

Return of Organization Exempt From Income Tax

2002

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

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

A For the 2002 calendar year, or tax year beginning 12/01, 2002, and ending 11/30/2003

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

C Name of organization: NATIONAL VACCINE INFORMATION CENTER. Address: 421-E CHURCH STREET, VIENNA, VA 22180

D Employer identification number: 54-1951769. E Telephone number: (703) 938-0342. F Accounting method: Accrual

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

H(a) Is this a group return for affiliates? No. H(b) If "Yes," enter number of affiliates. H(c) Are all affiliates included? No. H(d) Is this a separate return filed by an organization covered by a group ruling? No.

G Web site: WWW.NVIC.ORG

J Organization type (check only one): 501(c)(3)

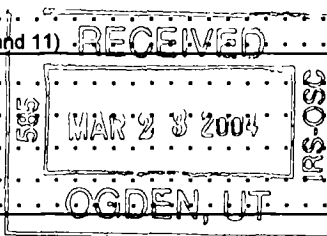
K Check here if the organization's gross receipts are normally not more than \$25,000

I Enter 4-digit GEN. 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: 442,797.

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See page 17 of the instructions)

Table with 21 rows and 4 columns: Description, (A) Securities, (B) Other, Total. Includes revenue from contributions, program services, and expenses for management and fundraising.



SCANNED MAR 30 04

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 page 21 of the instructions.)

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22	Grants and allocations (attach schedule) (cash \$ _____ noncash \$ _____)	22			
23	Specific assistance to individuals (attach schedule)	23			
24	Benefits paid to or for members (attach schedule)	24			
25	Compensation of officers, directors, etc	25	79,250.	66,437.	6,000.
26	Other salaries and wages	26	118,176.	114,305.	3,871.
27	Pension plan contributions	27			
28	Other employee benefits	28			
29	Payroll taxes	29	16,051.	14,095.	1,054.
30	Professional fundraising fees	30			902.
31	Accounting fees	31	17,888.	1,535.	16,353.
32	Legal fees	32	6,545.		6,545.
33	Supplies	33	8,120.	4,549.	3,571.
34	Telephone	34	5,939.	5,183.	445.
35	Postage and shipping	35	44,439.	16,995.	17,222.
36	Occupancy	36	27,642.	24,848.	2,794.
37	Equipment rental and maintenance	37	6,877.	6,877.	
38	Printing and publications	38	46,913.	18,221.	18,346.
39	Travel	39	2,512.	2,392.	120.
40	Conferences, conventions, and meetings	40	1,011.	1,011.	
41	Interest	41	1,038.		1,038.
42	Depreciation, depletion, etc (attach schedule)	42	9,581.		9,581.
43	Other expenses not covered above (itemize) STMT 4	43a	79,551.	63,287.	12,714.
	b	43b			
	c	43c			
	d	43d			
	e	43e			
44	Total functional expenses (add lines 22 through 43) <i>Organizations completing columns (B)-(D), carry these totals to lines 13-15.</i>	44	471,533.	339,735.	99,654.
					32,144.

Joint Costs. Check if you are following SOP 98-2

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? Yes No
 If "Yes," enter (i) the aggregate amount of these joint costs \$ 119,252., (ii) the amount allocated to Program services \$ 18,455.,
 (iii) the amount allocated to Management and general \$ 68,903., and (iv) the amount allocated to Fundraising \$ 31,894.

Part III Statement of Program Service Accomplishments (See page 24 of the instructions.)

What is the organization's primary exempt purpose? **STMT 5**

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.)

a	STMT 6	(Grants and allocations \$)	337,470.
b	STMT 6	(Grants and allocations \$)	2,265.
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)		339,735.

Part IV Balance Sheets (See page 24 of the instructions.)

Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.

		(A)		(B)
		Beginning of year		End of year
Assets	45 Cash - non-interest-bearing	36,331.	45	35,862.
	46 Savings and temporary cash investments	191,368.	46	95,024.
	47a Accounts receivable	47a 4,307.		
	b Less: allowance for doubtful accounts	47b	19,045.	47c 4,307.
	48a Pledges receivable	48a		
	b Less: allowance for doubtful accounts	48b		48c
	49 Grants receivable			49
	50 Receivables from officers, directors, trustees, and key employees (attach schedule)			50
	51a Other notes and loans receivable (attach schedule)	51a		
	b Less: allowance for doubtful accounts	51b		51c
	52 Inventories for sale or use		4,700.	52 6,928.
	53 Prepaid expenses and deferred charges		4,351.	53 3,968.
	54 Investments - securities (attach schedule) STMT 7. <input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV		697.	54 3,559.
	Liabilities	55a Investments - land, buildings, and equipment: basis	55a	
b Less: accumulated depreciation (attach schedule)		55b		55c
56 Investments - other (attach schedule)				56
57a Land, buildings, and equipment: basis		57a 66,326.		
b Less: accumulated depreciation (attach schedule) STMT 14		57b 51,871.	24,036.	57c 14,455.
58 Other assets (describe STMT 8)			250.	58 250.
59 Total assets (add lines 45 through 58) (must equal line 74)			280,778.	59 164,353.
60 Accounts payable and accrued expenses			50,317.	60 18,156.
61 Grants payable				61
62 Deferred revenue				62
Net Assets or Fund Balances	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 STMT 9)		18,333.	65 13,535.
	66 Total liabilities (add lines 60 through 65)		68,650.	66 31,691.
	67 Unrestricted		212,128.	67 130,562.
68 Temporarily restricted			68 2,100.	
69 Permanently restricted			69	
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, column (B) must equal line 21)		212,128.	73 132,662.	
74 Total liabilities and net assets / fund balances (add lines 66 and 73)		280,778.	74 164,353.	

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 IV-A Reconciliation of Revenue per Audited Financial Statements with Revenue per Return (See page 26 of the instructions.)

Part IV-B Reconciliation of Expenses per Audited Financial Statements with Expenses per Return

a	Total revenue, gains, and other support per audited financial statements . . ▶	a	438,252.
b	Amounts included on line a but not on line 12, Form 990		
	(1) Net unrealized gains on investments . . \$ _____		
	(2) Donated services and use of facilities \$ _____		
	(3) Recoveries of prior year grants \$ _____		
	(4) Other (specify): _____ \$ _____		
	Add amounts on lines (1) through (4) ▶	b	
c	Line a minus line b ▶	c	438,252.
d	Amounts included on line 12, Form 990 but not on line a:		
	(1) Investment expenses not included on line 6b, Form 990 . . . \$ _____		
	(2) Other (specify): _____ \$ _____		
	STMT 10 \$ 339.		
	Add amounts on lines (1) and (2) . . ▶	d	339.
e	Total revenue per line 12, Form 990 (line c plus line d) ▶	e	438,591.

a	Total expenses and losses per audited financial statements ▶	a	471,533.
b	Amounts included on line a but not on line 17, Form 990		
	(1) Donated services and use of facilities \$ _____		
	(2) Prior year adjustments reported on line 20, Form 990 \$ _____		
	(3) Losses reported on line 20, Form 990 \$ _____		
	(4) Other (specify): _____ \$ _____		
	Add amounts on lines (1) through (4) . . ▶	b	
c	Line a minus line b ▶	c	471,533.
d	Amounts included on line 17, Form 990 but not on line a:		
	(1) Investment expenses not included on line 6b, Form 990 . . . \$ _____		
	(2) Other (specify): _____ \$ _____		
	Add amounts on lines (1) and (2) . . ▶	d	
e	Total expenses per line 17, Form 990 (line c plus line d) ▶	e	471,533.

Part V List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated; see page 26 of the instructions)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-)	(D) Contributions to employee benefit plans & deferred compensation	(E) Expense account and other allowances
SEE STATEMENT 11		79,250.	NONE	NONE

75 Did any officer, director, trustee, or key employee receive aggregate compensation of more than \$100,000 from your organization and all related organizations, of which more than \$10,000 was provided by the related organizations? Yes No
If "Yes," attach schedule - see page 26 of the instructions

Part VI Other Information (See page 27 of the instructions.)

Table with columns: Question, Yes, No. Rows include questions 76-92 regarding organizational activities, financials, and tax status.

Part VII Analysis of Income-Producing Activities (See page 31 of the instructions.)

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					5,184.
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	1,162.	
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					17,105.
103 Other revenue: a					
b ALL OTHER INCOME			01	3,410.	
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))				4,572.	22,289.
105 Total (add line 104, columns (B), (D), and (E))					26,861.

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 page 32 of the instructions.)

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 page 32 of the instructions.)

(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 page 33 of the instructions.)

- (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 belief, 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. Shellen*

Type or print name and title: *Kathryn M. Shellen*

Paid Preparer's Use Only

Preparer's signature: *Bond Beebe*

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

JSA

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

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.)

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

OMB No 1545-0047

2002

Name of the organization

NATIONAL VACCINE INFORMATION CENTER

Employer identification number

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

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

Schedule A (Form 990 or 990-EZ) 2002

JSA
2E1210 1 000

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 a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ► \$ _____ (Must equal amounts on line 38, Part VI-A, or line i 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	1		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?	2 a		X
b Lending of money or other extension of credit?	2 b		X
c Furnishing of goods, services, or facilities?	2 c		X
STMT 12			
d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	2 d	X	
e Transfer of any part of its income or assets?	2 e		X
3 Does the organization make grants for scholarships, fellowships, student loans, etc.? (See Note below.)	3		X
4 Do you have a section 403(b) annuity plan for your employees?	4		X
<i>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.</i>			

Part IV Reason for Non-Private Foundation Status (See pages 3 through 5 of the instructions.)

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

5 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)

11 a 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)

11 b 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 5 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

Table with columns: Calendar year (or fiscal year beginning in), (a) 2001, (b) 2000, (c) 1999, (d) 1998, (e) Total. Rows include: 15 Gifts, grants, and contributions received; 16 Membership fees received; 17 Gross receipts from admissions, merchandise sold or services performed; 18 Gross income from interest, dividends, amounts received from payments on securities loans; 19 Net income from unrelated business activities; 20 Tax revenues levied for the organization's benefit; 21 The value of services or facilities furnished to the organization by a governmental unit without charge; 22 Other income; 23 Total of lines 15 through 22; 24 Line 23 minus line 17; 25 Enter 1% of line 23; 26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24; b Prepare a list for your records to show the name of and amount contributed by each person; c Total support for section 509(a)(1) test; d Add: Amounts from column (e) for lines 18, 19, 22; e Public support (line 26c minus line 26d total); f Public support percentage (line 26e (numerator) divided by line 26c (denominator)); 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"; 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; c Add: Amounts from column (e) for lines: 15, 16, 17, 20, 21; d Add: Line 27a total and line 27b total; e Public support (line 27c total minus line 27d total); f Total support for section 509(a)(2) test; g Public support percentage (line 27e (numerator) divided by line 27f (denominator)); h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator)).

28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 1998 through 2001, 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
29 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?	29	
30 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?	30	
31 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) ----- ----- -----	31	
32 Does the organization maintain the following		
a Records indicating the racial composition of the student body, faculty, and administrative staff?	32a	
b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b	
c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32c	
d Copies of all material used by the organization or on its behalf to solicit contributions?	32d	
If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement) ----- -----		
33 Does the organization discriminate by race in any way with respect to:		
a Students' rights or privileges?	33a	
b Admissions policies?	33b	
c Employment of faculty or administrative staff?	33c	
d Scholarships or other financial assistance?	33d	
e Educational policies?	33e	
f Use of facilities?	33f	
g Athletic programs?	33g	
h Other extracurricular activities?	33h	
If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement.) ----- -----		
34a Does the organization receive any financial aid or assistance from a governmental agency?	34a	
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.	34b	
35 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	35	

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.

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

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.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in) ►	(a) 2002	(b) 2001	(c) 2000	(d) 1999	(e) Total
45 Lobbying nontaxable amount					
46 Lobbying ceiling amount (150% of line 45(e))					
47 Total lobbying expenditures					
Grassroots nontaxable amount					
48 Grassroots ceiling amount (150% of line 48(e))					
49 Grassroots lobbying expenditures					
50 Total 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 11 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?

Table with columns: Question, Yes, No. Rows include: Transfers from the reporting organization to a noncharitable exempt organization of (i) Cash, (ii) Other assets; 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; 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 4 columns: (a) Line no., (b) Amount involved, (c) Name of noncharitable exempt organization, (d) Description of transfers, transactions, and sharing arrangements. Row 1 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 [X] No

b If "Yes," complete the following schedule

Table with 3 columns: (a) Name of organization, (b) Type of organization, (c) Description of relationship. Row 1 contains 'N/A'.

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

DESCRIPTION	AMOUNT
BOOKS, VIDEOS AND OTHER PUBLICATIONS	21,311.
TOTAL	21,311.

FORM 990, PART I - COST OF GOODS SOLD

=====

INVENTORY AT BEGINNING OF YEAR	4,700.
PURCHASES	6,433.
SALARIES AND WAGES	
OTHER COSTS	

SUBTOTAL	11,133.
MINUS ENDING INVENTORY	6,927.

COST OF GOODS SOLD	4,206.
	=====

FORM 990, PART I - OTHER DECREASES IN FUND BALANCES
 =====

DESCRIPTION -----	AMOUNT -----
UNREALIZED LOSS ON INVESTMENTS	339.
NET ASSETS ADJUSTMENT:REDUCTION OF NET ASSETS AS RESULT OF UNDERSTATEMENT OF EXPENSES FROM PREVIOUSLY STATED F/S	46,185.

TOTAL	46,524. =====

FORM 990, PART II - OTHER EXPENSES

DESCRIPTION -----	TOTAL -----	PROGRAM SERVICES -----	MANAGEMENT AND GENERAL -----	FUNDRAISING -----
BANK SERVICE CHARGES	4,371.	10.	4,361.	
CONSULTING	21,440.	18,471.	1,219.	1,750.
INTERNET	3,540.	3,540.		
DUES AND SUBSCRIPTIONS	298.	298.		
RESEARCH	2,332.	2,332.		
STATE REGISTRATIONS	709.		709.	
LIBRARY EXPENSE	2,265.	2,265.		
ADVERTISING & PROMOTIONS	985.	985.		
MISCELLANEOUS EXPENSES	526.	501.	25.	
OTHER DESIGN FEES	36,000.	34,200.		1,800.
DELIVERY SERVICE	685.	685.		
INSURANCE	6,400.		6,400.	
	-----	-----	-----	-----
TOTALS	79,551.	63,287.	12,714.	3,550.
	=====	=====	=====	=====

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. IN ADDITION,
 APPROXIMATELY 30,000 PEOPLE VISIT THE WEBSITE MONTHLY.

337,470.

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

2,265.

TOTAL

 339,735.
 =====

FORM 990, PART IV - INVESTMENTS - SECURITIES

=====

DESCRIPTION -----	BEGINNING BOOK VALUE -----	ENDING BOOK VALUE -----
COMMON STOCK	697.	3,559.
	-----	-----
TOTALS	697.	3,559.
	=====	=====

FORM 990, PART IV - OTHER ASSETS

=====

DESCRIPTION -----	BEGINNING BOOK VALUE -----	ENDING BOOK VALUE -----
DEPOSITS	250.	250.
	-----	-----
TOTALS	250.	250.
	=====	=====

FORM 990, PART IV - OTHER LIABILITIES

DESCRIPTION -----	BEGINNING BOOK VALUE -----	ENDING BOOK VALUE -----
PAYROLL WITHHOLDINGS	918.	NONE
LEASE PAYABLE	17,415.	13,535.
TOTALS	----- 18,333. =====	----- 13,535. =====

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

=====

DESCRIPTION	AMOUNT
-----	-----
UNREALIZED LOSS	339.
TOTAL	----- 339. =====

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 221 LAWYERS ROAD VIENNA, VA 22180	PRESIDENT FULL-TIME	40,375.	NONE	NONE
KATHRYN WILLIAMS 11450 OAKHURST LANE WOODBIDGE, VA 22192	VICE PRES FULL-TIME	38,875.	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		79,250.	NONE	NONE

SCHEDULE A, PART III - EXPLANATION FOR LINE 2D

SEE PART V, FORM 990

FEDERAL FOOTNOTES

ATTACHMENT

FORM 990, PART II, LINE 42

FORM 990, PART IV, LINE 57

	11/30/02	ADDITION	DELETION	11/30/03
FURNITURE & EQUIPMENT	6,032			6,032
COMPUTER EQUIPMENT	60,294			60,294
	66,326			66,326
ACCUMULATED DEPRECIATION	42,290	9,581		51,871
	24,036			14,455

DEPRECIATION EXPENSE IS COMPUTED UNDER THE DOUBLE-DELINING METHOD, USING THE ESTIMATED USEFUL LIFE OF EACH FIXED ASSET.

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

ATTACHMENT

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 PO 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

ATTACHMENT
(CONTINUED)

Mississippi -	Office of the Secretary of State P.O. Box 136 Jackson, MS 39205
Missouri -	Attorney General of Missouri PO Box 800 Jefferson City, 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, 2 nd Floor Columbus, OH 43215

ATTACHMENT
(CONTINUED)

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

ATTACHMENT
(CONTINUED)

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