimate of nondeductible for and political expenditure next year? Taxable amount of lobbying and political expenditures (see instructions) Texable amount of lobbying and political expenditures (see instructions)	OR (b) Pa	1 2a 2b 2c 3 4 5	A, lin		
1 2 a b c 3 4	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amount political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) due if notices were sent and the amount on line 2c exceeds the amount on line 3, what portion excess does the organization agree to carryover to the reasonable estimate of nondeductible for and political expenditure next year? Taxable amount of lobbying and political expenditures (see instructions) Texable amount of lobbying and political expenditures (see instructions)	OR (b) Pa	1 2a 2b 2c 3 4 5	A, lin		
1 2 a b c 3 4	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amount political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) due if notices were sent and the amount on line 2c exceeds the amount on line 3, what portion excess does the organization agree to carryover to the reasonable estimate of nondeductible for and political expenditure next year? Taxable amount of lobbying and political expenditures (see instructions) Texable amount of lobbying and political expenditures (see instructions)	OR (b) Pa	1 2a 2b 2c 3 4 5	A, lin		

Schedule C (Form 990 or 990-EZ) 2017

Page 4

Part IV Supplemental Information (continued)

SCHEDULE D (Form 990)

Supplemental Financial Statements

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. OMB No 1545-0047

► Attach to Form 990. Open to Public ► Go to www.irs.gov/Form990 for instructions and the latest information. Inspection Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

NAT	TIONAL ROAD SAFETY FOUNDATION, INC.	13-6128274
Pa	rt I Organizations Maintaining Donor Advised Funds or Other Similar Funds or	Accounts.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 6.	
	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate value of contributions to (during year)	
3	Aggregate value of grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held if	in donor advised
	funds are the organization's property, subject to the organization's exclusive legal control?	Yes . No
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant ful	nds can be used
	only for charitable purposes and not for the benefit of the donor or donor advisor, or for ar	ny other purpose
	conferring impermissible private benefit?	Yes No
Pa	rt II Conservation Easements.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 7.	
1	Purpose(s) of conservation easements held by the organization (check all that apply).	
		of a historically important land area
	Protection of natural habitat Preservation of	of a certified historic structure
	Preservation of open space	
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in	
	easement on the last day of the tax year	Held at the End of the Tax Year
а	Total number of conservation easements	2a 1.
b	Total acreage restricted by conservation easements	2b 27.00
С	Number of conservation easements on a certified historic structure included in (a)	2c
d	Number of conservation easements included in (c) acquired after 7/25/06, and not on a	
	historic structure listed in the National Register	2d
3	Number of conservation easements modified, transferred, released, extinguished, or terminal	ated by the organization during the
	tax year >	1.
4	Number of states where property subject to conservation easement is located	
5	Does the organization have a written policy regarding the periodic monitoring, inspection	- I I I I - I
e	violations, and enforcement of the conservation easements it holds?	
6	Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing cons	servation easements during the year
7	Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing co	inservation easements during the year
•	S	riser vacion easements during the year
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section	n 170(h)(4)(B)(i)
	and section 170(h)(4)(B)(II)?	
9	In Part XIII, describe how the organization reports conservation easements in its revenue and	
Ĭ	balance sheet, and include, if applicable, the text of the footnote to the organization's financia	•
	organization's accounting for conservation easements.	
Pa	rt III Organizations Maintaining Collections of Art, Historical Treasures, or Other	Similar Assets.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 8.	
1a	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its re-	evenue statement and balance sheet
	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its reworks of art, historical treasures, or other similar assets held for public exhibition, educing public service, provide, in Part XIII, the text of the footnote to its financial statements that described in the control of the contr	ation, or research in furtherance of
ь	If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its re	
b	works of art, historical treasures, or other similar assets held for public exhibition, educ	
	public service, provide the following amounts relating to these items:	
	(i) Revenue included on Form 990, Part VIII, line 1	> \$
	(ii) Assets included in Form 990, Part X	
2	If the organization received or held works of art, historical treasures, or other similar a	
	following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:	
а	Revenue included on Form 990, Part VIII, line 1	
<u>b</u>	Assets included in Form 990, Part X	<u></u> ▶ \$
For F	Panarwork Paduction Act Notice see the Instructions for Form 900	Schedule D (Form 990) 2017

Sched	dule D (Form 990) 2017									Page 2
Par	t III Organizations Maintainir	ng Collections of	Art, Hist	orical T	reasure	s, or Ot	her Simila	Asse	ts (cont	inued)
3	Using the organization's acquisition									
	collection items (check all that app				-		_			
а	Public exhibition	• /	d	Loan	or exchar	nge progra	ms			
b	Scholarly research			=		-				
c	Preservation for future general	rations		_						
4	Provide a description of the organ		s and expla	in how t	they furth	ner the or	ganization's	exemp	t purpose	in Part
•	XIII.		- aa op				3			
5	During the year, did the organization	n solicit or receive	donations o	fart hist	orical trea	asures or	other simila	r		
•	assets to be sold to raise funds rath								Yes	No
Dar	t IV Escrow and Custodial Ar		unica do po	1101110	oi gainizat		o	• • • •		
Fai	Complete if the organizat		s" on Forn	990. P	art IV. lir	ne 9. or re	eported an	amoun	t on For	m
	990, Part X, line 21.	ion anowored Te	0 0111 0111	. 000, .	Q1 (1 V , 111	,	, , , , , , , , , , , , , , , , , , , 			••
10	Is the organization an agent, truste	e custodian or oth	er intermed	liary for o	ontributio	one or other	r assets not			
ıa	included on Form 990, Part X?								Yes	No
h	If "Yes," explain the arrangement							∟		
U	ir res, explain the arrangement	iii ait Xiii aila coiii	piete tric loi	iowing tai	Б,С.		An	nount		
_	Regunning halance				<u> -</u>	10		100111		
	Beginning balance									
	Distributions during the year									
_	Ending balance									
f	Did the organization include an am						account liah	ility2	Yes	No
	If "Yes," explain the arrangement i									H'''
		II FAIT AIII CHECK II	ere ii trie e	Apiai iatioi	i ilas Deci	i provided	OITT GIT XIII	<u> </u>	· · · · ·	<u> </u>
Pal	Endowment Funds. Complete if the organizat	ion answered "Ye	s" on Form	990 P	art IV. lin	ne 10.				
	Complete if the organization	(a) Current year	(b) Prio		T	years back	(d) Three yes	ars back	(e) Four	ears back
			(5)	,	(0)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(0)		(0). 00	
1a	Beginning of year balance									
b	Contributions						 			
С	Net investment earnings, gains,									
	and losses				ļ		<u> </u>			
	Grants or scholarships	· · · · · · · · · · · · · · · · · · ·	<u> </u>		-	 				
0	Other expenditures for facilities									
	and programs		· · · · · ·				 			
f	Administrative expenses				 					
9	End of year balance				<u> </u>		<u></u>			
2	Provide the estimated percentage			e (line 1g,	, column ((a)) held as	3.			
a	•		_%							
	Permanent endowment ►									
С	Temporarily restricted endowment	· ———	4000/							
_	The percentages on lines 2a, 2b, a	•		.4: 45-4	-		-:-td f t	. .		
3 a	Are there endowment funds not in	the possession of t	ne organiza	ition that	are neio	and admi	nistered for t	ne	[V	es No
	organization by:									03 110
	(i) unrelated organizations								3a(i)	
_	(ii) related organizations								3a(ii)	
b	If "Yes" on line 3a(ii), are the relate					••••		• • • •	3b	!
4	Describe in Part XIII the intended u		ation's endo	wment fu	nas.					
Par	t VI Land, Buildings, and Equ Complete if the organiza	ipment. tion answered "Ye	es" on For	n 990. F	Part IV. li	ne 11a. S	See Form 9	90. Pa	rt X. line	10.
	Description of property	(a) Cost o	r other basis	(b) Cost	or other bas	is (c) Ac	cumulated		l) Book valu	
	l and		stment)		other)		reciation		3 00	0 001
	Land			3,0	029,881	L .			3,02	9,881.
b	Buildings									
C	Leasehold improvements	<u> </u>			10 55	,	12 521			
đ	Equipment				13,53	L .	13,531			
	Other			L						
Tota	I. Add lines 1a through 1e. (Column	(d) must equal For	m 990, Part	X, colum	n (B), line	10c)	<u> ▶</u> _		3,02	9,881.

Schedule D (Form 990) 2017

4GR0QK 1608

Part VII	Complete if the organization answered	"Yes" on Form 990	, Part IV, line 11b. See For	m 990, Part X, line 12.
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method o Cost or end-of-ye	of valuation.
(1) Financi	ial derivatives			
	r-held equity interests			
			-	
(A)				
(B)				
(C)				<u></u>
(D)				
(E)				
<u>(F)</u>				
(G)		-		
(H)			· · · · - · · - · · - · · · · · · · · ·	
	nn (b) must equal Form 990, Part X, col (B) line 12)			
Part VIII	Investments - Program Related. Complete if the organization answered	"Yes" on Form 990	, Part IV, line 11c. See Fori	m 990, Part X, line 13.
	(a) Description of investment	(b) Book value	(c) Method	of valuation.
			Cost or end-of-ye	ear market value
(1)				
(2)				
(3)				
(4)				
(5) (6)				
(7)				
(8)				
(9)				
	nn (b) must equal Form 990, Part X, col (B) line 13)			
Part IX	Other Assets.			
	Complete if the organization answered	"Yes" on Form 990	, Part IV, line 11d. See For	m 990, Part X, line 15.
	(a) Des	cription		(b) Book value
(1)				
_(2)				
_(3)				
(4)				
(5)				
(6)				
(7)				
<u>(8)</u> (9)				
	umn (b) must equal Form 990, Part X, col. (B) lii	ne 15)		. •
Part X	Other Liabilities.			
	Complete if the organization answered	"Yes" on Form 990	, Part IV, line 11e or 11f. So	ee Form 990, Part X,
	line 25.			
1.	(a) Description of liability	(b) Book valu	8	
	ral income taxes			
	UED EXPENSES & OTHER LIABI	16,	548.	
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)		16.5	340	
ı otal. (Colui	mn (b) must equal Form 990, Part X, col (B) line 25)	▶ 16,5	740.	

PAGE 35

Schedule D (Form 990) 2017

Part XIII Supplemental Information (continued)

NOTE 1:

SUPPLEMENTAL INFORMATION TO PART II LINE 9: THE ORGANIZATION HAS APPROXIMATELY 68 ACRES OF UNDEVELOPED LAND, LOCATED IN JACKSONVILLE, FLORIDA. THE PROPERTY WAS APPRAISED AT THE DONATION DATE FOR \$1,850,000. THE ORGANIZATION MADE LAND IMPROVEMENTS TO THE PROPERTY, IN ORDER FOR IT TO BE DESIGNED AS A QUALIFIED WETLANDS MITIGATION BANK. 57 ACRES OF THE PROPERTY QUALIFIED FOR MITIGATION BANKING. AS A QUALIFIED WETLANDS MITIGATION BANK, THE ORGANIZATION IS PERMITTED TO GRANT CONSERVATION EASEMENTS ON ITS PROPERTY. AT APRIL 30, 2018 AND 2017 THE MITIGATION PROPERTY IS CARRIED ON THE BOOKS AT APPROXIMATELY \$255,000 AND \$258,000 RESPECTIVELY, WHICH IS THE ORIGINAL APPRAISED VALUE PLUS LAND IMPROVEMENTS AT COST, NET OF THAT PORTION ALLOCABLE TO THE CONSERVATION EASEMENTS GRANTED AND AMOUNTS WRITTEN OFF DUE TO IMPAIRMENT LOSS. THE GRANTING OF THE CONSERVATION EASEMENTS BY THE FOUNDATION PROHIBITS THE FOUNDATION FROM DEVELOPING THE PROPERTY IN THE FUTURE AND, ACCORDINGLY, THE FOUNDATION REDUCES THE CARRYING VALUE OF THE LAND AND LAND IMPROVEMENT FOR THE PARCELS ENCUMBERED BY THE CONSERVATION EASEMENTS. THERE IS NO COST BASIS ALLOCATED TO THE 11 ACRES OF PROPERTY WHICH DOES NOT QUALIFY FOR LAND MITIGATION. THE FOUNDATION HAS THE RESPONSIBILITY TO MAINTAIN THE PROPERTY ENCUMBERED BY THE CONSERVATION EASEMENT IN PERPETUITY. FOR THE YEAR ENDED APRIL 30, 2018, CONSERVATION EASEMENTS ON APPROXIMATELY 0.4 ACRES OF LAND WERE GRANTED FOR \$7,500, WHICH RESULTED IN A RECOGNIZED GAIN OF \$1,911. FOR THE YEAR ENDED APRIL 30, 2018, NO CONSERVATION EASEMENTS WERE GRANTED. AS OF APRIL 30, 2018, CONSERVATION EASEMENTS ON APPROXIMATELY 41 ACRES HAVE BEEN GRANTED. THE FOUNDATION INTENDS TO DONATE THE PROPERTY UPON THE GRANTING OF ALL THE CONSERVATION EASEMENTS.

Part XIII Supplemental Information (continued)

NOTE 2: SUPPLEMENTAL INFORMATION TO PART X: THE FOUNDATION IS A NOT-FOR-PROFIT, PUBLIC CHARITABLE ORGANIZATION EXEMPT FROM FEDERAL INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE, AND IS CLASSIFIED AS A PUBLICLY SUPPORTED ORGANIZATION, WHICH ALLOWS FOR THE MAXIMUM CHARITABLE CONTRIBUTION DEDUCTION BY DONORS. AS A NOT-FOR-PROFIT CORPORATION, THE FOUNDATION IS ALSO EXEMPT FROM STATE AND LOCAL TAXES. THE FOUNDATION ANNUALLY REVIEWS ITS TAX POSITIONS AND HAS DETERMINED THAT THERE ARE NO MATERIAL UNCERTAIN TAX POSITIONS THAT REQUIRE RECOGNITION IN THE FINANCIAL STATEMENTS. THE FOUNDATION'S FEDERAL AND STATE INCOME TAX RETURNS AFTER 2013 REMAIN SUBJECT TO EXAMINATION BY THE RELEVANT TAXING AUTHORITIES.

SCHEDULE I (Form 990)

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

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

► Attach to Form 990.

► Go to www.irs gov/Form990 for the latest information.

Open to Public

Department of the Treasury

Internal Revenue Service	> Go	to www.irs gov	/Formyyu tor the	atest intormation	1.		nispection
Name of the organization						Employer Identific	ation number
NATIONAL ROAD SAFETY FOUNDATION,	INC.					13-612821	7.4
Part i General Information on Grants an	d Assistanc	0					
1 Does the organization maintain records to s	ubstantiate th	e amount of the	grants or assista	nce, the grantees	eligibility for the grant	s or assistance, and	
the selection criteria used to award the grant	ts or assistant	e?					X Yes No
2 Describe in Part IV the organization's proces							
Part II Grants and Other Assistance to D 990, Part IV, line 21, for any recip							es" on Form
(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) SADD, INC							
255 MAIN STREET, SUITE 208	04-2764514	501 (C) (3)	25,000				GENERAL SUPPORT
(2) ADTSEA							
1434 TRIM TREE RD INDIAANA, PA 15701	52-6054149	501 (C) (3)	6,200				GENERAL SUPPORT
(3) GOVERNORS HIGHWAY SAFETY ASSOCIATION	1]				
444 N CAPITOL STREET NW	52-1021004	501 (C) (3)	139,900				GENERAL SUPPORT
(4) WE SAVE LIVES	_1						
4601 N FAIRFAX DR ARLINGTON, VA 22203	45-3507377	501 (C) (3)	50,000				GENERAL SUPPORT
(5) FAMILY, CAREER AND COMMUNITY LEADERS OF AME	_			,			
1910 ASSOCIATION DRIVE RESTON, VA 20191	53-0178290	501 (C) (3)	16,200				GENERAL_SUPPORT
(6) NATIONAL SAFETY COUNCIL	4						
1121 SPRING LAKE DR ITASCA, IL 60143	36-2167809	501 (C) (3)	50,000				GENERAL SUPPORT
(7) SIMEONE FOUNDATION INC	4						
6825 NORWITCH DRIVE PHILADELPHIA, PA 19153	22-3483147	501 (C) (3)	25,000				GENERAL SUPPORT
(8) KDR CHALLENGE	4	1					
3238 S MACKINAC TRL SAULT S MARIE, MI 49783	82-1146072	501 (C) (3)	10,000				GENERAL SUPPORT
_(9)	-						
(10)		 				·	

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

Schedule I (Form 990) (2017)

OMB No 1545-0047

2017

(11) (12)

JSA 7E1288 1 000 4GROQK 1608

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PAGE 39

Schedule I (Form 990) (2017)
MITONAL ROAD SAFEII FOUNDATION, INC

Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22 Part III can be duplicated if additional space is needed

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book FMV appraisal, other)	(f) Description of non-cash assistance
1 scholarships	13	15,000			
2					<u> </u>
3					
4					
5					
6					
7					

Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information

PROCEDURES FOR MONITORING THE USE OF GRANT FUNDS:

THE USE OF GRANT FUNDS IS REVIEWED BY THE VICE PRESIDENT

Schedule I (Form 990) (2017)

JSA

7E1504 1 000 4GR0QK 1608

V 17-7.10

PAGE 40

SCHEDULE L
(Form 990 or 990-EZ)

Transactions With Interested Persons

Complete if the organization answered "Yes" on Form 990, Part IV, Ilne 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, Ilne 38a or 40b.

OMB No 1545-0047

[≥At	•		n 990 or Form					0	oen To	Public	
Department of the Treasury Internal Revenue Service	► Go to						latest information				specti		
Name of the organization								Employer	identif	ication	numbe	r	
NATIONAL ROAD S	AFETY FOUNDAT	ION, INC	•					13-	6128	274			
	nefit Transactions f the organization a										line 4	0b.	
1 (a) Name of disqu	ualified nemes	(b) Relatio	nship	between	disqualified pers	on and	(c) D	escription	of trans	action		(d)	Corrected
		ļ		organiz	zation		(6, 6		OI Walls			Ye	s No
(1)		ļ <u> </u>										-	4_
(2)												-	+
(3)		<u> </u>										+	+-
(5)		 		<u> </u>								+	+-
(6)		 											+
	it of tax incurred by	y the organiz	ation	mana	agers or disqu	ualified	d persons during	the year	ar				
	58									- \$ _			
3 Enter the amoun	t of tax, if any, on li	ne 2, above,	reım	bursec	l by the orgar	nizatio	n			• \$_			
													
	nd/or From Interes f the organization a			a Earn	. 000 E7 Da	-+ \/ i	no 38a or Form (000 Bas	. N./ 11:	26.	or if th	20	
	n reported an amo						ne soa or Form s	oou, rai	L IV, III	16 20,	OI II U	16	
(a) Name of interested per	rson (b) Relationship with organization	(c) Purpose of loan	fro	an to or in the ization?	(e) Origina principal am		(f) Balance due	(g) In	default?	by bo	proved pard or nittee?	(i) Wr agreen	
			То	From				Yes	No	Yes	No	Yes	No
(1)			-10	1110111				103	1.0	108	140	103	-110
(2)								\dashv	 				
(3)													
(4)													
(5)													
(6)					······································	_				<u> </u>	\sqcup		
(7)				-					ļ	├			
(8)				\vdash				\dashv	-	 		+	
(10)								\dashv	 	 - -			
· · ·						. ▶	\$	\neg			'		
Part III Grants or A	Assistance Benefit the organization a	ing Intereste	d Pe	rsons.				-					
(a) Name of interested per		p between intere- the organization		c) Amou	int of assistance		(d) Type of assistance	9	(e)	Purpo	se of ass	sistance	1
(1)													
(2)													
(3)			-										
(4)			-+									—	
(5)													
(6) (7)			_										
(8)	- 		\dashv										
(9)			\dashv										
(10)			$\neg \uparrow$										
For Bononyork Bodystion	Act Notice cos the	Inctructions	<u> </u>	000	or 000 E7			0.1	4.1.1	12.	000	200 F.M	

Schedule L (Form 990 or 990-EZ) 2017

Page 2

Complete if the	e organization answere	d "Yes" on Forn	QQ0 Part IV	line 28a 28h or 28c
	o uluanization anowere	u 163 Ulli Ulli	ı ssu. Faitiv.	III 16 20a. 20b. UI 20C.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?		
				Yes	No	
(1) DAVID REICH	TRUSTEE	98,808	PROMOTION		х	
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)	1					
(10)						

Part V Supplemental Information

Provide additional information for responses to questions on Schedule L (see instructions).

SCHEDULE M (Form 990)

Noncash Contributions

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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

► Attach to Form 990. ► Go to www.irs.gov/Form990 for the latest information. Open to Public Inspection

Employer identification number Name of the organization 13-6128274 NATIONAL ROAD SAFETY FOUNDATION, INC. Part I Types of Property (c) (b) Noncash contribution Number of contributions or Method of determining Check if amounts reported on noncash contribution amounts items contributed applicable Form 990, Part VIII, line 1g Art - Works of art Art - Historical treasures 3 Art - Fractional interests Books and publications 5 Clothing and household goods. 6 Cars and other vehicles 7 Boats and planes. Intellectual property 1,126,305. STOCK QUOTES 3. Securities - Publicly traded. Х 9 Securities - Closely held stock . . . 10 Securities - Partnership, LLC, or trust interests Securities - Miscellaneous 12 Qualified conservation contribution - Historic Qualified conservation contribution - Other Real estate - Residential 15 16 Real estate - Commercial 8. 560,000. APPRAISAL 17 Real estate - Other Collectibles...... 18 19 Food inventory...... 20 Drugs and medical supplies Taxidermy 21 Historical artifacts 22 23 Scientific specimens..... 24 Archeological artifacts..... 25 Other ►(26 Other ►(27 Other ►(28 Other ►(Number of Forms 8283 received by the organization during the tax year for contributions for 29 which the organization completed Form 8283, Part IV, Donee Acknowledgement Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required Х b If "Yes," describe the arrangement in Part II. 31 Does the organization have a gift acceptance policy that requires the review of any nonstandard Х 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash Х 32a b If "Yes," describe in Part II. 33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II

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

Schedule M (Form 990) (2017)

4GR0QK 1608

Schedule M (Form 990) (2017)

Part II

Page 2

Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

2017
Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

▶ Information about Schedule O (Form 990 or 990-EZ) and its Instructions is at www.irs.gov/form990.

NATIONAL ROAD SAFETY FOUNDATION, INC.

Employer identification number 13-6128274

FAMILY RELATIONSHIPS (PART VI, LINE 2):

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

RELATIONSHIP:

SISTER

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

RELATIONSHIP:

BROTHER

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

RELATIONSHIP:

SISTER

CONFLICT OF INTEREST POLICY (PART VI, LINE 12C)

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

AUDIT COMMITTEE (PART VI, LINE 11B)

THE AUDIT COMMITTEE REVIEWS THE 990 WITH THE FOUNDATION'S CPA, AND A COPY

OF IT IS PROVIDED TO EACH TRUSTEE PRIOR TO FILING WITH THE APPORPIRATE

GOVERNMENT AGENCIES.

AVAILABILITY OF FINANCIAL STATEMENTS (PART VI, LINE 19)
THE AUDITED FINANCIAL STATEMENTS AND FORM 990 ARE AVAILABLE AT THE

Name of the organization		Employer identification number
NATIONAL ROAD SAFETY FOUNDATION	N, INC.	13-6128274
NATIONAL ROAD SAFETY FOUNDATION	n's Business Office and are ava	ILABLE UPON
MATTER PROJECT COVERNANCE DO	CUMENTS ARE ALSO AVAILABLE AT T	HE BUSINESS
WATITEN ADQUEST. GOVERNANCE DO	COMENTO AND ADDO AVAIDABLE III 1	ns bootness
OFFICE UPON WRITTEN REQUEST.		
FORM 990, PART VIII - INVESTME	NT INCOME	ATTACHMENT 1
FORM 950, TAKE VIII INVESTIGE	HT THOULD	
	(A) (B)	(C) (D)
DESCRIPTION	TOTAL RELATED C REVENUE EXEMPT REVE	
<u>DBBCKII I I OK</u>		
INTEREST INCOME	131,299.	131,299.
DIVIDEND INCOME	917,146.	917,146.
TOTALS	1,048,445.	1,048,445.
TOTALS		
		ATTACHMENT 2
TORM OOG DARM V TAVECOMPANIO	DUDITCIV MDADED CECUDIMIEC	
FORM 990, PART X - INVESTMENTS	- FUBLICLI IRADED SECURITIES	
	PEGINING	DNDING COST
	BEGINNING	ENDING COST

BOOK VALUE

30,631,798.

30,631,798.

BOOK VALUE

30,389,630.

30,389,630.

DESCRIPTION

INVESTMENTS FROM NET INVESTMEN

TOTALS

OR FMV

FMV