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)

For the 2011 calendar year, or tax year beginning OCT 1, 2011 and ending SEP 30, 2012

C Name of organization:
HEARING HEALTH FOUNDATION

Doing Business As:

Room/suite: 13-1882107

E Telephone number:
(212) 257-6140

G Gross receipts:
2,642,400

H(a) Is this a group return for affiliates?: Yes ☐ No ☐
H(b) Are all affiliates included?: Yes ☐ No ☐
H(c) Group exemption number:

I Tax-exempt status:
☑ 501(c)(3) ☐ 501(c)(4) ☐ (insert no.) 4947(a)(1) or ☐ 527

J Website:
WWW.HEARINGHEALTHFOUNDATION.ORG

K Form of organization:
☑ Corporation ☐ Trust ☐ Association ☐ Other ☐
L Year of formation: 1958 ☠ State of legal domicile: NY

Part I: Summary

1 Briefly describe the organization’s mission or most significant activities: SINCE 1958, HEARING HEALTH FOUNDATION HAS BEEN THE LEADING NATIONAL SOURCE OF PRIVATE FUNDING

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

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

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

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

6 Total number of volunteers (estimate if necessary):

7a Total unrelated business revenue from Part VIII, column (C), line 12:

7b Net unrelated business taxable income from Form 990-T, line 34:

8 Contributions and grants (Part VIII, line 1h):

9 Program service revenue (Part VIII, line 2g):

10 Investment income (Part VIII, column (A), lines 3, 4, and 7d):

11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e):

12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12):

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

14 Benefits paid to or for members (Part IX, column (A), line 4):

15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10):

15a Professional fundraising fees (Part IX, column (A), line 11e):

15b Total fundraising expenses (Part IX, column (D), line 25):

17 Other expenses, Add lines 13-17 (must equal Part IX, column (A), line 26):

19 Revenue less expenses. Subtract line 18 from line 12:

20 Total assets (Part X, line 16):

21 Total liabilities (Part X, line 26):

22 Net assets or fund balances. Subtract line 21 from line 20:

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.

Signature of officer:
SHARI EBERTS, CHAIR

Type or print name and title:

Paid Preparer Information:

Preparer's name:
THOMAS F. BLANEY

Preparer's signature:

Preparer's EIN:
P00234022

Phone no.:
(212) 286-2600

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

Form 990 (2011)
HEARING HEALTH FOUNDATION

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:
THE MISSION OF HEARING HEALTH FOUNDATION IS TO PREVENT AND CURE HEARING LOSS THROUGH GROUNDBREAKING RESEARCH.

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

Yes X No

If “Yes,” describe these new services on Schedule O.

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

Yes X No

If “Yes,” describe these changes on Schedule O.

4 Describe the organization’s program service accomplishments for each of its three largest program services, as measured by expenses.

Section 501(c)(3) and 501(c)(4) organizations 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 $1,465,464, including grants of $1,281,647) (Revenue $5,804)
HEARING RESTORATION PROJECT AND EMERGING RESEARCH GRANTS—SINCE 1958, HEARING HEALTH FOUNDATION HAS BEEN COMMITTED TO HEARING RESEARCH. THIS YEAR THE HEARING RESTORATION PROJECT (HRP) WAS LAUNCHED. THE HRP IS A CONSORTIUM OF SENIOR SCIENTISTS ORGANIZED AND FUNDED BY HEARING HEALTH FOUNDATION, WITH A GOAL OF CURING HEARING LOSS THROUGH THE REGENERATION OF INNER EAR HAIR CELLS. A TOTAL OF 4 MULTI-INSTITUTIONAL GRANTS, AT $722,585 WERE AWARDED. OUR JUNIOR INVESTIGATORS PROGRAM, THE EMERGING RESEARCH GRANTS PROGRAM CONTINUES TO FINANCE PROMISING RESEARCH PROJECTS IN THE FIELD OF HEARING AND BALANCE SCIENCE THAT SHOW HIGH SCIENTIFIC MERIT AND CLEAR IMPORTANCE TO THE ADVANCEMENT OF BASIC, CLINICAL AND TRANSLATIONAL RESEARCH AND WILL LEAD TO MEDICAL THERAPIES AND TREATMENTS. A TOTAL OF 19 EMERGING RESEARCH GRANTS WERE AWARDED IN

4b (Code: ) (Expenses $275,040, including grants of ) (Revenue $586)
HEARING HEALTH MAGAZINE—HEARING HEALTH MAGAZINE IS THE ULTIMATE CONSUMER RESOURCE ON HEARING LOSS AND RELATED PRODUCTS. IT EARNED THIS POSITION OVER THE PAST 26 YEARS THROUGH STEADFAST DEDICATION FROM STAFF, QUALITY CONTRIBUTIONS AND COLLABORATIVE SUPPORT FROM ADVERTISERS. HEARING HEALTH MAGAZINE IS PUBLISHED QUARTERLY BY HEARING HEALTH FOUNDATION, WHICH SUPPORTS RESEARCH WITH THE GOAL OF MAKING A LIFETIME OF HEARING HEALTH POSSIBLE FOR ALL. HEARING HEALTH MAGAZINE’S MISSION IS TO EDUCATE INDIVIDUALS ABOUT THE EFFECTS OF HEARING LOSS ON HEALTH AND QUALITY OF LIFE AND TO INCREASE AWARENESS OF REAL-WORLD SOLUTIONS BASED ON THE LATEST RESEARCH AND TECHNOLOGY. HEARING HEALTH MAGAZINE IS CURRENTLY SENT TO 45,000 PEOPLE; WITH WAITING ROOM COPIES WE ESTIMATE READERSHIP TO BE APPROXIMATELY 215,000/ISSUE

4c (Code: ) (Expenses $425,372, including grants of ) (Revenue $)
COMMUNICATION/EDUCATION—HEARING HEALTH FOUNDATION AIMS TO EDUCATE THE PUBLIC THROUGH A VARIETY OF DIFFERENT FORUMS. THROUGH EXTERNAL CONFERENCE ATTENDANCE AND EXHIBITING OPPORTUNITIES, THE FOUNDATION EDUCATES PROFESSIONALS AND THOSE WITH HEARING LOSS PERSONALLY OR IN THEIR FAMILIES AND DISSEMINATES INFORMATION ON CURRENT RESEARCH AND CUTTING EDGE TECHNOLOGIES RELATED TO HEARING LOSS, AS WELL AS PROVIDES GENERAL INFORMATION ON THE FOUNDATION. THE FOUNDATION SPONSORS RESEARCH PROGRAMS AT CONFERENCES TO BRING DEVELOPMENTS ON HEARING RESEARCH TO NEW FORUMS AND POPULATIONS. THE FOUNDATION’S E-NEWSLETTER, HEARING HEALTH E-NEWS, IS A WAY TO COMMUNICATE THE FOUNDATION’S PROGRAMS AND EVENTS TO SUBSCRIBERS. THE FOUNDATION’S STAFF, BOARD MEMBERS AND RESEARCHERS ARE FEATURED, AS ARE PROGRAMS LIKE “IT’S A

4d Other program services (Describe in Schedule O)

4e Total program service expenses $2,165,876.

SEE SCHEDULE O FOR CONTINUATION(S)

132002 02-09-12

16310724 756359 104105.2 2011.05080 HEARING HEALTH FOUNDATION 10410511
<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
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<tr>
<td>1</td>
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<td>20b</td>
<td>X</td>
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</tbody>
</table>
21 Did the organization report more than $5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II 21 X

22 Did the organization report more than $5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and II 22 X

23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J 23 X

24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to line 25 24a X

b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b

c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 24c

d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d

25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I 25a X

b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I 25b X

26 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 26 X

27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III 27 X

28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):

   a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28a X

   b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28b X

   c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV 28c X

29 Did the organization receive more than $25,000 in non-cash contributions? If "Yes," complete Schedule M 29 X

30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 30 X

31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31 X

32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II 32 X

33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I 33 X

34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1 34 X

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a X

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 35b X

36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 36 X

37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 37 X

38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? 38 X

Note. All Form 990 filers are required to complete Schedule O.
<table>
<thead>
<tr>
<th>Question</th>
<th>Answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>1a Enter the number reported in Box 3 of Form 1096. Enter 0 if not applicable</td>
<td>1a 16</td>
</tr>
<tr>
<td>1b Enter the number of Forms W-2G included in line 1a. Enter 0 if not applicable</td>
<td>1b 0</td>
</tr>
<tr>
<td>1c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable (gambling) winnings to prize winners?</td>
<td>1c X</td>
</tr>
<tr>
<td>2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return</td>
<td>2a 10</td>
</tr>
<tr>
<td>2b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?</td>
<td>2b X</td>
</tr>
<tr>
<td>3a Did the organization have unrelated business gross income of $1,000 or more during the year?</td>
<td>3a X</td>
</tr>
<tr>
<td>3b Did the organization file a Form 990-T for this year? If &quot;No,&quot; provide an explanation in Schedule O</td>
<td>3b X</td>
</tr>
<tr>
<td>4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?</td>
<td>4a X</td>
</tr>
<tr>
<td>5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?</td>
<td>5a X</td>
</tr>
<tr>
<td>5b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?</td>
<td>5b X</td>
</tr>
<tr>
<td>5c If &quot;Yes,&quot; to line 5a or 5b, did the organization file Form 8886-T?</td>
<td>5c</td>
</tr>
<tr>
<td>6a Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible?</td>
<td>6a X</td>
</tr>
<tr>
<td>7 Organizations that may receive deductible contributions under section 170(c).</td>
<td></td>
</tr>
<tr>
<td>7b Did the organization receive any payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?</td>
<td>7b X</td>
</tr>
<tr>
<td>7c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?</td>
<td>7c X</td>
</tr>
<tr>
<td>7d If &quot;Yes,&quot; indicate the number of Forms 8282 filed during the year</td>
<td>7d</td>
</tr>
<tr>
<td>7e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?</td>
<td>7e X</td>
</tr>
<tr>
<td>7f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?</td>
<td>7f X</td>
</tr>
<tr>
<td>7g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?</td>
<td>7g</td>
</tr>
<tr>
<td>7h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?</td>
<td>7h</td>
</tr>
<tr>
<td>8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?</td>
<td>8</td>
</tr>
<tr>
<td>9 Sponsoring organizations maintaining donor advised funds.</td>
<td></td>
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<tr>
<td>9b Did the organization make any distributions under section 4966?</td>
<td>9b</td>
</tr>
<tr>
<td>10 Section 501(c)(7) organizations. Enter:</td>
<td></td>
</tr>
<tr>
<td>10a Initiation fees and capital contributions included on Part VIII, line 12</td>
<td>10a</td>
</tr>
<tr>
<td>10b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities</td>
<td>10b</td>
</tr>
<tr>
<td>11 Section 501(c)(12) organizations. Enter:</td>
<td></td>
</tr>
<tr>
<td>11a Gross income from members or shareholders</td>
<td>11a</td>
</tr>
<tr>
<td>11b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)</td>
<td>11b</td>
</tr>
<tr>
<td>12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?</td>
<td>12a</td>
</tr>
<tr>
<td>12b If &quot;Yes,&quot; enter the amount of tax-exempt interest received or accrued during the year</td>
<td>12b</td>
</tr>
<tr>
<td>13 Section 501(c)(29) qualified nonprofit health insurance issuers.</td>
<td></td>
</tr>
<tr>
<td>13a Is the organization licensed to issue qualified health plans in more than one state?</td>
<td>13a</td>
</tr>
<tr>
<td>13b 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</td>
<td>13b</td>
</tr>
<tr>
<td>13c Enter the amount of reserves on hand</td>
<td>13c</td>
</tr>
<tr>
<td>14a Did the organization receive any payments for indoor tanning services during the tax year?</td>
<td>14a X</td>
</tr>
<tr>
<td>14b If &quot;Yes,&quot; has it filed a Form 720 to report these payments? If &quot;No,&quot; provide an explanation in Schedule O</td>
<td>14b</td>
</tr>
</tbody>
</table>
Section A. Governing Body and Management

1a Enter the number of voting members of the governing body at the end of the tax year
   1a  15

   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 a similar committee, explain in Schedule O.

1b Enter the number of voting members included in line 1a, above, who are independent
   1b  15

2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?
   2  X

3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?
   3  X

4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?
   4  X

5 Did the organization become aware during the year of a significant diversion of the organization's assets?
   5  X

6 Did the organization have members or stockholders?
   6  X

7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?
   7a  X

7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?
   7b  X

8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:
   a. The governing body?
      8a  X
   b. Each committee with authority to act on behalf of the governing body?
      8b  X

9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O?
   9  X

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

10a Did the organization have local chapters, branches, or affiliates?
    10a  X

10b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?
    10b  X

11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?
    11a  X

11b Describe in Schedule O the process, if any, used by the organization to review this Form 990.
    11b  X

12a Did the organization have a written conflict of interest policy? If "No," go to line 13
    12a  X

12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?
    12b  X

12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done
    12c  X

13 Did the organization have a written whistleblower policy?
    13  X

14 Did the organization have a written document retention and destruction policy?
    14  X

15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?
   a. The organization's CEO, Executive Director, or top management official
      15a  X
   b. Other officers or key employees of the organization
      15b  X

16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?
    16a  X

16b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?
    16b  X

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed:
    NY, AL, AK, AZ, AR, CA, CO, CT, FL, GA, HI, IL

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3) only) available for public inspection: Indicate how you made these available. Check all that apply.
   X Own website  X Another's website  X 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:
    DEMASCO, SENA AND JAHELKA, LLP - 516-541-6549
    5788 MERRICK ROAD, MASSAPEQUA, NY 11768

SEE SCHEDULE O FOR FULL LIST OF STATES
### Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

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

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

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

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

<table>
<thead>
<tr>
<th>(A) Name and Title</th>
<th>(B) Average hours per week</th>
<th>(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)</th>
<th>(D) Reportable compensation from the organization (W-2/1099-MISC)</th>
<th>(E) Reportable compensation from related organizations (W-2/1099-MISC)</th>
<th>(F) Estimated amount of other compensation from the organization and related organizations</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) ROBERT BOUCAI</td>
<td>1.00 X</td>
<td></td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>DIRECTOR</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2) JUDY R. DUBNO, PHD</td>
<td>1.00 X</td>
<td></td>
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</tr>
<tr>
<td>COUNCIL REPRESENTATIVE</td>
<td></td>
<td></td>
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<td></td>
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</tr>
<tr>
<td>(3) GEORGE A. GATES, MD</td>
<td>10.00 X</td>
<td></td>
<td>0.</td>
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</tr>
<tr>
<td>MEDICAL DIRECTOR THRU 5/28/12</td>
<td></td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>(4) REBECCA GINZBURG</td>
<td>1.00 X</td>
<td></td>
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<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>DIRECTOR</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(5) ROGER M. HARRIS</td>
<td>1.00 X</td>
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<tr>
<td>SECRETARY</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>(6) ELIZABETH KEITHLEY, PHD</td>
<td>1.00 X</td>
<td></td>
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<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>DIRECTOR</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(7) RICHARD T. MIYAMOTO, MD</td>
<td>0.50 X</td>
<td></td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>DIRECTOR</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(8) MICHAEL C. NOLAN</td>
<td>1.00 X</td>
<td></td>
<td>0.</td>
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<td>0.</td>
</tr>
<tr>
<td>TREASURER</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(9) PAUL E. ORLIN</td>
<td>1.00 X</td>
<td></td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>DIRECTOR</td>
<td></td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>(10) ELIZABETH THORP</td>
<td>0.50 X</td>
<td></td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>DIRECTOR</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(11) RONALD E. WEST</td>
<td>1.00 X</td>
<td></td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>SECRETARY THRU 9/10/12</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(12) CLIFFORD P. TALLMAN, JR</td>
<td>2.00 X</td>
<td></td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>CHAIR THRU 1/1/12</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(13) DAVID S. HAYNES</td>
<td>1.00 X</td>
<td></td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>MEDICAL DIRECTOR</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(14) PETER STEYGER, PHD</td>
<td>5.00 X</td>
<td></td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>SCIENTIFIC DIRECTOR</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(15) SHARI S. EBERS</td>
<td></td>
<td></td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>CHAIR FROM 1/1/12</td>
<td>20.00 X</td>
<td></td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>(16) NANCY WILLIAMS</td>
<td>10.00 X</td>
<td></td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>DIRECTOR</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(17) MARK ANGELO</td>
<td>1.00 X</td>
<td></td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>DIRECTOR</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Part VII  Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

<table>
<thead>
<tr>
<th>(A) Name and title</th>
<th>(B) Average hours per week</th>
<th>(C) Position</th>
<th>(D) Reportable compensation from the organization (W-2/1099-MISC)</th>
<th>(E) Reportable compensation from related organizations (W-2/1099-MISC)</th>
<th>(F) Estimated amount of other compensation from the organization and related organizations</th>
</tr>
</thead>
<tbody>
<tr>
<td>(18) ANDREA BOIDMAN</td>
<td>55.00</td>
<td>X</td>
<td>135,404.</td>
<td>0.</td>
<td>0.</td>
</tr>
</tbody>
</table>

1b Sub-total: 135,404. 0. 0.

c Total from continuation sheets to Part VII, Section A: 0. 0. 0.

d Total (add lines 1b and 1c): 135,404. 0. 0.

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: 1

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: X

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: X

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: 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.

<table>
<thead>
<tr>
<th>(A) Name and business address</th>
<th>(B) Description of services</th>
<th>(C) Compensation</th>
</tr>
</thead>
<tbody>
<tr>
<td>NONE</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Contributions, Gifts, Grants, and Other Similar Amounts</th>
<th>(A) Total revenue</th>
<th>(B) Related or exempt function revenue</th>
<th>(C) Unrelated business revenue</th>
<th>(D) Revenue excluded from tax under sections 512, 513, or 514</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 a Federated campaigns</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1b Membership dues</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1c Fundraising events</td>
<td>102,444.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1d Related organizations</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1e Government grants (contributions)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1f All other contributions, gifts, grants, and similar amounts not included above</td>
<td>1713830.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>g Noncash contributions included in lines 1a-1f $</td>
<td>330,961.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>h Total. Add lines 1a-1f</td>
<td>1816274.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Program Service Revenue</th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>2 a PUBLISHING INCOME</td>
<td>511120</td>
<td>289,644.</td>
<td>289,644.</td>
<td></td>
</tr>
<tr>
<td>3 Investment income (including dividends, interest, and other similar amounts)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4 Income from investment of tax-exempt bond proceeds</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5 Royalties</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Other Revenue</th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>6 a Gross rents</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b Less: rental expenses</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c Rental income or (loss)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d Net rental income or (loss)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7 a Gross amount from sales of assets other than inventory</td>
<td>431279.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b Less: cost or other basis and sales expenses</td>
<td>434026.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c Gain or (loss)</td>
<td>-2,747.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d Net gain or (loss)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8 a Gross income from fundraising events (not including $ 102,444. of contributions reported on line 1c). See Part IV, line 18</td>
<td>57,889.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b Less: direct expenses</td>
<td>83,995.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c Net income or (loss) from fundraising events</td>
<td>-26,106.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9 a Gross income from gaming activities. See Part IV, line 19</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b Less: direct expenses</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c Net income or (loss) from gaming activities</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10 a Gross sales of inventory, less returns and allowances</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b Less: cost of goods sold</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c Net income or (loss) from sales of inventory</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Miscellaneous Revenue</th>
<th></th>
<th></th>
<th></th>
<th></th>
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</thead>
<tbody>
<tr>
<td>11 a GRANT REFUNDS</td>
<td>900099</td>
<td>5,804.</td>
<td>5,804.</td>
<td></td>
</tr>
<tr>
<td>b MAGAZINE MARKETING</td>
<td>900099</td>
<td>586.</td>
<td>586.</td>
<td></td>
</tr>
<tr>
<td>c All other revenue</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e Total. Add lines 11a-11d</td>
<td>6,390.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12 Total revenue. See instructions</td>
<td>2124379.</td>
<td>6,390.</td>
<td>289,644.</td>
<td>12,071.</td>
</tr>
<tr>
<td></td>
<td>(A)</td>
<td>(B)</td>
<td>(C)</td>
<td>(D)</td>
</tr>
<tr>
<td>---</td>
<td>------</td>
<td>------</td>
<td>------</td>
<td>------</td>
</tr>
<tr>
<td>1</td>
<td>Grants and other assistance to governments and organizations in the United States. See Part IV, line 21</td>
<td>1,281,647</td>
<td>1,281,647</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Grants and other assistance to individuals in the United States. See Part IV, line 22</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Benefits paid to or for members</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Compensation of current officers, directors, trustees, and key employees</td>
<td>166,000</td>
<td>110,722</td>
<td>13,778</td>
</tr>
<tr>
<td>6</td>
<td>Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Other salaries and wages</td>
<td>352,049</td>
<td>47,883</td>
<td>43,629</td>
</tr>
<tr>
<td>8</td>
<td>Pension plan accruals and contributions (include section 401(k) and section 403(b) employer contributions)</td>
<td></td>
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<tr>
<td>9</td>
<td>Other employee benefits</td>
<td>78,231</td>
<td>35,204</td>
<td>23,469</td>
</tr>
<tr>
<td>10</td>
<td>Payroll taxes</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11</td>
<td>Fees for services (non-employees):</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>a Management</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>b Legal</td>
<td>10,379</td>
<td>10,379</td>
<td></td>
</tr>
<tr>
<td></td>
<td>c Accounting</td>
<td>55,712</td>
<td>55,712</td>
<td></td>
</tr>
<tr>
<td></td>
<td>d Lobbying</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>e Professional fundraising services. See Part IV, line 17</td>
<td>25,325</td>
<td></td>
<td>25,325</td>
</tr>
<tr>
<td></td>
<td>f Investment management fees</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12</td>
<td>Advertising and promotion</td>
<td>174,378</td>
<td>159,656</td>
<td>10,943</td>
</tr>
<tr>
<td>13</td>
<td>Office expenses</td>
<td>109,422</td>
<td>108,173</td>
<td>157</td>
</tr>
<tr>
<td>14</td>
<td>Information technology</td>
<td>284,858</td>
<td>183,419</td>
<td>18,594</td>
</tr>
<tr>
<td>15</td>
<td>Royalties</td>
<td>35,509</td>
<td>11,897</td>
<td>17,157</td>
</tr>
<tr>
<td>16</td>
<td>Occupancy</td>
<td>111,137</td>
<td>39,227</td>
<td>32,683</td>
</tr>
<tr>
<td>17</td>
<td>Travel</td>
<td>38,852</td>
<td>34,366</td>
<td>25</td>
</tr>
<tr>
<td>18</td>
<td>Payments of travel or entertainment expenses for any federal, state, or local public officials</td>
<td>17,500</td>
<td>17,500</td>
<td></td>
</tr>
<tr>
<td>19</td>
<td>Conferences, conventions, and meetings</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>20</td>
<td>Interest</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>21</td>
<td>Payments to affiliates</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>22</td>
<td>Depreciation, depletion, and amortization</td>
<td>33,859</td>
<td>33,859</td>
<td></td>
</tr>
<tr>
<td>23</td>
<td>Insurance</td>
<td>5,663</td>
<td></td>
<td>5,663</td>
</tr>
<tr>
<td>24</td>
<td>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.)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>a EDITORIAL/ARTWORK/DESIGN</td>
<td>121,246</td>
<td>109,871</td>
<td>11,375</td>
</tr>
<tr>
<td></td>
<td>b OTHER EXPENSES</td>
<td>26,870</td>
<td>11,887</td>
<td>7,145</td>
</tr>
<tr>
<td></td>
<td>c FILING FEES</td>
<td>14,178</td>
<td></td>
<td>14,178</td>
</tr>
<tr>
<td></td>
<td>d DUES AND SUBSCRIPTIONS</td>
<td>11,429</td>
<td>3,024</td>
<td>2,498</td>
</tr>
<tr>
<td></td>
<td>e All other expenses</td>
<td>11,400</td>
<td>11,400</td>
<td></td>
</tr>
<tr>
<td>25</td>
<td>Total functional expenses. Add lines 1 through 24e</td>
<td>2,965,644</td>
<td>2,165,876</td>
<td>275,691</td>
</tr>
<tr>
<td>26</td>
<td>Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
## Balance Sheet

<table>
<thead>
<tr>
<th>Assets</th>
<th>(A) Beginning of year</th>
<th>(B) End of year</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Cash - non-interest-bearing</td>
<td>89,582</td>
<td>9,080</td>
</tr>
<tr>
<td>2 Savings and temporary cash investments</td>
<td>2,698,468</td>
<td>1,817,617</td>
</tr>
<tr>
<td>3 Pledges and grants receivable, net</td>
<td>138,850</td>
<td>148,177</td>
</tr>
<tr>
<td>4 Accounts receivable, net</td>
<td>58,005</td>
<td>49,445</td>
</tr>
<tr>
<td>5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L</td>
<td></td>
<td>5</td>
</tr>
<tr>
<td>6 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)</td>
<td></td>
<td>6</td>
</tr>
<tr>
<td>7 Notes and loans receivable, net</td>
<td></td>
<td>7</td>
</tr>
<tr>
<td>8 Inventories for sale or use</td>
<td></td>
<td>8</td>
</tr>
<tr>
<td>9 Prepaid expenses and deferred charges</td>
<td>140,860</td>
<td>59,575</td>
</tr>
<tr>
<td>10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D</td>
<td>180,703</td>
<td></td>
</tr>
<tr>
<td>10b Less: accumulated depreciation</td>
<td>72,333</td>
<td>55,916</td>
</tr>
<tr>
<td>11 Investments - publicly traded securities</td>
<td>963,071</td>
<td>1,315,793</td>
</tr>
<tr>
<td>12 Investments - other securities. See Part IV, line 11</td>
<td>12</td>
<td></td>
</tr>
<tr>
<td>13 Investments - program-related. See Part IV, line 11</td>
<td>13</td>
<td></td>
</tr>
<tr>
<td>14 Intangible assets</td>
<td>14</td>
<td></td>
</tr>
<tr>
<td>15 Other assets. See Part IV, line 11</td>
<td>15</td>
<td></td>
</tr>
<tr>
<td>16 Total assets. Add lines 1 through 15 (must equal line 34)</td>
<td>4,144,752</td>
<td>3,508,057</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Liabilities</th>
<th>(A) Beginning of year</th>
<th>(B) End of year</th>
</tr>
</thead>
<tbody>
<tr>
<td>17 Accounts payable and accrued expenses</td>
<td>69,697</td>
<td>79,126</td>
</tr>
<tr>
<td>18 Grants payable</td>
<td>414,500</td>
<td>735,667</td>
</tr>
<tr>
<td>19 Deferred revenue</td>
<td>131,100</td>
<td></td>
</tr>
<tr>
<td>20 Tax-exempt bond liabilities</td>
<td></td>
<td>20</td>
</tr>
<tr>
<td>21 Escrow or custodial account liability. Complete Part IV of Schedule D</td>
<td></td>
<td>21</td>
</tr>
<tr>
<td>22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L</td>
<td></td>
<td>22</td>
</tr>
<tr>
<td>23 Secured mortgages and notes payable to unrelated third parties</td>
<td></td>
<td>23</td>
</tr>
<tr>
<td>24 Unsecured notes and loans payable to unrelated third parties</td>
<td></td>
<td>24</td>
</tr>
<tr>
<td>25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D</td>
<td>14,256</td>
<td>7,263</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Net Assets or Fund Balances</th>
<th>(A) Beginning of year</th>
<th>(B) End of year</th>
</tr>
</thead>
<tbody>
<tr>
<td>27 Unrestricted net assets</td>
<td></td>
<td>2,351,007</td>
</tr>
<tr>
<td>28 Temporarily restricted net assets</td>
<td>845,424</td>
<td>1,138,796</td>
</tr>
<tr>
<td>29 Permanently restricted net assets</td>
<td>318,768</td>
<td>318,768</td>
</tr>
<tr>
<td>Organizations that do not follow SFAS 117, check here ▶ and complete lines 27 through 29, and lines 33 and 34.</td>
<td></td>
<td>27</td>
</tr>
<tr>
<td>30 Capital stock or trust principal, or current funds</td>
<td></td>
<td>30</td>
</tr>
<tr>
<td>31 Palch in capital surplus, or land, building, or equipment fund</td>
<td></td>
<td>31</td>
</tr>
<tr>
<td>32 Retained earnings, endowment, accumulated income, or other funds</td>
<td>32</td>
<td></td>
</tr>
<tr>
<td>33 Total net assets or fund balances</td>
<td>3,515,199</td>
<td>2,686,001</td>
</tr>
<tr>
<td>34 Total liabilities and net assets/fund balances</td>
<td>4,144,752</td>
<td>3,508,057</td>
</tr>
</tbody>
</table>

Form 990 (2011)
### Part XI | Reconciliation of Net Assets

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

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

### Part XII | Financial Statements and Reporting

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

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Accounting method used to prepare the Form 990:</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Cash</td>
<td>X</td>
</tr>
<tr>
<td>2a</td>
<td>Were the organization’s financial statements compiled or reviewed by an independent accountant?</td>
<td>X</td>
</tr>
<tr>
<td>2b</td>
<td>Were the organization’s financial statements audited by an independent accountant?</td>
<td>X</td>
</tr>
<tr>
<td>2c</td>
<td>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?</td>
<td>X</td>
</tr>
<tr>
<td>3a</td>
<td>As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?</td>
<td>X</td>
</tr>
<tr>
<td>3b</td>
<td>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.</td>
<td></td>
</tr>
</tbody>
</table>
Public Charity Status and Public Support

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

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

Name of the organization: HEARING HEALTH FOUNDATION

Employer identification number: 13-1882107

Part I

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

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

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

2
A school described in section 170(b)(1)(A)(ii), (Attach Schedule E).

3
A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).

4
A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state:

5
An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)

6
A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).

7
An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)

8
A community trust described in section 170(b)(1)(A)(vii). (Complete Part II.)

9
An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)

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

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

a
Type I

b
Type II

c
Type III - Functionally Integrated

11e
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).

11f
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

11g
Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

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

Yes

No

11g(i)

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

Yes

No

11g(ii)

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

Yes

No

11g(iii)

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

(i) Name of supported organization

(ii) EIN

(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))

(v) Is the organization in col. (i) listed in your governing document?

(vi) Did you notify the organization in col. (i) of your support?

(vii) Is the organization in col. (i) organized in the U.S.?

Amount of support

Yes

No

Yes

No

Yes

No

Total

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

Schedule A (Form 990 or 990-EZ) 2011

12021
01-24-12

16310724 756359 104105.2 2011.05080 HEARING HEALTH FOUNDATION 10410511
### Section A. Public Support

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2007</th>
<th>(b) 2008</th>
<th>(c) 2009</th>
<th>(d) 2010</th>
<th>(e) 2011</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1  Gifts, grants, contributions, and membership fees received. (Do not include any “unusual grants.”)</td>
<td>1,800,920</td>
<td>2,685,122</td>
<td>2,115,069</td>
<td>1,751,935</td>
<td>1,816,274</td>
<td>10,169,320</td>
</tr>
<tr>
<td>2  Tax revenues levied for the organization’s benefit and either paid to or expended on its behalf</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3  The value of services or facilities furnished by a governmental unit to the organization without charge</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4  <strong>Total. Add lines 1 through 3</strong></td>
<td>1,800,920</td>
<td>2,685,122</td>
<td>2,115,069</td>
<td>1,751,935</td>
<td>1,816,274</td>
<td>10,169,320</td>
</tr>
<tr>
<td>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)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6  <strong>Public support. Subtract line 5 from line 4.</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Section B. Total Support

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2007</th>
<th>(b) 2008</th>
<th>(c) 2009</th>
<th>(d) 2010</th>
<th>(e) 2011</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>7  Amounts from line 4</td>
<td>1,800,920</td>
<td>2,685,122</td>
<td>2,115,069</td>
<td>1,751,935</td>
<td>1,816,274</td>
<td>10,169,320</td>
</tr>
<tr>
<td>8  Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources</td>
<td>66,564</td>
<td>15,550</td>
<td>33,800</td>
<td>37,126</td>
<td>40,924</td>
<td>193,964</td>
</tr>
<tr>
<td>9  Net income from unrelated business activities, whether or not the business is regularly carried on</td>
<td>64,319</td>
<td>94,811</td>
<td>185,857</td>
<td>236,841</td>
<td>289,644</td>
<td>871,472</td>
</tr>
<tr>
<td>10  Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)</td>
<td>15,309</td>
<td>65,148</td>
<td>7,677</td>
<td>6,390</td>
<td>94,524</td>
<td></td>
</tr>
<tr>
<td>11  <strong>Total support. Add lines 7 through 10</strong></td>
<td>11,329,280</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12  Gross receipts from related activities, etc. (see instructions)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>31,200</td>
</tr>
<tr>
<td>13  <strong>First five years. If the Form 990 is for the organization’s first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here.</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Section C. Computation of Public Support Percentage

| (a) Public support percentage for 2011 (line 6, column (f) divided by line 11, column (f)) | 56.44% |
| (b) Public support percentage from 2010 Schedule A, Part II, line 14 | 55.92% |

**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. **[X]**

**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. **[ ]**

**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. **[ ]**
### Section A. Public Support

#### Calendar year (or fiscal year beginning in)

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

### Section B. Total Support

#### Calendar year (or fiscal year beginning in)

<table>
<thead>
<tr>
<th></th>
<th>(a) 2007</th>
<th>(b) 2008</th>
<th>(c) 2009</th>
<th>(d) 2010</th>
<th>(e) 2011</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>9</td>
<td>Amounts from line 6</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10a</td>
<td>Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10b</td>
<td>Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11</td>
<td>Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12</td>
<td>Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13</td>
<td>Total support. Add lines 9, 10a, 11, and 12</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>14</td>
<td>First five years. If the organization's first, second, third, fourth, or fifth tax year is for the organization</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Section C. Computation of Public Support Percentage

<table>
<thead>
<tr>
<th></th>
<th>(a) 2007</th>
<th>(b) 2008</th>
<th>(c) 2009</th>
<th>(d) 2010</th>
<th>(e) 2011</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>15</td>
<td>Public support percentage for 2011 (line 8, column (f) divided by line 13, column (f))</td>
<td>15</td>
<td>%</td>
<td>16</td>
<td>Public support percentage from 2010 Schedule A, Part III, line 15</td>
<td>16</td>
</tr>
</tbody>
</table>

### Section D. Computation of Investment Income Percentage

<table>
<thead>
<tr>
<th></th>
<th>(a) 2007</th>
<th>(b) 2008</th>
<th>(c) 2009</th>
<th>(d) 2010</th>
<th>(e) 2011</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>17</td>
<td>Investment income percentage for 2011 (line 10c, column (f) divided by line 13, column (f))</td>
<td>17</td>
<td>%</td>
<td>18</td>
<td>Investment income percentage from 2010 Schedule A, Part III, line 17</td>
<td>18</td>
</tr>
<tr>
<td>19a</td>
<td>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</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>19b</td>
<td>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</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th>(a) 2007</th>
<th>(b) 2008</th>
<th>(c) 2009</th>
<th>(d) 2010</th>
<th>(e) 2011</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>20</td>
<td>Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
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.  

2011  

Name of the organization:  
HEARING HEALTH FOUNDATION  
Employer identification number:  
13-1882107  

Organization type (check one):  

Filers of:  
Form 990 or 990-EZ  
13(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  
X 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)
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.)

<table>
<thead>
<tr>
<th>(a) Filing organization’s totals</th>
<th>(b) Affiliated group totals</th>
</tr>
</thead>
</table>

1a Total lobbying expenditures to influence public opinion (grass roots lobbying)

1b Total lobbying expenditures to influence a legislative body (direct lobbying)

1c Total lobbying expenditures (add lines 1a and 1b)

1d Other exempt purpose expenditures

1e Total exempt purpose expenditures (add lines 1c and 1d)

1f Lobbying nontaxable amount. Enter the amount from the following table in both columns.

<table>
<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>

1g Grassroots nontaxable amount (enter 25% of line 1f)

1h Subtract line 1g from line 1a. If zero or less, enter 0.

1i Subtract line 1f from line 1c. If zero or less, enter 0.

1j 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

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2008</th>
<th>(b) 2009</th>
<th>(c) 2010</th>
<th>(d) 2011</th>
<th>(e) Total</th>
</tr>
</thead>
</table>

2a Lobbying nontaxable amount

<table>
<thead>
<tr>
<th>b Lobbying ceiling amount</th>
<th>(150% of line 2a, column(e))</th>
</tr>
</thead>
<tbody>
<tr>
<td>2008</td>
<td>226,150.</td>
</tr>
</tbody>
</table>

2b Lobbying ceiling amount

<table>
<thead>
<tr>
<th>c Total lobbying expenditures</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>2008</td>
<td>18,491.</td>
</tr>
</tbody>
</table>

2c Total lobbying expenditures

<table>
<thead>
<tr>
<th>d Grassroots nontaxable amount</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>2008</td>
<td>56,538.</td>
</tr>
</tbody>
</table>

2d Grassroots nontaxable amount

<table>
<thead>
<tr>
<th>e Grassroots ceiling amount</th>
<th>(150% of line 2d, column (e))</th>
</tr>
</thead>
<tbody>
<tr>
<td>2008</td>
<td>84,807.</td>
</tr>
</tbody>
</table>

2e Grassroots ceiling amount

<table>
<thead>
<tr>
<th>f Grassroots lobbying expenditures</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>2008</td>
<td></td>
</tr>
</tbody>
</table>
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.

<table>
<thead>
<tr>
<th>(a)</th>
<th>(b)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>No</td>
</tr>
</tbody>
</table>

1. During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:
   a. Volunteers? ........................................
   b. Paid staff or management (include compensation in expenses reported on lines 1c through 1l)? ....
   c. Media advertisements? .................................
   d. Mailings to members, legislators, or the public? ........................................
   e. Publications, or published or broadcast statements? ........................................
   f. Grants to other organizations for lobbying purposes? ........................................
   g. Direct contact with legislators, their staffs, government officials, or a legislative body? ........................................
   h. Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? ........................................
   i. Other activities? ........................................
   j. Total. Add lines 1c through 1i ........................................

2. a. Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? ................
   b. If "Yes," enter the amount of any tax incurred under section 4912 ........................................
   c. If "Yes," enter the amount of any tax incurred by organization managers under section 4912 ........................................
   d. If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? ................

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

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>No</td>
</tr>
</tbody>
</table>

1. Were substantially all (90% or more) dues received nondeductible by members? ........................................
2. Did the organization make only in-house lobbying expenditures of $2,000 or less? ........................................
3. Did the organization agree to carry over lobbying and political expenditures from the prior year? ........................................

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."

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
</tr>
</tbody>
</table>

1. Dues, assessments and similar amounts from members ........................................
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 ........................................
   b. Carryover from last year ........................................
   c. Total ........................................
3. Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues ........................................
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? ........................................
5. Taxable amount of lobbying and political expenditures (see instructions) ........................................

Part IV. Supplemental Information

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

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Schedule C (Form 990 or 990-EZ) 2011

16310724 756359 104105.2 2011.05080 HEARING HEALTH FOUNDATION 10410511
**Part I**

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

<table>
<thead>
<tr>
<th></th>
<th>(a) Donor advised funds</th>
<th>(b) Funds and other accounts</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Total number at end of year</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Aggregate contributions to (during year)</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Aggregate grants from (during year)</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Aggregate value at end of year</td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization’s property, subject to the organization’s exclusive legal control?</td>
<td>Yes</td>
</tr>
<tr>
<td>6</td>
<td>Did the organization inform all grantees, donors, and donor advisors in writing that grant funds 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?</td>
<td>Yes</td>
</tr>
</tbody>
</table>

**Part II**

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

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

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

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

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.

1b. 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:

<table>
<thead>
<tr>
<th></th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>1c</td>
<td></td>
</tr>
<tr>
<td>1d</td>
<td></td>
</tr>
<tr>
<td>1e</td>
<td></td>
</tr>
<tr>
<td>1f</td>
<td></td>
</tr>
</tbody>
</table>

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

   b. If “Yes,” explain the arrangement in Part XIV.

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

1a. Beginning of year balance

<table>
<thead>
<tr>
<th>(a) Current year</th>
<th>(b) Prior year</th>
<th>(c) Two years back</th>
<th>(d) Three years back</th>
<th>(e) Four years back</th>
</tr>
</thead>
<tbody>
<tr>
<td>332,186</td>
<td>328,766</td>
<td>320,710</td>
<td>319,405</td>
<td></td>
</tr>
</tbody>
</table>

   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

   | 341,978          | 332,186        | 328,766           | 320,710             |

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

   a. Board designated or quasi-endowment

   b. Permanent endowment

   c. Temporarily restricted endowment

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

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

   (i) unrelated organizations

   (ii) related organizations

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

   [ ] Yes [ ] No

3b. See Part XIV the intended uses of the organization’s endowment funds.

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

<table>
<thead>
<tr>
<th>Description of property</th>
<th>(a) Cost or other basis (investment)</th>
<th>(b) Cost or other basis (other)</th>
<th>(c) Accumulated depreciation</th>
<th>(d) Book value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Land</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Buildings</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Leasehold improvements</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Equipment</td>
<td>47,205</td>
<td>19,333</td>
<td>27,872</td>
<td></td>
</tr>
<tr>
<td>Other</td>
<td>133,498</td>
<td>53,000</td>
<td>80,498</td>
<td></td>
</tr>
</tbody>
</table>

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c)).

108,370.

Schedule D (Form 990) 2011
### Part VII Investments - Other Securities

<table>
<thead>
<tr>
<th>Description of security or category</th>
<th>Book value</th>
<th>Method of valuation: Cost or end-of-year market value</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) Financial derivatives</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2) Closely-held equity interests</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(3) Other</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(A)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(B)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(C)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(D)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(E)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(F)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(G)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(H)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(I)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

### Part VIII Investments - Program Related

<table>
<thead>
<tr>
<th>Description of investment type</th>
<th>Book value</th>
<th>Method of valuation: Cost or end-of-year market value</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(3)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(4)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(5)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(6)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(7)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(8)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(9)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(10)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

### Part IX Other Assets

<table>
<thead>
<tr>
<th>Description</th>
<th>Book value</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
<td></td>
</tr>
<tr>
<td>(2)</td>
<td></td>
</tr>
<tr>
<td>(3)</td>
<td></td>
</tr>
<tr>
<td>(4)</td>
<td></td>
</tr>
<tr>
<td>(5)</td>
<td></td>
</tr>
<tr>
<td>(6)</td>
<td></td>
</tr>
<tr>
<td>(7)</td>
<td></td>
</tr>
<tr>
<td>(8)</td>
<td></td>
</tr>
<tr>
<td>(9)</td>
<td></td>
</tr>
<tr>
<td>(10)</td>
<td></td>
</tr>
</tbody>
</table>

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

### Part X Other Liabilities

1. **Description of liability**: Federal income taxes
   - Book value: 7,263.

2. **Description of liability**: DEFERRED RENT EXPENSE
   - Book value: 7,263.

**Total. (Column (b) must equal Form 990, Part X, col (B) line 25.)**
### Part XI: Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements

<table>
<thead>
<tr>
<th>Line</th>
<th>Description</th>
<th>Revenue (Form 990, Part VIII, column (A), line 12)</th>
<th>Expenses (Form 990, Part IX, column (A), line 25)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Total revenue</td>
<td>2,124,379.</td>
<td>2,965,644.</td>
</tr>
<tr>
<td>2</td>
<td>Total expenses</td>
<td>2</td>
<td>5,328,374.</td>
</tr>
<tr>
<td>3</td>
<td>Excess or (deficit) for the year</td>
<td>12,067.</td>
<td>0.</td>
</tr>
<tr>
<td>4</td>
<td>Net unrealized gains (losses) on investments</td>
<td>12,067.</td>
<td>0.</td>
</tr>
<tr>
<td>5</td>
<td>Donated services and use of facilities</td>
<td>5,316,307.</td>
<td>0.</td>
</tr>
<tr>
<td>6</td>
<td>Investment expenses</td>
<td>2a-2d</td>
<td>5,316,307.</td>
</tr>
<tr>
<td>7</td>
<td>Prior period adjustments</td>
<td>2e</td>
<td>5,328,374.</td>
</tr>
<tr>
<td>8</td>
<td>Other (Describe in Part XIV)</td>
<td>4a-4b</td>
<td>0.</td>
</tr>
<tr>
<td>9</td>
<td>Total adjustments (net), Add lines 4 through 8</td>
<td>3</td>
<td>2,124,379.</td>
</tr>
<tr>
<td>10</td>
<td>Excess or (deficit) for the year per audited financial statements, Combine lines 3 and 9</td>
<td>10</td>
<td>0.</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Line</th>
<th>Description</th>
<th>Revenue</th>
<th>Expenses</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Total revenue, gains, and other support per audited financial statements</td>
<td>1,7452,753.</td>
<td>8,281,951.</td>
</tr>
<tr>
<td>2</td>
<td>Amounts included on line 1 but not on Form 990, Part VIII, line 12:</td>
<td>2a-2d</td>
<td>5,316,307.</td>
</tr>
<tr>
<td></td>
<td>a. Net unrealized gains on investments</td>
<td>2a</td>
<td>12,067.</td>
</tr>
<tr>
<td></td>
<td>b. Donated services and use of facilities</td>
<td>2b</td>
<td>5,316,307.</td>
</tr>
<tr>
<td></td>
<td>c. Recoveries of prior year grants</td>
<td>2c</td>
<td>0.</td>
</tr>
<tr>
<td></td>
<td>d. Other (Describe in Part XIV)</td>
<td>2d</td>
<td>0.</td>
</tr>
<tr>
<td></td>
<td>e. Add lines 2a through 2d</td>
<td>2e</td>
<td>5,328,374.</td>
</tr>
<tr>
<td>3</td>
<td>Subtract line 2e from line 1</td>
<td>3</td>
<td>2,124,379.</td>
</tr>
<tr>
<td>4</td>
<td>Amounts included on Form 990, Part VIII, line 12, but not on line 1:</td>
<td>4a-4c</td>
<td>0.</td>
</tr>
<tr>
<td></td>
<td>a. Investment expenses not included on Form 990, Part VIII, line 7b</td>
<td>4a</td>
<td>0.</td>
</tr>
<tr>
<td></td>
<td>b. Other (Describe in Part XIV)</td>
<td>4b</td>
<td>0.</td>
</tr>
<tr>
<td></td>
<td>c. Add lines 4a and 4b</td>
<td>4c</td>
<td>0.</td>
</tr>
<tr>
<td>5</td>
<td>Total revenue, Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)</td>
<td>5</td>
<td>2,124,379.</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Line</th>
<th>Description</th>
<th>Expenses</th>
<th>Income</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Total expenses and losses per audited financial statements</td>
<td>1,8281,951.</td>
<td>8,281,951.</td>
</tr>
<tr>
<td>2</td>
<td>Amounts included on line 1 but not on Form 990, Part IX, line 25:</td>
<td>2a-2d</td>
<td>5,316,307.</td>
</tr>
<tr>
<td></td>
<td>b. Prior year adjustments</td>
<td>2b</td>
<td>0.</td>
</tr>
<tr>
<td></td>
<td>c. Other losses</td>
<td>2c</td>
<td>0.</td>
</tr>
<tr>
<td></td>
<td>d. Other (Describe in Part XIV)</td>
<td>2d</td>
<td>0.</td>
</tr>
<tr>
<td></td>
<td>e. Add lines 2a through 2d</td>
<td>2e</td>
<td>5,316,307.</td>
</tr>
<tr>
<td>3</td>
<td>Subtract line 2e from line 1</td>
<td>3</td>
<td>2,965,644.</td>
</tr>
<tr>
<td>4</td>
<td>Amounts included on Form 990, Part IX, line 25, but not on line 1:</td>
<td>4a-4c</td>
<td>0.</td>
</tr>
<tr>
<td></td>
<td>a. Investment expenses not included on Form 990, Part VIII, line 7b</td>
<td>4a</td>
<td>0.</td>
</tr>
<tr>
<td></td>
<td>b. Other (Describe in Part XIV)</td>
<td>4b</td>
<td>0.</td>
</tr>
<tr>
<td></td>
<td>c. Add lines 4a and 4b</td>
<td>4c</td>
<td>0.</td>
</tr>
<tr>
<td>5</td>
<td>Total expenses, Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)</td>
<td>5</td>
<td>2,965,644.</td>
</tr>
</tbody>
</table>

### Part XIV: Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, 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 ENDOWMENT CORPUS FROM THE HEARST FOUNDATION PROVIDES INVESTMENT INCOME TO FUND THE HEARST ENDEWDED OTOLGIC FELLOWSHIP.**

**THE ENDOWMENT CORPUS FROM C.H.E.A.R. INC. PROVIDES INVESTMENT INCOME TO FUND THE ANNUAL C.H.E.A.R. ENDOWMENT GRANT.**

**PART X, LINE 2: THE FOUNDATION RECOGNIZES THE EFFECT OF INCOME TAX POSITIONS ONLY IF THOSE POSITIONS ARE MORE LIKELY THAN NOT OF BEING SUSTAINED. MANAGEMENT HAS DETERMINED THAT THE FOUNDATION HAD NO UNCERTAIN**
TAX POSITIONS THAT WOULD REQUIRE FINANCIAL STATEMENT RECOGNITION.
Supplemental Information Regarding Fundraising or Gaming Activities

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.

Name of the organization: HEARING HEALTH FOUNDATION
Employer identification number: 13-1882107

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. [X] Mail solicitations
   b. [X] Internet and email solicitations
   c. [X] Phone solicitations
   d. [X] In-person solicitations
   e. [X] Solicitation of non-government grants
   f. Solicitation of government grants
   g. [X] Special fundraising events

2. 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? [X] Yes □ No

   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?

   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)
       TRIPPI CONSULTING ASSOCIATES,
       INC. - 255 PLUTARCH ROAD,
   (ii) Activity
       MONTHLY PERFORMANCE
       REPORTS AND DESIGN ARTWORK
   (iii) Did fundraiser have custody or control of contributions?
       Yes □ No [X]
   (iv) Gross receipts from activity
       49,997.
   (v) Amount paid to (or retained by) fundraiser listed in col. (i)
       25,325.
   (vi) Amount paid to (or retained by) organization
       24,672.

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

LHA  Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule G (Form 990 or 990-EZ) 2011
SEE PART IV FOR CONTINUATIONS

132061 01-23-12
16310724 756359 104105.2 2011.05080 HEARING HEALTH FOUNDATION 10410511
### 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.

#### CELEBRATING THE SENSES

<table>
<thead>
<tr>
<th>Revenue</th>
<th>(a) Event #1</th>
<th>(b) Event #2</th>
<th>(c) Other events</th>
<th>(d) Total events</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Gross receipts</td>
<td>160,333</td>
<td></td>
<td></td>
<td>160,333</td>
</tr>
<tr>
<td>2 Less: Charitable contributions</td>
<td>102,444</td>
<td></td>
<td></td>
<td>102,444</td>
</tr>
<tr>
<td>3 Gross income (line 1 minus line 2)</td>
<td>57,889</td>
<td></td>
<td></td>
<td>57,889</td>
</tr>
</tbody>
</table>

#### Direct Expenses

| 4 Cash prizes | | |
| 5 Noncash prizes | | |
| 6 Rent/facility costs | | |
| 7 Food and beverages | | |
| 8 Entertainment | 83,995 | |
| 9 Other direct expenses | | 83,995 |
| 10 Direct expense summary. Add lines 4 through 9 in column (d) | (83,995) | |
| 11 Net income summary. Combine line 3, column (d), and line 10 | -26,106 | |

### 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.

#### Revenue

<table>
<thead>
<tr>
<th>(a) Bingo</th>
<th>(b) Pull tabs/instant bingo/progressive bingo</th>
<th>(c) Other gaming</th>
<th>(d) Total gaming (add col. (a) through col. (c))</th>
</tr>
</thead>
</table>

#### Direct Expenses

<table>
<thead>
<tr>
<th>6 Volunteer labor</th>
<th>Yes</th>
<th>%</th>
<th>Yes</th>
<th>%</th>
<th>Yes</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>7 Direct expense summary. Add lines 2 through 5 in column (d)</td>
<td>( )</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8 Net gaming income summary. Combine line 1, column d, and line 7</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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:


---

Schedule G (Form 990 or 990-EZ) 2011

16310724 756359 104105.2 2011.05080 HEARING HEALTH FOUNDATION 10410511
Schedule G (Form 990 or 990-EZ) 2011 HEARING HEALTH FOUNDATION

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
   □ Yes □ No
   %

   b An outside facility
   □ Yes □ No
   %

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 (iv), 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: TRIPi CONSULTING ASSOCIATES, INC.

(I) ADDRESS OF FUNDRAISER: 255 PLUTARCH ROAD, HIGHLAND, NY 12528
<table>
<thead>
<tr>
<th>Name and address of grantee</th>
<th>Cash grant (a)</th>
<th>Other (b)</th>
<th>Non-cash assistance (other)</th>
<th>Amount of FFD (c)</th>
<th>Total (d)</th>
<th>Non-cash assistance (d)</th>
<th>Cash grant (e)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Stanford University</td>
<td>25,000</td>
<td>0</td>
<td>0</td>
<td>94-115636</td>
<td>25,000</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>2. New York University</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>1-16-24138</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>3. University of California</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>25-095559</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

Grants and Other Assistance to Grantees and Organizations in the United States

3. Complete if the organization answered "Yes" to Form 990, Part V, line 21, or 22.

4. Does the organization maintain records to substantiate the amount of payments or assistance? Yes [ ] No [x]
<table>
<thead>
<tr>
<th>Name of Institution</th>
<th>Campus Address</th>
<th>City</th>
<th>State</th>
<th>ZIP Code</th>
<th>Email Address</th>
<th>Phone Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Iowa City, IA 52242</td>
<td>2 GILMORE HALL</td>
<td>2 GILMORE HALL</td>
<td>IA</td>
<td>52242</td>
<td></td>
<td>319-335-4371</td>
</tr>
<tr>
<td>St. Louis, MO 63117</td>
<td>100 ROSENBAUER AVE</td>
<td>WASHINGTON UNIVERSITY</td>
<td>MO</td>
<td>63117</td>
<td></td>
<td>314-935-3114</td>
</tr>
<tr>
<td>Boston, MA 02114</td>
<td>180 CAMBRIDGE STREET</td>
<td>180 CAMBRIDGE STREET</td>
<td>MA</td>
<td>02114</td>
<td></td>
<td>617-432-2661</td>
</tr>
<tr>
<td>Boston, MA 02114</td>
<td>150 CAMBRIDGE STREET</td>
<td>150 CAMBRIDGE STREET</td>
<td>MA</td>
<td>02114</td>
<td></td>
<td>617-432-2661</td>
</tr>
<tr>
<td>Boston, MA 02114</td>
<td>300 CAMBRIDGE STREET</td>
<td>300 CAMBRIDGE STREET</td>
<td>MA</td>
<td>02114</td>
<td></td>
<td>617-432-2661</td>
</tr>
<tr>
<td>Boston, MA 02114</td>
<td>500 CAMBRIDGE STREET</td>
<td>500 CAMBRIDGE STREET</td>
<td>MA</td>
<td>02114</td>
<td></td>
<td>617-432-2661</td>
</tr>
<tr>
<td>Boston, MA 02114</td>
<td>700 CAMBRIDGE STREET</td>
<td>700 CAMBRIDGE STREET</td>
<td>MA</td>
<td>02114</td>
<td></td>
<td>617-432-2661</td>
</tr>
<tr>
<td>Boston, MA 02114</td>
<td>900 CAMBRIDGE STREET</td>
<td>900 CAMBRIDGE STREET</td>
<td>MA</td>
<td>02114</td>
<td></td>
<td>617-432-2661</td>
</tr>
<tr>
<td>Boston, MA 02114</td>
<td>1100 CAMBRIDGE STREET</td>
<td>1100 CAMBRIDGE STREET</td>
<td>MA</td>
<td>02114</td>
<td></td>
<td>617-432-2661</td>
</tr>
<tr>
<td>Boston, MA 02114</td>
<td>1300 CAMBRIDGE STREET</td>
<td>1300 CAMBRIDGE STREET</td>
<td>MA</td>
<td>02114</td>
<td></td>
<td>617-432-2661</td>
</tr>
</tbody>
</table>

**Notes:**
- All institutions are in the United States.
- Email addresses are not listed for all institutions.
<table>
<thead>
<tr>
<th>Year</th>
<th>Grant Reference</th>
<th>Award Amount</th>
<th>Purpose of Grant</th>
<th>Non-Cash Assistance</th>
<th>Cash Grant</th>
<th>Total Grant</th>
</tr>
</thead>
<tbody>
<tr>
<td>2000</td>
<td>124,999</td>
<td>0</td>
<td>R&amp;D</td>
<td>0</td>
<td>0</td>
<td>124,999</td>
</tr>
<tr>
<td>2001</td>
<td>61,500</td>
<td>0</td>
<td>R&amp;D</td>
<td>0</td>
<td>0</td>
<td>61,500</td>
</tr>
<tr>
<td>2002</td>
<td>42,337</td>
<td>0</td>
<td>R&amp;D</td>
<td>0</td>
<td>0</td>
<td>42,337</td>
</tr>
<tr>
<td>2003</td>
<td>50,000</td>
<td>0</td>
<td>R&amp;D</td>
<td>0</td>
<td>0</td>
<td>50,000</td>
</tr>
<tr>
<td>2004</td>
<td>10,000</td>
<td>0</td>
<td>R&amp;D</td>
<td>0</td>
<td>0</td>
<td>10,000</td>
</tr>
<tr>
<td>2005</td>
<td>24,844</td>
<td>0</td>
<td>R&amp;D</td>
<td>0</td>
<td>0</td>
<td>24,844</td>
</tr>
<tr>
<td>2006</td>
<td>25,000</td>
<td>0</td>
<td>R&amp;D</td>
<td>0</td>
<td>0</td>
<td>25,000</td>
</tr>
<tr>
<td>2007</td>
<td>25,000</td>
<td>0</td>
<td>R&amp;D</td>
<td>0</td>
<td>0</td>
<td>25,000</td>
</tr>
<tr>
<td>Grant Type</td>
<td>Fiscal Year Expenditures</td>
<td>Grant Information</td>
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<td></td>
<td></td>
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</tr>
<tr>
<td>------------</td>
<td>--------------------------</td>
<td>-------------------</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Research</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Research</td>
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<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Research</td>
<td>0.0</td>
<td>KA90003247</td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>Research</td>
<td>0.0</td>
<td>KA90003247</td>
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<tr>
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<td>0.0</td>
<td>KA90003247</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Notes:**
- Grant information includes grant number and fiscal year expenditures.
- The table is part of a larger report or document that provides detailed financial information for grants received or awarded.
**Scientific Director**

Grant Extensions Are Reviewed and Approved by The Foundation's Awarding to Ask For A No Cost-Extension To Extend The Term of Their Grant. Option to Ask For A No Cost-Extension To Extend The Term of Their Grant Before The End Of The Grant Year, Grants Have The Returned With Report. Before The End Of The Grant Year, All Unexpended Funds Must Be Returned When Their Reports Are Due. All Unexpended Funds Must Be

Supplemental Information: Complete this part to describe the additional information required in Part I, Line 2, and any other additional information.

<table>
<thead>
<tr>
<th>Description of non-cash assistance</th>
<th>Cash assistance</th>
<th>Cash grant</th>
<th>Recipients</th>
</tr>
</thead>
<tbody>
<tr>
<td>(a) Method of valuation (book, fair market, appraisal, other)</td>
<td>(b) Amount of non-cash assistance</td>
<td>(c) Amount of cash assistance</td>
<td>(d) Amount of cash grant</td>
</tr>
</tbody>
</table>
Noncash Contributions

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

Attach to Form 990.

Name of the organization

HEARING HEALTH FOUNDATION

Employer identification number

13-1882107

Part I  Types of Property

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

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

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?

Yes 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?

Yes X

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?

Yes 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)
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.

2011

Employer identification number
13-1882107

HEARING HEALTH FOUNDATION

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

FOR BASIC, CLINICAL AND TRANSLATIONAL RESEARCH IN HEARING AND BALANCE SCIENCE, PROVIDING MORE GRANTS IN HEARING AND BALANCE SCIENCE THAN ANY OTHER CHARITABLE FOUNDATION. THROUGH OUR NEW HEARING RESTORATION PROJECT, THE FOUNDATION HAS ORGANIZED AND IS FUNDING A CONSORTIUM OF SENIOR SCIENTISTS WORKING TOGETHER ON A REGENERATIVE CURE FOR HEARING LOSS. HEARING HEALTH FOUNDATION PROVIDES SUPPORT THROUGH OUR RESEARCH GRANTS, AND THE SPONSORSHIP OF SCIENTIFIC AND RESEARCH MEETINGS AND SEMINARS. HEARING HEALTH FOUNDATION IS COMMITTED TO EDUCATING THE PUBLIC ON HEARING DISORDERS, TREATMENTS AND CURRENT RESEARCH, AS WELL AS THE PREVENTION OF HEARING LOSS, AND DOES SO THROUGH THE PUBLICATION OF OUR HEARING HEALTH MAGAZINE, OUR WEBSITE, WWW.HEARINGHEALTHFOUNDATION.ORG, DIRECT MAIL PIECES, OUR E-NEWSLETTER AND BY EXHIBITING AT VARIOUS INDUSTRY AND CONSUMER CONFERENCES.

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

2012 AT $456,735.32. THREE ADDITIONAL "AD-HOC" GRANTS WERE AWARDED TO SENIOR RESEARCHER WORKING IN STRIAL DEVELOPMENT AND ATROPHY (2 GRANTS, TOTALING $92,327) AND HYPERACUSIS ($10,000).

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

NOISY PLANET." OUR WEBSITE SERVES AS A RESOURCE FOR THOSE LOOKING FOR INFORMATION ON HEARING LOSS; ALL HEARING HEALTH MAGAZINE ARTICLES ARE ARCHIVED ON THE WEBSITE SINCE 2004, AND THE WEBSITE IS ALSO THE TOOL THROUGH WHICH OUR GRANTEES SUBMIT APPLICATIONS AND REPORTS AND THEIR RESEARCH IS FEATURED.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.
Schedule O (Form 990 or 990-EZ) (2011)
132211 0120-12

16310724 756359 104105.2 2011.05080 HEARING HEALTH FOUNDATION 10410511

FORM 990, PART VI, SECTION B, LINE 11: OUR FY 2011 990 WAS FIRST REVIEWED BY THE EXECUTIVE DIRECTOR, AND A FEW SMALL CHANGES WERE MADE. IT WAS THEN SENT VIA EMAIL ATTACHMENT TO OUR FINANCE COMMITTEE FOR REVIEW. THE FULL BOARD OF DIRECTORS RECEIVED THE EMAILED 990 BEFORE IT WAS FILED. NO CHANGES WERE MADE BY THE FINANCE COMMITTEE NOR BY THE FULL BOARD OF DIRECTORS.

FORM 990, PART VI, SECTION B, LINE 12C: EACH MEMBER OF THE BOARD OF DIRECTORS IS ASKED TO SIGN A CONFLICT OF INTEREST ("COI") POLICY ANNUALLY, AND LIST ALL OTHER ORGANIZATIONS WHERE THEY VOLUNTEER OR SIT ON A BOARD OF DIRECTORS. THE COI POLICIES ARE REVIEWED BY THE EXECUTIVE DIRECTOR ANNUALLY.

FORM 990, PART VI, SECTION B, LINE 15: EMPLOYEE COMPENSATION WAS DETERMINED BY REVIEWING COMPENSATION SURVEY CONDUCTED BY "PROFESSIONALS FOR NONPROFITS (PNP)" AT THE TIME EACH EMPLOYEE WAS HIRED. CURRENTLY, ONE OFFICER IS COMPENSATED. IN THE FUTURE, IF ANY OTHER OFFICERS OR KEY EMPLOYEES ARE HIRED, THEY WILL UNDERGO THE SAME COMPENSATION REVIEW PROCESS AS THE TOP MANAGEMENT OFFICIALS.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:

NY, AL, AK, AZ, AR, CA, CO, CT, FL, GA, HI, IL, KY, ME, MD, MA, MI, MN, MS, NH, NC, NJ, NM, OH, OK
FORM 990, PART VI, SECTION C, LINE 19: THE 990 IS AVAILABLE AS A PDF DOCUMENT ON OUR WEBSITE, UPON REQUEST, AND IN THE HEARING HEALTH FOUNDATION OFFICES. THE 990 IS ALSO AVAILABLE ON WWW.GUIDESTAR.ORG. THE AUDITED FINANCIAL STATEMENTS ARE AVAILABLE IN OUR OFFICE AND UPON REQUEST, AND ARE INCORPORATED IN THE ANNUAL REPORT, WHICH IS PUBLISHED ON HEARING HEALTH FOUNDATION’S WEBSITE. THE GOVERNING DOCUMENTS AND CONFLICT OF INTEREST (AND OTHER) POLICIES ARE AVAILABLE IN THE HEARING HEALTH FOUNDATION OFFICES AND UPON REQUEST.

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

NET UNREALIZED GAINS ON INVESTMENTS: 12,067.

FORM 990, PART XI, LINE 2C

OVERSIGHT OF INDEPENDENT AUDIT

HEARING HEALTH FOUNDATION HAS A COMMITTEE THAT ASSUMES RESPONSIBILITY FOR THE OVERSIGHT OF THE AUDIT OF THE FINANCIAL STATEMENTS AND FOR THE SELECTION OF THE INDEPENDENT AUDITORS, NO CHANGE IN THIS PROCESS FROM THE PRIOR YEAR.
Application for Extension of Time To File an Exempt Organization Return

Do not complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.

Electronic filing (e-file) You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for Charities & Nonprofits.

Part I  Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only.

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Name of exempt organization or other filer, see instructions.

HEARING HEALTH FOUNDATION

Number, street, and room or suite no. If a P.O. box, see instructions.

363 SEVENTH AVENUE, 10TH FLOOR

City, town or post office, state, and ZIP code. For a foreign address, see instructions.

NEW YORK, NY 10001

Employee identification number (EIN) or Social security number (SSN)

X 13-1882107

Enter the Return code for the return that this application is for (file a separate application for each return).

<table>
<thead>
<tr>
<th>Application Is For</th>
<th>Return Code</th>
<th>Application Is For</th>
<th>Return Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Form 990</td>
<td>01</td>
<td>Form 990-T (corporation)</td>
<td>01</td>
</tr>
<tr>
<td>Form 990-BL</td>
<td>02</td>
<td>Form 1041-A</td>
<td>08</td>
</tr>
<tr>
<td>Form 990-EZ</td>
<td>01</td>
<td>Form 4720</td>
<td>09</td>
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<tr>
<td>Form 990-PF</td>
<td>04</td>
<td>Form 5227</td>
<td>10</td>
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<tr>
<td>Form 990-T (sec. 401(a) or 408(a) trust)</td>
<td>05</td>
<td>Form 6069</td>
<td>11</td>
</tr>
<tr>
<td>Form 990-T (trust other than above)</td>
<td>06</td>
<td>Form 8870</td>
<td>12</td>
</tr>
</tbody>
</table>

DEMASCO, SENA AND JAHELKA, LLP

Telephone No. 516-541-6549 FAX No.

If the organization does not have an office or place of business in the United States, check this box. If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this box. If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension is for.

1  I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until MAY 15, 2013 , to file the exempt organization return for the organization named above. The extension is for the organization's return for:


<p>| | |</p>
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<tbody>
<tr>
<td>[ ] calendar year</td>
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<tr>
<td>[X] tax year beginning OCT 1, 2011 , and ending SEP 30, 2012</td>
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</tr>
</tbody>
</table>

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EQ and Form 8879-EQ for payment instructions.

LHA  For Privacy Act and Paperwork Reduction Act Notice, see Instructions.

Form 8868 (Rev. 1-2012)

14100109 756359 104105.2  2011.05020 HEARING HEALTH FOUNDATION 10410511
Form 8868 (Rev. 1-2012)

- If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this box ▶
- If you are filing for an Automatic 3-Month Extension, complete only Part I (on page 1).

**Part II** Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).

**Type or print**
- Name of exempt organization or other filer, see instructions
- Employer identification number (EIN) or number, street, and room or suite no. If a P.O. box, see instructions.
- Social security number (SSN)
- City, town or post office, state, and ZIP code. For a foreign address, see instructions.

**Hearing Health Foundation**
- 363 Seventh Avenue, 10th Floor
- New York, NY 10001
- X 13-1882107

Enter filer’s identifying number, see instructions

**Application**
- Is For
- Return Code
- Application Is For
- Return Code

| Form 990 | 01 | Form 1041-A | 08 |
| Form 990-BL | 02 | Form 4720 | 09 |
| Form 990-EZ | 01 | Form 5227 | 10 |
| Form 990-PF | 04 | Form 6069 | 11 |
| Form 990-T (sec. 401(a) or 408(a) trust) | 05 | Form 8870 | 12 |

**Application is for**

Form 990

- Return Code
- Application Is For
- Return Code

**STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.**

DEMASCO, SENA AND JAHELKA, LLP
- Telephone No. ▶ 516-541-6549
- FAX No. ▶

- If the organization does not have an office or place of business in the United States, check this box ▶
- If this is for a Group Return, enter the organization’s four digit Group Exemption Number (GEN) ▶. If this is for the whole group, check this box ▶ and attach a list with the names and EINs of all members the extension is for.

4 I request an additional 3-month extension of time until AUGUST 15, 2013.

5 For calendar year 2011, or other tax year beginning OCT 1, 2011, and ending SEP 30, 2012.

6 If the tax year entered in line 5 is for less than 12 months, check reason: □ Initial return □ Final return □ Change in accounting period

7 State in detail why you need the extension

ADDITIONAL TIME IS NEEDED TO COMPILE THE INFORMATION NECESSARY TO FILE A COMPLETE AND ACCURATE RETURN.

8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. ▶ 8a $ ▶

8b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868. ▶ 8b $ ▶

8c Balance due. Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. ▶ 8c $ ▶

**Signature and Verification must be completed for Part II only.**

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

**Signature** ▶

**Title** ▶ CPA

**Date** ▶ 5/10/13