See a Social Security Number? Say Something!
Report Privacy Problems to https://public.resource.org/privacy
Or call the IRS Identity Theft Hotline at 1-800-908-4490
**Form 990**

**Return of Organization Exempt From Income Tax**

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

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

**2011**

Open to Public Inspection

**A For the 2011 calendar year, or tax year beginning 01-01-2011 and ending 12-31-2011**

**B Check if applicable**
- [ ] Address change
- [ ] Name change
- [ ] Initial return
- [ ] Terminated
- [ ] Amended return
- [ ] Application pending

**C Name of organization**
- Practice (Greenhealth)

**D Employer identification number**
- 76-0815736

**E Telephone number**
- (888) 686-3332

**F Gross receipts $ 2,087,484**

**G Name and address of principal officer**
- Gary Cohen
- 12355 Sunrise Valley Drive No 680
- Reston, VA 20191

**H(a) Is this a group return for affiliates?**
- [ ] Yes
- [x] No

**H(b) Are all affiliates included?**
- [x] Yes
- [ ] No

**H(c) Group exemption number**
- [ ]

**I Tax-exempt status**
- [ ] 501(c)(3)
- [ ] 501(c)(4) (insert no) 4947(a)(1) or 527

**J Website**
- www.practicegreenhealth.org

**K Form of organization**
- Corporation

**L Year of formation**
- 2006

**M State of legal domicile**
- IL

## Part I Summary

1. **Briefly describe the organization's mission or most significant activities**
   - Provide educational resources on improving waste management & environmental practices in healthcare

2. **Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets**
   - [ ]

3. **Number of voting members of the governing body (Part VI, line 1a)**
   - 3

4. **Number of independent voting members of the governing body (Part VI, line 1b)**
   - 4

5. **Total number of individuals employed in calendar year 2011 (Part V, line 2a)**
   - 5

6. **Total number of volunteers (estimate if necessary)**
   - 6

7a. **Total unrelated business revenue from Part VIII, column (C), line 12**
   - 78,410

7b. **Net unrelated business taxable income from Form 990-T, line 34**
   - 34,336

## Revenue

8. **Contributions and grants (Part VIII, line 1h)**
   - 320,618

9. **Program service revenue (Part VIII, line 29)**
   - 1,603,655

10. **Investment income (Part VIII, column (A), lines 3, 4, and 7d)**
    - 85

11. **Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11a)**
    - 319,761

12. **Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)**
    - 2,244,119

## Expenses

13. **Grants and similar amounts paid (Part IX, column (A), lines 1-3)**
    - 0

14. **Benefits paid to or for members (Part IX, column (A), line 4)**
    - 0

15. **Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)**
    - 1,460,151

16a. **Professional fundraising fees (Part IX, column (A), line 11)**
    - 0

16b. **Total fundraising expenses (Part IX, column (D), line 25)**
    - 154,207

17. **Other expenses (Part IX, column (A), lines 11a-11d, 11f-24a)**
    - 579,831

18. **Total expenses—add lines 13-17 (must equal Part IX, column (A), line 25)**
    - 2,059,982

19. **Revenue less expenses Subtract line 18 from line 12**
    - 184,137

## Net Assets or Fund Balances

20. **Total assets (Part X, line 16)**
    - 215,686

21. **Total liabilities (Part X, line 26)**
    - 1,231,987

22. **Net assets or fund balances Subtract line 21 from line 20**
    - -1,016,301

## Part II Signature Block

**Sign Here**

<table>
<thead>
<tr>
<th>Signature of officer</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gary Cohen, President</td>
<td>2012-10-17</td>
</tr>
</tbody>
</table>

**Preparer's signature**

<table>
<thead>
<tr>
<th>Date</th>
<th>Check if self-employed</th>
</tr>
</thead>
<tbody>
<tr>
<td>2012-10-26</td>
<td>[ ]</td>
</tr>
</tbody>
</table>

**Preparer's taxpayer identification number**
- [ ]

**Preparer's address**
- Raffa PC
- 1899 L Street NW Suite 900
- Washington, DC 20036

**Preparer's phone number**
- (202) 822-5000

May the IRS discuss this return with the preparer shown above? [ ] Yes [ ] No

**Cat No 11282Y Form 990 (2011)**
Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission
Practice Greenhealth (PGH) was formed to provide education, tools and resources to health care professionals to improve sustainability and environmental practices in the health care sector.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?
If "Yes," describe these changes on Schedule O.

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

4a (Code ) (Expenses $716,846 including grants of $ ) (Revenue $1,396,128 )
Membership - PGH is the nation's leading membership and networking organization for institutions in the healthcare community that have made a commitment to sustainable, eco-friendly practices. Members include hospitals, healthcare systems, businesses and other stakeholders engaged in the greening of healthcare to improve the health of patients, staff and the environment.

4b (Code ) (Expenses $480,646 including grants of $ ) (Revenue $260,351 )
Education - The Education program provides resources and CE accredited programs designed to assist Practice Greenhealth members and other related organizations in their journey toward greater environmental sustainability. Over 35 webinars are held each year integrating green building and greener operations and covering topics such as pharmaceutical management, energy and water efficiency, hazardous waste compliance, and green building design and construction.

4c (Code ) (Expenses $291,979 including grants of $ ) (Revenue $ )
Facility Engagement - When a hospital or healthcare system joins Practice Greenhealth, an orientation and telephonic assessment is conducted with the lead sustainability officer of the organization. Practice Greenhealth's Facility Engagement team works with members throughout the year to assist them with tools and resources to meet their sustainability goals.

4d Other program services (Describe in Schedule O )
(Expenses $279,661 including grants of $ ) (Revenue $ )

4e Total program service expenses $1,769,132
Part IV  Checklist of Required Schedules

1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule E

2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?

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

4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II

5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III

6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I

7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II

8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III

9 Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV

10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V

11 If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, X, or X as applicable

   a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI

   b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII

   c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII

   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

   e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X

   f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X

12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII

   b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional

13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

14a Did the organization maintain an office, employees, or agents outside of the United States?

   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, Part I

   c Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or assistance to any organization or entity located outside the U.S.? If "Yes," complete Schedule F, Part II and IV

   d Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or assistance to individuals located outside the U.S.? If "Yes," complete Schedule F, Part III and IV

15 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

16 Did the organization report more than $15,000 of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II

17 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

20a Did the organization operate one or more hospitals? If "Yes," complete Schedule H

   b If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. All Form 990 filers that operated one or more hospitals must attach audited financial statements
### Part IV Checklist of Required Schedules (continued)

| 21 | Did the organization report more than $5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II. |
| 22 | Did the organization report more than $5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III. |
| 23 | Did the organization answer "Yes" to Part VII, Section A, questions 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 I. |
| 24a | Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25. |
| 24b | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? |
| 24c | Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? |
| 24d | Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? |
| 25a | **Section 501(c)(3) and 501(c)(4) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I. |
| 25b | 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. |
| 26 | Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization’s tax year? If "Yes," complete Schedule L, Part II. |
| 27 | Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III. |
| 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) |
| 28a | A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV. |
| 28b | A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV. |
| 28c | 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 owner? If "Yes," complete Schedule L, Part IV. |
| 29 | Did the organization receive more than $25,000 in non-cash contributions? If "Yes," complete Schedule M. |
| 30 | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M. |
| 31 | Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I. |
| 32 | Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II. |
| 33 | Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I. |
| 34 | Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1. |
| 35a | Is any related organization a controlled entity of the filing organization within the meaning of section 512(b)(13)? |
| 35b | Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2. |
| 36 | **Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-chaarticle related organization? If "Yes," complete Schedule R, Part V, line 2. |
| 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. |
| 38 | Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? |

**Note:** All Form 990 filers are required to complete Schedule O.
## Part V  Statements Regarding Other IRS Filings and Tax Compliance

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

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable</td>
<td>1a</td>
<td>19</td>
</tr>
<tr>
<td>1b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable</td>
<td>1b</td>
<td>0</td>
</tr>
<tr>
<td>2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements filed for the calendar year ending with or within the year covered by this return</td>
<td>2a</td>
<td>15</td>
</tr>
<tr>
<td>If at least one is reported on line 2a, did the organization file all required federal employment tax returns?</td>
<td>2b</td>
<td>Yes</td>
</tr>
<tr>
<td>3a Did the organization have unrelated business gross income of $1,000 or more during the year?</td>
<td>3a</td>
<td>Yes</td>
</tr>
<tr>
<td>If &quot;Yes,&quot; has it filed a Form 990-T for this year? If &quot;No,&quot; provide an explanation in Schedule O</td>
<td>3b</td>
<td>Yes</td>
</tr>
<tr>
<td>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 or securities account)?</td>
<td>4a</td>
<td>No</td>
</tr>
<tr>
<td>If &quot;Yes,&quot; enter the name of the foreign country</td>
<td>4b</td>
<td></td>
</tr>
<tr>
<td>See instructions for filing requirements for Form TD F90-221, Report of Foreign Bank and Financial Accounts</td>
<td>5a</td>
<td>No</td>
</tr>
<tr>
<td>Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?</td>
<td>5b</td>
<td>No</td>
</tr>
<tr>
<td>If &quot;Yes&quot; to line 5a or 5b, did the organization file Form 8886-T?</td>
<td>5c</td>
<td></td>
</tr>
<tr>
<td>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?</td>
<td>6a</td>
<td>No</td>
</tr>
<tr>
<td>If &quot;Yes,&quot; did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?</td>
<td>6b</td>
<td></td>
</tr>
<tr>
<td>Organizations that may receive deductible contributions under section 170(c).</td>
<td>7a</td>
<td>No</td>
</tr>
<tr>
<td>Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?</td>
<td>7b</td>
<td></td>
</tr>
<tr>
<td>Did the organization notify the donor of the value of the goods or services provided?</td>
<td>7c</td>
<td>No</td>
</tr>
<tr>
<td>Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?</td>
<td>7d</td>
<td></td>
</tr>
<tr>
<td>If &quot;Yes,&quot; indicate the number of Forms 8282 filed during the year</td>
<td>7e</td>
<td></td>
</tr>
<tr>
<td>Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?</td>
<td>7f</td>
<td>No</td>
</tr>
<tr>
<td>Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?</td>
<td>7g</td>
<td></td>
</tr>
<tr>
<td>If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?</td>
<td>7h</td>
<td></td>
</tr>
<tr>
<td>If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?</td>
<td>8</td>
<td></td>
</tr>
<tr>
<td>Sponsoring organizations maintaining donor advised funds.</td>
<td>9a</td>
<td></td>
</tr>
<tr>
<td>Did the organization make any taxable distributions under section 4966?</td>
<td>9b</td>
<td></td>
</tr>
<tr>
<td>Did the organization make a distribution to a donor, donor advisor, or related person?</td>
<td>10a</td>
<td></td>
</tr>
<tr>
<td>Section 501(c)(7) organizations. Enter</td>
<td>10b</td>
<td></td>
</tr>
<tr>
<td>Initiation fees and capital contributions included on Part VIII, line 12</td>
<td>11a</td>
<td></td>
</tr>
<tr>
<td>Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities</td>
<td>11b</td>
<td></td>
</tr>
<tr>
<td>Gross income from members or shareholders</td>
<td>12a</td>
<td></td>
</tr>
<tr>
<td>Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)</td>
<td>12b</td>
<td></td>
</tr>
<tr>
<td>Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?</td>
<td>13a</td>
<td></td>
</tr>
<tr>
<td>If &quot;Yes,&quot; enter the amount of tax-exempt interest received or accrued during the year</td>
<td>13b</td>
<td></td>
</tr>
<tr>
<td>Section 501(c)(29) qualified nonprofit health insurance issuers.</td>
<td>14a</td>
<td></td>
</tr>
<tr>
<td>Is the organization licensed to issue qualified health plans in more than one state?</td>
<td>14b</td>
<td></td>
</tr>
<tr>
<td>Note. All 501(c)(29) organizations must list in Schedule O each state in which they are licensed to issue qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization allocated to each state</td>
<td>14c</td>
<td></td>
</tr>
</tbody>
</table>
### Part VI  Governance, Management, and Disclosure

For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response to any question in this Part VI. 

#### Section A. Governing Body and Management

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>la Enter the number of voting members of the governing body at the end of the tax year</td>
<td>10</td>
<td></td>
</tr>
<tr>
<td>lb Enter the number of voting members included in line la, above, who are independent</td>
<td>10</td>
<td></td>
</tr>
<tr>
<td>2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>5 Did the organization become aware during the year of a significant diversion of the organization's assets?</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>6 Did the organization have members or stockholders?</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a The governing body?</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>b Each committee with authority to act on behalf of the governing body?</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If &quot;Yes,&quot; provide the names and addresses in Schedule O.</td>
<td>No</td>
<td></td>
</tr>
</tbody>
</table>

#### Section B. Policies

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

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>10a Did the organization have local chapters, branches, or affiliates?</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>b If &quot;Yes,&quot; did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>b Describe in Schedule O the process, if any, used by the organization to review the Form 990</td>
<td></td>
<td></td>
</tr>
<tr>
<td>12a Did the organization have a written conflict of interest policy? If &quot;No,&quot; go to line 13</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>b Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>c Did the organization regularly and consistently monitor and enforce compliance with the policy? If &quot;Yes,&quot; describe in Schedule O how this was done</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>13 Did the organization have a written whistleblower policy?</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>14 Did the organization have a written document retention and destruction policy?</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>a The organization's CEO, Executive Director, or top management official</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>b Other officers or key employees of the organization</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>If &quot;Yes,&quot; to line 15a or 15b, describe the process in Schedule O (see instructions)</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>b If &quot;Yes,&quot; did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?</td>
<td>No</td>
<td></td>
</tr>
</tbody>
</table>

#### Section C. Disclosure

17 List the States with which a copy of this Form 990 is required to be filed. IL, VA
18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3) only) available for public inspection. Indicate how you made these available. Check all that apply. 
   - Own website
   - Another's website
   - Upon request
19 Describe in Schedule O whether and (if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table
20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization.
   - Anna D Prow
   - 12355 Sunrise Valley Drive Suite
   - Reston, VA 20191
   - (703) 869-9790

Form 990 (2011)
### Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

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

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

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

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

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

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

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

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

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

<table>
<thead>
<tr>
<th>(A) Name and Title</th>
<th>(B) Average hours per week (describe hours for related organizations in Schedule O)</th>
<th>(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)</th>
<th>(D) Reportable compensation from the organization (W-2/1099-MISC)</th>
<th>(E) Reportable compensation from related organizations (W-2/1099-MISC)</th>
<th>(F) Estimated amount of other compensation from the organization and related organizations</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) Seter Susan Vickers Chair</td>
<td>100</td>
<td>Individual trustee</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>(2) Barbara A Blakeney Secretary</td>
<td>100</td>
<td>Individual trustee</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>(3) Bruno Giacomuzzi Treasurer</td>
<td>100</td>
<td>Individual trustee</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>(4) Charlotte Brody Director</td>
<td>100</td>
<td>Individual trustee</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>(5) Noe Copley-Woods Director</td>
<td>100</td>
<td>Individual trustee</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>(6) Kathy Genwig Director</td>
<td>100</td>
<td>Individual trustee</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>(7) Jeffrey Hollender Director</td>
<td>100</td>
<td>Individual trustee</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>(8) Andy Pines Director - until 3/2011</td>
<td>100</td>
<td>Individual trustee</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>(9) Anthony Robbins Director</td>
<td>100</td>
<td>Individual trustee</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>(10) John W Strong Director</td>
<td>100</td>
<td>Individual trustee</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>(11) Alan Yuseph Director</td>
<td>100</td>
<td>Individual trustee</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>(12) Anna Gilmore Hall Executive Director - Until 10/21/11</td>
<td>400</td>
<td>Key employee</td>
<td>106,123</td>
<td>0</td>
<td>16,667</td>
</tr>
<tr>
<td>(13) Robert Jarboe Executive Vice President</td>
<td>400</td>
<td>Key employee</td>
<td>143,137</td>
<td>0</td>
<td>21,205</td>
</tr>
<tr>
<td>(14) Gary Cohen President</td>
<td>180</td>
<td>Key employee</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>(15) Stan Cahill Senior Director of Membership Dev</td>
<td>400</td>
<td>Key employee</td>
<td>139,085</td>
<td>0</td>
<td>20,613</td>
</tr>
<tr>
<td>(16) Lara Sutherland Director of Business Membership</td>
<td>400</td>
<td>Key employee</td>
<td>104,423</td>
<td>0</td>
<td>3,340</td>
</tr>
<tr>
<td>(17) Mary Li Dir of Oper/Mktg - until 11/2011</td>
<td>400</td>
<td>Key employee</td>
<td>100,385</td>
<td>0</td>
<td>6,005</td>
</tr>
</tbody>
</table>
### Part VII  Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

<table>
<thead>
<tr>
<th>(A)</th>
<th>(B)</th>
<th>(C)</th>
<th>(D)</th>
<th>(E)</th>
<th>(F)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name and Title</td>
<td>Average hours per week (describe hours for related organizations in Schedule O)</td>
<td>Position (do not check more than one box, unless person is both an officer and a director/trustee)</td>
<td>Reportable compensation from the organization (W-2/1099-MISC)</td>
<td>Reportable compensation from related organizations (W-2/1099-MISC)</td>
<td>Estimated amount of other compensation from the organization and related organizations</td>
</tr>
<tr>
<td></td>
<td>Individual trustee</td>
<td>Institutional trustee</td>
<td>Officer</td>
<td>Employee</td>
<td>Former employee</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

| | | | | | |
| | | | | | |

<table>
<thead>
<tr>
<th>1b</th>
<th>Sub-Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>c</td>
<td>Total from continuation sheets to Part VII, Section A</td>
</tr>
<tr>
<td>d</td>
<td>Total (add lines 1b and 1c)</td>
</tr>
</tbody>
</table>

593,153 | 0 | 67,830 |

2  Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization ≥5

3  Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual.

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>3</td>
<td>No</td>
</tr>
</tbody>
</table>

4  For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than $150,000? If "Yes," complete Schedule J for such individual.

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>4</td>
<td>Yes</td>
</tr>
</tbody>
</table>

5  Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person.

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>5</td>
<td>No</td>
</tr>
</tbody>
</table>

### Section B. Independent Contractors

1  Complete this table for your five highest compensated independent contractors that received more than $100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization’s tax year.

<table>
<thead>
<tr>
<th>(A)</th>
<th>(B)</th>
<th>(C)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name and business address</td>
<td>Description of services</td>
<td>Compensation</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

2  Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 of compensation from the organization ≥0
### Part VIII  Statement of Revenue

<table>
<thead>
<tr>
<th>Contributions, gifts, grants, and other similar amounts</th>
<th>Business Code</th>
<th>(A) Total revenue</th>
<th>(B) Related or exempt function revenue</th>
<th>(C) Unrelated business revenue</th>
<th>(D) Revenue excluded from tax under sections 512, 513, or 514</th>
</tr>
</thead>
<tbody>
<tr>
<td>1a Federated campaigns</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1b Membership dues</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1c Fundraising events</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1d Related organizations</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1e Government grants (contributions)</td>
<td></td>
<td></td>
<td>176,626</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1f All other contributions, gifts, grants, and similar amounts not included above</td>
<td></td>
<td></td>
<td>54,250</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1g Noncash contributions included in lines 1a-1f $</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>h Total Add lines 1a-1f $</td>
<td></td>
<td></td>
<td>230,876</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Program Service Revenue</th>
<th>Business Code</th>
<th>(A) Total revenue</th>
<th>(B) Related or exempt function revenue</th>
<th>(C) Unrelated business revenue</th>
<th>(D) Revenue excluded from tax under sections 512, 513, or 514</th>
</tr>
</thead>
<tbody>
<tr>
<td>2a Membership dues</td>
<td>900099</td>
<td>1,396,128</td>
<td>1,396,128</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2b Registration</td>
<td>900099</td>
<td>133,443</td>
<td>133,443</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2c Contract revenue</td>
<td>900099</td>
<td>126,908</td>
<td>126,908</td>
<td></td>
<td></td>
</tr>
<tr>
<td>d</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2f All other program service revenue</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>g Total Add lines 2a-2f $</td>
<td></td>
<td></td>
<td>1,656,479</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Income (including dividends, interest and other similar amounts)</th>
<th>Business Code</th>
<th>(A) Total revenue</th>
<th>(B) Related or exempt function revenue</th>
<th>(C) Unrelated business revenue</th>
<th>(D) Revenue excluded from tax under sections 512, 513, or 514</th>
</tr>
</thead>
<tbody>
<tr>
<td>3</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Royalties</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(i) Real</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(ii) Personal</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Net rental income or (loss)</th>
<th>Business Code</th>
<th>(A) Total revenue</th>
<th>(B) Related or exempt function revenue</th>
<th>(C) Unrelated business revenue</th>
<th>(D) Revenue excluded from tax under sections 512, 513, or 514</th>
</tr>
</thead>
<tbody>
<tr>
<td>(i) Securities</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(ii) Other</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Gross gain or (loss)</th>
<th>Business Code</th>
<th>(A) Total revenue</th>
<th>(B) Related or exempt function revenue</th>
<th>(C) Unrelated business revenue</th>
<th>(D) Revenue excluded from tax under sections 512, 513, or 514</th>
</tr>
</thead>
<tbody>
<tr>
<td>8a Gross gain from fundraising events (not including $ of contributions reported on line 1c) See Part IV, line 18</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>$</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b Less direct expenses</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c Net income or (loss) from fundraising events</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Gross income from gaming activities</th>
<th>Business Code</th>
<th>(A) Total revenue</th>
<th>(B) Related or exempt function revenue</th>
<th>(C) Unrelated business revenue</th>
<th>(D) Revenue excluded from tax under sections 512, 513, or 514</th>
</tr>
</thead>
<tbody>
<tr>
<td>9a</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b Less direct expenses</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c Net income or (loss) from gaming activities</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Gross sales of inventory, less returns and allowances</th>
<th>Business Code</th>
<th>(A) Total revenue</th>
<th>(B) Related or exempt function revenue</th>
<th>(C) Unrelated business revenue</th>
<th>(D) Revenue excluded from tax under sections 512, 513, or 514</th>
</tr>
</thead>
<tbody>
<tr>
<td>10a</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b Less cost of goods sold</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c Net income or (loss) from sales of inventory</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Miscellaneous Revenue</th>
<th>Business Code</th>
<th>(A) Total revenue</th>
<th>(B) Related or exempt function revenue</th>
<th>(C) Unrelated business revenue</th>
<th>(D) Revenue excluded from tax under sections 512, 513, or 514</th>
</tr>
</thead>
<tbody>
<tr>
<td>11a Advertising</td>
<td>514800</td>
<td>80,410</td>
<td>80,410</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b Other income</td>
<td>900099</td>
<td>63,749</td>
<td>63,749</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d All other revenue</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e Total Add lines 11a-11d</td>
<td></td>
<td></td>
<td>144,159</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

| 12 Total revenue. See Instructions                              |               |                  |                                       |                               |                                                             |

**Note:** Form 990 (2011) Page 9
## Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D). Check if Schedule O contains a response to any question in this Part IX.

### Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.

<table>
<thead>
<tr>
<th></th>
<th>(A) Total expenses</th>
<th>(B) Program service expenses</th>
<th>(C) Management and general expenses</th>
<th>(D) Fundraising expenses</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Grants and other assistance to governments and organizations in the United States. See Part IV, line 21</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Grants and other assistance to individuals in the United States. See Part IV, line 22</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Benefits paid to or for members</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Compensation of current officers, directors, trustees, and key employees</td>
<td>287,132</td>
<td>117,023</td>
<td>131,102</td>
</tr>
<tr>
<td>6</td>
<td>Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Other salaries and wages</td>
<td>1,018,188</td>
<td>630,064</td>
<td>349,568</td>
</tr>
<tr>
<td>8</td>
<td>Pension plan contributions (include section 401(k) and section 403(b) employer contributions)</td>
<td>19,115</td>
<td>13,803</td>
<td>4,416</td>
</tr>
<tr>
<td>9</td>
<td>Other employee benefits</td>
<td>132,870</td>
<td>82,600</td>
<td>45,168</td>
</tr>
<tr>
<td>10</td>
<td>Payroll taxes</td>
<td>98,483</td>
<td>55,252</td>
<td>37,708</td>
</tr>
<tr>
<td>11</td>
<td>Fees for services (non-employees)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Management</td>
<td>262,922</td>
<td>169,497</td>
<td>93,425</td>
</tr>
<tr>
<td></td>
<td>Legal</td>
<td>14,357</td>
<td></td>
<td>14,357</td>
</tr>
<tr>
<td></td>
<td>Accounting</td>
<td>24,998</td>
<td></td>
<td>24,998</td>
</tr>
<tr>
<td></td>
<td>Lobbying</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Professional fundraising. See Part IV, line 17</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Investment management fees</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Other</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12</td>
<td>Advertising and promotion</td>
<td></td>
<td>5,161</td>
<td>742</td>
</tr>
<tr>
<td>13</td>
<td>Office expenses</td>
<td>174,114</td>
<td>83,958</td>
<td>89,153</td>
</tr>
<tr>
<td>14</td>
<td>Information technology</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>15</td>
<td>Royalties</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>16</td>
<td>Occupancy</td>
<td>35,705</td>
<td>8,851</td>
<td>26,854</td>
</tr>
<tr>
<td>17</td>
<td>Travel</td>
<td>81,930</td>
<td>55,731</td>
<td>15,759</td>
</tr>
<tr>
<td>18</td>
<td>Payments of travel or entertainment expenses for any federal, state, or local public officials</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Conferences, conventions, and meetings</td>
<td>49,254</td>
<td>30,213</td>
<td>16,771</td>
</tr>
<tr>
<td>20</td>
<td>Interest</td>
<td>3,954</td>
<td></td>
<td>3,954</td>
</tr>
<tr>
<td>21</td>
<td>Payments to affiliates</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>22</td>
<td>Depreciation, depletion, and amortization</td>
<td>9,494</td>
<td></td>
<td>9,494</td>
</tr>
<tr>
<td>23</td>
<td>Insurance</td>
<td>3,841</td>
<td>310</td>
<td>3,531</td>
</tr>
<tr>
<td>24</td>
<td>Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24f. If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O.)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>UBI Tax</td>
<td>8,925</td>
<td></td>
<td>8,925</td>
</tr>
<tr>
<td></td>
<td>Dues and subscriptions</td>
<td>8,170</td>
<td>6,459</td>
<td>1,662</td>
</tr>
<tr>
<td></td>
<td>Miscellaneous</td>
<td>7,424</td>
<td>587</td>
<td>6,837</td>
</tr>
<tr>
<td></td>
<td>Taxes</td>
<td>2,046</td>
<td></td>
<td>2,046</td>
</tr>
<tr>
<td></td>
<td>All other expenses</td>
<td>514,042</td>
<td></td>
<td>-565,166</td>
</tr>
<tr>
<td>25</td>
<td><strong>Total functional expenses. Add lines 1 through 24f</strong></td>
<td>2,248,083</td>
<td>1,769,132</td>
<td>324,681</td>
</tr>
<tr>
<td>26</td>
<td><strong>Joint costs.</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
## Part X  Balance Sheet

<table>
<thead>
<tr>
<th></th>
<th>(A) Beginning of year</th>
<th>(B) End of year</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Cash—non-interest-bearing</td>
<td>68,561</td>
</tr>
<tr>
<td>2</td>
<td>Savings and temporary cash investments</td>
<td>25,045</td>
</tr>
<tr>
<td>3</td>
<td>Pledges and grants receivable, net</td>
<td>28,529</td>
</tr>
<tr>
<td>4</td>
<td>Accounts receivable, net</td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Schedule L</td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Schedule L</td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Notes and loans receivable, net</td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>Inventories for sale or use</td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Prepaid expenses and deferred charges</td>
<td>9</td>
</tr>
<tr>
<td>10a</td>
<td>Land, buildings, and equipment cost or other basis</td>
<td>122,794</td>
</tr>
<tr>
<td></td>
<td>Complete Part VI of Schedule D</td>
<td></td>
</tr>
<tr>
<td>10b</td>
<td>Less accumulated depreciation</td>
<td>17,757</td>
</tr>
<tr>
<td>10c</td>
<td></td>
<td>105,037</td>
</tr>
<tr>
<td>11</td>
<td>Investments—publicly traded securities</td>
<td></td>
</tr>
<tr>
<td>12</td>
<td>Investments—other securities</td>
<td></td>
</tr>
<tr>
<td></td>
<td>See Part IV, line 11</td>
<td></td>
</tr>
<tr>
<td>13</td>
<td>Investments—program-related</td>
<td></td>
</tr>
<tr>
<td>14</td>
<td>Intangible assets</td>
<td></td>
</tr>
<tr>
<td>15</td>
<td>Other assets</td>
<td></td>
</tr>
<tr>
<td></td>
<td>See Part IV, line 11</td>
<td></td>
</tr>
<tr>
<td>16</td>
<td>Total assets</td>
<td>215,666</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th>(A) Beginning of year</th>
<th>(B) End of year</th>
</tr>
</thead>
<tbody>
<tr>
<td>17</td>
<td>Accounts payable and accrued expenses</td>
<td></td>
</tr>
<tr>
<td>18</td>
<td>Grants payable</td>
<td></td>
</tr>
<tr>
<td>19</td>
<td>Deferred revenue</td>
<td></td>
</tr>
<tr>
<td>20</td>
<td>Tax-exempt bond liabilities</td>
<td></td>
</tr>
<tr>
<td>21</td>
<td>Escrow or custodial account liability</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Complete Part IV of Schedule D</td>
<td></td>
</tr>
<tr>
<td>22</td>
<td>Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Complete Part II of Schedule L</td>
<td></td>
</tr>
<tr>
<td>23</td>
<td>Secured mortgages and notes payable to unrelated third parties</td>
<td></td>
</tr>
<tr>
<td>24</td>
<td>Unsecured notes and loans payable to unrelated third parties</td>
<td></td>
</tr>
<tr>
<td>25</td>
<td>Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Complete Part X of Schedule D</td>
<td>613,338</td>
</tr>
<tr>
<td>26</td>
<td>Total liabilities</td>
<td>1,231,967</td>
</tr>
</tbody>
</table>

### Organizations that follow SFAS 117, check here ▶ and complete lines 27 through 29, and lines 33 and 34.

<table>
<thead>
<tr>
<th></th>
<th>(A) Beginning of year</th>
<th>(B) End of year</th>
</tr>
</thead>
<tbody>
<tr>
<td>27</td>
<td>Unrestricted net assets</td>
<td>-1,142,521</td>
</tr>
<tr>
<td>28</td>
<td>Temporarily restricted net assets</td>
<td>126,220</td>
</tr>
<tr>
<td>29</td>
<td>Permanently restricted net assets</td>
<td></td>
</tr>
</tbody>
</table>

### Organizations that do not follow SFAS 117, check here ▶ and complete lines 30 through 34.

<table>
<thead>
<tr>
<th></th>
<th>(A) Beginning of year</th>
<th>(B) End of year</th>
</tr>
</thead>
<tbody>
<tr>
<td>30</td>
<td>Capital stock or trust principal, or current funds</td>
<td></td>
</tr>
<tr>
<td>31</td>
<td>Paid-in or capital surplus, or land, building or equipment fund</td>
<td></td>
</tr>
<tr>
<td>32</td>
<td>Retained earnings, endowment, accumulated income, or other funds</td>
<td></td>
</tr>
<tr>
<td>33</td>
<td>Total net assets or fund balances</td>
<td>-1,016,301</td>
</tr>
<tr>
<td>34</td>
<td>Total liabilities and net assets/fund balances</td>
<td>215,686</td>
</tr>
</tbody>
</table>
### Part XI  Reconciliation of Net Assets

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

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Total revenue (must equal Part VIII, column (A), line 12)</td>
</tr>
<tr>
<td>2</td>
<td>Total expenses (must equal Part IX, column (A), line 25)</td>
</tr>
<tr>
<td>3</td>
<td>Revenue less expenses Subtract line 2 from line 1</td>
</tr>
<tr>
<td>4</td>
<td>Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))</td>
</tr>
<tr>
<td>5</td>
<td>Other changes in net assets or fund balances (explain in Schedule O)</td>
</tr>
<tr>
<td>6</td>
<td>Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))</td>
</tr>
</tbody>
</table>

### Part XII  Financial Statements and Reporting

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

<table>
<thead>
<tr>
<th></th>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>2a</td>
<td>Were the organization's financial statements compiled or reviewed by an independent accountant?</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>2b</td>
<td>Were the organization's financial statements audited by an independent accountant?</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>2c</td>
<td>If &quot;Yes,&quot; to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>3a</td>
<td>As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>3b</td>
<td>If &quot;Yes,&quot; did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
## Part I: Reason for Public Charity Status

(All organizations must complete this part.) See instructions

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

2. A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)
3. A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
4. A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state

5. An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II)
6. A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
7. An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II)
8. A community trust described in section 170(b)(1)(A)(vii) (Complete Part II)
9. An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III)
10. An organization organized and operated exclusively to test for public safety See section 509(a)(4).
11. An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h

- a. Type I
- b. Type II
- c. Type III - Functionally integrated
- d. Type III - Other

By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)

If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box

Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

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

Provide the following information about the supported organization(s)

### Table

<table>
<thead>
<tr>
<th>Name of supported organization</th>
<th>EIN</th>
<th>Type of organization (described on lines 1 - 9 above or IRC section (see instructions))</th>
<th>Is the organization in (i) listed in your governing document?</th>
<th>Did you notify the organization in (i) of your support?</th>
<th>Is the organization in (i) organized in the U S?</th>
<th>Amount of support?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Part II  Support Schedule for Organizations Described in IRC 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

### Section A. Public Support

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2007</th>
<th>(b) 2008</th>
<th>(c) 2009</th>
<th>(d) 2010</th>
<th>(e) 2011</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Gifts, grants, contributions, and membership fees received (Do not include any &quot;unusual grants&quot;)</td>
<td>396,040</td>
<td>493,583</td>
<td>363,567</td>
<td>320,618</td>
<td>230,876</td>
<td>1,804,684</td>
</tr>
<tr>
<td>2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3 The value of services or facilities furnished by a governmental unit to the organization without charge</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4 <strong>Total. Add lines 1 through 3</strong></td>
<td>396,040</td>
<td>493,583</td>
<td>363,567</td>
<td>320,618</td>
<td>230,876</td>
<td>1,804,684</td>
</tr>
</tbody>
</table>

5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) | | | | | | 211,740 |

6 **Public Support. Subtract line 5 from line 4** | | | | | | 1,592,944 |

### Section B. Total Support

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2007</th>
<th>(b) 2008</th>
<th>(c) 2009</th>
<th>(d) 2010</th>
<th>(e) 2011</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>7 Amounts from line 4</td>
<td>396,040</td>
<td>493,583</td>
<td>363,567</td>
<td>320,618</td>
<td>230,876</td>
<td>1,804,684</td>
</tr>
<tr>
<td>8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources</td>
<td></td>
<td></td>
<td></td>
<td>5,228</td>
<td>48,103</td>
<td>55,970</td>
</tr>
<tr>
<td>9 Net income from unrelated business activities, whether or not the business is regularly carried on</td>
<td></td>
<td></td>
<td></td>
<td>42,469</td>
<td>34,728</td>
<td>77,197</td>
</tr>
<tr>
<td>10 Other income (Explain in Part IV.) Do not include gain or loss from the sale of capital assets</td>
<td>14,249</td>
<td>120,786</td>
<td>101,223</td>
<td>187,083</td>
<td>63,749</td>
<td>487,090</td>
</tr>
<tr>
<td>11 <strong>Total support (Add lines 7 through 10)</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>2,478,272</td>
</tr>
<tr>
<td>12 Gross receipts from related activities, etc (See instructions)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>12</td>
</tr>
<tr>
<td>13 <strong>First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Section C. Computation of Public Support Percentage

14 Public Support Percentage for 2011 (line 6 column (f) divided by line 11 column (f)) | 14 | 64.280% |

15 Public Support Percentage for 2010 Schedule A, Part II, line 14

16a **33 1/3% support test—2011.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization |

16b **33 1/3% support test—2010.** If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization |

17a **10%-facts-and-circumstances test—2011.** If the organization did not check a box on line 13, 16a, or 16b and line 14 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization |

17b **10%-facts-and-circumstances test—2010.** If the organization did not check a box on line 13, 16a, 16b, or 17a and line 15 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization |

18 **Private Foundation** If the organization did not check a box on line 13, 16a, 16b, 17a or 17b, check this box and see instructions
## Support Schedule for Organizations Described in IRC 509(a)(2)

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

### Section A. Public Support

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

### Section B. Total Support

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

### Section C. Computation of Public Support Percentage

15 Public Support Percentage for 2011 (line 8 column (f) divided by line 13 column (f))

16 Public support percentage from 2010 Schedule A, Part III, line 15

### Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2011 (line 10c column (f) divided by line 13 column (f))

18 Investment income percentage from 2010 Schedule A, Part III, line 17

19a 33 1/3% support tests—2011. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

19b 33 1/3% support tests—2010. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

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

---

Schedule A (Form 990 or 990-EZ) 2011
**Part IV**  **Supplemental Information.** Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Also complete this part for any additional information. (See instructions).

<table>
<thead>
<tr>
<th>Facts And Circumstances Test</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Explanation</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td></td>
</tr>
</tbody>
</table>

Schedule A (Form 990 or 990-EZ) 2011
# Additional Data

**Software ID:**  
**Software Version:**  
**EIN:** 76-0815736  
**Name:** Practice Greenhealth

## Form 990, Special Condition Description:

### Special Condition Description

**Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)**

<table>
<thead>
<tr>
<th>Code</th>
<th>Expenses ($)</th>
<th>Revenue ($)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Environmentally Preferable Purchasing</td>
<td>155,367</td>
<td>including grants of $</td>
</tr>
<tr>
<td>H-CAP</td>
<td>106,970</td>
<td>including grants of $</td>
</tr>
<tr>
<td>Energy and Built Environment</td>
<td>16,526</td>
<td>including grants of $</td>
</tr>
<tr>
<td>Health Hospitals Initiative</td>
<td>798</td>
<td>including grants of $</td>
</tr>
</tbody>
</table>
Supplemental Financial Statements

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

<table>
<thead>
<tr>
<th></th>
<th>(a) Donor advised funds</th>
<th>(b) Funds and other accounts</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Total number at end of year</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Aggregate contributions to (during year)</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Aggregate grants from (during year)</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Aggregate value at end of year</td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?</td>
<td>Yes</td>
</tr>
<tr>
<td>6</td>
<td>Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?</td>
<td>Yes</td>
</tr>
</tbody>
</table>

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

1. Purpose(s) of conservation easements held by the organization (check all that apply)
   - Preservation of land for public use (e.g., recreation or pleasure)
   - Preservation of an historically important land area
   - Protection of natural habitat
   - Preservation of a certified historic structure
   - Preservation of open space

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

<table>
<thead>
<tr>
<th></th>
<th>Held at the End of the Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>2a</td>
<td></td>
</tr>
<tr>
<td>2b</td>
<td></td>
</tr>
<tr>
<td>2c</td>
<td></td>
</tr>
<tr>
<td>2d</td>
<td></td>
</tr>
</tbody>
</table>

3. Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year:

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, handling of violations, and enforcement of the conservation easements it holds? Yes | No

6. Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year:

7. Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year:
   - $  

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

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

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

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

1b. If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenues included in Form 990, Part VIII, line 1
   - $  

(ii) Assets included in Form 990, Part X
   - $  

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

a. Revenues included in Form 990, Part VIII, line 1
   - $  

b. Assets included in Form 990, Part X
   - $  

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990
Part III  Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization’s accession and other records, check any of the following that are a significant use of its collection items (check all that apply)
   a  □  Public exhibition
   b  □  Scholarly research
   c  □  Preservation for future generations
   d  □  Loan or exchange programs
   e  □  Other

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

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

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

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

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


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

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

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

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

1a Beginning of year balance

   b Contributions

   c Investment earnings or losses

   d Grants or scholarships

   e Other expenditures for facilities and programs

   f Administrative expenses

   g End of year balance

2 Provide the estimated percentage of the year end balance held as

   a Board designated or quasi-endowment

   b Permanent endowment

   c Term endowment

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

   i unrelated organizations

   ii related organizations

   □ Yes □ No

   b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

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

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

<table>
<thead>
<tr>
<th>Description of property</th>
<th>(a) Cost or other basis (investment)</th>
<th>(b) Cost or other basis (other)</th>
<th>(c) Accumulated depreciation</th>
<th>(d) Book value</th>
</tr>
</thead>
<tbody>
<tr>
<td>1a Land</td>
<td></td>
<td></td>
<td>14,092</td>
<td>105,037</td>
</tr>
<tr>
<td>b Buildings</td>
<td></td>
<td></td>
<td>14,092</td>
<td>105,037</td>
</tr>
<tr>
<td>c Leasehold improvements</td>
<td></td>
<td></td>
<td>108,702</td>
<td>3,665</td>
</tr>
<tr>
<td>d Equipment</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e Other</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Add lines 1a–1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).)
**Schedule D (Form 990) 2011**

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

<table>
<thead>
<tr>
<th>(a) Description of security or category (including name of security)</th>
<th>(b) Book value</th>
<th>(c) Method of valuation Cost or end-of-year market value</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) Financial derivatives</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2) Closely-held equity interests</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Total. (Column (b) should equal Form 990, Part X, col (B) line 12.)**

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

<table>
<thead>
<tr>
<th>(a) Description of investment type</th>
<th>(b) Book value</th>
<th>(c) Method of valuation Cost or end-of-year market value</th>
</tr>
</thead>
</table>

**Total. (Column (b) should equal Form 990, Part X, col (B) line 13.)**

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

<table>
<thead>
<tr>
<th>(a) Description</th>
<th>(b) Book value</th>
</tr>
</thead>
</table>

**Total. (Column (b) should equal Form 990, Part X, col (B) line 15.)**

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

1. **Description of Liability**
   - Federal Income Taxes
     - Due to affiliate
       - Amount: $38,551

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

- $38,551

2. **Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740).**
### Part XI  Reconciliation of Change in Net Assets from Form 990 to Financial Statements

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Total revenue (Form 990, Part VIII, column (A), line 12)</td>
</tr>
<tr>
<td>2</td>
<td>Total expenses (Form 990, Part IX, column (A), line 25)</td>
</tr>
<tr>
<td>3</td>
<td>Excess or (deficit) for the year Subtract line 2 from line 1</td>
</tr>
<tr>
<td>4</td>
<td>Net unrealized gains (losses) on investments</td>
</tr>
<tr>
<td>5</td>
<td>Donated services and use of facilities</td>
</tr>
<tr>
<td>6</td>
<td>Investment expenses</td>
</tr>
<tr>
<td>7</td>
<td>Prior period adjustments</td>
</tr>
<tr>
<td>8</td>
<td>Other (Describe in Part XIV)</td>
</tr>
<tr>
<td>9</td>
<td>Total adjustments (net) Add lines 4 - 8</td>
</tr>
<tr>
<td>10</td>
<td>Excess or (deficit) for the year per financial statements Combine lines 3 and 9</td>
</tr>
</tbody>
</table>

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

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Total revenue, gains, and other support per audited financial statements</td>
</tr>
<tr>
<td>2</td>
<td>Amounts included on line 1 but not on Form 990, Part VIII, line 12</td>
</tr>
<tr>
<td>a</td>
<td>Net unrealized gains on investments</td>
</tr>
<tr>
<td>b</td>
<td>Donated services and use of facilities</td>
</tr>
<tr>
<td>c</td>
<td>Recoveries of prior year grants</td>
</tr>
<tr>
<td>d</td>
<td>Other (Describe in Part XIV)</td>
</tr>
<tr>
<td>e</td>
<td>Add lines 2a through 2d</td>
</tr>
<tr>
<td>3</td>
<td>Subtract line 2e from line 1</td>
</tr>
<tr>
<td>4</td>
<td>Amounts included on Form 990, Part VIII, line 12, but not on line 1</td>
</tr>
<tr>
<td>a</td>
<td>Investment expenses not included on Form 990, Part VIII, line 7b</td>
</tr>
<tr>
<td>b</td>
<td>Other (Describe in Part XIV)</td>
</tr>
<tr>
<td>c</td>
<td>Add lines 4a and 4b</td>
</tr>
<tr>
<td>5</td>
<td>Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)</td>
</tr>
</tbody>
</table>

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

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Total expenses and losses per audited financial statements</td>
</tr>
<tr>
<td>2</td>
<td>Amounts included on line 1 but not on Form 990, Part IX, line 25</td>
</tr>
<tr>
<td>a</td>
<td>Donated services and use of facilities</td>
</tr>
<tr>
<td>b</td>
<td>Prior year adjustments</td>
</tr>
<tr>
<td>c</td>
<td>Other losses</td>
</tr>
<tr>
<td>d</td>
<td>Other (Describe in Part XIV)</td>
</tr>
<tr>
<td>e</td>
<td>Add lines 2a through 2d</td>
</tr>
<tr>
<td>3</td>
<td>Subtract line 2e from line 1</td>
</tr>
<tr>
<td>4</td>
<td>Amounts included on Form 990, Part IX, line 25, but not on line 1:</td>
</tr>
<tr>
<td>a</td>
<td>Investment expenses not included on Form 990, Part VIII, line 7b</td>
</tr>
<tr>
<td>b</td>
<td>Other (Describe in Part XIV)</td>
</tr>
<tr>
<td>c</td>
<td>Add lines 4a and 4b</td>
</tr>
<tr>
<td>5</td>
<td>Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)</td>
</tr>
</tbody>
</table>

### Part XIV  Supplemental Information

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

<table>
<thead>
<tr>
<th>Identifier</th>
<th>Return Reference</th>
<th>Explanation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Description of Uncertain Tax Positions Under FIN 48</td>
<td>Part X</td>
<td>Practice Greenhealth performed an evaluation of uncertain tax positions for the year ended December 31, 2011 and determined that there were no matters that would require recognition in the consolidated financial statements</td>
</tr>
</tbody>
</table>
# Compensation Information

## Part I Questions Regarding Compensation

### 1a
Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a: Complete Part III to provide any relevant information regarding these items.

- [ ] First-class or charter travel
- [ ] Housing allowance or residence for personal use
- [ ] Travel for companions
- [ ] Payments for business use of personal residence
- [ ] Tax indemnification and gross-up payments
- [ ] Health or social club dues or initiation fees
- [ ] Discretionary spending account
- [ ] Personal services (e.g., maid, chauffeur, chef)

### 1b
If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement of all the expenses described above? If "No," complete Part III to explain.

### 2
Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?

### 3
Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply.

- [ ] Compensation committee
- [ ] Independent compensation consultant
- [ ] Form 990 of other organizations
- [ ] Written employment contract
- [ ] Compensation survey or study
- [ ] Approval by the board or compensation committee

### 4
During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization.

#### a
Receive a severance payment or change-of-control payment?

#### b
Participate in, or receive payment from, a supplemental nonqualified retirement plan?

#### c
Participate in, or receive payment from, an equity-based compensation arrangement?

If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

### Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.

### 5
For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

#### a
The organization?

#### b
Any related organization?

If "Yes," to line 5a or 5b, describe in Part III.

### 6
For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

#### a
The organization?

#### b
Any related organization?

If "Yes," to line 6a or 6b, describe in Part III.

### 7
For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III.

### 8
Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III.

### 9
If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?
**Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees.** Use Schedule J-1 if additional space needed.

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

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

<table>
<thead>
<tr>
<th>(A) Name</th>
<th>(B) Breakdown of W-2 and/or 1099-MISC compensation</th>
<th>(C) Retirement and other deferred compensation</th>
<th>(D) Nontaxable benefits</th>
<th>(E) Total of columns (B)(i)-(D)</th>
<th>(F) Compensation reported in prior Form 990 or Form 990-EZ</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) Robert Jarboe</td>
<td>(i) 115,000</td>
<td>(iii) 28,137</td>
<td>4,296</td>
<td>16,909</td>
<td>164,342</td>
</tr>
<tr>
<td></td>
<td>(ii) 0</td>
<td></td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>(2) Stan Cahill</td>
<td>(i) 24,000</td>
<td>(iii) 115,085</td>
<td>4,173</td>
<td>16,440</td>
<td>159,698</td>
</tr>
<tr>
<td></td>
<td>(ii) 0</td>
<td></td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>
### Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8. Also, complete this part for any additional information.

<table>
<thead>
<tr>
<th>Identifier</th>
<th>Return Reference</th>
<th>Explanation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Part I, Lines 4a-c</td>
<td>Mary Lisi, Director of Operations &amp; Marketing received $7,500 in severance pay. The following individuals listed in Form 990, Part 7 received commissions as part of an equity-based compensation arrangement: Robert Jarboe ($28,137), Stan Cahill ($115,085), and Lara Sutherland ($33,165).</td>
<td></td>
</tr>
</tbody>
</table>
Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

<table>
<thead>
<tr>
<th>Identifier</th>
<th>Return Reference</th>
<th>Explanation</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Form 990, Part VI, Section A, line 6</td>
<td>Practice Greenhealth has one class of voting members. There shall be only one voting member of Practice Greenhealth and that member shall be the DC nonprofit organization, Health Care Without Harm</td>
</tr>
<tr>
<td>Identifier</td>
<td>Return Reference</td>
<td>Explanation</td>
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</tr>
<tr>
<td>Form 990, Part VI, Section A, line 7a</td>
<td>PGH shall have one class of voting members. There shall be only one voting member of Practice Greenhealth and that member shall be the D C nonprofit organization, Health Care Without Harm. The voting member shall have the right to elect and remove the members of the Board of Directors of Practice Greenhealth, to approve any dissolution, merger, consolidation, or transfer of substantially all assets, to amend the Articles of Incorporation and the Bylaws, and to exercise such other rights as are provided in the Bylaws or reserved to voting members under the Act.</td>
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<td>Identifier</td>
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<td>Explanation</td>
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<tr>
<td>Form 990, Part VI, Section A, line 7b</td>
<td>PGH shall have one class of voting members. There shall be only one voting member of Practice Greenhealth and that member shall be the D.C. nonprofit organization, Health Care Without Harm. The voting member shall have the right to elect and remove the members of the Board of Directors of Practice Greenhealth, to approve any dissolution, merger, consolidation, or transfer of substantially all assets, to amend the Articles of Incorporation and the Bylaws, and to exercise such other rights as are provided in the Bylaws or reserved to voting members under the Act.</td>
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<tr>
<td>Identifier</td>
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<td>Explanation</td>
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<tr>
<td>Form 990, Part VI, Section B, line 11</td>
<td>PGH's federal Form 990 is reviewed by the Controller, the Director of Finance and Administration and the Executive Director. Such review takes place upon receipt of the draft Form 990 received from the independent public accounting firm who conducts the financial statement audit of PGH. The review involves comparison of financial data in the federal Form 990 with the audited financial statements and the books and records of PGH and review of all narrative information for accuracy and completeness. Additionally, the Treasurer of the Board of Directors reviews a copy of the return for accuracy. Prior to filing the federal Form 990 with the Internal Revenue Service, a complete copy is provided to all voting members of PGH's Board of Directors.</td>
<td></td>
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<tr>
<td>Identifier</td>
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<td>Explanation</td>
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<td>Form 990, Part VI, Section B, line 12c</td>
<td>The Board of Directors' Conflict of Interest Policy provides the following procedures for addressing potential conflicts of interest that may require board or committee action: 1) The Interested Person must disclose all facts material of the conflict of interest and such disclosure must be reflected in the minutes of the meeting where such matter is being reviewed, 2) The Interested Person is prohibited from participating in discussions except to disclose material facts and respond to questions, 3) Such person shall not attempt to exert his or her personal influence with respect to the matter either at or outside of the meeting, 4) Such person may not be present to hear the board or committee discussions on the matter, 5) Such Interested Person is precluded from voting on the matter and such person's presence may not be counted in determining the presence of a quorum for purposes of the vote at the meeting, 6) Such person may not be present during the vote unless the vote is by secret ballot, and 7) Such person's ineligibility to vote should be reflected in the minutes. Additionally, the Employee Code of Conduct applies to all employees, and all employees receive a copy of the Code of Conduct and return an acknowledgement to the HR Department that they understand and will comply with the Code of Conduct. Section 21 of the Personnel Policies sets forth the conflict of interest rules applicable to all employees. It is PGH's intent to avoid impropriety in all of our decisions and actions. PGH employees are prohibited from participating in activities that conflict with PGH's activities or interests. It is impossible to describe all of the situations that might cause or give rise to a conflict of interest. However, in general employees should not engage in any activity where there is the potential for their professional, financial, or other personal interests to be opposed to the interests of PGH or where their outside and personal interests might adversely influence their actions and judgments on behalf of PGH or interfere with their ability to act in the best interests of PGH. In addition, employees may not use their positions at PGH for personal benefit, for the benefit of friends or relatives, or to further any outside interests or personal agenda. If a conflict or potential conflict arises, employees under the policy may consult with the Executive Director, their supervisor or Human Resources. If the Executive Director considers a possible conflict of interest, they are required to report this to the President.</td>
</tr>
<tr>
<td>Identifier</td>
<td>Reference</td>
<td>Explanation</td>
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<td>The Directors of PGH shall serve as such without salary, but the Board of Directors may authorize payment by PGH of the reasonable expenses incurred by the Directors in the performance of their duties. The Directors may also authorize payment for services rendered in a capacity other than as a Director, with prior Board of Directors approval. All board member compensation will be approved by the PGH’s Board of Directors. A Board of Directors committee, which shall consist solely of disinterested individuals who do not directly or indirectly receive more than an insignificant amount of compensation from PGH, will be established to set and manage appropriate compensation levels for the President and Executive Director. This committee will also review on an annual basis the levels of reimbursement for Board of Directors travel and other expenses and any other payments to Directors for services. As part of its due diligence, the compensation committee shall rely on appropriate comparative data, including salary data from surveys, compensation levels for similar positions in both exempt and taxable organizations, and regional economic data. The Compensation Committee shall also document the bases upon which it relies for its compensation determinations.</td>
</tr>
<tr>
<td>Identifier</td>
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<td>Explanation</td>
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<tr>
<td>Form 990, Part VI, Section C, line 19</td>
<td>Governing documents, including the conflict of interest policy, the federal Form 990, and financial statements are available upon request</td>
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<tr>
<td>Identifier</td>
<td>Return Reference</td>
<td>Explanation</td>
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<tr>
<td></td>
<td>Form 990, Part VII, Column B. Gary Cohen, President, who worked an average of 18 hours per week for PGH also worked an average of 22 hours per week for Health Care Without Harm</td>
<td></td>
</tr>
</tbody>
</table>
**Part I**  Identification of Disregarded Entities  
(Complete if the organization answered "Yes" on Form 990, Part IV, line 33.)

<table>
<thead>
<tr>
<th>(a) Name, address, and EIN of disregarded entity</th>
<th>(b) Primary activity</th>
<th>(c) Legal domicile (state or foreign country)</th>
<th>(d) Total income</th>
<th>(e) End-of-year assets</th>
<th>(f) Direct controlling entity</th>
</tr>
</thead>
<tbody>
<tr>
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</tbody>
</table>

**Part II**  Identification of Related Tax-Exempt Organizations  
(Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

<table>
<thead>
<tr>
<th>(a) Name, address, and EIN of related organization</th>
<th>(b) Primary activity</th>
<th>(c) Legal domicile (state or foreign country)</th>
<th>(d) Exempt Code section</th>
<th>(e) Public charity status (if section 501(c)(3))</th>
<th>(f) Direct controlling entity</th>
<th>(g) Section 512(b)(13) controlled organization</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health Care Without Harm</td>
<td></td>
<td></td>
<td></td>
<td>Line 7</td>
<td>N/A</td>
<td>Yes</td>
</tr>
<tr>
<td>12355 Sunrise Valley Drive 680</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>N/A</td>
<td>No</td>
</tr>
<tr>
<td>Reston, VA 20191</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>N/A</td>
<td>No</td>
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<td>52-2358837</td>
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<td>N/A</td>
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<td>N/A</td>
<td>No</td>
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</tbody>
</table>
### Part III Identification of Related Organizations Taxable as a Partnership

(Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.)

<table>
<thead>
<tr>
<th>(a) Name, address, and EIN of related organization</th>
<th>(b) Primary activity</th>
<th>(c) Legal domicile (state or foreign country)</th>
<th>(d) Direct controlling entity</th>
<th>(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)</th>
<th>(f) Share of total income</th>
<th>(g) Share of end-of-year assets</th>
<th>(h) Disproportionate allocations?</th>
<th>(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)</th>
<th>(j) General or managing partner?</th>
<th>(k) Percentage ownership</th>
</tr>
</thead>
<tbody>
<tr>
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<td></td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
</tr>
</tbody>
</table>

### Part IV Identification of Related Organizations Taxable as a Corporation or Trust

(Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

<table>
<thead>
<tr>
<th>(a) Name, address, and EIN of related organization</th>
<th>(b) Primary activity</th>
<th>(c) Legal domicile (state or foreign country)</th>
<th>(d) Direct controlling entity</th>
<th>(e) Type of entity (C corp, S corp, or trust)</th>
<th>(f) Share of total income</th>
<th>(g) Share of end-of-year assets</th>
<th>(h) Percentage ownership</th>
</tr>
</thead>
<tbody>
<tr>
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</tbody>
</table>
### Transactions With Related Organizations

(Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35, 35A, or 36.)

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

1. During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

   - a. Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity
   - b. Gift, grant, or capital contribution to related organization(s)
   - c. Gift, grant, or capital contribution from related organization(s)
   - d. Loans or loan guarantees to or for related organization(s)
   - e. Loans or loan guarantees by related organization(s)
   - f. Sale of assets to related organization(s)
   - g. Purchase of assets from related organization(s)
   - h. Exchange of assets with related organization(s)
   - i. Lease of facilities, equipment, or other assets to related organization(s)
   - j. Lease of facilities, equipment, or other assets from related organization(s)
   - k. Performance of services or membership or fundraising solicitations for related organization(s)
   - l. Performance of services or membership or fundraising solicitations by related organization(s)
   - m. Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)
   - n. Sharing of paid employees with related organization(s)
   - o. Reimbursement paid to related organization(s) for expenses
   - p. Reimbursement paid by related organization(s) for expenses
   - q. Other transfer of cash or property to related organization(s)
   - r. Other transfer of cash or property from related organization(s)

2. If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

<table>
<thead>
<tr>
<th>(a) Name of other organization</th>
<th>(b) Transaction type(a-r)</th>
<th>(c) Amount involved</th>
<th>(d) Method of determining amount involved</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
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<td>(6)</td>
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</tbody>
</table>
### Part VI Unrelated Organizations Taxable as a Partnership

(Complete if the organization answered "Yes" on Form 990, Part IV, Line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

<table>
<thead>
<tr>
<th>(a) Name, address, and EIN of entity</th>
<th>(b) Primary activity</th>
<th>(c) Legal domicile (state or foreign country)</th>
<th>(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)</th>
<th>(e) Are all partners section 501(c)(3) organizations?</th>
<th>(f) Share of total income</th>
<th>(g) Share of end-of-year assets</th>
<th>(h) Disproportionate allocations?</th>
<th>(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)</th>
<th>(j) General or managing partner?</th>
<th>(k) Percentage ownership</th>
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<tbody>
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</tbody>
</table>
### Part VII  Supplemental Information

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

<table>
<thead>
<tr>
<th>Identifier</th>
<th>Return Reference</th>
<th>Explanation</th>
</tr>
</thead>
</table>

Schedule R (Form 990) 2011