

# Return of Organization Exempt From Income Tax

**2001**

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

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

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

**A** For the 2001 calendar year, or tax year beginning 12/01, 2001, and ending 11/30/2002

- B** Check if applicable:
- Address change
  - Name change
  - Initial return
  - Final return
  - Amended return
  - Application pending

**C** Name of organization  
**NATIONAL VACCINE INFORMATION CENTER**

Number and street (or P O box if mail is not delivered to street address) Room/suite  
**421-E CHURCH STREET**

City or town, state or country, and ZIP + 4  
**VIENNA, VA 22180**

**D** Employer identification number  
**54-1951769**

**E** Telephone number  
**(703) 938-6017**

**F** Accounting method:  Cash  Accrual  
Other (specify) ▶

• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ)

**H** and **I** are not applicable to section 527 organizations

**H(a)** Is this a group return for affiliates?  Yes  No

**H(b)** If "Yes" enter number of affiliates ▶

**H(c)** Are all affiliates included?  Yes  No (If "No," attach a list. See instructions.)

**H(d)** Is this a separate return filed by an organization covered by a group ruling?  Yes  No

**I** Enter 4-digit GEN ▶

**G** Web site ▶

**J** Organization type (check only one)  501(c) ( 3 ) (insert no)  4947(a)(1) or  527

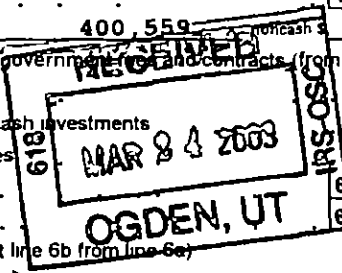
**K** Check here  if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS, but if the organization received a Form 990 Package in the mail it should file a return without financial data. **Some states require a complete return.**

**M** Check  if the organization is not required to attach Sch. B (Form 990, 990-EZ, or 990-PF)

**L** Gross receipts. Add lines 6b, 8b, 9b, and 10b to line 12 ▶ **550,679**

**Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances** (See Specific Instructions on page 16)

<b>Revenue</b>	<b>1</b> Contributions, gifts, grants, and similar amounts received <b>STMT 1</b>			
	<b>a</b> Direct public support	<b>1a</b>	<b>405,529</b>	
	<b>b</b> Indirect public support	<b>1b</b>		
	<b>c</b> Government contributions (grants)	<b>1c</b>		
	<b>d</b> Total (add lines 1a through 1c) (cash \$ <b>400,559</b> and noncash \$ <b>4,970</b> )	<b>1d</b>		<b>405,529</b>
	<b>2</b> Program service revenue including government grants and contracts (from Part VII, line 93)	<b>2</b>		<b>72,181</b>
	<b>3</b> Membership dues and assessments	<b>3</b>		
	<b>4</b> Interest on savings and temporary cash investments	<b>4</b>		
	<b>5</b> Dividends and interest from securities	<b>5</b>		<b>3,128</b>
	<b>6 a</b> Gross rents	<b>6a</b>		
	<b>b</b> Less rental expenses	<b>6b</b>		
	<b>c</b> Net rental income or (loss) (subtract line 6b from line 6a)	<b>6c</b>		
<b>7</b> Other investment income (describe ▶)	<b>7</b>			
<b>8 a</b> Gross amount from sales of assets other than inventory	(A) Securities		(B) Other	
	<b>4,970</b>	<b>8a</b>		
	<b>4,970</b>	<b>8b</b>		
		<b>8c</b>		
<b>d</b> Net gain or (loss) (combine line 8c, columns (A) and (B))	<b>8d</b>			
<b>9</b> Special events and activities (attach schedule)	<b>a</b> Gross revenue (not including \$ _____ of contributions reported on line 1a)	<b>9a</b>		
	<b>b</b> Less direct expenses other than fundraising expenses	<b>9b</b>		
	<b>c</b> Net income or (loss) from special events (subtract line 9b from line 9a)	<b>9c</b>		
<b>10 a</b> Gross sales of inventory, less returns and allowances <b>STMT 2</b>	<b>10a</b>	<b>64,871</b>		
	<b>b</b> Less cost of goods sold <b>STMT 3</b>	<b>10b</b>	<b>15,898</b>	
	<b>c</b> Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)	<b>10c</b>		<b>48,973</b>
<b>11</b> Other revenue (from Part VII, line 103)	<b>11</b>			
<b>12</b> Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	<b>12</b>		<b>529,811</b>	
<b>Expenses</b>	<b>13</b> Program services (from line 44, column (B))	<b>13</b>		<b>464,494</b>
	<b>14</b> Management and general (from line 44, column (C))	<b>14</b>		<b>91,232</b>
	<b>15</b> Fundraising (from line 44, column (D))	<b>15</b>		<b>20,294</b>
	<b>16</b> Payments to affiliates (attach schedule)	<b>16</b>		
	<b>17</b> Total expenses (add lines 16 and 44, column (A))	<b>17</b>		<b>576,020</b>
<b>Net Assets</b>	<b>18</b> Excess or (deficit) for the year (subtract line 17 from line 12)	<b>18</b>		<b>-46,209</b>
	<b>19</b> Net assets or fund balances at beginning of year (from line 73, column (A))	<b>19</b>		<b>258,565</b>
	<b>20</b> Other changes in net assets or fund balances (attach explanation) <b>STMT 4</b>	<b>20</b>		<b>-228</b>
	<b>21</b> Net assets or fund balances at end of year (combine lines 18, 19, and 20)	<b>21</b>		<b>212,128</b>



SCANNED APR 03 2003

For Paperwork Reduction Act Notice, see the separate instructions

Part II Statement of Functional Expenses

All organizations must complete column (A) Columns (B), (C) and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others (See Specific Instructions on page 21)

Table with 5 columns: (A) Total, (B) Program services, (C) Management and general, (D) Fundraising. Rows include: 22 Grants and allocations, 23 Specific assistance to individuals, 24 Benefits paid to or for members, 25 Compensation of officers, directors, etc, 26 Other salaries and wages, 27 Pension plan contributions, 28 Other employee benefits, 29 Payroll taxes, 30 Professional fundraising fees, 31 Accounting fees, 32 Legal fees, 33 Supplies, 34 Telephone, 35 Postage and shipping, 36 Occupancy, 37 Equipment rental and maintenance, 38 Printing and publications, 39 Travel, 40 Conferences, conventions, and meetings, 41 Interest, 42 Depreciation, depletion, etc, 43 Other expenses not covered above, 44 Total functional expenses.

Joint Costs Check [X] if you are following SOP 98-2

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? [X] Yes [ ] No
If "Yes, enter (i) the aggregate amount of these joint costs \$ 128,573, (ii) the amount allocated to Program services \$ 50,757, (iii) the amount allocated to Management and general \$ 60,550, and (iv) the amount allocated to Fundraising \$ 17,266

Part III Statement of Program Service Accomplishments (See Specific Instructions on page 24)

What is the organization's primary exempt purpose? STMT 6

All organizations must describe their exempt purpose achievements in a clear and concise manner State the number of clients served, publications issued, etc Discuss achievements that are not measurable (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others)

Program Service Expenses (Required for 501(c)(3) and (4) orgs and 4947(a)(1) trusts but optional for others)

Table with 2 columns: Description, Program Service Expenses. Rows include: a STMT 7 (Grants and allocations \$ 422,281), b STMT 7 (Grants and allocations \$ 42,213), c (Grants and allocations \$), d (Grants and allocations \$), e Other program services (attach schedule) (Grants and allocations \$), f Total of Program Service Expenses (should equal line 44, column (B) Program services) 464,494

**Part IV Balance Sheets** (See Specific Instructions on page 24 )

Note		Where required, attached schedules and amounts within the description column should be for end-of-year amounts only		(A) Beginning of year		(B) End of year
Assets	45	Cash - non-interest-bearing		1,080	45	36,331
	46	Savings and temporary cash investments		253,862	46	191,368
	47a	47a	19,045			
		b	Less allowance for doubtful accounts		47c	19,045
	48a	48a				
		b	Less allowance for doubtful accounts		48c	
	49	Grants receivable			49	
	50	Receivables from officers, directors, trustees, and key employees (attach schedule)			50	
	51a	51a	Other notes and loans receivable (attach schedule)			
		b	Less allowance for doubtful accounts		51c	
	52	Inventories for sale or use		3,364	52	4,700
	53	Prepaid expenses and deferred charges		4,701	53	4,351
	54	Investments - securities (attach schedule) <b>STMT 9</b> <input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV		925	54	697
	55a	55a	Investments - land, buildings, and equipment basis			
		b	Less accumulated depreciation (attach schedule)		55c	
56	Investments - other (attach schedule)			56		
57a	57a	Land, buildings, and equipment basis <b>STMT 11</b>	66,326			
	b	Less accumulated depreciation (attach schedule)	42,290	57c	24,036	
58	Other assets (describe <input type="checkbox"/> <b>STMT 12</b> )		317	58	250	
<b>59 Total assets (add lines 45 through 58) (must equal line 74)</b>				<b>273,102</b>	<b>59</b>	<b>280,778</b>
Liabilities	60	Accounts payable and accrued expenses		9,176	60	50,317
	61	Grants payable			61	
	62	Deferred revenue			62	
	63	Loans from officers, directors, trustees, and key employees (attach schedule)			63	
	64a	Tax-exempt bond liabilities (attach schedule)			64a	
		b	Mortgages and other notes payable (attach schedule)		64b	
65	Other liabilities (describe <input type="checkbox"/> <b>STMT 13</b> )		5,361	65	18,333	
<b>66 Total liabilities (add lines 60 through 65)</b>				<b>14,537</b>	<b>66</b>	<b>68,650</b>
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74					
	67	Unrestricted		216,408	67	212,128
	68	Temporarily restricted		42,157	68	
	69	Permanently restricted			69	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74					
	70	Capital stock, trust principal, or current funds			70	
	71	Paid-in or capital surplus, or land, building, and equipment fund			71	
	72	Retained earnings, endowment, accumulated income, or other funds			72	
	73	Total net assets or fund balances (add lines 67 through 69 OR lines 70 through 72, column (A) must equal line 19, and column (B) must equal line 21)		258,565	73	212,128
	74	Total liabilities and net assets / fund balances (add lines 66 and 73)		273,102	74	280,778

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.



Part VII Other Information (See Specific Instructions on page 27)

	Yes	No
76 Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity		X
77 Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes		X
78 a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? b If "Yes," has it filed a tax return on Form 990-T for this year?		X
78a		X
78b	N/A	
79 Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement		X
80 a Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization? b If "Yes," enter the name of the organization _____ and check whether it is <input type="checkbox"/> exempt OR <input type="checkbox"/> nonexempt		X
80a		X
81 a Enter direct or indirect political expenditure See line 81 instructions b Did the organization file Form 1120-POL for this year?	81a	NONE
81a	NONE	
81b		X
82 a Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value? b If "Yes," you may indicate the value of these items here Do not include this amount as revenue in Part I or as an expense in Part II (See instructions in Part III)	82a	
82a		X
82b	N/A	
83 a Did the organization comply with the public inspection requirements for returns and exemption applications? b Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83a	X
83a	X	
83b	X	
84 a Did the organization solicit any contributions or gifts that were not tax deductible? b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	84a	
84a		X
84b	N/A	
85 501(c)(4), (5), or (6) organizations a Were substantially all dues nondeductible by members? b Did the organization make only in-house lobbying expenditures of \$2,000 or less? If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year	85a	N/A
85a	N/A	
85b	N/A	
c Dues, assessments, and similar amounts from members	85c	N/A
85c	N/A	
d Section 162(e) lobbying and political expenditures	85d	N/A
85d	N/A	
e Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e	N/A
85e	N/A	
f Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f	N/A
85f	N/A	
g Does the organization elect to pay the section 6033(e) tax on the amount in 85f?	85g	N/A
85g	N/A	
h If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount in 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85h	N/A
85h	N/A	
86 501(c)(7) orgs Enter a Initiation fees and capital contributions included on line 12 b Gross receipts, included on line 12, for public use of club facilities	86a	N/A
86a	N/A	
86b	N/A	
87 501(c)(12) orgs Enter a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	87a	N/A
87a	N/A	
87b	N/A	
88 At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX	88	
88		X
89 a 501(c)(3) organizations Enter Amount of tax imposed on the organization during the year under section 4911 <input type="checkbox"/> NONE, section 4912 <input type="checkbox"/> NONE, section 4955 <input type="checkbox"/> NONE b 501(c)(3) and 501(c)(4) orgs Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction c Enter Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 d Enter Amount of tax on line 89c, above, reimbursed by the organization	89a	NONE
89a	NONE	
89b		X
90 a List the states with which a copy of this return is filed <input type="checkbox"/> SEE LIST ATTACHED b Number of employees employed in the pay period that includes March 12, 2001 (See instructions)	90b	10
90b	10	
91 The books are in care of <input type="checkbox"/> THE ORGANIZATION Telephone no <input type="checkbox"/> 703-938-6017 Located at <input type="checkbox"/> VIENNA, VA ZIP + 4 <input type="checkbox"/> 22180		
92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the tax year	92	N/A
92	N/A	

**Part VII Analysis of Income-Producing Activities (See Specific Instructions on page 32)**

Note Enter gross amounts unless otherwise indicated

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
93 Program service revenue					
a CONFERENCE					72,181
b					
c					
d					
e					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments					
96 Dividends and interest from securities			14	3,128	
97 Net rental income or (loss) from real estate					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory					
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					48,973
103 Other revenue a					
b					
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))				3,128	121,154
105 Total (add line 104, columns (B), (D), and (E))					124,282

Note Line 105 plus line 1d, Part I, should equal the amount on line 12, Part I

**Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See Specific Instructions on page 32)**

Line No	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes)
93A	CONFERENCE HELD TO PROVIDE VENUE TO EDUCATE THE PUBLIC ABOUT VACCINES AND VACCINE REACTIONS
102	SALE OF EDUCATIONAL ITEMS PROMOTING VACCINE SAFETY

**Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See Specific Instructions on page 33)**

(A) Name, address and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
	%			
	%			
	%			
	%			

**Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See Specific Instructions on page 33)**

(a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Yes  No

(b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? Yes  No

Note If "Yes" to (b), file Form 8870 and Form 4720 (see instructions)

Under penalties of perjury I declare that I have examined this return and believe it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has knowledge.

**Please Sign Here**

Signature of officer: Kathryn M. Williams

Type or print name and title: Kathryn M. Williams

**Paid Preparer's Use Only**

Preparer's signature: Joe C. Susco

Firm's name (or yours if self-employed) address and ZIP + 4: BOND BEEBE  
7315 WISCONSIN AVE  
BETHESDA, MD

**SCHEDULE A**  
**(Form 990 or 990-EZ)**

**Organization Exempt Under Section 501(c)(3)**

(Except Private Foundation) and Section 501(e), 501(f), 501(k),  
501(n), or Section 4947(a)(1) Nonexempt Charitable Trust

**Supplementary Information - (See separate instructions.)**

OMB No 1545-0047

**2001**

Department of the Treasury  
Internal Revenue Service

▶ **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

Name of the organization

Employer identification number

**NATIONAL VACCINE INFORMATION CENTER**

**54-1951769**

**Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees**  
(See page 1 of the instructions List each one If there are none, enter "None")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
NONE				
Total number of other employees paid over \$50,000	▶ NONE			

**Part II Compensation of the Five Highest Paid Independent Contractors for Professional Services**  
(See page 2 of the instructions List each one (whether individuals or firms) If there are none, enter "None")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services	▶ NONE	

**Part III Statements About Activities (See page 2 of the instructions)**

	Yes	No
1 During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ▶ \$ _____ (Must equal amount on line 38, Part VI-A, or line 1 or Part VI-B) Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes," must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities		X
2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions)		
a Sale, exchange, or leasing of property?		X
b Lending of money or other extension of credit?		X
c Furnishing of goods, services, or facilities?		X
d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	X	
e Transfer of any part of its income or assets?		X
3 Does the organization make grants for scholarships, fellowships, student loans, etc? (See Note below)		X
4 Do you have a section 403(b) annuity plan for your employees?		X

STMT 16

Note Attach a statement to explain how the organization determines that individuals or organizations receiving grants or loans from it in furtherance of its charitable programs "qualify" to receive payments

**Part IV Reason for Non-Private Foundation Status (See pages 3 through 6 of the instructions)**

The organization is not a private foundation because it is (Please check only ONE applicable box)

- 6  A church, convention of churches, or association of churches Section 170(b)(1)(A)(i)
- 6  A school Section 170(b)(1)(A)(ii) (Also complete Part V)
- 7  A hospital or a cooperative hospital service organization Section 170(b)(1)(A)(iii)
- 8  A Federal, state, or local government or governmental unit Section 170(b)(1)(A)(v)
- 9  A medical research organization operated in conjunction with a hospital Section 170(b)(1)(A)(iii) Enter the hospital's name, city, and state ▶ \_\_\_\_\_
- 10  An organization operated for the benefit of a college or university owned or operated by a governmental unit Section 170(b)(1)(A)(iv) (Also complete the Support Schedule in Part IV-A)
- 11a  An organization that normally receives a substantial part of its support from a governmental unit or from the general public Section 170(b)(1)(A)(vi) (Also complete the Support Schedule in Part IV-A)
- 11b  A community trust Section 170(b)(1)(A)(vi) (Also complete the Support Schedule in Part IV-A)
- 12  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 charitable, etc., 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) (Also complete the Support Schedule in Part IV-A)
- 13  An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in (1) lines 5 through 12 above, or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2) (See section 509(a)(3))

Provide the following information about the supported organizations (See page 5 of the instructions)

(a) Name(s) of supported organization(s)	(b) Line number from above

- 14  An organization organized and operated to test for public safety Section 509(a)(4) (See page 6 of the instructions)



**Part IV-A Support Schedule** (Complete only if you checked a box on line 10, 11, or 12) *Use cash method of accounting*

**Note** You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting

Calendar year (or fiscal year beginning in)	(a) 2000	(b) 1999	(c) 1998	(d) 1997	(e) Total
15 Gifts, grants, and contributions received (Do not include unusual grants. See line 28)	448,485	497,486	608,618	337,690	1,892,279
16 Membership fees received					
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose	40,149	64,297	65,769	72,994	243,209
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	9,867	4,462	2,443	2,164	18,936
19 Net income from unrelated business activities not included in line 18					
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
21 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge					
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets					
23 Total of lines 15 through 22	498,501	566,245	676,830	412,848	2,154,424
24 Line 23 minus line 17	458,352	501,948	611,061	339,854	1,911,215
25 Enter 1% of line 23	4,985	5,662	6,768	4,128	
26 Organizations described on lines 10 or 11	a Enter 2% of amount in column (e), line 24				▶ 26a 38,224
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 1997 through 2000 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts	▶ 26b 152,801				
c Total support for section 509(a)(1) test. Enter line 24, column (e)	▶ 26c 1,911,215				
d Add: Amounts from column (e) for lines 18 <u>18,936</u> 19 _____ 22 _____ 26b <u>152,801</u>	▶ 26d 171,737				
e Public support (line 26c minus line 26d total)	▶ 26e 1,739,478				
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))	▶ 26f 91.0143%				
27 Organizations described on line 12	a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." Do not file this list with your return. Enter the sum of such amounts for each year: (2000) _____ (1999) _____ (1998) <b>NOT APPLICABLE</b> (1997) _____				
b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year: (2000) _____ (1999) _____ (1998) _____ (1997) _____					
c Add: Amounts from column (e) for lines 15 _____ 16 _____ 17 _____ 20 _____ 21 _____	▶ 27c _____				
d Add: Line 27a total _____ and line 27b total _____	▶ 27d _____				
e Public support (line 27c total minus line 27d total)	▶ 27e _____				
f Total support for section 509(a)(2) test. Enter amount on line 23, column (e)	▶ 27f _____				
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))	▶ 27g _____ %				
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))	▶ 27h _____ %				
28 Unusual Grants. For an organization described in line 10, 11, or 12 that received any unusual grants during 1997 through 2000, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.					

**Part V Private School Questionnaire (See page 7 of the instructions)**  
**(To be completed ONLY by schools that checked the box on line 6 in Part IV)**

	Yes	No
<b>29</b> Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	<b>29</b>	
<b>30</b> Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	<b>30</b>	
<b>31</b> Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe, if "No," please explain (If you need more space, attach a separate statement ) ----- ----- -----	<b>31</b>	
<b>32</b> Does the organization maintain the following		
<b>a</b> Records indicating the racial composition of the student body, faculty, and administrative staff?	<b>32a</b>	
<b>b</b> Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	<b>32b</b>	
<b>c</b> Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	<b>32c</b>	
<b>d</b> Copies of all material used by the organization or on its behalf to solicit contributions?  If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement.) ----- -----	<b>32d</b>	
<b>33</b> Does the organization discriminate by race in any way with respect to		
<b>a</b> Students' rights or privileges?	<b>33a</b>	
<b>b</b> Admissions policies?	<b>33b</b>	
<b>c</b> Employment of faculty or administrative staff?	<b>33c</b>	
<b>d</b> Scholarships or other financial assistance?	<b>33d</b>	
<b>e</b> Educational policies?	<b>33e</b>	
<b>f</b> Use of facilities?	<b>33f</b>	
<b>g</b> Athletic programs?	<b>33g</b>	
<b>h</b> Other extracurricular activities?  If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement ) ----- -----	<b>33h</b>	
<b>34a</b> Does the organization receive any financial aid or assistance from a governmental agency?	<b>34a</b>	
<b>b</b> Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement.	<b>34b</b>	
<b>35</b> Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," attach an explanation	<b>35</b>	

**Part VI-A Lobbying Expenditures by Electing Public Charities** (See page 9 of the instructions)

(To be completed **ONLY** by an eligible organization that filed Form 5768) **NOT APPLICABLE**

- Check  a if the organization belongs to an affiliated group
- Check  b if you checked "a" and "limited control" provisions apply

<b>Limits on Lobbying Expenditures</b>		(a) Affiliated group totals	(b) To be completed for ALL electing organizations
(The term "expenditures" means amounts paid or incurred)			
<b>36</b>	Total lobbying expenditures to influence public opinion (grassroots lobbying)	<b>36</b>	
<b>37</b>	Total lobbying expenditures to influence a legislative body (direct lobbying)	<b>37</b>	
<b>38</b>	Total lobbying expenditures (add lines 36 and 37)	<b>38</b>	
<b>39</b>	Other exempt purpose expenditures	<b>39</b>	
<b>40</b>	Total exempt purpose expenditures (add lines 38 and 39)	<b>40</b>	
<b>41</b>	Lobbying nontaxable amount Enter the amount from the following table - If the amount on line 40 is - The lobbying nontaxable amount is -	<b>41</b>	
	Not over \$500,000 20% of the amount on line 40		
	Over \$500,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000		
	Over \$1,000,000 but not over \$1,500,000 \$175,000 plus 10% of the excess over \$1,000,000		
	Over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000		
	Over \$17,000,000 \$1,000,000		
<b>42</b>	Grassroots nontaxable amount (enter 25% of line 41)	<b>42</b>	
<b>43</b>	Subtract line 42 from line 36 Enter -0- if line 42 is more than line 36	<b>43</b>	
<b>44</b>	Subtract line 41 from line 38 Enter -0- if line 41 is more than line 38	<b>44</b>	

**Caution** If there is an amount on either line 43 or line 44, you must file Form 4720

**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 45 through 50 on page 11 of the instructions)

<b>Lobbying Expenditures During 4-Year Averaging Period</b>					
Calendar year (or fiscal year beginning in) ▶	(a) 2001	(b) 2000	(c) 1999	(d) 1998	(e) Total
<b>45</b> Lobbying nontaxable amount					
<b>46</b> Lobbying ceiling amount (150% of line 45(e))					
<b>47</b> Total lobbying expenditures					
<b>48</b> Grassroots nontaxable amount					
<b>49</b> Grassroots ceiling amount (150% of line 48(e))					
<b>50</b> Grassroots lobbying expenditures					

**Part VI-B Lobbying Activity by Nonelecting Public Charities**

**NOT APPLICABLE**

(For reporting only by organizations that did not complete Part VI-A) (See page 12 of the instructions)

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of	Yes	No	Amount
a Volunteers		X	
b Paid staff or management (include compensation in expenses reported on lines c through h)		X	
c Media advertisements		X	
d Mailings to members, legislators, or the public		X	
e Publications, or published or broadcast statements		X	
f Grants to other organizations for lobbying purposes		X	
g Direct contact with legislators, their staffs, government officials, or a legislative body		X	
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means		X	
i Total lobbying expenditures (add lines c through h)			

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities

Part VII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See page 12 of the instructions)

51 Did the reporting organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

a Transfers from the reporting organization to a noncharitable exempt organization of

- (i) Cash
(ii) Other assets

b Other transactions

- (i) Sales or exchanges of assets with a noncharitable exempt organization
(ii) Purchases of assets from a noncharitable exempt organization
(iii) Rental of facilities, equipment, or other assets
(iv) Reimbursement arrangements
(v) Loans or loan guarantees
(vi) Performance of services or membership or fundraising solicitations

c Sharing of facilities, equipment, mailing lists, other assets, or paid employees

d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting organization. If the organization received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received

Table with 3 columns: Question, Yes, No. Rows include 51a(i), a(ii), b(i), b(ii), b(iii), b(iv), b(v), b(vi), and c.

Table with 4 columns: (a) Line no, (b) Amount involved, (c) Name of noncharitable exempt organization, (d) Description of transfers, transactions, and sharing arrangements. First row contains 'N/A'.

52a Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?

Yes No (with checked X in No box)

b If "Yes," complete the following schedule

Table with 3 columns: (a) Name of organization, (b) Type of organization, (c) Description of relationship. First row contains 'N/A'.

FORM 990, PART I - GROSS SALES LESS RETURNS AND ALLOWANCES  
=====

DESCRIPTION -----	AMOUNT -----
BOOKS, VIDEOS AND OTHER PUBLICATIONS	64,871.
TOTAL	----- 64,871. =====

FORM 990, PART I - COST OF GOODS SOLD

=====

INVENTORY AT BEGINNING OF YEAR .....	3,364.
PURCHASES .....	17,234.
SALARIES AND WAGES .....	
OTHER COSTS .....	
	-----
SUBTOTAL .....	20,598.
MINUS ENDING INVENTORY .....	4,700.
	-----
COST OF GOODS SOLD .....	15,898.
	=====

FORM 990, PART I - OTHER DECREASES IN FUND BALANCES

=====

DESCRIPTION	AMOUNT
-----	-----
UNREALIZED DEPRECIATION OF INVESTMENTS	228.
TOTAL	----- 228.
	=====

FORM 990, PART II - OTHER EXPENSES

DESCRIPTION	TOTAL	PROGRAM SERVICES	MANAGEMENT AND GENERAL	FUNDRAISING
BANK SERVICE CHARGES	3,611.	5.	3,606.	
CONSULTING	10,608.	7,055.	995.	2,558.
INTERNET	2,163.	2,262.	-99.	
DUES AND SUBSCRIPTIONS	828.	510.	318.	
RESEARCH	4,500.	4,500.		
STATE REGISTRATIONS	1,097.		1,097.	
LIBRARY EXPENSE	11,876.	11,876.		
ADVERTISING & PROMOTIONS	2,202.	2,202.		
MISCELLENEOUS EXPENSES	971.	590.	381.	
OTHER DESIGN FEES	36,000.	34,200.		1,800.
DELIVERY SERVICE	2,920.	1,629.	1,277.	14
INSURANCE	9,239.	440.	8,799.	
<b>TOTALS</b>	<b>86,015.</b>	<b>65,269.</b>	<b>16,374.</b>	<b>4,372.</b>



FORM 990, PART III - ORGANIZATION'S PRIMARY EXEMPT PURPOSE

=====

DEDICATED TO PREVENTING VACCINE INJURIES AND DEATHS THROUGH PUBLIC  
EDUCATION AND OUTREACH PROGRAMS.

FORM 990, PART III - STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS

---

DESCRIPTION  
-----

EXPENSES  
-----

EDUCATE THE PUBLIC REGARDING VACCINE SAFETY AND CONDUCT  
OUTREACH PROGRAMS FOR FAMILIES WHO HAVE EXPERIENCED VACCINE  
REACTIONS, INJURIES OR DEATH. APPROXIMATELY 45,000 PEOPLE  
WERE INFORMED THROUGH TELEPHONE CALLS, FAXES, CORRESPONDENCE  
AND DISSEMINATION OF PUBLICATIONS.

422,281.

PROVIDING THE PUBLIC ACCESSIBILITY FOR EDUCATIONAL  
INFORMATION AND RESEARCH CAPABILITIES REGARDING VACCINE AND  
VACCINE REACTIONS THROUGH THE MEANS OF A COMPREHENSIVE  
LIBRARY.

42,213.

TOTAL

-----  
464,494.  
=====

FORM 990, PART IV - PREPAID EXPENSES AND DEFERRED CHARGES

DESCRIPTION -----	BEGINNING BOOK VALUE -----	ENDING BOOK VALUE -----
PREPAID RENT	4,701.	4,351.
TOTALS	----- 4,701. =====	----- 4,351. =====

FORM 990, PART IV - INVESTMENTS - SECURITIES

DESCRIPTION	BEGINNING BOOK VALUE	ENDING BOOK VALUE
-----	-----	-----
COMMON STOCK	925.	697.
TOTALS	925.	697.
	=====	=====

NATIONAL VACCINE INFORMATION CENTER  
 EIN 54-1951769  
 11/30/2002

**FIXED ASSETS**

<u>DESCRIPTION</u>	<u>11/30/01 BALANCE</u>	<u>ADDITIONS</u>	<u>DEPLETIONS</u>	<u>11/30/02 BALANCE</u>
FURNITURE & EQUIPMENT	6,031 71	0 00	0 00	6,031 71
COMPUTER EQUIPMENT	<u>39,416 88</u>	<u>20,877 37</u>	<u>0 00</u>	<u>60,294 25</u>
	<u>45,448 59</u>	<u>20,877 37</u>	<u>0 00</u>	<u>66,325 96</u>

**ACCUMULATED DEPRECIATION**

FURNITURE & EQUIPMENT	5,681 25	110 00	0 00	5,791 25
COMPUTER EQUIPMENT	<u>30,914 52</u>	<u>5,584 23</u>	<u>0 00</u>	<u>36,498 75</u>
	<u>36,595 77</u>	<u>5,694 23</u>	<u>0 00</u>	<u>42,290 00</u>

FORM 990, PART IV - OTHER ASSETS

DESCRIPTION -----	BEGINNING BOOK VALUE -----	ENDING BOOK VALUE -----
DEPOSITS	250.	250.
EMPLOYEE ADVANCE	67.	
	-----	-----
TOTALS	317.	250.
	=====	=====

FORM 990, PART IV - OTHER LIABILITIES

DESCRIPTION -----	BEGINNING BOOK VALUE -----	ENDING BOOK VALUE -----
PAYROLL WITHHOLDINGS	5,361.	918.
LEASE PAYABLE		17,415.
	-----	-----
TOTALS	5,361.	18,333.
	=====	=====

FORM 990, PART IV-A - OTHER REVENUE ON RETURN BUT NOT ON BOOKS

=====

DESCRIPTION	AMOUNT
-----	-----
UNREALIZED LOSS	228.
TOTAL	----- 228.
	=====



## FORM 990, PART V - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS -----	TITLE AND TIME DEVOTED TO POSITION -----	COMPENSATION -----	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS -----	EXPENSE ACCT AND OTHER ALLOWANCES -----
BARBARA LOE LITTLES 631 EAST CAPITOL STREET S.E WASHINGTON, DC 20003	PRESIDENT 40	38,500.	NONE	NONE
KATHRYN WILLIAMS 11450 OAKHURST LANE WOODBIDGE, VA 22192	VICE PRES 40	37,000.	NONE	NONE
CAROL HALL 9627 BRENDA WAY MANASSAS, VA 22110	2ND VP AS NEEDED	NONE	NONE	NONE
JUDY BRAIMAN 50 LANDSDOWNE LANE ROCHESTER, NY 14618	SECRETARY AS NEEDED	NONE	NONE	NONE
PAUL MULHAUSER 69 FIFTH AVENUE # 15G NEW YORK, NY 10003	DIRECTOR AS NEEDED	NONE	NONE	NONE
	GRAND TOTALS	75,500.	NONE	NONE

SCHEDULE A, PART III - EXPLANATION FOR LINE 2D

=====

SEE PART V, FORM 990

STATES IN WHICH NVIC IS CURRENTLY REGISTERED.

Alabama -	Office of the Attorney General Consumer Affairs 11 South Union Street Montgomery, AL 36130
Alaska -	Fair Business Practices Section Department of Law 1031 West Fourth Ave Suite 200 Anchorage, AK 99501
Arizona-	Office of the Secretary of State State Capitol West Wing 1700 West Washington Phoenix, AZ 85007
Arkansas -	Office of the Attorney General 200 Tower Building 323 Center Street Little Rock, AR 72201
California -	Registry of Charitable Trusts P O Box 903447 Sacramento, CA 94203
Connecticut -	Department of Consumer Protection Office of the Attorney General 55 Elm Street Hartford, CT 06106
Florida -	Florida Department of Agriculture and Consumer Services Division of Consumer Services Room 208A, Mayo Building Tallahassee, FL 32399-0800
Georgia -	Secretary of State Business Services and Regulation 2 Martin Luther King Jr Drive Suite 315, West Tower Atlanta, GA 30334
Illinois -	Illinois Attorney General's Office Charitable Trusts and Solicitations Division 100 West Randolph St , 12th Floor Chicago, IL 60601

Kansas -

Secretary of State  
Corporation Division  
2nd Floor, State Capitol  
Topeka, KS 66612-1594

Kentucky -

Consumer Protection Division  
Attorney General's Office  
1024 Capitol Center Drive  
Frankfort, KY 40601-8204

Los Angeles -

Los Angeles Police Department  
Commission Investigation Division  
Charitable Services Section  
201 North Figueroa Street, Room 160  
Los Angeles, CA 90012

Louisiana

Office of the Attorney General  
Consumer Protection Division  
Department of Justice  
Baton Rouge, LA 70804

Maine-

Department of Professional and Financial Regulation  
Division of Licensing and Enforcement  
State House Station #35  
Augusta, ME 04333

Maryland -

Maryland Secretary of State  
Charitable Division  
State House  
Annapolis, MD 21401

Massachusetts -

Division of Public Charities  
Department of the Attorney General  
One Ashburton Place  
Boston, MA 02108 1698

Michigan -

Department of Attorney General  
Charitable Trust Section  
P0 Box 30214  
Lansing, MI 48909

Minnesota -

Office of the Attorney General  
Charities Division  
Suite 1200 NCL Tower  
445 Minnesota Street  
St Paul, MN 55101-2130

Mississippi-	Office of the Secretary of State P O Box 136 Jackson, MS 39205
Missouri-	Attorney General of Missouri P O Box 800 Jefferson Crty, MO 65102
New Hampshire-	Attorney General 33 Capitol Street Concord, NH 03301
New Jersey-	Division of Consumer Affairs Charities Registration Section 124 Halsey Street Newark, NJ 07101
New York-	State of New York Department of Law 120 Broadway New York, NY 10271
New Mexico-	Office of the Attorney General P O Drawer 1508 Santa Fe, NM 87504
North Carolina-	Department of Health and Human Services Solicitation Licensing Branch Division of Facility Services 701 Barbour Drive Raleigh, NC 27626-0530
North Dakota -	Office of the Secretary of State 600 East Boulevard Avenue Bismarck, ND 58505
Ohio-	Office of the Attorney General Charitable Foundations Section 101 E Town Street, 4th Floor Columbus, OH 43215  City of Columbus - Department of Public Safety 50 W Gay Street, 2nd Floor Columbus, OH 43215
Oklahoma-	Office of the Secretary of State

2300 North Lincoln Blvd , Room 101  
Oklahoma City, OK 73105-4897

Oregon-

Charitable Activities Section  
1515 SW Fifth, Suite 410  
Portland, OR 97201

Pennsylvania-

Commonwealth of Pennsylvania  
Department of State  
Bureau of Charitable Organizations  
308 North Office Building  
Harrisburg, PA 17120

Rhode Island-

Department of Business Regulation  
Division of Securities  
233 Richmond Street  
Suite 232  
Providence, RI 02903

South Carolina-

Office of the Attorney General  
1000 Assembly Street  
Columbia, SC 29202

Tennessee-

Department of State  
Charitable Solicitations  
James K Polk Building  
Suite 1700  
Nashville, TN 37243 0308

Utah-

Department of Commerce  
Division of Consumer Protection  
160 East 300 South  
P O Box 45804  
Salt Lake City, Utah 84145 0804

Virginia-

State Division of Consumer Affairs  
1100 Bank Street  
Richmond, VA 23219

Washington-

Secretary of State  
Charities Division  
505 E Union Avenue  
Olympia, WA 98504

West Virginia - State of West Virginia

Secretary of State  
Building 1, Suite 157-K  
1900 Kanawha Blvd East  
Charleston, WV 25305

Wisconsin-

Department of Regulation & Licensing  
1400 E Washington Avenue  
Madison, WI 53703