


Form 990



Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

OMB No 1545-0047

2012

Open to Public Inspection

A For the 2012 calendar year, or tax year beginning 01-01-2012 , 2012, and ending 12-31-2012

☐ Check if applicable

☐ Address change

☐ Name change

☐ Initial return

☐ Terminated

☐ Amended return

☐ Application pending

C Name of organization
THE NATIONAL QUALITY FORUM

Doing Business As

Number and street (or P O box if mail is not delivered to street address)
1030 15TH STREET NW
Suite 800

Room/suite

City or town, state or country, and ZIP + 4
WASHINGTON, DC 20005

F Name and address of principal officer
CHRISTINE K CASSEL MD
1030 15th st nw suite 800
washington, DC 20005

H(a) Is this a group return for affiliates?

☐ Yes☒ No

H(b) Are all affiliates included?

☐ Yes☐ No

If "No," attach a list (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status

☒ 501(c)(3)☐ 501(c) () ◀(Insert no)☐ 4947(a)(1) or☐ 527

J Website: ▶ WWW.QUALITYFORUM.ORG

K Form of organization

☒ Corporation☐ Trust☐ Association☐ Other ▶

L Year of formation 1999

M State of legal domicile DC

Part I

Summary

Activities & Governance

1

Briefly describe the organization's mission or most significant activities
THE NATIONAL QUALITY FORUM ADVANCES EFFORTS TO IMPROVE HEALTHCARE QUALITY THROUGH PERFORMANCE MEASUREMENT AND PUBLIC REPORTING

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	30
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	29
5	Total number of individuals employed in calendar year 2012 (Part V, line 2a)	5	137
6	Total number of volunteers (estimate if necessary)	6	1,069
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
7b	Net unrelated business taxable income from Form 990-T, line 34	7b	0

Revenue

	Prior Year	Current Year
8	Contributions and grants (Part VIII, line 1h)	25,138,72225,940,132
9	Program service revenue (Part VIII, line 2g)	412,975257,823
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	102,36886,401
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	11,8279,457
12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	25,665,89226,293,813

Expenses

13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	00
14	Benefits paid to or for members (Part IX, column (A), line 4)	00
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	13,700,08214,488,699
16a	Professional fundraising fees (Part IX, column (A), line 11e)	00
b	Total fundraising expenses (Part IX, column (D), line 25) ▶ ⁰	
17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	10,627,2279,084,128
18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	24,327,30923,572,827
19	Revenue less expenses Subtract line 18 from line 12	1,338,5832,720,986

Net Assets or Fund Balances

	Beginning of Current Year	End of Year
20	Total assets (Part X, line 16)	18,458,75221,343,594
21	Total liabilities (Part X, line 26)	9,027,6689,049,058
22	Net assets or fund balances Subtract line 21 from line 20	9,431,08412,294,536

Part II

Signature Block

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

Sign Here

Signature of officer

JEFFREY TOMITZ CFO

Type or print name and title

2013-11-15

Date

Paid Preparer Use Only

Pnnt/Type preparer's name
jeffrey schragg

Firm's name ▶ BDO USA LLP

Firm's address ▶ 8405 GREENSBORO DRIVE 7TH FLOOR
MCLEAN, VA 22102

Preparer's signature

Date

Check ☐ if self-employed

PTIN

Firm's EIN ▶

Phone no (703) 893-0600

May the IRS discuss this return with the preparer shown above? (see instructions)

☒ Yes☐ No

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No 11282Y

Form 990 (2012)

Part III

Statement of Program Service Accomplishments

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

☐ Yes ☒ No

1

Briefly describe the organization's mission

SEE SCHEDULE O

2

Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

☐ Yes ☒ No

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

3

Did the organization cease conducting, or make significant changes in how it conducts, any program services?

☐ Yes ☒ No

If "Yes," describe these changes on Schedule O

4

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations 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 \$ 6,945,191 including grants of \$) (Revenue \$ 0)

SEE SCHEDULE O

4b

(Code) (Expenses \$ 5,682,582 including grants of \$) (Revenue \$ 0)

SEE SCHEDULE O

4c

(Code) (Expenses \$ 3,245,934 including grants of \$) (Revenue \$ 0)

SEE SCHEDULE O

4d



















Other program services (Describe in Schedule O)

(Expenses \$ 2,679,215 including grants of \$) (Revenue \$ 257,823)

4e

Total program service expenses 18,552,922

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A 	1 Yes	
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 	2 Yes	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I 	3	No
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II 	4 Yes	
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III 	5	No
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I 	6	No
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 	7	No
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 	8	No
9 Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 	9	No
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 	10	No
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI 	11a Yes	
b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 	11b	No
c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 	11c	No
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX 	11d	No
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 	11e Yes	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 	11f Yes	
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII 	12a Yes	
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 	12b	No
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	No
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a	No
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	No
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15	No
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16	No
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	No
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	No
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19	No
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	No
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	

Part IV

Checklist of Required Schedules (continued)

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

Part V

Statements Regarding Other IRS Filings and Tax Compliance

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

☐

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.	15	
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	0	
1c			
2a		137	
2b		Yes	
3a			No
3b			
4a			No
b			
5a			No
5b			No
5c			
6a			No
6b			
7 Organizations that may receive deductible contributions under section 170(c).			
7a			No
7b			
7c			No
7d			
7e			No
7f			No
7g			
7h			
8			
9 Sponsoring organizations maintaining donor advised funds.			
9a			
9b			
10 Section 501(c)(7) organizations. Enter			
10a			
10b			
11 Section 501(c)(12) organizations. Enter			
11a			
11b			
12a			
12b			
13 Section 501(c)(29) qualified nonprofit health insurance issuers.			
13a			
13b			
13c			
14a			No
14b			

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

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	30	
If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
1b	Enter the number of voting members included in line 1a, above, who are independent	29	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3	No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5	No
6	Did the organization have members or stockholders?	6	Yes
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes
7b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	Yes
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
8a	The governing body?	8a	Yes
8b	Each committee with authority to act on behalf of the governing body?	8b	Yes
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	No

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

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

Section C. Disclosure

17	List the States with which a copy of this Form 990 is required to be filed
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. <input type="checkbox"/> Own website <input type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request <input type="checkbox"/> Other (explain in Schedule O)
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization JEFFREY TOMITZ1030 15TH ST NW SUITE 800 WASHINGTON, DC (202) 783-1300

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

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

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

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

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

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

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

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

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

[illegible]

Part VII

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
1b Sub-Total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								4,340,337	0	306,500

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 **42**

		Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3	No
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? <i>If "Yes," complete Schedule J for such individual</i>	4	Yes
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>	5	No

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.

(A) Name and business address	(B) Description of services	(C) Compensation
TELLIGEN , 1776 WEST LAKES PARKWAY WEST DES MOINES IA 50266	software development	1,297,638
PANTHEON SOFTWARE , 2020 N 14TH STREET SUITE 700 ARLINGTON VA 22201	software development	1,294,043
COMM PARTNERS , 7230 LEE DEFOREST DRIVE SUITE 206 COLUMBIA MD 21046	LONG DIS & WEB COMM	275,341
NEAL R GROSS CO INC , 1323 RHODE ISLAND AVE NW WASHINGTON DC 200053701	TRANSCRIPTION SVC	233,360
THE HYATT REGENCY WASHINGTON , 400 NEW JERSEY AVENUE NW WASHINGTON DC 20001	LODGING, MEETING SVC	156,011

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 5

Part VIII

Statement of Revenue

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

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns . . .	1a				
	b	Membership dues	1b	4,553,344			
	c	Fundraising events	1c				
	d	Related organizations	1d				
	e	Government grants (contributions)	1e	19,911,038			
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	1,475,750			
	g	Noncash contributions included in lines 1a-1f \$					
	h	Total. Add lines 1a-1f		25,940,132			
Program Service Revenue	2a	CONFERENCES	Business Code 900099	257,823	257,823		
	b						
	c						
	d						
	e						
	f	All other program service revenue					
	g	Total. Add lines 2a-2f		257,823			
	Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		98,590		
4		Income from investment of tax-exempt bond proceeds		0			
5		Royalties		0			
6a		Gross rents	(i) Real (ii) Personal				
b		Less rental expenses					
c		Rental income or (loss)	0 0				
d		Net rental income or (loss)		0			
7a		Gross amount from sales of assets other than inventory	(i) Securities (ii) Other 141,574 1,000				
b		Less cost or other basis and sales expenses	153,193 1,570				
c		Gain or (loss)	-11,619 -570				
d		Net gain or (loss)		-12,189			-12,189
8a		Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18	a				
b		Less direct expenses	b				
c		Net income or (loss) from fundraising events		0			
9a		Gross income from gaming activities See Part IV, line 19	a				
b		Less direct expenses	b				
c		Net income or (loss) from gaming activities		0			
10a		Gross sales of inventory, less returns and allowances	a				
b		Less cost of goods sold	b				
c		Net income or (loss) from sales of inventory		0			
Miscellaneous Revenue		Business Code					
11a		HONORARIUM	900099	3,500	3,500		
b	PUBLICATION SALES	900099	2,554	2,554			
c	ROOM RENTAL	900099	3,403	3,403			
d	All other revenue						
e	Total. Add lines 11a-11d		9,457				
12	Total revenue. See Instructions		26,293,813	267,280		86,401	

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).

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21.	0			
2	Grants and other assistance to individuals in the United States. See Part IV, line 22.	0			
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16.	0			
4	Benefits paid to or for members.	0			
5	Compensation of current officers, directors, trustees, and key employees.	3,289,446	2,007,575	1,281,871	0
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B).	0			
7	Other salaries and wages.	9,317,956	7,737,586	1,580,370	0
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions).	220,592	195,063	25,529	0
9	Other employee benefits.	1,040,887	805,988	234,899	0
10	Payroll taxes.	619,818	510,048	109,770	0
11	Fees for services (non-employees):				
a	Management.	0			
b	Legal.	84,495	0	84,495	0
c	Accounting.	63,539	0	63,539	0
d	Lobbying.	180,000	180,000	0	0
e	Professional fundraising services. See Part IV, line 17.	0			
f	Investment management fees.	12,989		12,989	0
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O).	1,940,701	1,874,128	66,573	0
12	Advertising and promotion.	8,361	7,236	1,125	0
13	Office expenses.	519,915	519,915	0	0
14	Information technology.	698,718	219,741	478,977	0
15	Royalties.	0			
16	Occupancy.	1,599,786	1,284,395	315,391	0
17	Travel.	120,772	84,150	36,622	0
18	Payments of travel or entertainment expenses for any federal, state, or local public officials.	0			
19	Conferences, conventions, and meetings.	1,637,580	1,520,918	116,662	0
20	Interest.	539	0	539	0
21	Payments to affiliates.	0			
22	Depreciation, depletion, and amortization.	1,854,309	1,488,739	365,570	0
23	Insurance.	66,773	53,609	13,164	0
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O):				
a	EMPLOYEE RECRUITMENT	197,847	0	197,847	0
b	PROD & PRINTING OF REPORTS	47,501	47,501	0	0
c	PUBLICATIONS AND DUES	26,533	14,334	12,199	0
d	MISCELLANEOUS	23,770	1,996	21,774	0
e	All other expenses				
25	Total functional expenses. Add lines 1 through 24e.	23,572,827	18,552,922	5,019,905	0
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720).				

Part X

Balance Sheet

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

☐

				(A)		(B)
				Beginning of year		End of year
Assets	1	Cash—non-interest-bearing		400	1	400
	2	Savings and temporary cash investments		4,201,956	2	9,314,471
	3	Pledges and grants receivable, net		0	3	0
	4	Accounts receivable, net		5,395,226	4	4,180,367
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		0	5	0
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L		0	6	0
	7	Notes and loans receivable, net		0	7	0
	8	Inventories for sale or use		0	8	0
	9	Prepaid expenses and deferred charges		895,321	9	356,618
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a9,009,329			
	b	Less accumulated depreciation	10b4,035,258	5,653,861	10c	4,974,071
	11	Investments—publicly traded securities		2,021,254	11	2,219,185
	12	Investments—other securities See Part IV, line 11		263,057	12	293,371
	13	Investments—program-related See Part IV, line 11		0	13	0
	14	Intangible assets		0	14	0
	15	Other assets See Part IV, line 11		27,677	15	5,111
	16	Total assets. Add lines 1 through 15 (must equal line 34)		18,458,752	16	21,343,594
Liabilities	17	Accounts payable and accrued expenses		2,145,783	17	1,376,367
	18	Grants payable		0	18	0
	19	Deferred revenue		6,642,347	19	7,524,785
	20	Tax-exempt bond liabilities		0	20	0
	21	Escrow or custodial account liability Complete Part IV of Schedule D		0	21	0
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		0	22	0
	23	Secured mortgages and notes payable to unrelated third parties		0	23	0
	24	Unsecured notes and loans payable to unrelated third parties		0	24	0
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D		239,538	25	147,906
	26	Total liabilities. Add lines 17 through 25		9,027,668	26	9,049,058
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.					
	27	Unrestricted net assets		9,431,084	27	12,244,536
	28	Temporarily restricted net assets		0	28	50,000
	29	Permanently restricted net assets		0	29	0
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.					
	30	Capital stock or trust principal, or current funds			30	
	31	Paid-in or capital surplus, or land, building or equipment fund			31	
	32	Retained earnings, endowment, accumulated income, or other funds			32	
	33	Total net assets or fund balances		9,431,084	33	12,294,536
	34	Total liabilities and net assets/fund balances		18,458,752	34	21,343,594

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	26,293,813
2	Total expenses (must equal Part IX, column (A), line 25)	2	23,572,827
3	Revenue less expenses Subtract line 2 from line 1	3	2,720,986
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	9,431,084
5	Net unrealized gains (losses) on investments	5	142,466
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	12,294,536

Part XII Financial Statements and Reporting

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

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

Additional Data

Software ID:

Software Version:

EIN: 52-2175544

Name: THE NATIONAL QUALITY FORUM

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Janet M Corrigan President/CEO	40 0	X		X				259,307	0	26,043
Gerald M Shea Treasurer, Interim CEO	2 0	X		X				84,585	0	535
William L Roper Chair	2 0	X		X				0	0	0
Andrew Webber Vice-Chair	2 0	X		X				0	0	0
Helen Darling Vice-Chair	2 0	X		X				0	0	0
Lawrence M Becker Board Member	2 0	X						0	0	0
JudyAnn Bigby Board Member	2 0	X						0	0	0
Carolyn M Clancy Board Member	2 0	X						0	0	0
Jack Cochran Board Member	2 0	X						0	0	0
Patrick Conway Board Member	2 0	X						0	0	0
Maureen Corry Board Member	2 0	X						0	0	0
Leonardo Cuello Board Member	2 0	X						0	0	0
Joyce Dubow Board Member	2 0	X						0	0	0
Thomas Frieden Board Member	2 0	X						0	0	0
Robert Galvin Board Member	2 0	X						0	0	0
Ardis Hoven Board Member	2 0	X						0	0	0
Karen Ignagni Board Member	2 0	X						0	0	0
Chris Jennings Board Member	2 0	X						0	0	0
Charles N Kahn III Board Member	2 0	X						0	0	0
Donald Kemper Board Member	2 0	X						0	0	0
William Kramer Board Member	2 0	X						0	0	0
Mark B McClellan Board Member	2 0	X						0	0	0
Sheri S McCoy Board Member	2 0	X						0	0	0
Harold D Miller Board Member	2 0	X						0	0	0
Delores Mitchell Board Member	2 0	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Elizabeth Mitchell Board Member	2 0	X						0	0	0
Mary Naylor Board Member	2 0	X						0	0	0
Debra L Ness Board Member	2 0	X						0	0	0
Samuel R Nussbaum Board Member	2 0	X						0	0	0
J Marc Overhage Board Member	2 0	X						0	0	0
Bernard M Rosof Board Member	2 0	X						0	0	0
John C Rother Board Member	2 0	X						0	0	0
Bruce Siegel Board Member	2 0	X						0	0	0
Joseph R Swedish Board Member	2 0	X						0	0	0
John Tooker Board Member	2 0	X						0	0	0
Richard J Umbdenstock Board Member	2 0	X						0	0	0
Andrew Weber Board Member	2 0	X						0	0	0
Mary Wakefield Board Member	2 0	X						0	0	0
Laura Miller Chief Operating Officer	40 0			X				329,826	0	21,389
Jeffrey Tomitz CFO	40 0			X				247,863	0	10,209
Ann Hammersmith Gnrl Counsel & Corp Secr	40 0			X				236,735	0	19,316
Thomas Valuck Sr Vp Strategic Partnerships	40 0				X			392,106	0	19,394
Helen Burstn Sr VP Peformance Measures	40 0				X			381,520	0	30,990
Lndsey Spindle Sr VP Com & External Affairs	40 0				X			313,369	0	14,920
Floyd P Eisenberg Sr VP Health Information Tech	40 0				X			379,480	0	22,754
Nicole Silverman VP Federal Program Mgmt	40 0				X			240,271	0	22,677
Kyle Vickers Chief Information Officer	40 0				X			227,358	0	14,570
Lisa Hines VP Member Relations	40 0				X			149,759	0	21,310
Rosemary Kennedy VP Health Info Tech	40 0					X		233,979	0	11,015
Heidi Bossley VP Performance Measures	40 0					X		227,829	0	14,786

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Karen Adams VP National Priorities	40 0					X		217,506	0	20,806
Constance Hwang VP Measures App Ptps	40 0					X		204,123	0	20,658
Diane Stollenwerk VP Stakeholder Collab	40 0					X		214,721	0	15,128

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No 1545-0047

2012

Open to Public
Inspection

Name of the organization THE NATIONAL QUALITY FORUM	Employer identification number 52-2175544
--	--

Part I

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

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

- 1

☐

A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2

☐

A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E)
- 3

☐

A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4

☐

A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state _____
- 5

☐

An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)
- 6

☐

A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7

☒

An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II)
- 8

☐

A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)
- 9

☐

An organization that normally receives (1) more than 33¹/₃% 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 33¹/₃% 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 - Non-functionally integrated
- e

☐

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

☐

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

☐

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

(i)

A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?

(ii)

A family member of a person described in (i) above?

(iii)

A 35% controlled entity of a person described in (i) or (ii) above?

h

☐

Provide the following information about the supported organization(s)

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

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

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

Cat No 11285F

Schedule A (Form 990 or 990-EZ) 2012

Part II

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

Section A. Public Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	11,716,718	14,127,738	20,962,589	25,138,722	25,940,132	97,885,899
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
3 The value of services or facilities furnished by a governmental unit to the organization without charge						0
4 Total. Add lines 1 through 3	11,716,718	14,127,738	20,962,589	25,138,722	25,940,132	97,885,899
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)						7,825,401
6 Public support. Subtract line 5 from line 4						90,060,498

Section B. Total Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7 Amounts from line 4	11,716,718	14,127,738	20,962,589	25,138,722	25,940,132	97,885,899
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	174,027	31,430	16,453	133,817	98,590	454,317
9 Net income from unrelated business activities, whether or not the business is regularly carried on						0
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	3,605	55,059	27,569	11,827	9,457	107,517
11 Total support (Add lines 7 through 10)						98,447,733
12 Gross receipts from related activities, etc (see instructions)					12	1,926,935
13 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 ▶						

Section C. Computation of Public Support Percentage		
14 Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f))	14	91 480 %
15 Public support percentage for 2011 Schedule A, Part II, line 14	15	89 543 %
16a 33 1/3% support test—2012. 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 ▶		
b 33 1/3% support test—2011. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶		
17a 10%-facts-and-circumstances test—2012. 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 ▶		
b 10%-facts-and-circumstances test—2011. 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 ▶		

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

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

Section A. Public Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6.)						

Section B. Total Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here ▶						

Section C. Computation of Public Support Percentage			
15 Public support percentage for 2012 (line 8, column (f) divided by line 13, column (f))	15		
16 Public support percentage from 2011 Schedule A, Part III, line 15	16		

Section D. Computation of Investment Income Percentage			
17 Investment income percentage for 2012 (line 10c, column (f) divided by line 13, column (f))	17		
18 Investment income percentage from 2011 Schedule A, Part III, line 17	18		
19a 33 1/3% support tests—2012. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶			
b 33 1/3% support tests—2011. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶			
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶			

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

Facts And Circumstances Test

Explanation

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

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

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

OMB No 1545-0047

2012

Open to Public Inspection

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

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

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

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

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

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

Name of the organization THE NATIONAL QUALITY FORUM	Employer identification number 52-2175544
--	--

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

1	Provide a description of the organization’s direct and indirect political campaign activities in Part IV	
2	Political expenditures	▶ \$
3	Volunteer hours	

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

1	Enter the amount of any excise tax incurred by the organization under section 4955	▶ \$
2	Enter the amount of any excise tax incurred by organization managers under section 4955	▶ \$
3	If the organization incurred a section 4955 tax, did it file Form 4720 for this year?	<input type="checkbox"/> Yes <input type="checkbox"/> No
4a	Was a correction made?	<input type="checkbox"/> Yes <input type="checkbox"/> No
b	If “Yes,” describe in Part IV	

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

1	Enter the amount directly expended by the filing organization for section 527 exempt function activities	▶ \$
2	Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities	▶ \$
3	Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b	▶ \$
4	Did the filing organization file Form 1120-POL for this year?	<input type="checkbox"/> Yes <input type="checkbox"/> No
5	Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization’s funds Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV	

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

Part II-A

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

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

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)															
b Total lobbying expenditures to influence a legislative body (direct lobbying)		517,516													
c Total lobbying expenditures (add lines 1a and 1b)		517,516													
d Other exempt purpose expenditures		23,055,311													
e Total exempt purpose expenditures (add lines 1c and 1d)		23,572,827													
f Lobbying nontaxable amount Enter the amount from the following table in both columns		1,000,000													
<table><tr><td>If the amount on line 1e, column (a) or (b) is:</td><td>The lobbying nontaxable amount is:</td></tr><tr><td>Not over \$500,000</td><td>20% of the amount on line 1e</td></tr><tr><td>Over \$500,000 but not over \$1,000,000</td><td>\$100,000 plus 15% of the excess over \$500,000</td></tr><tr><td>Over \$1,000,000 but not over \$1,500,000</td><td>\$175,000 plus 10% of the excess over \$1,000,000</td></tr><tr><td>Over \$1,500,000 but not over \$17,000,000</td><td>\$225,000 plus 5% of the excess over \$1,500,000</td></tr><tr><td>Over \$17,000,000</td><td>\$1,000,000</td></tr></table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000	Over \$17,000,000	\$1,000,000		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000														
Over \$17,000,000	\$1,000,000														
g Grassroots nontaxable amount (enter 25% of line 1f)		250,000													
h Subtract line 1g from line 1a If zero or less, enter -0-															
i Subtract line 1f from line 1c If zero or less, enter -0-															
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		<input type="checkbox"/> Yes <input type="checkbox"/> No													

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

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) Total
2a Lobbying nontaxable amount	914,225	1,000,000	1,000,000	1,000,000	3,914,225
b Lobbying ceiling amount (150% of line 2a, column(e))					5,871,338
c Total lobbying expenditures	65,619	0	6,451	517,516	589,586
d Grassroots nontaxable amount	228,556	250,000	250,000	250,000	978,556
e Grassroots ceiling amount (150% of line 2d, column (e))					1,467,834
f Grassroots lobbying expenditures		0	0		0

Part II-B

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

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

Part III-A

Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

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

Part III-B

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

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

Part IV

Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, line 2, and Part II-B, line 1. Also, complete this part for any additional information.

Identifier	Return Reference	Explanation
------------	------------------	-------------

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization
THE NATIONAL QUALITY FORUM

Employer identification number
52-2175544

Part I

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

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

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

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

3

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

4

Number of states where property subject to conservation easement is located ▶_____

5

Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

☐ Yes☐ No

6

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

7

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

8

Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

☐ Yes☐ No

9

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

Part III

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

1a

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

b

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

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

▶\$ _____

(ii) Assets included in Form 990, Part X

▶\$ _____

2

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

a

Revenues included in Form 990, Part VIII, line 1

▶\$ _____

b

Assets included in Form 990, Part X

▶\$ _____

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

Cat No 52283D

Schedule D (Form 990) 2012

Part III

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

3

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

a

☐ Public exhibition

d

☐ Loan or exchange programs

b

☐ Scholarly research

e

☐ Other

c

☐ Preservation for future generations

4

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

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 XIII and complete the following table

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

	Amount
1c	
1d	
1e	
1f	

2a

Did the organization include an amount on Form 990, Part X, line 21?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

☐

Part V

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

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

2

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

a

Board designated or quasi-endowment

b

Permanent endowment

c

Temporarily restricted endowment

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

3a

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

(i) unrelated organizations

3a(i)

Yes

No

(ii) related organizations

3a(ii)

Yes

No

b

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

3b

Yes

No

4

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

Part VI

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		2,932,640	409,838	2,522,802
d Equipment		655,199	559,592	95,607
e Other		5,421,489	3,065,827	2,355,662
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				4,974,071

Schedule D (Form 990) 2012

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return				
1	Total revenue, gains, and other support per audited financial statements		1	26,436,279
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
a	Net unrealized gains on investments	2a 142,466		
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII)	2d		
e	Add lines 2a through 2d		2e	142,466
3	Subtract line 2e from line 1		3	26,293,813
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII)	4b		
c	Add lines 4a and 4b		4c	
5	Total revenue Add lines 3 and 4c . (This must equal Form 990, Part I, line 12)		5	26,293,813
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return				
1	Total expenses and losses per audited financial statements		1	23,572,827
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			
a	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII)	2d		
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	23,572,827
4	Amounts included on Form 990, Part IX, line 25, but not on line 1 :			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII)	4b		
c	Add lines 4a and 4b		4c	
5	Total expenses Add lines 3 and 4c . (This must equal Form 990, Part I, line 18)		5	23,572,827

Part XIII Supplemental Information

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

Identifier	Return Reference	Explanation
FIN 48 FOOTNOTE	FORM 990, SCHEDULE D, PART X, LINE 2	NQF applies a "more-likely than-not" threshold to positions taken or expected to be taken in a tax return. With few exceptions, NQF is no longer subject to income tax examinations by the U.S. federal, state or local tax authorities for years ended December 31, 2008 and prior. Management has evaluated NQF's tax positions and has concluded that NQF has taken no material uncertain tax positions that require adjustment to the financial statements to comply with the provisions of this guidance.

Schedule J
(Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

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

▶ Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization
THE NATIONAL QUALITY FORUM

Employer identification number
52-2175544

Part I	Questions Regarding Compensation		Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items			
	<div><input type="checkbox"/> First-class or charter travel</div> <div><input type="checkbox"/> Travel for companions</div> <div><input type="checkbox"/> Tax idemnification and gross-up payments</div> <div><input type="checkbox"/> Discretionary spending account</div>	<div><input type="checkbox"/> Housing allowance or residence for personal use</div> <div><input type="checkbox"/> Payments for business use of personal residence</div> <div><input type="checkbox"/> Health or social club dues or initiation fees</div> <div><input type="checkbox"/> Personal services (e g , maid, chauffeur, chef)</div>		
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III			
	<div><input checked="" type="checkbox"/> Compensation committee</div> <div><input checked="" type="checkbox"/> Independent compensation consultant</div> <div><input checked="" type="checkbox"/> Form 990 of other organizations</div>	<div><input checked="" type="checkbox"/> Written employment contract</div> <div><input checked="" type="checkbox"/> Compensation survey or study</div> <div><input checked="" type="checkbox"/> Approval by the board or compensation committee</div>		
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?	4a	Yes	
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		No
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		No
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of			
a	The organization?	5a		No
b	Any related organization?	5b		No
	If "Yes," to line 5a or 5b, describe in Part III			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of			
a	The organization?	6a		No
b	Any related organization?	6b		No
	If "Yes," to line 6a or 6b, describe in Part III			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7		No
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	8		No
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	9		

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

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

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

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

Part III **Supplemental Information**

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

Identifier	Return Reference	Explanation
QUESTIONS REGARDING COMPENSATION	FORM 990, SCHEDULE J, PART I, LINE 4A	DURING THE YEAR, FLOYD EISENBERG RECEIVED A SEVERANCE PAYMENT OF 88,025 BASED ON 16 WEEKS OF SALARY

Software ID:
Software Version:
EIN: 52-2175544
Name: THE NATIONAL QUALITY FORUM

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

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other compensation				
Janet M Corrigan	(i)	259,307	0	0	11,379	14,664	285,350	
	(ii)	0	0	0	0	0	0	
Laura Miller	(i)	329,826	0	0	14,799	6,590	351,215	
	(ii)	0	0	0	0	0	0	
Jeffrey Tomitz	(i)	229,863	18,000	0	8,000	2,209	258,072	
	(ii)	0	0	0	0	0	0	
Ann Hammersmith	(i)	219,235	17,500	0	10,260	9,056	256,051	
	(ii)	0	0	0	0	0	0	
Thomas Valuck	(i)	359,606	32,500	0	12,705	6,689	411,500	
	(ii)	0	0	0	0	0	0	
Helen Burstin	(i)	348,914	32,606	0	16,212	14,778	412,510	
	(ii)	0	0	0	0	0	0	
Lindsey Spindle	(i)	293,369	20,000	0	12,763	2,157	328,289	
	(ii)	0	0	0	0	0	0	
Floyd P Eisenberg	(i)	291,455	0	88,025	8,882	13,872	402,234	
	(ii)	0	0	0	0	0	0	
Nicole Silverman	(i)	222,271	18,000	0	9,476	13,201	262,948	
	(ii)	0	0	0	0	0	0	
Kyle Vickers	(i)	214,858	12,500	0	10,160	4,410	241,928	
	(ii)	0	0	0	0	0	0	
Lisa Hines	(i)	142,259	7,500	0	6,997	14,313	171,069	
	(ii)	0	0	0	0	0	0	
Rosemary Kennedy	(i)	218,979	15,000	0	0	11,015	244,994	
	(ii)	0	0	0	0	0	0	
Heidi Bossley	(i)	210,329	17,500	0	8,500	6,286	242,615	
	(ii)	0	0	0	0	0	0	
Karen Adams	(i)	205,006	12,500	0	8,540	12,266	238,312	
	(ii)	0	0	0	0	0	0	
Constance Hwang	(i)	204,123	0	0	10,825	9,833	224,781	
	(ii)	0	0	0	0	0	0	
Diane Stollenwerk	(i)	202,221	12,500	0	8,675	6,453	229,849	
	(ii)	0	0	0	0	0	0	

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization THE NATIONAL QUALITY FORUM	Employer identification number 52-2175544
--	--

Identifier	Return Reference	Explanation
ORGANIZATION'S MISSION AND PROGRAM SERVICE ACCOMPLISHMENTS	FORM 990, PART III, LINE 1, 4A & 4B & 4C	<p>LINE 1 THE NATIONAL QUALITY FORUM (NQF) IS A UNIQUE, MULTI-STAKEHOLDER ORGANIZATION INSTRUMENTAL IN ADVANCING EFFORTS TO IMPROVE HEALTHCARE QUALITY THROUGH PERFORMANCE MEASUREMENT AND PUBLIC REPORTING. NQF IS A NOT-FOR-PROFIT MEMBERSHIP ORGANIZATION WITH MORE THAN 400 MEMBERS REPRESENTING VIRTUALLY EVERY SECTOR OF THE HEALTHCARE SYSTEM. NQF OPERATES UNDER A THREE-PART MISSION TO IMPROVE THE QUALITY OF AMERICAN HEALTHCARE BY SETTING NATIONAL PRIORITIES AND GOALS FOR PERFORMANCE IMPROVEMENT, ENDORSING NATIONAL CONSENSUS STANDARDS FOR MEASURING AND PUBLICLY REPORTING ON PERFORMANCE, AND PROMOTING THE ATTAINMENT OF NATIONAL GOALS THROUGH EDUCATION AND OUTREACH PROGRAMS.</p> <p>LINE 4A STRATEGIC PARTNERSHIPS. NATIONAL PRIORITIES PARTNERSHIP (NPP) - THE NPP IS AN NQF-CONVENED COLLABORATION OF 52 PUBLIC- AND PRIVATE-SECTOR ORGANIZATIONS UNIQUELY QUALIFIED TO REPRESENT THE ARRAY OF STAKEHOLDERS NEEDED TO IMPROVE THE NATION'S HEALTHCARE SYSTEM. IN 2012, NPP FOCUSED ON HOW TO ADVANCE PATIENT SAFETY BY ALIGNING ITS WORK WITH HHS' "PARTNERSHIP FOR PATIENTS" EFFORT. NPP DEVELOPED ACTION PLANS TO FOCUS NATIONAL AND LOCAL ORGANIZATIONS IN DIVERSE SECTORS ON HOW TO ALIGN AROUND TWO GOALS: REDUCING PREVENTABLE READMISSIONS AND IMPROVING MATERNITY CARE BY REDUCING EARLY ELECTIVE DELIVERIES AND CESAREAN SECTION IN LOW-RISK WOMEN. NEARLY 700 INDIVIDUALS PARTICIPATED IN THESE ACTION-ORIENTED ACTIVITIES. NPP ALSO CREATED A WEB-BASED SYSTEM, THE ONLINE ACTION REGISTRY, TO TRACK AND SHARE THESE IMPROVEMENT ACTIVITIES AND TO ENABLE LEARNING ACROSS PARTICIPANTS. ALSO IN SUPPORT OF HHS' PARTNERSHIP FOR PATIENTS INITIATIVE, THE NPP DEVELOPED AND HOSTED THREE PATIENT-SAFETY ORIENTED WEBINARS IN 2012, AS WELL AS FOUR QUARTERLY IN-PERSON MEETINGS FOR A WIDE RANGE OF PARTNERSHIP FOR PATIENTS STAKEHOLDERS.</p> <p>MEASURE APPLICATIONS - CONVENED BY NQF IN THE SPRING OF 2011, THE MEASURE APPLICATIONS PARTNERSHIP (MAP) IS A PUBLIC-PRIVATE PARTNERSHIP MADE UP OF 60 ORGANIZATIONS REPRESENTING MAJOR STAKEHOLDER GROUPS, 9 FEDERAL AGENCIES, AND 40 SUBJECT-MATTER EXPERTS. IT WAS ESTABLISHED TO PROVIDE HHS WITH THOUGHTFUL, PRE-RULEMAKING INPUT ABOUT WHICH PERFORMANCE MEASURES TO USE IN PUBLIC REPORTING AND PAYMENT WITHIN AND ACROSS 17 FEDERAL PROGRAMS. SIMULTANEOUSLY, MAP IS INFORMING THE THINKING AND DECISIONS OF PRIVATE-SECTOR LEADERS WITH RESPECT TO THEIR MEASURE-SELECTION STRATEGIES. MAP ENABLES PUBLIC- AND PRIVATE-SECTOR LEADERS TO WORK TOGETHER ON CREATING A MEASUREMENT STRATEGY AND IMPLEMENTATION PLAN THAT IS CROSSCUTTING AND COORDINATED ACROSS SETTINGS OF CARE, FEDERAL, STATE, AND PRIVATE PROGRAMS, LEVELS OF MEASUREMENT ANALYSIS, PAYER TYPE, AND POINTS IN TIME. IN FEBRUARY 2012, MAP SUBMITTED ITS FIRST ANNUAL PRE-RULEMAKING REPORT, PROVIDING PUBLIC/PRIVATE ADVICE TO HHS ABOUT USE OF MEASURES IN 17 DIFFERENT FEDERAL PROGRAMS. THE REPORT RECOMMENDED THAT 40 PERCENT OF THE MEASURES THAT CMS PROPOSED AT THE END OF 2011 MOVE INTO FEDERAL PROGRAMS, EXPRESSED CLEAR PREFERENCE FOR BOTH USING NQF-ENDORSED MEASURES AND FOR DEVELOPING MORE ROBUST FEEDBACK LOOPS, CONSIDERED HOW TO FURTHER ALIGN MEASURES ACROSS PROGRAMS AND WITH THE PRIVATE SECTOR, AND LAID OUT GUIDING PRINCIPLES FOR A THREE- TO FIVE-YEAR MEASUREMENT STRATEGY. THE CENTERS FOR MEDICARE & MEDICAID SERVICES LARGELY HEEDED THIS INPUT, WITH CMS' 2012 FINAL RULES IMPLEMENTING MANY OF THE MEASURES RECOMMENDED BY THE MAP (ON A PROGRAM BASIS, THE AGREEMENT OF RECOMMENDATIONS TO ACTUAL USE RANGED FROM 40 TO 100 PERCENT). ALSO IN OCTOBER 2012, MAP RELEASED ITS FAMILIES OF MEASURES REPORT THAT DEFINES MEASURE FAMILIES IN FOUR KEY AREAS-SAFETY, CARE COORDINATION, CARDIOVASCULAR, AND DIABETES CARE-WITH THE GOALS OF PROMOTING MORE COHESION AND INTEGRATION OF CARE REGARDLESS OF SETTING, PROVIDER, LEVEL OF INTENSITY, OR TIMING, AS WELL AS REDUCING MEASUREMENT AND REPORTING BURDEN FOR HOSPITALS, PHYSICIANS, AND OTHER PROVIDERS.</p>

Identifier	Return Reference	Explanation
ORGANIZATION'S PROGRAM SERVICE ACCOMPLISHMENTS	FORM 990, PART III, LINE 4A CONTINUED & 4B	<p>LINE 4A CONTINUED ROBERT WOOD JOHNSON FOUNDATION (RWJF) GRANT - THE STRATEGIC PARTNERSHIPS TEAM RELEASED THE QUALITY POSITIONING SYSTEM (QPS) VERSION 1 0, IN OCTOBER 2012. ORIGINALLY LAUNCHED IN BETA FORM IN 2011, QPS IS THE MOST RELIABLE AND COMPREHENSIVE ONLINE SOURCE FOR FINDING ALL NQF-ENDORSED MEASURES. QPS VERSION 1 0 ALLOWED USERS TO SEARCH FOR MEASURES, ORGANIZE MEASURES BY CREATING CUSTOMIZED LISTS OF NQF-ENDORSED MEASURES IN PUBLIC OR PRIVATE 'PORTFOLIOS' TO FIT SPECIFIC INTERESTS OR NEEDS, COMPARE MEASURES OR PORTFOLIOS SIDE-BY-SIDE, AND PRIVATELY SHARE PORTFOLIOS OR MEASURES OF INTEREST WITH OTHERS. SINCE THE BETA LAUNCH IN 2011, THOUSANDS OF USERS HAVE TESTED AND USED THE INTERACTIVE FEATURES. ALSO UNDER THE RWJF GRANT, IN FEBRUARY 2012 NQF RELEASED THE ALIGNMENT TOOL, AN EXCEL SPREADSHEET THAT DISPLAYS THE NQF-ENDORSED MEASURES IN USE BY ONE OR MORE OF THE 16 ALIGNING FORCES FOR QUALITY (AF4Q) ALLIANCES. THE TOOL HAS HELPED COMMUNITIES ALIGN THEIR MEASUREMENT STRATEGIES IN MULTIPLE WAYS: TO WHAT OTHERS ARE DOING, TO THE NATIONAL QUALITY STRATEGY PRIORITIES, AND TO NATIONAL PROGRAMS THAT INVOLVE REPORTING REQUIREMENTS OR PAYMENT INCENTIVES. THE TOOL LINKS TO QPS, WHERE UP-TO-DATE DETAILED MEASURE INFORMATION CAN BE FOUND.</p> <p>LINE 4B PERFORMANCE MEASURES - THIS PROGRAMMATIC AREA REFERS TO THE TECHNICAL WORK OF EVALUATING PERFORMANCE MEASURES (PM) SUBMITTED FOR NQF-ENDORSEMENT CONSIDERATION. NQF COMPLETED 16 ENDORSEMENT PROJECTS DURING THE COURSE OF 2012, USING BOTH THE NATIONAL QUALITY STRATEGY (NQS) PRIORITIES THAT CROSS CONDITIONS AND LEADING HEALTH CONDITIONS WITH RESPECT TO PREVALENCE AND COST AS A WAY TO PRIORITIZE ITS EFFORTS. IN TOTAL, NQF COMMITTEES EVALUATED 430 SUBMITTED MEASURES AND ENDORSED 301. THESE ENDORSED MEASURES INCLUDE 81 NEW MEASURES AND 220 MEASURES THAT NQF EXPERT COMMITTEES CONCLUDED COULD MAINTAIN THEIR PREVIOUS ENDORSEMENT AFTER BEING REVIEWED AGAINST NQF'S CRITERIA AND COMPARED TO NEW EVIDENCE OR COMPETING MEASURES. OVERALL, MEASURES UNDERGOING MAINTENANCE WERE ENDORSED AT A RATE OF 55 PERCENT, AND NEW MEASURES SUBMITTED FOR ENDORSEMENT WERE ENDORSED AT A RATE OF 89 PERCENT. IN COMPARISON, NQF COMPLETED 11 PROJECTS AND ENDORSED 170 MEASURES IN 2011. THIS INCREASED PRODUCTIVITY CAN BE ATTRIBUTED TO EFFORTS TO MAKE THE REVIEW PROCESS MORE EFFICIENT-THE AVERAGE MEASURE REVIEW TIME DECREASED FROM 12 MONTHS TO 7 MONTHS DURING 2012-AS WELL AS TO OTHER ENHANCEMENTS TO THE ENDORSEMENT PROCESS. SPECIFICALLY, AS PART OF THE CONSENSUS DEVELOPMENT PROCESS PILOT PROGRAM, NQF PROVIDED EARLIER, MORE DETAILED FEEDBACK TO MEASURE DEVELOPERS ABOUT A FIRST-ORDER CRITERION (I.E., IMPORTANCE TO MEASURE) TO FURTHER THE GOAL THAT DEVELOPMENT DOLLARS ARE SPENT ON MEASURES THAT ARE VIEWED AS CONSEQUENTIAL BY THE FIELD. FURTHERMORE, WHEN A MEASURE IS RE-EVALUATED FOR CONTINUED ENDORSEMENT, NQF NOW REQUIRES COMMITTEES TO CONSIDER THE MEASURE'S USE AND WHETHER SUCH USE HAS RESULTED IN IMPROVEMENT OR HAS LED TO UNINTENDED CONSEQUENCES, ENSURING THAT COMMITTEE MEMBERS ARE INFORMED ABOUT THE MEASURE'S IMPACT. IN THE LAST YEAR, CLINICAL PROJECTS WITH A LARGE NUMBER OF PROCESS MEASURES HAD MARKEDLY LOWER ENDORSEMENT RATES FOR MAINTENANCE MEASURES (E.G., PERINATAL CARE, 44 PERCENT, PULMONARY, 44 PERCENT, AND RENAL DISEASE, 36 PERCENT). NEWER MEASUREMENT AREAS THAT ARE HIGHLY VALUED BY CLINICIANS AND PATIENTS HAD HIGHER ENDORSEMENT RATES, INCLUDING DISPARITIES MEASURES AT 75 PERCENT AND PALLIATIVE CARE AT 64 PERCENT. THE DISPARITIES MEASURES WERE PRIMARILY OUTCOME MEASURES, WHILE THE PALLIATIVE MEASURES WERE PRIMARILY PROCESS MEASURES. MEASURE HIGHLIGHTS FROM THE YEAR INCLUDE A FIRST-EVER SET OF RESOURCE USE MEASURES, HARMONIZED BEHAVIORAL HEALTH MEASURES, PATIENT-REPORTED EXPERIENCE MEASURES, READMISSIONS MEASURES THAT CAN HELP THE HEALTHCARE COMMUNITY BETTER UNDERSTAND AND APPROPRIATELY REDUCE READMISSION RATES, AND A MEASUREMENT FRAMEWORK FOR MULTIPLE CHRONIC CONDITIONS.</p>

Identifier	Return Reference	Explanation
ORGANIZATION'S PROGRAM SERVICE ACCOMPLISHMENTS	FORM 990, PART III, LINE 4B CONTINUED & 4C & 4D	<p>LINE 4B CONTINUED IN ADDITION TO THE MEASURES THAT WERE ENDORSED IN 2012, NQF ALSO REMOVED 103 MEASURES FROM ITS PORTFOLIO FOR A VARIETY OF REASONS. MEASURES NO LONGER MET ENDORSEMENT CRITERIA, MEASURES WERE HARMONIZED WITH OTHER SIMILAR, COMPETING MEASURES, OR MEASURE DEVELOPERS CHOSE TO RETIRE MEASURES THEY NO LONGER WISHED TO MAINTAIN. LINE 4C HEALTH INFORMATION TECHNOLOGY IN 2012, NQF LAUNCHED A SERIES OF ACTIVITIES DESIGNED TO PROMOTE SHARED UNDERSTANDING AMONG THOSE INVOLVED IN ADVANCING ELECTRONIC MEASUREMENT AND DATA INFRASTRUCTURE. SEVERAL OF NQF'S PROJECTS SOUGHT TO FACILITATE A UNIFIED UNDERSTANDING OF TERMS AND MEASUREMENT APPROACHES USED IN THE HEALTH IT FIELD, SO THAT MEASURE DEVELOPERS AND IMPLEMENTERS, HEALTH IT VENDORS, STANDARDS ORGANIZATIONS, AND OTHER USERS OF EMEASURES AND TOOLS WORK WITH A SIMILAR LEXICON. LINE 4C CONTINUED E-MEASURES - NQF CONVENED THE EMEASURE LEARNING COLLABORATIVE, A NEW ENVIRONMENT FOR PROMOTING BEST PRACTICES RELATED TO DEVELOPMENT AND IMPLEMENTATION OF MEASURES APPLIED TO ELECTRONIC DATA SOURCES. EMEASURES ARE AN INNOVATION IN ADVANCING QUALITY MEASUREMENT, BUT SIGNIFICANT BARRIERS HAMPER THEIR WIDER SCALE CREATION, ADOPTION, AND USE. THROUGH TWO IN-PERSON MEETINGS AND OTHER VIRTUAL CONVENINGS, NQF BROUGHT TOGETHER HUNDREDS OF STAKEHOLDERS INCLUDING GOVERNMENT REPRESENTATIVES, EHR VENDORS, MEASURE DEVELOPERS, CLINICIANS, AND HOSPITALS-CREATING A UNIQUE FORUM FOR THESE PARTIES TO WORK TOGETHER ON NEW EMEASUREMENT APPROACHES. QUALITY DATA MODEL (QDM) - DEVELOPED BY NQF, THE QUALITY DATA MODEL (QDM) IS AN "INFORMATION MODEL" THAT DEFINES CONCEPTS USED IN QUALITY MEASURES AND CLINICAL CARE IN A WAY THAT ALLOWS THE INFORMATION TO BE COLLECTED AUTOMATICALLY FROM DATA ALREADY STORED IN AN EHR. NQF RELEASED AN UPDATED VERSION OF THE QDM IN DECEMBER 2012, WHICH FOCUSED ON SIMPLIFYING AND STANDARDIZING QDM MEASURE LOGIC TO SUPPORT IMPLEMENTATION OF THE FEDERAL MEANINGFUL USE REGULATIONS. NQF ALSO REGULARLY RECEIVES ONGOING FEEDBACK AND INSIGHTS INTO BEST PRACTICES FROM A USER GROUP OF MEASURE DEVELOPERS, PHYSICIANS, HOSPITALS, AND EHR VENDORS WHO ARE CURRENTLY ACTIVELY INVOLVED IN EMEASURE USE. MEASURE AUTHORIZING TOOL (MAT) - THIS NON-PROPRIETARY, WEB-BASED TOOL MAKES IT EASIER AND MORE EFFICIENT FOR MEASURE DEVELOPERS TO SPECIFY, SUBMIT, AND MAINTAIN ELECTRONIC MEASURES, OR EMEASURES. AT THE END OF 2012, NQF TRANSITIONED THE DAY-TO-DAY OPERATION OF THE MAT TO HHS, GIVING HHS THE OPPORTUNITY TO BETTER POSITION THE MAT AND EMEASURES IN FEDERAL PROGRAMS USING EHR-BASED PERFORMANCE MEASUREMENT, AND TO SUPPORT THE MAT'S EVOLUTION. CRITICAL PATHS FOR CREATING DATA PLATFORMS PROJECT - COMPLETED IN 2012, THIS EFFORT HELPED ASSESS THE READINESS OF ELECTRONIC DATA TO SUPPORT INNOVATIVE MEASUREMENT CONCEPTS AND RECOMMENDED STEPS TO ADDRESS DATA AND INFRASTRUCTURE GAPS AND BARRIERS IN TWO HIGH-PRIORITY DOMAINS: CARE COORDINATION AND PATIENT SAFETY. THE CARE COORDINATION REPORT FOCUSED ON TRANSITIONS OF CARE AND COMMUNICATION OF THE PATIENT PLAN OF CARE. THE PATIENT SAFETY REPORT FOCUSED ON EFFECTIVE USE OF INFUSION DEVICES (E.G., GIVING MEDICATION THROUGH AN IV) IN ACUTE CARE SETTINGS. THE ABILITY TO CAPTURE DATA ACROSS SETTINGS IS FUNDAMENTAL TO GAUGING, FOR EXAMPLE, THE DEGREE OF CARE COORDINATION IN A HEALTHCARE SYSTEM. THE FINAL REPORTS FROM THESE PROJECTS DELINEATED SPECIFIC STEPS THAT THE GOVERNMENT AND PRIVATE SECTOR CAN TAKE TO ENABLE ELECTRONIC MEASUREMENT IN THESE AREAS. LINE 4D THE OTHER PROGRAM SERVICES INCLUDE CONFERENCES AND WORKSHOPS HELD BY NATIONAL QUALITY FORUM.</p>

Identifier	Return Reference	Explanation
MEMBERS OF ORGANIZATION AND MEMBERS VOTING RESPONSIBILITIES	FORM 990, PART VI, LINE 6 AND LINE 7A	LINE 6 THE NATIONAL QUALITY FORUM HAS OVER 400 MEMBER ORGANIZATIONS THEY REPRESENT ALL SECTORS IN THE HEALTHCARE QUALITY LANDSCAPE INCLUDING CONSUMERS, PUBLIC AND PRIVATE PURCHASERS, PHYSICIANS, NURSES, PHARMACISTS, AND OTHER HEALTHCARE PROFESSIONALS, HOSPITALS, NURSING HOMES, AND OTHER PROVIDER ORGANIZATIONS, ACCREDITING AND CERTIFYING BODIES, SUPPORTING INDUSTRIES, AND HEALTHCARE RESEARCH AND QUALITY IMPROVEMENT ORGANIZATIONS LINE 7A MEMBERS VOTE ON A SLATE OF CANDIDATES TO FILL BOARD OF DIRECTOR VACANCIES

Identifier	Return Reference	Explanation
DECISIONS OF GOVERNING BODY SUBJECT TO APPROVAL	FORM 990, PART VI, LINE 7B	THE BOARD RECOMMENDS A SLATE OF CANDIDATES TO FILL BOARD VACANCIES THIS RECOMMENDATION GOES TO THE GENERAL MEMBERSHIP FOR A VOTE. MEMBERSHIP MUST APPROVE CHANGES TO GOVERNING DOCUMENTS

Identifier	Return Reference	Explanation
FORM 990 REVIEW PROCESS	FORM 990, PART VI, LINE 11A & 11B	THE ORGANIZATION'S FORM 990 UNDERGOES A NUMBER OF INTERNAL AND EXTERNAL REVIEWS BEFORE IT IS FILED WITH THE IRS. THE RETURN IS PREPARED BY THE ORGANIZATION'S PUBLIC ACCOUNTING FIRM, BDO USA, AND IS THEN REVIEWED BY THE ORGANIZATION'S FINANCE AND AUDIT COMMITTEE, A COMMITTEE OF THE BOARD. A FINAL DRAFT OF THE FORM 990 IS THEN PROVIDED TO EACH MEMBER OF THE ORGANIZATION'S BOARD OF DIRECTORS AND TO OUTSIDE COUNSEL FOR REVIEW AND COMMENT, BEFORE IT IS FILED WITH THE IRS.

Identifier	Return Reference	Explanation
CONFLICTS OF INTEREST	FORM 990, PART VI, LINE 12C	ON AN ANNUAL BASIS, CONFLICT OF INTEREST FORMS ARE SENT TO BOARD MEMBERS AND STAFF TO COMPLETE. THE GENERAL COUNSEL REVIEWS CONFLICT OF INTEREST FORMS SUBMITTED BY BOARD MEMBERS AND BOARD MEMBERS ORALLY DISCLOSE ANY RELAVANT INFORMATION ANNUALLY IN A PUBLIC BOARD SESSION. EMPLOYEE CONFLICT OF INTEREST FORMS ARE SCREENED BY THE HUMAN RESOURCES DEPARTMENT AND ANY DISCLOSURES MADE BY EMPLOYEES ARE REFERRED TO THE GENERAL COUNSEL FOR FOLLOW-UP AND RESOLUTION.

Identifier	Return Reference	Explanation
DETERMINING COMPENSATION	FORM 990, PART VI, LINE 15A & 15B	THE COMPENSATION COMMITTEE, COMPRISED OF INDEPENDENT MEMBERS OF THE BOARD OF DIRECTORS, DETERMINES THE CEO'S COMPENSATION PACKAGE BY USING COMPARABLE DATA APPROVED BY THE ENTIRE BOARD. CONTEMPORANEOUS SUBSTANTIATION OF THE DELIBERATION AND DECISION IS ALSO MAINTAINED. THE CEO DETERMINES THE SALARIES OF OTHER OFFICERS AND KEY EMPLOYEE BASED ON OUTSIDE COMPARABILITY DATA AND THE RESULTS ARE DOCUMENTED IN PERSONNEL FILES.

Identifier	Return Reference	Explanation
AVAILABILITY OF OTHER DOCUMENTS	FORM 990, PART VI, LINE 19	THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST