

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)

OMB No. 1545-0047

2011

Open to Public  
Inspection

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

## A For the 2011 calendar year, or tax year beginning and ending

B Check if applicable:

- ☐ Address change  
☐ Name change  
☐ Initial return  
☐ Terminated  
☐ Amended return  
☐ Application pending

## C Name of organization

VIETNAM VETERANS MEMORIAL FUND, INC.

## Doing Business As

Number and street (or P.O. box if mail is not delivered to street address) Room/suite  
2600 VIRGINIA AVENUE, N.W. 104City or town, state or country, and ZIP + 4  
WASHINGTON, DC 20037

## F Name and address of principal officer: DANIEL REESE

2600 VIRGINIA AVENUE, N.W. SUITE 104, WASHIN

## D Employer identification number

52-1149668

## E Telephone number

202-393-0090

G Gross receipts \$ 16,324,917.

## H(a) Is this a group return

for affiliates? ☐ Yes ☒ NoH(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.VVMF.ORG

K Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation: 1979 M State of legal domicile: DC

## Part I Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities: TO PRESERVE THE LEGACY OF THE VIETNAM VETERANS MEMORIAL, TO PROMOTE NATIONAL HEALING, AND TO		
	2	Check this box <input type="checkbox"/> 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	7
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	7
	5	Total number of individuals employed in calendar year 2011 (Part V, line 2a)	5	26
	6	Total number of volunteers (estimate if necessary)	6	750
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
	b Net unrelated business taxable income from Form 990-T, line 34	7b	0.	
Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9	Program service revenue (Part VIII, line 2g)	10,037,188.	7,560,161.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	108,500.	119,000.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	529,513.	805,522.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	106,047.	53,881.
			10,781,248.	8,538,564.
	Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.
14		Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
15		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	1,374,684.	1,609,795.
16a		Professional fundraising fees (Part IX, column (A), line 11e)	273,396.	227,437.
		b Total fundraising expenses (Part IX, column (D), line 25) ▶ 1,988,171.		
17		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	5,067,950.	6,127,007.
18		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	6,716,030.	8,307,806.
Net Assets or Fund Balances	19	Revenue less expenses. Subtract line 18 from line 12	4,065,218.	230,758.
	20	Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21	Total liabilities (Part X, line 26)	30,721,100.	29,962,849.
	22	Net assets or fund balances. Subtract line 21 from line 20	1,942,948.	1,849,624.
		28,778,152.	28,113,225.	

## 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

Date

DANIEL REESE, CFO, COO

Type or print name and title

Paid

Print/Type preparer's name  
JOAN M. RENNER

Preparer's signature

Date

Check ☐ if self-employed

PTIN

P00456765

Preparer

Firm's name ▶ RENNER AND COMPANY, CPA, P.C.

Firm's EIN ▶ 54-1498950

Use Only

Firm's address ▶ 700 NORTH FAIRFAX ST, SUITE 400  
ALEXANDRIA, VA 22314

Phone no. 703-535-1200

May the IRS discuss this return with the preparer shown above? (see instructions) ☒ Yes ☐ No

132001 01-23-12

LHA For Paperwork Reduction Act Notice, see the separate instructions.

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SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

**Part III Statement of Program Service Accomplishments**

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

☒ X**1** Briefly describe the organization's mission:

TO PRESERVE THE LEGACY OF THE VIETNAM VETERANS MEMORIAL, TO PROMOTE NATIONAL HEALING, AND TO EDUCATE ON THE IMPACTS OF THE VIETNAM WAR ERA.

**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 and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.**4a** (Code: ) (Expenses \$ 2,300,186. including grants of \$ ) (Revenue \$ )

THE ORGANIZATION PRESERVES THE LEGACY OF THE MEMORIAL AND PROMOTES HEALING THROUGH PUBLIC OUTREACH, PROMOTING VISITATION OF THE MEMORIAL BY THE GENERAL PUBLIC. THE ORGANIZATION PROVIDES INFORMATION ABOUT THE HISTORY OF THE MEMORIAL AND RESPONDS TO QUESTIONS FROM POTENTIAL VISITORS. THE ORGANIZATION MAINTAINS A COMMEMORATIVE WEB SITE CALLED THE VIRTUAL WALL, THAT ALLOWS FAMILIES, FRIENDS AND VETERANS TO POST REMEMBRANCES TO THOSE WHOSE NAMES ARE INSCRIBED ON THE MEMORIAL, EXTENDING THE HEALING POWER AND EMOTIONAL IMPACT OF THE WALL TO MILLIONS OF PEOPLE THROUGH THE INTERNET. MORE THAN 100,000 MESSAGES HAVE BEEN POSTED ON THE VIRTUAL WALL. THE ORGANIZATION IS ALSO CONDUCTING A NATIONAL CALL FOR PHOTOS TO PRESERVE THE MEMORY OF THOSE WHOSE NAMES ARE INSCRIBED ON THE MEMORIAL. THE PHOTOS WILL BE

**4b** (Code: ) (Expenses \$ 1,656,256. including grants of \$ ) (Revenue \$ )

THE ORGANIZATION IS CONDUCTING A NATIONAL CAMPAIGN TO PROMOTE FUTURE VISITATION BY THE GENERAL PUBLIC OF THE EDUCATION CENTER TO BE BUILT ADJACENT TO THE VIETNAM VETERANS MEMORIAL ONCE CONSTRUCTION IS COMPLETE. THE PROJECT FOCUSES ON PROVIDING INFORMATION ABOUT THE IMPORTANT ROLE THE EDUCATION CENTER WILL PLAY IN PRESERVING THE LEGACY OF THOSE WHOSE NAMES ARE INSCRIBED ON THE WALL. DURING 2011 THE ORGANIZATION'S CAPITAL EXPENDITURES RELATED TO CONSTRUCTING THE EDUCATION CENTER TOTALED \$2,602,938.

**4c** (Code: ) (Expenses \$ 914,673. including grants of \$ ) (Revenue \$ )

THE ORGANIZATION PROMOTES HEALING FROM THE EFFECTS OF THE VIETNAM WAR THROUGH PROJECT RENEW, A HUMANITARIAN PROGRAM DESIGNED TO REDUCE THE THREAT OF LANDMINES AND UNEXPLODED ORDNANCE IN VIETNAM. THE PROJECT FOCUSES ON MINE AWARENESS EDUCATION, INCLUDING PUBLIC SERVICE ANNOUNCEMENTS, AND THE REMOVAL OF UNEXPLODED ORDNANCE IN QUANG TRI AND QUANG BINH PROVINCES, THE MOST HEAVILY BOMBED AND SHELLLED AREAS OF VIETNAM.

**4d** Other program services (Describe in Schedule O.)

(Expenses \$ 1,273,373. including grants of \$ ) (Revenue \$ 119,000.)

**4e** Total program service expenses 6,144,488.

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**Part IV Checklist of Required Schedules**

	Yes	No
<b>1</b> Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	<b>1</b> X	
<b>2</b> Is the organization required to complete Schedule B, Schedule of Contributors?	<b>2</b> X	
<b>3</b> Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>	<b>3</b>	X
<b>4</b> <b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	<b>4</b> X	
<b>5</b> 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? <i>If "Yes," complete Schedule C, Part III</i>	<b>5</b>	
<b>6</b> 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? <i>If "Yes," complete Schedule D, Part I</i>	<b>6</b>	X
<b>7</b> Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	<b>7</b>	X
<b>8</b> Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	<b>8</b>	X
<b>9</b> Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>	<b>9</b>	X
<b>10</b> Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	<b>10</b> X	
<b>11</b> 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.		
<b>a</b> Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	<b>11a</b> X	
<b>b</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? <i>If "Yes," complete Schedule D, Part VII</i>	<b>11b</b> X	
<b>c</b> 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? <i>If "Yes," complete Schedule D, Part VIII</i>	<b>11c</b>	X
<b>d</b> 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? <i>If "Yes," complete Schedule D, Part IX</i>	<b>11d</b> X	
<b>e</b> Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	<b>11e</b> X	
<b>f</b> 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)? <i>If "Yes," complete Schedule D, Part X</i>	<b>11f</b> X	
<b>12a</b> Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII</i>	<b>12a</b> X	
<b>b</b> Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional</i>	<b>12b</b>	X
<b>13</b> Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>	<b>13</b>	X
<b>14a</b> Did the organization maintain an office, employees, or agents outside of the United States?	<b>14a</b> X	
<b>b</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? <i>If "Yes," complete Schedule F, Parts I and IV</i>	<b>14b</b> X	
<b>15</b> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Parts II and IV</i>	<b>15</b> X	
<b>16</b> 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? <i>If "Yes," complete Schedule F, Parts III and IV</i>	<b>16</b>	X
<b>17</b> 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? <i>If "Yes," complete Schedule G, Part I</i>	<b>17</b> X	
<b>18</b> Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	<b>18</b> X	
<b>19</b> Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>	<b>19</b>	X
<b>20a</b> Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	<b>20a</b>	X
<b>b</b> If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	<b>20b</b>	

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

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

Note. All Form 990 filers are required to complete Schedule O

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**Part V** Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response to any question in this Part V ☐

		Yes	No
<b>1a</b> Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a 26		
<b>b</b> Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b 0		
<b>c</b> Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	X	
<b>2a</b> Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a 26		
<b>b</b> If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	X	
<b>3a</b> Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
<b>b</b> If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
<b>4a</b> At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	X	
<b>b</b> If "Yes," enter the name of the foreign country: <b>VIETNAM</b> See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
<b>5a</b> Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
<b>b</b> Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
<b>c</b> If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
<b>6a</b> Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a		X
<b>b</b> If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
<b>7 Organizations that may receive deductible contributions under section 170(c).</b>			
<b>a</b> Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X
<b>b</b> If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
<b>c</b> Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		X
<b>d</b> If "Yes," indicate the number of Forms 8282 filed during the year	7d		
<b>e</b> Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
<b>f</b> Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
<b>g</b> If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
<b>h</b> If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
<b>8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
<b>9 Sponsoring organizations maintaining donor advised funds.</b>			
<b>a</b> Did the organization make any taxable distributions under section 4966?	9a		
<b>b</b> Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
<b>10 Section 501(c)(7) organizations.</b> Enter:			
<b>a</b> Initiation fees and capital contributions included on Part VIII, line 12	10a		
<b>b</b> Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b		
<b>11 Section 501(c)(12) organizations.</b> Enter:			
<b>a</b> Gross income from members or shareholders	11a		
<b>b</b> Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b		
<b>12a Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?	12a		
<b>b</b> If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b		
<b>13 Section 501(c)(29) qualified nonprofit health insurance issuers.</b>			
<b>a</b> Is the organization licensed to issue qualified health plans in more than one state? <b>Note.</b> See the instructions for additional information the organization must report on Schedule O.	13a		
<b>b</b> Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b		
<b>c</b> Enter the amount of reserves on hand	13c		
<b>14a</b> Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
<b>b</b> If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

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

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

☒**Section A. Governing Body and Management**

	1a	1b	7	Yes	No
<b>1a</b> Enter the number of voting members of the governing body at the end of the tax year			7		
If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.					
<b>b</b> Enter the number of voting members included in line 1a, above, who are independent			7		
<b>2</b> 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		X
<b>3</b> 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		X
<b>4</b> Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?			4		X
<b>5</b> Did the organization become aware during the year of a significant diversion of the organization's assets?			5		X
<b>6</b> Did the organization have members or stockholders?			6		X
<b>7a</b> 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		X
<b>b</b> Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?			7b		X
<b>8</b> Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:					
<b>a</b> The governing body?			8a	X	
<b>b</b> Each committee with authority to act on behalf of the governing body?			8b	X	
<b>9</b> Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9		X

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

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

**Section C. Disclosure**

**17** List the states with which a copy of this Form 990 is required to be filed **SEE SCHEDULE O**

**18** Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.  
☒ Own website ☐ Another's website ☒ Upon request

**19** Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public 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: **THE ORGANIZATION - 202-393-0090**  
**2600 VIRGINIA AVE., NW, SUITE 104, WASHINGTON, DC 20037**

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

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

2011.03050 VIETNAM VETERANS MEMORIAL F 0403-001



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

(A) Name and title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(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			
<b>1b Sub-total</b>								440,800.	0.	77,145.
<b>c Total from continuation sheets to Part VII, Section A</b>								0.	0.	0.
<b>d Total (add lines 1b and 1c)</b>								440,800.	0.	77,145.

**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 **2**

- 3** Did the organization list any **former** officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual **3**
- 4** For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual **4**
- 5** Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person **5**

	Yes	No
<b>3</b>		X
<b>4</b>	X	
<b>5</b>		X

**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
ENNEAD ARCHITECTS 320 WEST 13TH STREET, NEW YORK, NY 10014	ARCHITECTURE FIRM	996,518.
RALPH APPLEBAUM ASSOCIATES 88 PINE STREET, NEW YORK, NY 10005	ARCHITECTURE AND DESIGN FIRM	936,913.
CREATIVE DIRECT RESPONSE 1682 VILLAGE GREEN, CROFTON, MD 21114	PROFESSIONAL FUNDRAISING	515,704.
TISHMAN CONSTRUCTION CORP OF DC 1150 18TH ST NW #475, WASHINGTON, DC 20036	GENERAL CONSTRUCTION CONTRACTOR	308,000.
RENNER AND COMPANY, CPA, PC, 700 N. FAIRFA STREET #400, ALEXANDRIA, VA 22314	CERTIFIED PUBLIC ACCOUNTANTS	203,560.

**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 **7**



**Part VIII** Statement of Revenue

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
<b>Contributions, Gifts, Grants and Other Similar Amounts</b>	<b>1 a</b> Federated campaigns .....	<b>1a</b>	69,501.				
	<b>b</b> Membership dues .....	<b>1b</b>					
	<b>c</b> Fundraising events .....	<b>1c</b>	179,431.				
	<b>d</b> Related organizations .....	<b>1d</b>					
	<b>e</b> Government grants (contributions) .....	<b>1e</b>	629,394.				
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above .....	<b>1f</b>	6,681,835.				
	<b>g</b> Noncash contributions included in lines 1a-1f: \$ .....		5,439.				
	<b>h Total.</b> Add lines 1a-1f .....		7,560,161.				
<b>Program Service Revenue</b>	<b>2 a</b> SITE FEES-TRAVELING WA .....	Business Code	900099	119,000.	119,000.		
	<b>b</b> .....						
	<b>c</b> .....						
	<b>d</b> .....						
	<b>e</b> .....						
	<b>f</b> All other program service revenue .....						
	<b>g Total.</b> Add lines 2a-2f .....		119,000.				
<b>Other Revenue</b>	<b>3</b> Investment income (including dividends, interest, and other similar amounts) .....			488,870.			488,870.
	<b>4</b> Income from investment of tax-exempt bond proceeds .....						
	<b>5</b> Royalties .....			2,311.			2,311.
	<b>6 a</b> Gross rents .....	(i) Real	(ii) Personal				
	<b>b</b> Less: rental expenses .....						
	<b>c</b> Rental income or (loss) .....						
	<b>d</b> Net rental income or (loss) .....						
	<b>7 a</b> Gross amount from sales of assets other than inventory .....	(i) Securities	(ii) Other				
	<b>b</b> Less: cost or other basis and sales expenses .....						
	<b>c</b> Gain or (loss) .....						
	<b>d</b> Net gain or (loss) .....			316,652.			316,652.
	<b>8 a</b> Gross income from fundraising events (not including \$ 179,431. of contributions reported on line 1c). See Part IV, line 18 .....						
	<b>b</b> Less: direct expenses .....			74,029.			
	<b>c</b> Net income or (loss) from fundraising events .....			74,029.			
	<b>9 a</b> Gross income from gaming activities. See Part IV, line 19 .....			0.			
	<b>b</b> Less: direct expenses .....						
	<b>c</b> Net income or (loss) from gaming activities .....						
<b>10 a</b> Gross sales of inventory, less returns and allowances .....							
<b>b</b> Less: cost of goods sold .....							
<b>c</b> Net income or (loss) from sales of inventory .....							
<b>Miscellaneous Revenue</b>			Business Code				
<b>11 a</b> LIST RENTAL .....		900099	51,570.			51,570.	
<b>b</b> .....							
<b>c</b> .....							
<b>d</b> All other revenue .....							
<b>e Total.</b> Add lines 11a-11d .....			51,570.				
<b>12 Total revenue.</b> See instructions. ....			8,538,564.	119,000.	0.	859,403.	

**Part IX Statement of Functional Expenses**

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(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				
2 Grants and other assistance to individuals in the United States. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16	343,567.	343,567.		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	517,946.	272,051.	215,180.	30,715.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	802,978.	484,782.	263,039.	55,157.
8 Pension plan accruals and contributions (include section 401(k) and section 403(b) employer contributions)	58,024.		58,024.	
9 Other employee benefits	149,010.		149,010.	
10 Payroll taxes	81,837.	52,195.	23,269.	6,373.
11 Fees for services (non-employees):				
a Management				
b Legal	30,019.	8,631.	21,388.	
c Accounting	241,929.	4,806.	237,123.	
d Lobbying	51,600.			51,600.
e Professional fundraising services. See Part IV, line 17	227,437.			227,437.
f Investment management fees	87,242.		87,242.	
g Other	467,746.	407,371.	40,745.	19,630.
12 Advertising and promotion	248,473.	217,213.	9,182.	22,078.
13 Office expenses	269,234.	129,836.	120,820.	18,578.
14 Information technology	216,442.	120,398.	53,816.	42,228.
15 Royalties	49,545.	49,281.	264.	
16 Occupancy	234,282.	2,053.	232,229.	
17 Travel	185,749.	169,754.	7,190.	8,805.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	157,874.	87,309.	7,350.	63,215.
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	119,099.	40,269.	78,830.	
23 Insurance	8,199.	5,177.	3,022.	
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 DIRECT MAIL EXPENSES	3,397,875.	2,125,305.		1,272,570.
b VIETNAM PROGRAM	215,926.	215,926.		
c REPAIRS AND MAINTENANCE	107,328.	104,384.	2,944.	
d DIRECT CALLING FOR PHOT	28,160.			28,160.
e All other expenses SEE SCH O	10,285.	1,304,180.	-1,435,520.	141,625.
25 Total functional expenses. Add lines 1 through 24e	8,307,806.	6,144,488.	175,147.	1,988,171.
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 checked="" type="checkbox"/> if following SOP 98-2 (ASC 958-720)	3,270,778.	2,144,702.	0.	1,126,076.

**Part X Balance Sheet**

		(A) Beginning of year		(B) End of year
<b>Assets</b>	<b>1</b> Cash - non-interest-bearing .....	533,393.	<b>1</b>	389,215.
	<b>2</b> Savings and temporary cash investments .....	2,826,235.	<b>2</b>	1,149,423.
	<b>3</b> Pledges and grants receivable, net .....	12,074,448.	<b>3</b>	8,189,418.
	<b>4</b> Accounts receivable, net .....	88,826.	<b>4</b>	35,873.
	<b>5</b> Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L .....		<b>5</b>	
	<b>6</b> 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) .....		<b>6</b>	
	<b>7</b> Notes and loans receivable, net .....		<b>7</b>	
	<b>8</b> Inventories for sale or use .....		<b>8</b>	
	<b>9</b> Prepaid expenses and deferred charges .....	104,678.	<b>9</b>	87,015.
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D .....	<b>10a</b> 1,086,225.		
	<b>b</b> Less: accumulated depreciation .....	<b>10b</b> 682,758.	<b>10c</b>	403,467.
	<b>11</b> Investments - publicly traded securities .....		<b>11</b>	
	<b>12</b> Investments - other securities. See Part IV, line 11 .....	9,969,032.	<b>12</b>	12,522,704.
	<b>13</b> Investments - program-related. See Part IV, line 11 .....		<b>13</b>	
	<b>14</b> Intangible assets .....		<b>14</b>	
	<b>15</b> Other assets. See Part IV, line 11 .....	4,582,796.	<b>15</b>	7,185,734.
<b>16</b> <b>Total assets.</b> Add lines 1 through 15 (must equal line 34) .....	30,721,100.	<b>16</b>	29,962,849.	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses .....	1,012,727.	<b>17</b>	1,017,814.
	<b>18</b> Grants payable .....		<b>18</b>	
	<b>19</b> Deferred revenue .....	10,500.	<b>19</b>	20,000.
	<b>20</b> Tax-exempt bond liabilities .....		<b>20</b>	
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D .....		<b>21</b>	
	<b>22</b> Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L .....		<b>22</b>	
	<b>23</b> Secured mortgages and notes payable to unrelated third parties .....		<b>23</b>	
	<b>24</b> Unsecured notes and loans payable to unrelated third parties .....		<b>24</b>	
	<b>25</b> 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 .....	919,721.	<b>25</b>	811,810.
	<b>26</b> <b>Total liabilities.</b> Add lines 17 through 25 .....	1,942,948.	<b>26</b>	1,849,624.
	<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117, check here</b> <input checked="" type="checkbox"/> <b>X</b> <b>and complete lines 27 through 29, and lines 33 and 34.</b>		
<b>27</b> Unrestricted net assets .....		7,706,830.	<b>27</b>	9,581,211.
<b>28</b> Temporarily restricted net assets .....		19,171,322.	<b>28</b>	16,632,014.
<b>29</b> Permanently restricted net assets .....		1,900,000.	<b>29</b>	1,900,000.
<b>Organizations that do not follow SFAS 117, check here</b> <input type="checkbox"/> <b>and complete lines 30 through 34.</b>				
<b>30</b> Capital stock or trust principal, or current funds .....			<b>30</b>	
<b>31</b> Paid-in or capital surplus, or land, building, or equipment fund .....			<b>31</b>	
<b>32</b> Retained earnings, endowment, accumulated income, or other funds .....			<b>32</b>	
<b>33</b> <b>Total net assets or fund balances</b> .....		28,778,152.	<b>33</b>	28,113,225.
<b>34</b> <b>Total liabilities and net assets/fund balances</b> .....	30,721,100.	<b>34</b>	29,962,849.	

Form 990 (2011)

**Part XI Reconciliation of Net Assets**Check if Schedule O contains a response to any question in this Part XI ☒

<b>1</b>	Total revenue (must equal Part VIII, column (A), line 12)	<b>1</b>	8,538,564.
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25)	<b>2</b>	8,307,806.
<b>3</b>	Revenue less expenses. Subtract line 2 from line 1	<b>3</b>	230,758.
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	<b>4</b>	28,778,152.
<b>5</b>	Other changes in net assets or fund balances (explain in Schedule O)	<b>5</b>	-895,685.
<b>6</b>	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	<b>6</b>	28,113,225.

**Part XII Financial Statements and Reporting**Check if Schedule O contains a response to any question in this Part XII ☐

	Yes	No
<b>1</b> 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.		
<b>2a</b> Were the organization's financial statements compiled or reviewed by an independent accountant?		X
<b>b</b> Were the organization's financial statements audited by an independent accountant?	X	
<b>c</b> 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.	X	
<b>d</b> If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued 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		
<b>3a</b> 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?	X	
<b>b</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.	X	

Form 990 (2011)

Department of the Treasury  
Internal Revenue Service

**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

2011

**Open to Public Inspection**

Name of the organization

VIETNAM VETERANS MEMORIAL FUND, INC.

Employer identification number

52-1149668

<b>Part I</b>	<b>Reason for Public Charity Status</b> (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 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)

10 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**

11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h.

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

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?

	Yes	No
(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? _____	11g(i)	
(ii) A family member of a person described in (i) above? _____	11g(ii)	
(iii) A 35% controlled entity of a person described in (i) or (ii) above? _____	11g(iii)	

h Provide the following information about the supported organization(s).

[illegible]

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

Schedule A (Form 990 or 990-EZ) 2011

**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) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	8635870.	8688291.	8156094.	10037188.	7560161.	43077604.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	8635870.	8688291.	8156094.	10037188.	7560161.	43077604.
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)						5388664.
6 Public support. Subtract line 5 from line 4.						37688940.

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7 Amounts from line 4	8635870.	8688291.	8156094.	10037188.	7560161.	43077604.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	336,405.	314,859.	280,043.	469,083.	809,532.	2209922.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	115,131.	10,973.	43,326.	85,758.	51,570.	306,758.
11 Total support. Add lines 7 through 10						45594284.
12 Gross receipts from related activities, etc. (see instructions)					12	637,140.
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						► <input type="checkbox"/>

**Section C. Computation of Public Support Percentage**

14 Public support percentage for 2011 (line 6, column (f) divided by line 11, column (f))	14	82.66	%
15 Public support percentage from 2010 Schedule A, Part II, line 14	15	76.34	%
16a 33 1/3% support test - 2011. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	► <input checked="" type="checkbox"/>		
b 33 1/3% support test - 2010. 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	► <input type="checkbox"/>		
17a 10% -facts-and-circumstances test - 2011. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	► <input type="checkbox"/>		
b 10% -facts-and-circumstances test - 2010. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	► <input type="checkbox"/>		
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	► <input type="checkbox"/>		

Schedule A (Form 990 or 990-EZ) 2011

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

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

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....						
<b>2</b> 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 .....						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513 .....						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge .....						
<b>6 Total.</b> Add lines 1 through 5 .....						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons .....						
<b>b</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 .....						
<b>c</b> Add lines 7a and 7b .....						
<b>8 Public support</b> (Subtract line 7c from line 6.) .....						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
<b>9</b> Amounts from line 6 .....						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources .....						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 .....						
<b>c</b> Add lines 10a and 10b .....						
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on .....						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) .....						
<b>13 Total support</b> (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 section 501(c)(3) organization, check this box and **stop here** ..... ☐

**Section C. Computation of Public Support Percentage**

<b>15</b> Public support percentage for 2011 (line 8, column (f) divided by line 13, column (f)) .....	<b>15</b>	%
<b>16</b> Public support percentage from 2010 Schedule A, Part III, line 15 .....	<b>16</b>	%

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for 2011 (line 10c, column (f) divided by line 13, column (f)) .....	<b>17</b>	%
<b>18</b> Investment income percentage from 2010 Schedule A, Part III, line 17 .....	<b>18</b>	%

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

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

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





**Schedule B**  
(Form 990, 990-EZ,  
or 990-PF)

Department of the Treasury  
Internal Revenue Service

**Schedule of Contributors**

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.

OMB No. 1545-0047

**2011**

Name of the organization

Employer identification number

VIETNAM VETERANS MEMORIAL FUND, INC.

52-1149668

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

☒ 501(c)( 3 ) (enter number) organization

☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

☐ 527 political organization

Form 990-PF

☐ 501(c)(3) exempt private foundation

☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation

☐ 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

**Note.** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

**General Rule**

- ☐ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

**Special Rules**

- ☒ For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- ☐ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- ☐ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year. ▶ \$ \_\_\_\_\_

**Caution.** An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on Part I, line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2011)

Name of organization

Employer identification number

VIETNAM VETERANS MEMORIAL FUND, INC.

52-1149668

**Part I Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	TRIWEST HEALTH 6010 N. 28TH AVENUE PHOENIX, AZ 85053	\$ 1,000,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
2	ALAN AND CHRISTINE BUCKELEW 3212 COLBY AVENUE LOS ANGELES, CA 90066	\$ 250,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
3	WHS ACQUISITION & PROCUREMENT OFFICE 1155 DEFENSE PENTAGON WASHINGTON, DC 20301	\$ 492,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Name of organization

Employer identification number

VIETNAM VETERANS MEMORIAL FUND, INC.

52-1149668

**Part II Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	

Name of organization

Employer identification number

VIETNAM VETERANS MEMORIAL FUND, INC.

52-1149668

**Part III** Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations that total more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once.) ▶ \$

Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee

**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

**2011**

**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 organization <b>VIETNAM VETERANS MEMORIAL FUND, INC.</b>	Employer identification number <b>52-1149668</b>
---	---

**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? ..... ☐ Yes ☐ No

4a Was a correction made? ..... ☐ Yes ☐ 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? ..... ☐ Yes ☐ 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-

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

Schedule C (Form 990 or 990-EZ) 2011

LHA

132041  
01-27-12

**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												
<b>1 a</b> Total lobbying expenditures to influence public opinion (grass roots lobbying) .....															
<b>b</b> Total lobbying expenditures to influence a legislative body (direct lobbying) .....															
<b>c</b> Total lobbying expenditures (add lines 1a and 1b) .....															
<b>d</b> Other exempt purpose expenditures .....															
<b>e</b> Total exempt purpose expenditures (add lines 1c and 1d) .....															
<b>f</b> Lobbying nontaxable amount. Enter the amount from the following table in both columns.															
<table border="1"> <thead> <tr> <th>If the amount on line 1e, column (a) or (b) is:</th> <th>The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <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> </tbody> </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.														
<b>g</b> Grassroots nontaxable amount (enter 25% of line 1f) .....															
<b>h</b> Subtract line 1g from line 1a. If zero or less, enter -0- .....															
<b>i</b> Subtract line 1f from line 1c. If zero or less, enter -0- .....															
<b>j</b> 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? .....															

☐ Yes ☐ 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) 2008	(b) 2009	(c) 2010	(d) 2011	(e) Total
<b>2 a</b> Lobbying nontaxable amount					
<b>b</b> Lobbying ceiling amount (150% of line 2a, column(e))					
<b>c</b> Total lobbying expenditures					
<b>d</b> Grassroots nontaxable amount					
<b>e</b> Grassroots ceiling amount (150% of line 2d, column (e))					
<b>f</b> Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2011



**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?		X	
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		X	
c Media advertisements?		X	
d Mailings to members, legislators, or the public?		X	
e Publications, or published or broadcast statements?		X	
f Grants to other organizations for lobbying purposes?		X	
g Direct contact with legislators, their staffs, government officials, or a legislative body?	X		51,600.
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		X	
i Other activities?		X	
j Total. Add lines 1c through 1i			51,600.
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		X	
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 I-A; and Part II-B, line 1. Also, complete this part for any additional information.

**PART II-B, LINE 1(I), OTHER LOBBYING ACTIVITIES:**

DURING 2011 VVMF'S LOBBYING ACTIVITIES CONSISTED SOLELY OF LOBBYING

LEGISLATORS TO LIFT THE BAN ON THE USE OF FEDERAL FUNDS FOR THE

BUILDING OF THE EDUCATION CENTER AT THE WALL.

**SCHEDULE D**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Financial Statements**

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

OMB No. 1545-0047

**2011**

Open to Public Inspection

Name of the organization

VIETNAM VETERANS MEMORIAL FUND, INC.

Employer identification number

52-1149668

**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? .....	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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? .....	<input type="checkbox"/> Yes	<input type="checkbox"/> No

**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).

<input type="checkbox"/> Preservation of land for public use (e.g., recreation or education)	<input type="checkbox"/> Preservation of an historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> 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 Tax Year
a Total number of conservation easements .....	2a
b Total acreage restricted by conservation easements .....	2b
c Number of conservation easements on a certified historic structure included in (a) .....	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register .....	2d

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

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.**

Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (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 XIV, 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 .....	▶ \$ .....

**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  
 b ☐ Scholarly research  
 c ☐ Preservation for future generations  
 d ☐ Loan or exchange programs  
 e ☐ Other \_\_\_\_\_

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

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

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

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

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

	Amount
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	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 XIV.

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	1,900,000.	1,900,000.	1,900,000.	1,900,000.	
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	1,900,000.	1,900,000.	1,900,000.	1,900,000.	

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 ☒ 100.00 %

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 ☐ Yes ☒ No  
 3a(i) ☐ Yes ☒ No

(ii) related organizations ☐ Yes ☒ No  
 3a(ii) ☐ Yes ☒ No

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? ☐ Yes ☒ No  
 3b ☐ Yes ☒ No

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

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

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		278,420.	104,407.	174,013.
d Equipment		742,825.	531,974.	210,851.
e Other		64,980.	46,377.	18,603.
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				403,467.

Schedule D (Form 990) 2011

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives .....		
(2) Closely-held equity interests .....		
(3) Other		
(A) PUBLICLY TRADED		
(B) SECURITIES	12,483,553.	END-OF-YEAR MARKET VALUE
(C) PRIVATE EQUITY		
(D) COMMODITIES	39,151.	END-OF-YEAR MARKET VALUE
(E)		
(F)		
(G)		
(H)		
(I)		
<b>Total.</b> (Col (b) must equal Form 990, Part X, col (B) line 12.) ▶	12,522,704.	

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

(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
<b>Total.</b> (Col (b) must equal Form 990, Part X, col (B) line 13.) ▶		

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

(a) Description	(b) Book value
(1) EDUCATION CENTER - CONSTRUCTION IN PROGRESS	7,160,649.
(2) SECURITY DEPOSIT	25,085.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col (B) line 15.) ▶	7,185,734.

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) DEFERRED RENT	416,011.
(3) DEFERRED COMPENSATION	
(4)	257,661.
(5) REFUNDABLE ADVANCES	
(6)	138,138.
(7)	
(8)	
(9)	
(10)	
(11)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col (B) line 25.) ▶	811,810.

FIN 48 (ASC 740) footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740).

**Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements**

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	8,538,564.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	8,307,806.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	230,758.
4	Net unrealized gains (losses) on investments	4	-751,551.
5	Donated services and use of facilities	5	-101,300.
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV.)	8	-42,834.
9	Total adjustments (net). Add lines 4 through 8	9	-895,685.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	-664,927.

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

1	Total revenue, gains, and other support per audited financial statements	1	11,381,090.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	-751,551.
b	Donated services and use of facilities	2b	3,724,114.
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV.)	2d	-42,834.
e	Add lines 2a through 2d	2e	2,929,729.
3	Subtract line 2e from line 1	3	8,451,361.
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	87,242.
b	Other (Describe in Part XIV.)	4b	-39.
c	Add lines 4a and 4b	4c	87,203.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	8,538,564.

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

1	Total expenses and losses per audited financial statements	1	12,046,017.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	3,825,414.
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV.)	2d	
e	Add lines 2a through 2d	2e	3,825,414.
3	Subtract line 2e from line 1	3	8,220,603.
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	87,242.
b	Other (Describe in Part XIV.)	4b	-39.
c	Add lines 4a and 4b	4c	87,203.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	8,307,806.

**Part XIV Supplemental Information**

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

**PART V, LINE 4: THE PURPOSE OF THE ENDOWMENT FUNDS IS TO PROVIDE A**

**PERMANENT SOURCE OF INCOME TO FURTHER THE MISSION OF THE ORGANIZATION.**

**PART X, LINE 2: THE FUND IS GENERALLY EXEMPT FROM FEDERAL INCOME TAXES**

**UNDER SECTION 501(C)(3) OF THE**

**U.S. INTERNAL REVENUE CODE. IN ADDITION, THE FUND QUALIFIES FOR CHARITABLE**

**CONTRIBUTION DEDUCTIONS AND HAS BEEN CLASSIFIED AS AN ORGANIZATION THAT IS**

**NOT A PRIVATE FOUNDATION. BUSINESS INCOME, WHICH IS NOT RELATED TO EXEMPT**

**Part XIV** Supplemental Information (continued)

PURPOSES, LESS APPLICABLE DEDUCTIONS, IS SUBJECT TO FEDERAL AND STATE CORPORATE INCOME TAXES. THE FUND HAD NO NET UNRELATED BUSINESS INCOME FOR THE YEAR ENDED DECEMBER 31, 2011.

THE ACCOUNTING STANDARD ON ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES ADDRESSES THE DETERMINATION OF WHETHER TAX BENEFITS CLAIMED OR EXPECTED TO BE CLAIMED ON A TAX RETURN SHOULD BE RECORDED IN THE FINANCIAL STATEMENTS. UNDER THIS GUIDANCE, THE FUND MAY RECOGNIZE THE TAX BENEFIT FROM AN UNCERTAIN TAX POSITION ONLY IF IT IS MORE LIKELY THAN NOT THAT THE TAX POSITION WILL BE SUSTAINED ON EXAMINATION BY TAXING AUTHORITIES, BASED ON THE TECHNICAL MERITS OF THE POSITION. THE TAX BENEFITS RECOGNIZED IN THE FINANCIAL STATEMENTS FROM SUCH A POSITION ARE MEASURED BASED ON THE LARGEST BENEFIT THAT HAS A GREATER THAN 50% LIKELIHOOD OF BEING REALIZED UPON ULTIMATE SETTLEMENT. THE GUIDANCE ON ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES ALSO ADDRESSES DE-RECOGNITION, CLASSIFICATION, INTEREST AND PENALTIES ON INCOME TAXES, AND ACCOUNTING IN INTERIM PERIODS. MANAGEMENT EVALUATED THE FUNDS TAX POSITIONS AND CONCLUDED THAT THE FUND HAD TAKEN NO UNCERTAIN TAX POSITIONS THAT REQUIRE ADJUSTMENT TO THE FINANCIAL STATEMENTS TO COMPLY WITH THE PROVISIONS OF THIS GUIDANCE. GENERALLY, THE FUND IS NO LONGER SUBJECT TO INCOME TAX EXAMINATIONS BY THE U.S. FEDERAL, STATE OR LOCAL TAX AUTHORITIES FOR YEARS BEFORE 2008.

**PART XI, LINE 8 - OTHER ADJUSTMENTS:**

UNREALIZED LOSS FROM FOREIGN CURRENCY ADJUSTMENT -42,834.

**PART XII, LINE 2D - OTHER ADJUSTMENTS:**

UNREALIZED LOSS FROM FOREIGN CURRENCY ADJUSTMENT -42,834.

**PART XII, LINE 4B - OTHER ADJUSTMENTS:**

Schedule D (Form 990) 2011

**Part XIV** Supplemental Information (continued)

LOSS ON SALE OF EQUIPMENT -39.

PART XIII, LINE 4B - OTHER ADJUSTMENTS:

LOSS ON SALE OF EQUIPMENT -39.



**SCHEDULE F**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Statement of Activities Outside the United States**

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

OMB No. 1545-0047

**2011**

Open to Public  
Inspection

Name of the organization

Employer identification number

VIETNAM VETERANS MEMORIAL FUND, INC.

52-1149668

**Part I** **General Information on Activities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

**1 For grantmakers.** Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ..... ☐ Yes ☒ No

**2 For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

**3 Activities per Region.** (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
EAST ASIA & THE PACIFIC - VIETNAM	1	1	PROGRAM SERVICES	REMOVAL OF UNEXPLODED ORDNANCE - SEE SCHEDULE F, PART IV	513,109.
<b>3 a</b> Sub-total .....	1	1			513,109.
<b>b</b> Total from continuation sheets to Part I .....	0	0			0.
<b>c Totals</b> (add lines 3a and 3b) .....	1	1			513,109.

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

Schedule F (Form 990) 2011





**Part IV Foreign Forms**

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

Schedule F (Form 990) 2011

**Part V** Supplemental Information

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

SCHEDULE F, PART I, LINE 2: THE ORGANIZATION DOES NOT MAKE GRANTS IN CONNECTION WITH ITS PROGRAM SERVICE ACTIVITIES OUTSIDE THE U.S. THE PROGRAM SERVICE ACTIVITIES DESCRIBED ON SCHEDULE F, PART I, LINE 3 REPRESENT A PROGRAM FOR THE REMOVAL OF UNEXPLODED ORDNANCE IN VIETNAM.

SCHEDULE F, PART I, LINE 3: ALL EXPENDITURES IN THE REGION ARE ACCOUNTED FOR UNDER THE ACCRUAL METHOD OF ACCOUNTING.

SCHEDULE F, PART I, LINE 3: PROJECT RENEW IS THE FIRST COMPREHENSIVE MANAGEMENT APPROACH UNDERTAKEN IN VIETNAM TO RESTORE THE ENVIRONMENT AND NEUTRALIZE THE EFFECTS OF WAR. ITS WORK IS TO HELP REDUCE THE RISK OF THE MORE THAN 350,000 TONS OF UNEXPLODED ORDNANCE (UXO) LEFT FROM THE WAR, MUCH OF IT IN CENTRAL VIETNAM IN AREAS WHERE FARMERS WORK AND CHILDREN PLAY. PROJECT RENEW WAS LAUNCHED IN DECEMBER 2000 BY THE VIETNAM VETERANS MEMORIAL FUND IN PARTNERSHIP WITH THE QUANG TRI PROVINCE PEOPLE'S COMMITTEE. IN ADDITION TO CLEARING LANDMINES AND UXO FROM CONTAMINATED AREAS, PROJECT RENEW PERFORMS MANY OTHER VALUABLE SERVICES: IT PURSUES MINE-RISK EDUCATION THROUGH TELEVISION AND RADIO SPOTS AND A VARIETY OF IN-PERSON PROGRAMS. IT PROVIDES EMERGENCY MEDICAL SERVICES AND PROSTHETIC LIMBS FOR AMPUTEES. IT GIVES JOB TRAINING AND ASSISTANCE TO LANDMINE VICTIMS TO HELP THEM ATTAIN SUSTAINABLE INCOME.

Department of the Treasury  
Internal Revenue Service

**Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.**  
**▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.**

OMB No. 1545-0047

2011

## Open To Public Inspection

Name of the organization

VIETNAM VETERANS MEMORIAL FUND, INC.

**Employer identification number**  
52-1149668

## Part I

**Fundraising Activities.** Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

- 1** Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a ☒ Mail solicitations  
b ☒ Internet and email solicitations  
c ☒ Phone solicitations  
d ☒ In-person solicitations  
e ☒ Solicitation of non-government grants  
f ☒ Solicitation of government grants  
g ☒ Special fundraising events

- 2 a** Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?

☒ Yes      ☐ No

- b** If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
CREATIVE DIRECT RESPONSE - 16900 SCIENCE DRIVE #210,	DIRECT MAIL FUNDRAISING		X	3,957,916.	515,704.	3,442,212.
ADVANTAGE - 208 PASSAIC AVENUE, FAIRFIELD, NJ 07004	PLANNED GIVING CONSULTANTS		X	0.	138,000.	0.
<b>Total</b> .....				3,957,916.	653,704.	3,442,212.

- 3** List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

AL, AK, AZ, AR, CA, CO, CT, DE, FL, GA, HI, ID, IL, IN, IA, KS, KY, LA, ME, MD, MA, MI, MN, MS, MO  
MT, NE, NV, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, SD, TN, TX, UT, VT, VA, WA, WV, WI, WY

**Part II Fundraising Events.** Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events NONE	(d) Total events (add col. (a) through col. (c))
		ANNUAL GALA (event type)	(event type)	(total number)	
Revenue	1 Gross receipts .....	253,460.			253,460.
	2 Less: Charitable contributions .....	179,431.			179,431.
	3 Gross income (line 1 minus line 2) .....	74,029.			74,029.
Direct Expenses	4 Cash prizes .....				
	5 Noncash prizes .....	3,578.			3,578.
	6 Rent/facility costs .....	5,560.			5,560.
	7 Food and beverages .....	46,507.			46,507.
	8 Entertainment .....	13,563.			13,563.
	9 Other direct expenses .....	4,821.			4,821.
	10 Direct expense summary. Add lines 4 through 9 in column (d) .....				( 74,029 )
	11 Net income summary. Combine line 3, column (d), and line 10 .....				0.

**Part III Gaming.** Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	1 Gross revenue .....				
	2 Cash prizes .....				
	3 Noncash prizes .....				
	4 Rent/facility costs .....				
	5 Other direct expenses .....				
Direct Expenses	6 Volunteer labor .....	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
	7 Direct expense summary. Add lines 2 through 5 in column (d) .....				( )
	8 Net gaming income summary. Combine line 1, column d, and line 7 .....				

9 Enter the state(s) in which the organization operates gaming activities: \_\_\_\_\_

a Is the organization licensed to operate gaming activities in each of these states? ☐ Yes ☐ No

b If "No," explain: \_\_\_\_\_

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? ☐ Yes ☐ No

b If "Yes," explain: \_\_\_\_\_



- 11 Does the organization operate gaming activities with nonmembers? ☐ Yes ☐ No
- 12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? ☐ Yes ☐ No
- 13 Indicate the percentage of gaming activity operated in:
- |                               |     |   |
|-------------------------------|-----|---|
| a The organization's facility | 13a | % |
| b An outside facility         | 13b | % |
- 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ \_\_\_\_\_

Address ▶ \_\_\_\_\_

- 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? ☐ Yes ☐ No

b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ \_\_\_\_\_ and the amount of gaming revenue retained by the third party ▶ \$ \_\_\_\_\_

c If "Yes," enter name and address of the third party:

Name ▶ \_\_\_\_\_

Address ▶ \_\_\_\_\_

16 Gaming manager information:

Name ▶ \_\_\_\_\_

Gaming manager compensation ▶ \$ \_\_\_\_\_

Description of services provided ▶ \_\_\_\_\_

☐ Director/officer ☐ Employee ☐ Independent contractor

17 Mandatory distributions:

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? ☐ Yes ☐ No

b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ \_\_\_\_\_

**Part IV** Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).

SCHEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISERS:

(I) NAME OF FUNDRAISER: CREATIVE DIRECT RESPONSE

(I) ADDRESS OF FUNDRAISER: 16900 SCIENCE DRIVE #210, BOWIE, MD 20715

(I) NAME OF FUNDRAISER: ADVANTAGE

(I) ADDRESS OF FUNDRAISER: 208 PASSAIC AVENUE, FAIRFIELD, NJ 07004

SCHEDULE G, PART I, LINE 2B, COLUMN (V): THE AGREEMENT BETWEEN VVMF AND

**Part IV** Supplemental Information (continued)

CREATIVE DIRECT RESPONSE PROVIDES FOR THE REIMBURSEMENT OF EXPENSES  
SEPARATE FROM THE PAYMENT OF FEES RELATED TO FUNDRAISING SERVICES. THE  
FUNDRAISER LISTS THESE EXPENSES AS DIFFERENT LINE-ITEMS ON INVOICES TO  
DISTINGUISH THEM FROM FUNDRAISING SERVICE FEES. IN 2011, VVMF REIMBURSED  
THE FUNDRAISER FOR EXPENSES IN THE AMOUNT OF \$2,871,819.

**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, line 23.

► Attach to Form 990. ► See separate instructions.

OMB No. 1545-0047

**2011**

Open to Public  
Inspection

Name of the organization

VIETNAM VETERANS MEMORIAL FUND, INC.

Employer identification number

52-1149668

**Part I Questions Regarding Compensation**

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

☐ First-class or charter travel

☐ Travel for companions

☒ Tax indemnification and gross-up payments

☐ Discretionary spending account

☐ Housing allowance or residence for personal use

☐ Payments for business use of personal residence

☐ Health or social club dues or initiation fees

☐ Personal services (e.g., maid, chauffeur, chef)

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

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

**3** Indicate which, if any, of the following the 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. Explain in Part III.

☐ Compensation committee

☐ Independent compensation consultant

☐ Form 990 of other organizations

☐ Written employment contract

☒ Compensation survey or study

☒ Approval by the board or compensation committee

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

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

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

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

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

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

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

**a** The organization?

**b** Any related organization?

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

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

**a** The organization?

**b** Any related organization?

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

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

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

**9** If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in  
Regulations section 53.4958-6(c)?

Yes No

1b

X

2

X

4a

X

4b

X

4c

X

5a

X

5b

X

6a

X

6b

X

7

X

8

X

9

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

Schedule J (Form 990) 2011

**Part I 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	(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				
1 JAN C. SCRUGGS	(i) 158,031.	0.	61,857.	22,329.	17,570.	259,787.	0.
	(ii) 0.	0.	0.	0.	0.	0.	0.
2 DANIEL W. REESE	(i) 184,988.	13,500.	22,424.	21,532.	15,714.	258,158.	0.
	(ii) 0.	0.	0.	0.	0.	0.	0.
3	(i)						
	(ii)						
4	(i)						
	(ii)						
5	(i)						
	(ii)						
6	(i)						
	(ii)						
7	(i)						
	(ii)						
8	(i)						
	(ii)						
9	(i)						
	(ii)						
10	(i)						
	(ii)						
11	(i)						
	(ii)						
12	(i)						
	(ii)						
13	(i)						
	(ii)						
14	(i)						
	(ii)						
15	(i)						
	(ii)						
16	(i)						
	(ii)						

**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.

**PART I, LINE 1A: A TAX GROSS-UP PAYMENT WAS MADE ON BEHALF OF DAN**

**REESE, EXECUTIVE VP/CFO/COO, FOR \$540 IN RELATION TO A NON-CASH BENEFIT**

**PROVIDED IN 2011. BOTH THE VALUE OF THE NON-CASH BENEFIT, \$4,510, AND THE**

**RELATED GROSS-UP, WERE REPORTED TO THE IRS AS 2011 COMPENSATION.**

**PART I, LINE 4B: IN RECOGNITION OF THEIR SERVICES TO VVMF, THE**

**ORGANIZATION MAKES CONTRIBUTIONS TO DEFERRED COMPENSATION PLANS ON BEHALF**

**OF VVMF'S FOUNDER AND PRESIDENT, JAN SCRUGGS, AND EXECUTIVE VP/CFO/COO, DAN**

**REESE.**

**MR. SCRUGGS' REPORTED SALARY FOR 2011 INCLUDES DEFERRED COMPENSATION UNDER**

**SECTION 457(B), IN THE AMOUNT OF \$16,500, AND SECTION 457(F), IN THE AMOUNT**

**OF \$45,537, FOR A TOTAL OF \$61,857 IN DEFERRED COMPENSATION. MR. REESE'S**

**REPORTED SALARY FOR 2011 INCLUDES DEFERRED COMPENSATION UNDER SECTION**

**457(B), IN THE AMOUNT OF \$16,500.**

Department of the Treasury  
Internal Revenue Service

**▶ Complete if the organization answered**  
**"Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c,**  
**or Form 990-EZ, Part V, line 38a or 40b.**  
**▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.**

OMB No. 1545-0047

2011

## Open To Public Inspection

Name of the organization

VIETNAM VETERANS MEMORIAL FUND, INC.

Employer identification number  
52-1149668

**Part I Excess Benefit Transactions** (section 501(c)(3) and section 501(c)(4) organizations only).

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.

[illegible]

2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under section 4958

**3** Enter the amount of tax, if any, on line 2, above, reimbursed by the organization

**Part II** **Loans to and/or From Interested Persons.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a.

[illegible]

**Total** ..... ► \$

### Part III Grants or Assistance Benefiting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

[illegible]

**Part IV Business Transactions Involving Interested Persons.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
JAN SCRUGGS	FOUNDER AND PRESIDE	360.	MR. SCRUGGS		X

**Part V Supplemental Information**

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

SCH L, PART IV, BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS:

(A) NAME OF PERSON: JAN SCRUGGS

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:

FOUNDER AND PRESIDENT

(D) DESCRIPTION OF TRANSACTION: MR. SCRUGGS PURCHASED A SURPLUS PIECE OF COMPUTER EQUIPMENT AT FMV FROM VVMF IN 2011 FOR \$360. THE EQUIPMENT WAS ORIGINALLY PURCHASED IN 2010 FOR \$598. FMV WAS ESTABLISHED BY COMPARING THE PRICES FOR IDENTICAL PIECES OF USED EQUIPMENT FOUND ON AN ONLINE AUCTION SITE.

**SCHEDULE M**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Noncash Contributions**

► **Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.**  
► **Attach to Form 990.**

OMB No. 1545-0047

**2011**

**Open to Public Inspection**

Name of the organization **VIETNAM VETERANS MEMORIAL FUND, INC.** Employer identification number **52-1149668**

**Part I Types of Property**

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded	X	1	5,439.	SELLING PRICE
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ► ( )				
26 Other ► ( )				
27 Other ► ( )				
28 Other ► ( )				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement **29**

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?	X	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		X
b If "Yes," describe in Part II.		
33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

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

Schedule M (Form 990) (2011)



**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 990-EZ or to provide any additional information.  
▶ Attach to Form 990 or 990-EZ.

OMB No. 1545-0047

**2011**

Open to Public  
Inspection

Name of the organization

VIETNAM VETERANS MEMORIAL FUND, INC.

Employer identification number  
52-1149668

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

EDUCATE ON THE IMPACTS OF THE VIETNAM WAR ERA.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

DISPLAYED IN THE EDUCATION CENTER.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

THE ORGANIZATION PLANS, ORGANIZES AND CONDUCTS A NUMBER OF CEREMONIES  
AT THE MEMORIAL AND ELSEWHERE TO BRING PEOPLE TOGETHER TO REMEMBER AND  
HONOR THE MEN AND WOMEN WHO SERVED IN THE VIETNAM WAR AND THOSE WHO  
DIED. CEREMONIES ARE CONDUCTED EACH YEAR ON MEMORIAL DAY, VETERANS  
DAY, FATHERS DAY, MOTHERS DAY, IN MEMORY DAY AND CHRISTMAS TO  
RECOGNIZE, REMEMBER AND HONOR THOSE WHO SERVED AND DIED AS WELL AS TO  
BRING HEALING TO THEIR FAMILIES, THEIR FRIENDS AND OUR NATION.

EXPENSES \$ 377,903. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

THE ORGANIZATION PROMOTES HEALING AND PROVIDES EDUCATION ABOUT THE  
IMPACT OF THE VIETNAM WAR THROUGH ITS TRAVELING MEMORIAL CALLED "THE  
WALL THAT HEALS". THE ORGANIZATION EXHIBITS A HALF-SCALE REPLICA OF  
THE VIETNAM VETERANS MEMORIAL IN CITIES AND LOCATIONS THROUGHOUT THE  
UNITED STATES, MAKING IT POSSIBLE FOR MILLIONS OF INDIVIDUALS WHO ARE  
UNABLE TO TRAVEL TO WASHINGTON, D.C. TO RECOGNIZE, REMEMBER AND HONOR  
THOSE WHO SERVED AND DIED, AND TO EXPERIENCE A CONNECTION WITH LOST  
COMRADES AND LOVED ONES. THE TRAVELING MEMORIAL ALSO INCLUDES AN  
EDUCATIONAL MUSEUM AND AN INFORMATION CENTER TO ASSIST VISITORS IN  
FINDING NAMES ON THE MEMORIAL. THIS YEAR, THE ORGANIZATION BROUGHT THE

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

Schedule O (Form 990 or 990-EZ) (2011)

132211  
01-23-12

Name of the organization

VIETNAM VETERANS MEMORIAL FUND, INC.

Employer identification number

52-1149668

WALL THAT HEALS AND THE TRAVELING MUSEUM AND INFORMATION CENTER TO 23  
LOCATIONS IN THE UNITED STATES AND BROUGHT THE MUSEUM COMPONENT TO TWO  
ADDITIONAL LOCATIONS REACHING THOUSANDS OF VISITORS.

EXPENSES \$ 536,487. INCLUDING GRANTS OF \$ 0. REVENUE \$ 119,000.

THE ORGANIZATION WORKS IN COOPERATION WITH THE NATIONAL PARK SERVICE TO  
PROVIDE FOR SPECIAL MAINTENANCE NEEDS OF THE VIETNAM VETERANS MEMORIAL  
IN WASHINGTON, D.C., INCLUDING THE ADJACENT THREE SERVICEMAN STATUE,  
FLAGPOLE AND THE THREE-ACRE SITE WHERE THE VIETNAM VETERANS MEMORIAL IS  
LOCATED, TO MAINTAIN THE SITE'S FUNCTION AS A PLACE OF REFLECTION ON  
THE VIETNAM WAR, A PLACE OF HONOR, RECOGNITION AND REMEMBRANCE OF THOSE  
WHO SERVED AND THOSE WHO DIED, A PLACE OF SPIRITUAL CONNECTION WITH  
LOST COMRADES AND LOVED ONES, AND A SYMBOL OF HEALING FOR OUR NATION.  
THE MEMORIAL HAS BEEN VISITED BY MORE THAN 80 MILLION PEOPLE, MAKING IT  
ONE OF THE MOST VISITED MEMORIALS ON THE NATIONAL MALL. THIS YEAR 4.6  
MILLION PEOPLE VISITED THE VIETNAM VETERANS MEMORIAL IN WASHINGTON D.C.  
EXPENSES \$ 139,636. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

THE ORGANIZATION EDUCATES STUDENTS ABOUT THE IMPACT OF THE VIETNAM WAR  
AND PRESERVES THE LEGACY OF THE VIETNAM VETERANS MEMORIAL THROUGH ITS  
PROGRAMS RELATED TO THE EDUCATION OF STUDENTS AND TEACHERS REGARDING  
THE VIETNAM WAR, THE VIETNAM VETERANS MEMORIAL AND THE MEMORIAL'S  
LEGACY IN CULTURE AND SOCIETY. THE ORGANIZATION'S EDUCATION PROGRAMS  
REACH TEACHERS AND STUDENTS FROM GRADES 7 TO 12 AS WELL AS HIGHER  
EDUCATION. THE HOMETOWN HEROES PROGRAM, DEVELOPED TO PROMOTE A GREATER  
UNDERSTANDING OF THE VIETNAM WAR, THE VIETNAM ERA, AND THE PERSONAL  
SACRIFICE OF THE INDIVIDUALS WHOSE NAMES ARE INSCRIBED ON THE MEMORIAL,  
PROVIDES PROGRAM INFORMATION TO SCHOOLS AND COMMUNITY ORGANIZATIONS

Name of the organization

VIETNAM VETERANS MEMORIAL FUND, INC.

Employer identification number

52-1149668

ENCOURAGING STUDENTS TO WRITE BIOGRAPHIES OF MEN AND WOMEN FROM THEIR COMMUNITY WHOSE NAMES ARE INSCRIBED ON THE MEMORIAL. THE INFORMATION GATHERED BY THE STUDENTS WILL BE INCLUDED IN THE EDUCATION CENTER BEING BUILT.

EXPENSES \$ 219,347. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

THE ORGANIZATION IS DEVELOPING AN EDUCATION CENTER THAT WILL BE LOCATED ADJACENT TO THE VIETNAM VETERANS MEMORIAL ON THE NATIONAL MALL IN WASHINGTON D.C. THE EDUCATION CENTER WILL INCLUDE INTERACTIVE EXHIBITS AND PRIMARY SOURCE MATERIALS TO PERSONALIZE THE NAMES ON THE WALL TO HELP VISITORS GAIN A GREATER UNDERSTANDING OF THE COURAGE AND PERSONAL SACRIFICE OF THE INDIVIDUALS WHOSE NAMES ARE INSCRIBED ON THE MEMORIAL. THE EDUCATION CENTER WILL ALSO PROMOTE A GREATER UNDERSTANDING OF THE VIETNAM WAR AND THE VIETNAM WAR ERA. AS DISCLOSED IN ITEM 4B, DURING 2011, THE ORGANIZATION'S CAPITAL EXPENDITURES RELATED TO THE DEVELOPMENT OF THE EDUCATION CENTER TOTALED \$2,602,938.

FORM 990, PART VI, SECTION B, LINE 11: A CPA FIRM PREPARES THE FORM 990 AND PROVIDES A DRAFT COPY TO THE CFO AND THE BOARD FOR THEIR REVIEW AND APPROVAL. THE FINANCE AND AUDIT COMMITTEE REVIEWS THE RETURN IN DETAIL. A CONFERENCE CALL TAKES PLACE TO DISCUSS THE RETURN AND RESPOND TO QUESTIONS. ANY NECESSARY REVISIONS ARE MADE AND THE REVISED DRAFT IS THEN SENT TO THE BOARD FOR REVIEW PRIOR TO THE 990 BEING ISSUED FINAL. THE CFO THEN APPROVES THE 990 FOR ASSEMBLY AND SIGNS THE FINAL FORM.

FORM 990, PART VI, SECTION B, LINE 12C: THE CONFLICT OF INTEREST POLICY IS REVIEWED AND ACKNOWLEDGED ANNUALLY BY OFFICERS AND DIRECTORS.

Name of the organization

VIETNAM VETERANS MEMORIAL FUND, INC.

Employer identification number  
52-1149668

FORM 990, PART VI, SECTION B, LINE 15: EXECUTIVE COMMITTEE REVIEW OF CONTRACT AND SALARY REQUIREMENTS BASED ON SALARY COMPARISON DATA PROVIDED BY INDEPENDENT SURVEY AND CONTEMPORANEOUS DOCUMENTATION OF THE DECISION WAS MADE BY THE COMMITTEE FOR THE PRESIDENT/CEO EMPLOYMENT CONTRACT AND THE CONTRACTS OF OTHER OFFICERS AND KEY EMPLOYEES OF THE ORGANIZATION.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:  
AL, AK, AZ, AR, CA, CT, DC, FL, GA, HI, IL, IA, KS, KY, LA, ME, MD, MA, MI, MN, MS, MO, MT, NV, NH  
NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, SD, TN, UT, VA, WA, WV, WI, WY

FORM 990, PART VI, SECTION C, LINE 18: VVMF COMPLIES WITH SECTION 6104 AND MAKES ITS FORM 1023, 990 AND 990-T (IF APPLICABLE) AVAILABLE FOR PUBLIC INSPECTION UPON REQUEST FROM THE VVMF OFFICE, ON GUIDESTAR.COM, ON THE WEBSITE OF THE BETTER BUSINESS BUREAU WWW.BBB.ORG, AND ON ITS OWN WEBSITE, WWW.VVMF.ORG.

FORM 990, PART VI, SECTION C, LINE 19: ALL DOCUMENTS SUCH AS GOVERNING DOCUMENTS, CONFLICT OF INTEREST AND A COPY OF VVMF'S FINANCIAL STATEMENTS ARE AVAILABLE UPON REQUEST FROM THE VVMF OFFICE.

FORM 990, PART IX, LINE 24E, ALL OTHER FUNCTIONAL EXPENSES:

LOSS ON PROPERTY DISPOSAL	:	
PROGRAM SERVICE EXPENSES		21,981.
MANAGEMENT AND GENERAL EXPENSES		0.
FUNDRAISING EXPENSES		0.
TOTAL EXPENSES		21,981.

LICENSES AND PERMITS :

132212  
01-23-12

Schedule O (Form 990 or 990-EZ) (2011)

Name of the organization

VIETNAM VETERANS MEMORIAL FUND, INC.

Employer identification number  
52-1149668

PROGRAM SERVICE EXPENSES	100.
MANAGEMENT AND GENERAL EXPENSES	13,788.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	13,888.

## MISCELLANEOUS :

PROGRAM SERVICE EXPENSES	2,466.
MANAGEMENT AND GENERAL EXPENSES	1,861.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	4,327.

## ALLOCATION OF \$1,451,169 OF INDIRECT EXPENSES REPORTED IN (C):

PROGRAM SERVICE EXPENSES	1,279,633.
MANAGEMENT AND GENERAL EXPENSES	-1,451,169.
FUNDRAISING EXPENSES	141,625.
TOTAL EXPENSES	-29,911.
TOTAL OTHER EXPENSES ON FORM 990, PART IX, LINE 24E, COL A	10,285.

## FORM 990, PART XI, LINE 5, CHANGES IN NET ASSETS:

NET UNREALIZED LOSSES ON INVESTMENTS:	-751,551.
DONATED SERVICES AND USE OF FACILITIES:	-101,300.
UNREALIZED LOSS FROM FOREIGN CURRENCY ADJUSTMENT	-42,834.
TOTAL TO FORM 990, PART XI, LINE 5	-895,685.

2011 DEPRECIATION AND AMORTIZATION REPORT

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Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
	FURNITURE & EQUIPMENT														
24	FILE CABINET	12/10/96	SL	3.00	16	16	130.				130.	130.		0.	130.
46	(D) DESKS	04/03/98	SL	3.00	16	16	630.				630.	630.		0.	
47	DEFILE CABINET	04/03/98	SL	3.00	16	16	330.				330.	330.		0.	
55	FILE CABINET	06/26/98	SL	3.00	16	16	800.				800.	800.		0.	800.
59	FAX MACHINE	09/29/98	SL	3.00	16	16	250.				250.	250.		0.	250.
64	GUEST CHAIRS - 2	01/07/99	SL	3.00	16	16	551.				551.	551.		0.	551.
68	FURNITURE	11/11/99	SL	3.00	16	16	8,988.				8,988.	8,988.		0.	8,988.
69	FURNITURE	11/11/99	SL	3.00	16	16	7,483.				7,483.	7,483.		0.	7,483.
70	DE FURNITURE	12/01/99	SL	3.00	16	16	811.				811.	811.		0.	
71	(D) FURNITURE	12/01/99	SL	3.00	16	16	1,607.				1,607.	1,607.		0.	
72	FURNITURE	12/01/99	SL	3.00	16	16	1,666.				1,666.	1,666.		0.	1,666.
73	FURNITURE	12/01/99	SL	3.00	16	16	6,788.				6,788.	6,788.		0.	6,788.
74	FURNITURE	12/31/99	SL	3.00	16	16	1,279.				1,279.	1,279.		0.	1,279.
75	FURNITURE	12/31/99	SL	3.00	16	16	8,566.				8,566.	8,566.		0.	8,566.
92	DELL LAPTOPS	02/14/03	SL	3.00	16	16	4,237.				4,237.	4,237.		0.	4,237.
93	DELL COMPUTER	11/12/03	SL	3.00	16	16	2,310.				2,310.	2,310.		0.	2,310.
94	DELL COMPUTER	03/24/03	SL	3.00	16	16	1,280.				1,280.	1,280.		0.	1,280.

128111  
05-01-11

(D) - Asset disposed

\* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

2011 DEPRECIATION AND AMORTIZATION REPORT

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Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
95	DELL COMPUTER	03/11/04	SL	3.00		16	6,555.				6,555.	6,555.		0.	6,555.
96	DELL COMPUTER	05/01/04	SL	3.00		16	2,375.				2,375.	2,375.		0.	2,375.
97	DELL SERVER LAPTOP	07/01/04	SL	3.00		16	5,063.				5,063.	5,063.		0.	5,063.
100	COMPUTER MONITOR	04/23/05	SL	3.00		16	433.				433.	433.		0.	433.
101	COMPUTER	06/28/05	SL	3.00		16	421.				421.	421.		0.	421.
102	COMPUTER	08/22/05	SL	3.00		16	977.				977.	977.		0.	977.
103	COMPUTER	01/24/07	SL	3.00		16	606.				606.	606.		0.	606.
104	DESKTOP COMPUTER	02/18/07	SL	3.00		16	966.				966.	966.		0.	966.
105	DESKTOP COMPUTER	02/18/07	SL	3.00		16	966.				966.	966.		0.	966.
106	LAPTOP COMPUTER	05/22/07	SL	3.00		16	1,385.				1,385.	1,385.		0.	1,385.
107	LAPTOP COMPUTER	06/22/07	SL	3.00		16	1,385.				1,385.	1,385.		0.	1,385.
108	DESKS	05/11/07	SL	3.00		16	3,850.				3,850.	3,850.		0.	3,850.
109	COMPUTERS	06/30/07	SL	3.00		16	3,633.				3,633.	3,633.		0.	3,633.
110	COMPUTERS	09/30/07	SL	3.00		16	3,459.				3,459.	3,459.		0.	3,459.
111	COMPUTERS	12/17/07	SL	3.00		16	2,714.				2,714.	2,714.		0.	2,714.
112	COMPUTERS	03/14/08	SL	3.00		16	4,650.				4,650.	4,650.		258.	4,585.
113	COMPUTERS	03/19/08	SL	3.00		16	6,307.				6,307.	5,867.		440.	6,307.
114	COMPUTERS	03/31/08	SL	3.00		16	683.				683.	625.		57.	683.

128111  
05-01-11

(D) - Asset disposed

\* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

2011 DEPRECIATION AND AMORTIZATION REPORT

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Asset No.	Description	Date Acquired	Method	Life	C o n v	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
115	OFFICE FURNITURE	04/11/08	SL	3.00		16	3,700.				3,700.	3,391.		309.	3,700.
116	COMPUTERS	11/04/08	SL	3.00		16	1,195.				1,195.	861.		332.	1,195.
117	COMPUTER	01/21/09	SL	3.00		16	1,535.				1,535.	1,024.		511.	1,535.
118	COMPUTER	03/20/09	SL	3.00		16	1,818.				1,818.	594.		339.	932.
120	COMPUTER	07/14/09	SL	3.00		16	1,364.				1,364.	682.		455.	1,137.
121	FURNITURE	07/31/09	SL	7.00		16	1,848.				1,848.	174.		264.	638.
122	FURNITURE	09/19/09	SL	7.00		16	38,739.				38,739.	6,918.		5,534.	12,452.
123	ADDITIONAL PHONES	10/21/09	SL	7.00		16	1,326.				1,326.	236.		189.	425.
124	SECURITY SYSTEMS	11/12/09	SL	7.00		16	4,526.				4,526.	755.		647.	1,402.
157	HP PROBOOK	03/03/10	SL	3.00		16	630.				630.	175.		210.	385.
158	COMPUTER	04/11/10	SL	3.00		16	600.				600.	150.		200.	350.
159	DESKS	05/01/10	SL	7.00		16	487.				487.	39.		58.	97.
160	FILE CABINET	05/08/10	SL	7.00		16	330.				330.	31.		47.	78.
161	CHAIRS	05/15/10	SL	7.00		16	455.				455.	43.		65.	108.
162	OPTOMA PROJECTOR	05/07/10	SL	3.00		16	708.				708.	138.		236.	374.
163	BATTERY BACKUP	04/28/10	SL	3.00		16	1,274.				1,274.	283.		425.	708.
164	DELL VOSTRO COMPUTER	05/01/10	SL	3.00		16	1,029.				1,029.	229.		343.	572.
165	CLOSET DOOR LOCK	05/10/10	SL	3.00		16	595.				595.	132.		198.	330.

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(D) - Asset disposed

\* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone



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Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
166	ACER LAPTOP	05/28/10	SL	3.00		16	340.				340.	66.		113.	179.
167	BATTERY BACKUP	08/02/10	SL	3.00		16	613.				613.	85.		234.	289.
168	DELL QUAD COMPUTERS	08/24/10	SL	3.00		16	3,078.				3,078.	342.		1,026.	1,368.
169	DELL QUAD COMPUTER	08/24/10	SL	3.00		16	614.				614.	66.		233.	273.
170	PHONE SYSTEM	10/06/10	SL	3.00		16	6,709.				6,709.	559.		2,236.	2,795.
171	DELL DESKTOP COMPUTERS	11/16/10	SL	3.00		16	1,513.				1,513.	42.		536.	548.
172	SAMSUNG LCD MONITOR	11/17/10	SL	3.00		16	487.				487.	14.		162.	176.
173	CONFERENCE ROOM TELEVISION	12/01/10	SL	3.00		16	499.				499.	14.		188.	189.
174	IPAD 16GB 3G	12/20/10	SL	3.00		16	828.				828.			276.	276.
175	APPLE IPAD 16GB	12/20/10	SL	3.00		16	538.				538.			139.	
183	APPLE COMPUTER MAC BOOK PRO 13.3	06/01/11	SL	3.00		16	1,894.				1,894.			368.	368.
184	APPLE COMPUTER MAC BOOK PRO 13.3	07/28/11	SL	3.00		16	1,363.				1,363.			189.	189.
	* 990 PAGE 10 TOTAL - FURNITURE & EQUIPMENT						173,925.				173,925.	110,531.		16,767.	123,721.
156	FURNITURE	04/01/99	SL	10.00		16	40,990.				40,990.	40,990.		0.	40,990.
	* 990 PAGE 10 TOTAL - FURNITURE & EQUIPMENT - TRAVELING WELL						40,990.				40,990.	40,990.		0.	40,990.
125	TENANT IMPROVEMENT	10/01/09	SL	5.00		16	41,540.				41,540.	8,654.		6,923.	15,577.

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(D) - Asset disposed

\* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

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Asset No.	Description	Date Acquired	Method	Life	C o n v	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
126	TENANT IMPROVEMENT CONCESSIONS * 990 PAGE 10 TOTAL TENANT IMPROVEMENT	10/01/09	SL	6.00		16	236,880.				236,880.	49,350.		39,480.	88,830.
140	VEHICLES - PROJECT RENEW * 990 PAGE 10 TOTAL - VEHICLES - PROJECT RENEW	06/30/07	SL	5.00		16	101,450.				101,450.	71,015.		8,454.	104,407.
132	TRAVELLING WALL REPLICA	12/19/02	SL	10.00		16	11,967.				11,967.	9,574.		1,197.	10,771.
133	NEW TRAVEL WALL REPLICA	03/11/03	SL	10.00		16	12,063.				12,063.	9,453.		1,207.	10,860.
134	NEW TRAVEL WALL REPLICA	03/24/03	SL	10.00		16	11,967.				11,967.	9,374.		1,197.	10,571.
135	NEW TRAVEL WALL REPLICA	04/28/03	SL	10.00		16	16,306.				16,306.	12,448.		1,631.	11,089.
136	NEW TRAVEL WALL REPLICA	11/10/05	SL	10.00		16	10,673.				10,673.	5,514.		1,067.	6,581.
137	NEW TRAVEL WALL REPLICA	12/14/05	SL	10.00		16	6,809.				6,809.	3,457.		680.	4,137.
138	NEW TRAVEL WALL REPLICA	03/31/05	SL	10.00		16	39,154.				39,154.	18,598.		3,915.	22,513.
139	NEW TRAVEL WALL REPLICA	07/01/09	SL	10.00		16	23,778.				23,778.	3,567.		2,378.	5,985.
176	TRAVELLING WALL PANELS X2	05/06/10	SL	5.00		16	1,500.				1,500.	200.		300.	500.
177	TRAVEL WALL PANEL	06/08/10	SL	5.00		16	873.				873.	103.		175.	277.
178	TWTH TRUCK COMPUTER	10/08/10	SL	3.00		16	1,031.				1,031.	86.		344.	430.
179	TWTH TRUCK PRINTER	10/08/10	SL	3.00		16	441.				441.	37.		147.	184.

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(D) - Asset disposed

\* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

2011 DEPRECIATION AND AMORTIZATION REPORT

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Asset No.	Description	Date Acquired	Method	Life	C o n v	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
	* 990 PAGE 10 TOTAL - TRAVELLING WALL REPLICA						136,558.				136,558.	72,410.		14,238.	86,648.
	TRAVELLING WALL MUSEUM EXHIBIT														
127	ORIGINAL EXP	04/01/08	SL	10.00		16	155,578.				155,578.	155,578.		0.	155,578.
128	FEATHERLITE TRAILER	01/31/01	SL	10.00		16	69,880.				69,880.	69,218.		582.	59,890.
130	UPDATES TO TRAILER	06/30/08	SL	10.00		16	169,950.				169,950.	38,239.		16,995.	55,234.
	* 990 PAGE 10 TOTAL - TRAVELLING WALL MUSEUM EXHIBIT						395,328.				395,328.	263,035.		17,577.	280,612.
	WEBSITE														
141	TV WORLDWIDE WEB PAGE	06/30/05	SL	3.00		16	18,000.				18,000.	18,000.		0.	18,000.
180	CORPORATE ZEN - WEBSITE	03/31/10	SL	3.00		16	13,980.				13,980.	3,495.		4,660.	8,155.
181	WEBSITE DEV - WPC SALSA	08/19/10	SL	3.00		16	8,000.				8,000.	883.		2,687.	3,556.
182	WEBSITE - EDUCATION CENTER	01/01/10	SL	3.00		16	25,000.				25,000.	8,333.		8,333.	16,666.
	* 990 PAGE 10 TOTAL - WEBSITE						64,980.				64,980.	30,717.		15,680.	46,377.
	* GRAND TOTAL 990 PAGE 10 DEPR						1,191,651.				1,191,651.	646,702.		119,099.	682,755.

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(D) - Asset disposed

\* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

2011 DEPRECIATION AND AMORTIZATION REPORT

- CURRENT YEAR FEDERAL - VIETNAM VETERANS MEMORIAL FUND, INC.

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
	FURNITURE & EQUIPMENT											
24	FILE CABINET	121096SL	3.00	16		130.			130.	130.		0.
46	(D) DESKS	040398SL	3.00	16		630.			630.	630.		0.
47	(D) FILE CABINET	040398SL	3.00	16		330.			330.	330.		0.
55	FILE CABINET	062698SL	3.00	16		800.			800.	800.		0.
59	FAX MACHINE	092998SL	3.00	16		250.			250.	250.		0.
64	GUEST CHAIRS - 2	010799SL	3.00	16		551.			551.	551.		0.
68	FURNITURE	111199SL	3.00	16		8,958.			8,958.	8,958.		0.
69	FURNITURE	111199SL	3.00	16		7,483.			7,483.	7,483.		0.
70	(D) FURNITURE	120199SL	3.00	16		811.			811.	811.		0.
71	(D) FURNITURE	120199SL	3.00	16		1,607.			1,607.	1,607.		0.
72	FURNITURE	120199SL	3.00	16		1,666.			1,666.	1,666.		0.
73	FURNITURE	120199SL	3.00	16		6,788.			6,788.	6,788.		0.
74	FURNITURE	123199SL	3.00	16		1,279.			1,279.	1,279.		0.
75	FURNITURE	123199SL	3.00	16		8,566.			8,566.	8,566.		0.
92	DELL LAPTOPS	021403SL	3.00	16		4,237.			4,237.	4,237.		0.
93	DELL COMPUTER	111203SL	3.00	16		2,310.			2,310.	2,310.		0.
94	DELL COMPUTER	032403SL	3.00	16		1,280.			1,280.	1,280.		0.

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(D) - Asset disposed

\* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

2011 DEPRECIATION AND AMORTIZATION REPORT

- CURRENT YEAR FEDERAL - VIETNAM VETERANS MEMORIAL FUND, INC.

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
95	DELL COMPUTER	031104SL	3.00	16	16	6,555.			6,555.	6,555.		0.
96	DELL COMPUTER	050104SL	3.00	16	16	2,375.			2,375.	2,375.		0.
97	DELL SERVER LAPTOP	070104SL	3.00	16	16	5,063.			5,063.	5,063.		0.
100	COMPUTER MONITOR	042905SL	3.00	16	16	433.			433.	433.		0.
101	COMPUTER	062805SL	3.00	16	16	421.			421.	421.		0.
102	COMPUTER	082205SL	3.00	16	16	977.			977.	977.		0.
103	COMPUTER	012407SL	3.00	16	16	606.			606.	606.		0.
104	DESKTOP COMPUTER	021807SL	3.00	16	16	966.			966.	966.		0.
105	DESKTOP COMPUTER	021807SL	3.00	16	16	966.			966.	966.		0.
106	LAPTOP COMPUTER	062207SL	3.00	16	16	1,385.			1,385.	1,385.		0.
107	LAPTOP COMPUTER	062207SL	3.00	16	16	1,385.			1,385.	1,385.		0.
108	DESKS	061107SL	3.00	16	16	3,850.			3,850.	3,850.		0.
109	COMPUTERS	063007SL	3.00	16	16	3,633.			3,633.	3,633.		0.
110	COMPUTERS	093007SL	3.00	16	16	3,459.			3,459.	3,459.		0.
111	COMPUTERS	121707SL	3.00	16	16	2,714.			2,714.	2,714.		0.
112	COMPUTERS	031408SL	3.00	16	16	4,650.			4,650.	4,327.		258.
113	COMPUTERS	031908SL	3.00	16	16	6,307.			6,307.	5,867.		440.
114	COMPUTERS	033108SL	3.00	16	16	683.			683.	626.		57.

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(D) - Asset disposed

\* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

2011 DEPRECIATION AND AMORTIZATION REPORT

- CURRENT YEAR FEDERAL - VIETNAM VETERANS MEMORIAL FUND, INC.

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
115	OFFICE FURNITURE	041108SL		3.00	16	3,700.			3,700.	3,391.		309.
116	COMPUTERS	110408SL		3.00	16	1,195.			1,195.	863.		332.
117	COMPUTER	012109SL		3.00	16	1,535.			1,535.	1,024.		511.
118	COMPUTER	032009SL		3.00	16	1,018.			1,018.	594.		339.
120	COMPUTER	071409SL		3.00	16	1,364.			1,364.	682.		455.
121	FURNITURE	073109SL		7.00	16	1,848.			1,848.	374.		264.
122	FURNITURE	091909SL		7.00	16	38,739.			38,739.	6,918.		5,534.
123	ADDITIONAL PHONES	102109SL		7.00	16	1,326.			1,326.	236.		189.
124	SECURITY SYSTEMS	111209SL		7.00	16	4,526.			4,526.	755.		647.
157	HP PROBOOK	030910SL		3.00	16	630.			630.	175.		210.
158	COMPUTER	041110SL		3.00	16	600.			600.	150.		200.
159	DESKS	050110SL		7.00	16	407.			407.	39.		58.
160	FILE CABINET	050810SL		7.00	16	330.			330.	31.		47.
161	CHAIRS	051510SL		7.00	16	455.			455.	43.		65.
162	OPTOMA PROJECTOR	060710SL		3.00	16	708.			708.	138.		236.
163	BATTERY BACKUP DELL VOSTRO	042810SL		3.00	16	1,274.			1,274.	283.		425.
164	COMPUTER	050110SL		3.00	16	1,029.			1,029.	229.		343.
165	CLOSET DOOR LOCK	051010SL		3.00	16	595.			595.	132.		198.

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(D) - Asset disposed

\* IRC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

2011 DEPRECIATION AND AMORTIZATION REPORT

- CURRENT YEAR FEDERAL - VIETNAM VETERANS MEMORIAL FUND, INC.

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
166	ACER LAPTOP	052810SL		3.00	16	340.			340.	66.		113.
167	BATTERY BACKUP	080210SL		3.00	16	613.			613.	85.		204.
168	DELL QUAD COMPUTERS	082410SL		3.00	16	3,078.			3,078.	342.		1,026.
169	DELL QUAD COMPUTER	082410SL		3.00	16	614.			614.	68.		205.
170	PHONE SYSTEM	100610SL		3.00	16	6,709.			6,709.	559.		2,236.
171	DELL DESKTOP	111610SL		3.00	16	1,519.			1,519.	42.		506.
172	SAMSUNG LCD MONITOR	111710SL		3.00	16	487.			487.	14.		162.
173	TELEVISION	120110SL		3.00	16	499.			499.	14.		166.
174	IPAD 16GB 3G	122010SL		3.00	16	828.			828.			276.
175	IPAD 16GB	122010SL		3.00	16	598.			598.			199.
183	APPLE COMPUTER MAC BOOK PRO 13.3	060111SL		3.00	16	1,894.			1,894.			368.
184	APPLE COMPUTER MAC BOOK PRO 13.3	072811SL		3.00	16	1,363.			1,363.			189.
	* 990 PAGE 10 TOTAL - FURNITURE & EQUIPMENT - TRAVELL					173,925.			173,925.	110,531.		16,767.
156	FURNITURE	040199SL		10.00	16	40,990.			40,990.	40,990.		0.
	* 990 PAGE 10 TOTAL - FURNITURE & EQUIPMENT					40,990.			40,990.	40,990.		0.
125	OFFICE BUILDOUT	100109SL		6.00	16	41,540.			41,540.	8,634.		6,923.

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(D) - Asset disposed

\* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

2011 DEPRECIATION AND AMORTIZATION REPORT

- CURRENT YEAR FEDERAL - VIETNAM VETERANS MEMORIAL FUND, INC.

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
126	TENANT IMPROVEMENT CONCESSIONS	100109SL		6.00	16	236,880.			236,880.	49,350.		39,480.
	* 990 PAGE 10 TOTAL											
	- TENANT IMPROVEMENTS					278,420.			278,420.	58,004.		46,403.
	VEHICLES - PROJECT RENEW											
	(D)VEHICLES - PROJECT RENEW											
140	PROJECT RENEW	063007SL		5.00	16	101,450.			101,450.	71,015.		8,454.
	* 990 PAGE 10 TOTAL											
	- VEHICLES - PROJECT RENEW					101,450.			101,450.	71,015.		8,454.
	TRAVELLING WALL REPLICA											
132	NEW TRAVEL WALL	121902SL		10.00	16	11,967.			11,967.	9,574.		1,197.
	NEW TRAVEL WALL											
133	REPLICA	031203SL		10.00	16	12,068.			12,068.	9,453.		1,207.
	NEW TRAVEL WALL											
134	REPLICA	032403SL		10.00	16	11,967.			11,967.	9,374.		1,197.
	NEW TRAVEL WALL											
135	REPLICA	042803SL		10.00	16	16,306.			16,306.	12,448.		1,631.
	NEW TRAVEL WALL											
136	REPLICA	111005SL		10.00	16	10,673.			10,673.	5,514.		1,067.
	NEW TRAVEL WALL											
137	REPLICA	121405SL		10.00	16	6,800.			6,800.	3,457.		680.
	NEW TRAVEL WALL											
138	REPLICA	033105SL		10.00	16	39,154.			39,154.	18,598.		3,915.
	NEW TRAVEL WALL											
139	REPLICA	070109SL		10.00	16	23,778.			23,778.	3,567.		2,378.
	TRAVELING WALL											
176	PANELS X2	050610SL		5.00	16	1,500.			1,500.	200.		300.
	TRAVELING WALL											
177	TRAVEL WALL PANEL	060910SL		5.00	16	873.			873.	102.		175.
	TRAVELING WALL											
178	TWTH TRUCK COMPUTER	100810SL		3.00	16	1,031.			1,031.	86.		344.
	TRUCK COMPUTER											
179	TWTH TRUCK PRINTER	100810SL		3.00	16	441.			441.	37.		147.
	TRUCK PRINTER											

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(D) - Asset disposed

\* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction



- CURRENT YEAR FEDERAL - VIETNAM VETERANS MEMORIAL FUND, INC.

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\* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

## - NEXT YEAR FEDERAL - VIETNAM VETERANS MEMORIAL FUND, INC.

Asset No.	Description	Date Acquired	Method	Life	Unadjusted Cost Or Basis	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Amount Of Depreciation
	FURNITURE & EQUIPMENT								
24	FILE CABINET	12/10/96	SL	3.00	130.		130.	130.	0.
55	FILE CABINET	06/26/98	SL	3.00	800.		800.	800.	0.
59	FAX MACHINE	09/29/98	SL	3.00	250.		250.	250.	0.
64	GUEST CHAIRS - 2	01/07/99	SL	3.00	551.		551.	551.	0.
68	FURNITURE	11/11/99	SL	3.00	8,958.		8,958.	8,958.	0.
69	FURNITURE	11/11/99	SL	3.00	7,483.		7,483.	7,483.	0.
72	FURNITURE	12/01/99	SL	3.00	1,666.		1,666.	1,666.	0.
73	FURNITURE	12/01/99	SL	3.00	6,788.		6,788.	6,788.	0.
74	FURNITURE	12/31/99	SL	3.00	1,279.		1,279.	1,279.	0.
75	FURNITURE	12/31/99	SL	3.00	8,566.		8,566.	8,566.	0.
92	DELL LAPTOPS	02/14/03	SL	3.00	4,237.		4,237.	4,237.	0.
93	DELL COMPUTER	11/12/03	SL	3.00	2,310.		2,310.	2,310.	0.
94	DELL COMPUTER	03/24/03	SL	3.00	1,280.		1,280.	1,280.	0.
95	DELL COMPUTER	03/11/04	SL	3.00	6,555.		6,555.	6,555.	0.
96	DELL COMPUTER	05/01/04	SL	3.00	2,375.		2,375.	2,375.	0.
97	DELL SERVER LAPTOP	07/01/04	SL	3.00	5,063.		5,063.	5,063.	0.
100	COMPUTER MONITOR	04/29/05	SL	3.00	433.		433.	433.	0.
101	COMPUTER	06/28/05	SL	3.00	421.		421.	421.	0.
102	COMPUTER	08/22/05	SL	3.00	977.		977.	977.	0.
103	COMPUTER	01/24/07	SL	3.00	606.		606.	606.	0.
104	DESKTOP COMPUTER	02/18/07	SL	3.00	966.		966.	966.	0.
105	DESKTOP COMPUTER	02/18/07	SL	3.00	966.		966.	966.	0.
106	LAPTOP COMPUTER	06/22/07	SL	3.00	1,385.		1,385.	1,385.	0.
107	LAPTOP COMPUTER	06/22/07	SL	3.00	1,385.		1,385.	1,385.	0.
108	DESKS	06/11/07	SL	3.00	3,850.		3,850.	3,850.	0.
109	COMPUTERS	06/30/07	SL	3.00	3,633.		3,633.	3,633.	0.
110	COMPUTERS	09/30/07	SL	3.00	3,459.		3,459.	3,459.	0.
111	COMPUTERS	12/17/07	SL	3.00	2,714.		2,714.	2,714.	0.
112	COMPUTERS	03/14/08	SL	3.00	4,650.		4,650.	4,650.	0.
113	COMPUTERS	03/19/08	SL	3.00	6,307.		6,307.	6,307.	0.
114	COMPUTERS	03/19/08	SL	3.00	683.		683.	683.	0.
115	OFFICE FURNITURE	04/11/08	SL	3.00	3,700.		3,700.	3,700.	0.
116	COMPUTERS	11/04/08	SL	3.00	1,195.		1,195.	1,195.	0.

## 2012 DEPRECIATION AND AMORTIZATION REPORT

## - NEXT YEAR FEDERAL - VIETNAM VETERANS MEMORIAL FUND, INC.

Asset No.	Description	Date Acquired	Method	Life	Unadjusted Cost Or Basis	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Amount Of Depreciation
117	COMPUTER	012109SL	SL	3.00	1,535.		1,535.	1,535.	0.
118	COMPUTER	032009SL	SL	3.00	1,018.		1,018.	933.	85.
120	COMPUTER	071409SL	SL	3.00	1,364.		1,364.	1,137.	227.
121	FURNITURE	073309SL	SL	7.00	1,848.		1,848.	638.	264.
122	FURNITURE	091909SL	SL	7.00	38,739.		38,739.	12,452.	5,534.
123	ADDITIONAL PHONES	102109SL	SL	7.00	1,326.		1,326.	425.	189.
124	SECURITY SYSTEMS	111209SL	SL	7.00	4,526.		4,526.	1,402.	647.
157	HP PROROCK	030910SL	SL	3.00	630.		630.	385.	210.
158	COMPUTER	041110SL	SL	3.00	600.		600.	350.	200.
159	DESKS	050110SL	SL	7.00	407.		407.	97.	58.
160	FILE CABINET	050810SL	SL	7.00	330.		330.	78.	47.
161	CHAIRS	051510SL	SL	7.00	455.		455.	108.	65.
162	OPTOMA PROJECTOR	060710SL	SL	3.00	708.		708.	374.	236.
163	BATTERY BACKUP	042810SL	SL	3.00	1,274.		1,274.	708.	425.
164	DELL VOSTRO COMPUTER	050110SL	SL	3.00	1,029.		1,029.	572.	343.
165	CLOSET DOOR LOCK	051010SL	SL	3.00	595.		595.	330.	198.
166	ACER LAPTOP	052810SL	SL	3.00	340.		340.	179.	113.
167	BATTERY BACKUP	080210SL	SL	3.00	613.		613.	289.	204.
168	DELL QUAD COMPUTERS	082410SL	SL	3.00	3,078.		3,078.	1,368.	1,026.
169	DELL QUAD COMPUTER	082410SL	SL	3.00	614.		614.	273.	205.
170	PHONE SYSTEM	100610SL	SL	3.00	6,709.		6,709.	2,795.	2,236.
171	DELL DESKTOP COMPUTERS	111610SL	SL	3.00	1,519.		1,519.	548.	506.
172	SAMSUNG LCD MONITOR	111710SL	SL	3.00	487.		487.	176.	162.
173	CONFERENCE ROOM TELEVISION	120110SL	SL	3.00	499.		499.	180.	166.
174	IPAD 16GB 3G	122010SL	SL	3.00	828.		828.	276.	276.
183	APPLE COMPUTER MAC BOOK PRO 13.3	060111SL	SL	3.00	1,894.		1,894.	368.	631.
184	APPLE COMPUTER MAC BOOK PRO 13.3	060111SL	SL	3.00	1,894.		1,894.	368.	631.
	* 990 PAGE 10 TOTAL - FURNITURE & EQUIPMENT	072811SL	SL	3.00	1,363.		1,363.	189.	454.
	FURNITURE & EQUIPMENT - TRAVELLING WALL				169,949.		169,949.	123,721.	14,707.
156	FURNITURE	040199SL	SL	10.00	40,990.		40,990.	40,990.	0.
	* 990 PAGE 10 TOTAL - FURNITURE & EQUIPMENT - TRAVELLING WALL				40,990.		40,990.	40,990.	0.

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05-01-11

(D) - Asset disposed

\* ITC, Section 179, Salvage, HR 3090, Commercial Revitalization Deduction, GO Zone

## - NEXT YEAR FEDERAL - VIETNAM VETERANS MEMORIAL FUND, INC.

Asset No.	Description	Date Acquired	Method	Life	Unadjusted Cost Or Basis	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Amount Of Depreciation
125	TENANT IMPROVEMENT								
125	OFFICE BUILDOUT	100109SL		6.00	41,540.		41,540.	15,577.	6,923.
126	TENANT IMPROVEMENT CONCESSIONS	100109SL		6.00	236,880.		236,880.	88,830.	39,480.
	* 990 PAGE 10 TOTAL - TENANT IMPROVEMENT				278,420.		278,420.	104,407.	46,403.
	VEHICLES - PROJECT RENEW								
	TRAVELLING WALL REPLICA								
132	NEW TRAVEL WALL REPLICA	121902SL		10.00	11,967.		11,967.	10,771.	1,196.
133	NEW TRAVEL WALL REPLICA	031203SL		10.00	12,068.		12,068.	10,660.	1,207.
134	NEW TRAVEL WALL REPLICA	032403SL		10.00	11,967.		11,967.	10,571.	1,197.
135	NEW TRAVEL WALL REPLICA	042803SL		10.00	16,306.		16,306.	14,079.	1,631.
136	NEW TRAVEL WALL REPLICA	111005SL		10.00	10,673.		10,673.	6,581.	1,067.
137	NEW TRAVEL WALL REPLICA	121405SL		10.00	6,800.		6,800.	4,137.	680.
138	NEW TRAVEL WALL REPLICA	033105SL		10.00	39,154.		39,154.	22,513.	3,915.
139	NEW TRAVEL WALL REPLICA	070109SL		10.00	23,778.		23,778.	5,945.	2,378.
176	TRAVELLING WALL PANELS X2	050610SL		5.00	1,500.		1,500.	500.	300.
177	TRAVEL WALL PANEL	060910SL		5.00	873.		873.	277.	175.
178	TWTH TRUCK COMPUTER	100810SL		3.00	1,031.		1,031.	430.	344.
179	TWTH TRUCK PRINTER	100810SL		3.00	441.		441.	184.	147.
	* 990 PAGE 10 TOTAL - TRAVELLING WALL REPLICA				136,558.		136,558.	86,648.	14,237.
	TRAVELLING WALL MUSEUM EXHIBIT								
127	ORIGINAL EXP	040108SL		10.00	155,578.		155,578.	155,578.	0.
129	FEATHERLINE TRAILER	013101SL		10.00	69,800.		69,800.	69,800.	0.
130	UPDATES TO TRAILER	063008SL		10.00	169,950.		169,950.	55,234.	16,995.
	* 990 PAGE 10 TOTAL - TRAVELLING WALL MUSEUM EXHIBIT WEBSITE				395,328.		395,328.	280,612.	16,995.
141	TV WORLDWIDE WEB PAGE								
180	CORPORATE ZEN - WEBSITE	063005SL		3.00	18,000.		18,000.	18,000.	0.
181	WEBSITE DEV - WFC SALSA	033110SL		3.00	13,980.		13,980.	8,155.	4,660.
182	WEBSITE - EDUCATION CENTER	081910SL		3.00	8,000.		8,000.	3,556.	2,667.
	* 990 PAGE 10 TOTAL - WEBSITE	010110SL		3.00	25,000.		25,000.	16,666.	8,333.
	* GRAND TOTAL 990 PAGE 10 DEPR				64,980.		64,980.	46,377.	15,660.
					1086225.		1086225.	682,753.	108,002.

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05-01-11

(D) - Asset disposed

\* ITC, Section 179, Salvage, HR 3090, Commercial Revitalization Deduction, GO Zone