Department of the Treasury Internal Revenue Service

### Return of Organization Exempt From Income Tax

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

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

OMB No 1545-0047 Open to Public

Inspection A For the 2012 calendar year, or tax year beginning and ending C Name of organization Check if applicable D Employer identification number Address change BRADY CAMPAIGN TO PREVENT GUN VIOLENCE Name change 23-7321017 Doing Business As Initial return Number and street (or P 0 box if mail is not delivered to street address) Room/suite E Telephone number Terminl1 1 0 0 202-898-0792 1225 EYE STREET, NW Amende 4,946,066. City, town, or post office, state, and ZIP code G Gross receipts \$ Applica-WASHINGTON, DC 20005 H(a) Is this a group return pending F Name and address of principal officer: DANIEL GROSS XYes for affiliates? SAME AS C ABOVE H(b) Are all affiliates included? X Yes 1 Tax-exempt status \_\_\_\_ 501(c)(3) \_\_\_ X 501(c) ( 4 4947(a)(1) or ) ◀ (insert no ) If "No," attach a list. (see instructions) J Website: ► WWW.BRADYCAMPAIGN.ORG H(c) Group exemption number ► 3950 K Form of organization X Corporation L Year of formation 1974 M State of legal domicile DC Trust Association Other > Part I Summary Briefly describe the organization's mission or most significant activities: WE ARE DEVOTED TO CREATING AN Governance AMERICA FREE FROM GUN VIOLENCE WHERE ALL AMERICANS ARE SAFE AT HOME, oxed if the organization discontinued its operations or disposed of more than 25% of its net assets 18 Number of voting members of the governing body (Part VI, line 1a) <del>18</del> Number of independent voting members of the governing body (Part VI, line 1b) 4 Activities & 10 Total number of individuals employed in calendar year 2012 (Part V, line 2a) 5 350 Total number of volunteers (estimate if necessary) 6 0. 7 a Total unrelated business revenue from Part VIII, column (C), line 12 7a 0. b Net unrelated business taxable income from Form 990-T, line 34 **Prior Year Current Year** 2,887,422  $4,876,\overline{442}$ Contributions and grants (Part VIII, line 1h) Revenue 0. Program service revenue (Part VIII, line 2g) 11,641 20,153. Investment income (Part VIII, column (A), lines 3, 4, and 7d) 18,226. 31,813. 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 2,930,876 4,914,821. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) Grants and similar amounts Daily (Rart X, column (A), lines 1-3) 0. Benefits paid to or for members (Part IX, cplumn (A), line 4) Ō. 0. 15 Salaries, other compensation, employee beforts (Part IX, column (A), lines 5-10)
16a Professional fondraising vees (Part IX, column (A), line 11e) 882,100. 633,828. 63,718 b Total fundraising expenses (Part IX, column (D), line 25) 798,859. 2,085,577. Other expenses (Part X Columb (A) Inhes 11a-11d, 11f-24e) 2,091,907 Total expenses, Add lines 13-17 (must equal Part IX, column (A), line 25) 2,719,405. 3,037,725 -106,8492,195,416. Revenue less expenses. Subtract line 18 from line 12 **Beginning of Current Year End of Year** 490,956. 2,538,509. 20 Total assets (Part X, line 16) 1,210,012. 1,376,801 21 Total liabilities (Part X, line 26) 22 Net assets or fund balances. Subtract line 21 from line 20 -885,845. 1,328,497 Part II Signature Block Sunder penalties of perjury, I declare that I have targuined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of prepared (other than officer) is based on all information of which preparer has any knowledge 11/15/13 Signature of officer Date Sign Here DANIEL GROSS, PRESIDENT Type or print name and title PTIN Date Print/Type preparer's name Premarer's signature Check 8 P01300682 CHARLES R. DEPPE Firm's name MATTHEWS, CARTER & BOYCE 54-1487262 Firm's EIN Firm's address 11320 RANDOM HILLS ROAD, SUITE 600 Úse Only FAIRFAX, VA 22030 Phone no 703-218-3600

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

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

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

Form **990** (2012)

X Yes No

	990 (2012) BRADY CAMPAIGN TO PREVENT GUN VIOLENCE 23-7321  IV Checklist of Required Schedules	017	P	age 3
rai	the Checklist of Required Schedules			Г <del></del>
_	1- Ab - 200-201-201-201-201-201-201-201-201-201-		Yes	No
	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			х
	If "Yes," complete Schedule A	2	Х	
	Is the organization required to complete Schedule B, Schedule of Contributors?		Λ.	
	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for		х	
	public office? If "Yes," complete Schedule C, Part I	3	A	
	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	4		
	during the tax year? If "Yes," complete Schedule C, Part II	-		
	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	Х	
	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		х
	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			<del></del>
	Schedule D, Part III	8		X
	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for		<u> </u>	
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			}
	If "Yes," complete Schedule D, Part IV	9		X
	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
• •	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,	1	Ì	1
_	Part VI	11a	Х	İ
ь	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
_	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	ļ	X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	İ
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		ļ	
	Schedule D, Parts XI and XII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	X	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	ļ .	X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	ļ	X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			•
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			
	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15	<u> </u>	X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16	ļ	X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		<u> </u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G. Part II	18	1	X

Form **990** (2012)

19

20a

20b

Х

X

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"

20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H

**b** If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

complete Schedule G, Part III

Pa	rt IV	Checklist	of Required	I Schedules	(continued)

			Yes	No
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 III	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			İ
	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		<u> </u>
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			l
	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		<u> </u>
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, highest 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	ļ	<u> X</u>
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):	00-	Х	Ì
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	-	<del>  ^</del>
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		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	<del>                                     </del>
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation		<u> </u>	<del> </del>
-	contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
•	If "Yes," complete Schedule N, Part I	31		х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	<del>ا آ</del>		<u> </u>
	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 <sup>o</sup> 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, Part II, III, or IV, and			Ì
	Part V, line 1	34	X	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	X	
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? 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	<u> </u>	<u> </u>
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 11b and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	X	
		Form	990	(2012)

* *	Check if Schedule O contains a response to any question in this Part V					
					Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	10			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and r		ble gaming			
	(gambling) winnings to prize winners?			1c	Х	
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	2a	10			
b	if at least one is reported on line 2a, did the organization file all required federal employment tax retu			2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instruction					
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?			3a		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O			3ь		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other	autho	nty over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial	accou	nt)?	4a		X
b	If "Yes," enter the name of the foreign country: ▶					
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial	Accou	nts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		X
þ	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	action?	•	5b		Х
C	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did to	he org	anızatıon solicit			
	any contributions that were not tax deductible as charitable contributions?			6a	_X	
b	If "Yes," did the organization include with every solicitation an express statement that such contribu	tions c	r gifts			
	were not tax deductible?			6b	X	<u> </u>
7	Organizations that may receive deductible contributions under section 170(c).					
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and se	rvices	provided to the payor?	7a		<u> </u>
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w	as rec	uired	_		
_	to file Form 8282?	١	I	7c		ļ
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	-42	7.		
e f	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of		St /	7e 7f		
g	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit cont If the organization received a contribution of qualified intellectual property, did the organization file F		200 on required?			<del> </del>
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization		· ·	7g 7h		<del> </del>
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.			/!!		_
•	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at		=	8	,	
9	Sponsoring organizations maintaining donor advised funds.	,	ourg , our.	Ť		
а	Did the organization make any taxable distributions under section 4966?			9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?			9b		
10	Section 501(c)(7) organizations. Enter:					
а	Initiation fees and capital contributions included on Part VIII, line 12	10a				
þ	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	Section 501(c)(12) organizations. Enter:		1			
а	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against					
	amounts due or received from them.)	11b	<u> </u>			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	I	?	12a		ļ
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
13	Section 501(c)(29) qualified nonprofit health insurance issuers.					
а	Is the organization licensed to issue qualified health plans in more than one state?			13a		<del> </del>
	Note. See the instructions for additional information the organization must report on Schedule O.					
b	Enter the amount of reserves the organization is required to maintain by the states in which the	ا	1			
	organization is licensed to issue qualified health plans	13b	1			
	Enter the amount of reserves on hand	13c		4.4		Х
	Did the organization receive any payments for indoor tanning services during the tax year?  If "Yes," heart filed a Form 720 to report these payments? If "No," provide an evaluation is Sabada.	<u>ه</u> ۸		14a		^
<u>D</u>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedu	ie U		14b	990	(2012)
				1 0111	・シフひ	(2012)

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

	Check if Schedule O contains a response to any question in this Part VI			X
Sec	tion A. Governing Body and Management			<u> </u>
<u> </u>	MONTAL GOVERNING BODY and Management		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 18		163	140
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
ь	Enter the number of voting members included in line 1a, above, who are independent  18			
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	Х	
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	İ	Х
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	Х	
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	Х	
ь	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
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
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	X	
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	Х	
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	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	_X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this was done	12c	Х	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	
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	Х	
16-	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
ıva	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	40		v
<b>L</b>	taxable entity during the year?  If "You" did the graph ration follows written policy or precedure requiring the graph ratio to evaluate the participation.	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	In joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's	401		
500	exempt status with respect to such arrangements?	16b		
	tion C. Disclosure  List the states with which a copy of this Form 990 is required to be filed ▶SEE SCHEDULE O	-		
17 18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)	aved-l-		
10	for public inspection. Indicate how you made these available. Check all that apply.	avallab	ne	
	X Own website X Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, ar	d fina-	olol	
13	statements available to the public during the tax year.	u iiiar	icial	
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization.	tion: 🕨	•	
	THE ORGANIZATION - 202-218-4650	uon P		
	1225 EYE STREET, NW, WASHINGTON, DC 20005			
23200		Fa	000	(2012)

12-10-12

# Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

### 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.

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

- 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.

Name and Title	(A)	(B)			((	<b>)</b>			(D)	(E)	(F)
Nours per   Nours per   Nours per   Nours for week (let any hours for related organizations below line)   B		į.	,,,		Pos	ition			1		
West any hours for related organizations below line)   Page   P		hours per	box,	, unle	ss pe	rson i	s bot	h an	· ·	· ·	amount of
(1) SARAH BRADY		week	H	cer an	dad	recto	r/trus	tee)	from	from related	
(1) SARAH BRADY			EC O								•
(1) SARAH BRADY		<b>I</b>	o d	88	'		ated		_	(W·2/1099-MISC)	
(1) SARAH BRADY			ustee	arst a		88	bens		(W-2/1099-MISC)		_
(1) SARAH BRADY		1 -	t la	tonal		yold.	15 g				
(1) SARAH BRADY		1	ndiw	nsttu	Officer	(ey en	angle and see	ome			Organizations
C2   ROBERT BATES	(1) SARAH BRADY	2.00	<u> </u>	-=-		-		Ī			-
TREASURER	CHAIR OF THE ORGANIZATION		Х		Х				119,700.	0.	15,561.
(3) WILLIAM HARWOOD   5.00   X	(2) ROBERT BATES	5.00									
DOARD CHAIR	TREASURER		X		X				0.	0.	0.
(4) DAN GROSS	(3) WILLIAM HARWOOD	5.00		1					_	_	_
Resident	BOARD CHAIR		X		X				0.	0.	0.
SECRETARY	(4) DAN GROSS			į							
SECRETARY	PRESIDENT		X	_	X		<u> </u>	_	0.	206,731.	26,875.
Column		5.00		Ì		l					
TRUSTEE	SECRETARY		Х		X			<u> </u>	0.	0.	0.
TRUSTEE	(6) ALAN BENNETT	2.00				1					
TRUSTEE	TRUSTEE		X	<u> </u>	<u> </u>	-	<u> </u>	ļ	0.	0.	0.
Reserve	(7) NICK BROWN	2.00									
TRUSTEE	TRUSTEE		X	<u> </u>	ļ	<u> </u>		<u> </u>	0.	0.	0.
TRUSTEE	(8) JOEL BUCHWALD	2.00	١			1					
TRUSTEE	TRUSTEE	0.00	X		<u> </u>	<u> </u>	ļ	1_	0.	0.	0.
TRUSTEE	(9) JON COBIN	2.00	١		1						
TRUSTEE	TRUSTEE		X	-	ļ	<u> </u>	ļ	ļ	0.	0.	0.
TRUSTEE	(10) MARIA CUOMO COLE	2.00	١								
TRUSTEE	TRUSTEE	<del></del>	X	ļ	_	ļ.,		<u> </u>	0.	0.	0.
TRUSTEE	(11) TIM GOMES	2.00	١		l	l		}			
TRUSTEE         X         0.         0.         0.           (13) KATHLEEN KENNEDY TOWNSEND         2.00         X         0.         0.         0.           TRUSTEE         X         0.         0.         0.         0.           (14) RICHARD PENNINGTON         2.00         X         0.         0.         0.           TRUSTEE         X         0.         0.         0.         0.           (16) GENITA ROBINSON         2.00         X         0.         0.         0.           TRUSTEE         X         0.         0.         0.         0.           (17) MICHAEL SMALL         2.00         X         0.         0.         0.           TRUSTEE         X         0.         0.         0.         0.	TRUSTEE		X	<u> </u>	ļ	<u> </u>	<del> </del>		0.	0.	0.
Columbia	(12) JOAN HILL	2.00	١	1			}				
TRUSTEE         X         0.         0.         0.           (14) RICHARD PENNINGTON         2.00         X         0.         0.         0.           TRUSTEE         X         0.         0.         0.         0.           (15) JOAN PETERSON         2.00         X         0.         0.         0.         0.           TRUSTEE         X         0.         0.         0.         0.         0.         0.           (17) MICHAEL SMALL         2.00         X         0.         0.         0.         0.         0.           TRUSTEE         X         0.         0.         0.         0.         0.         0.	<del></del>	2 22	X	-	-	-	_	1	0.	0.	0.
Column		2.00	١.,								
TRUSTEE         X         0.         0.         0.           (15) JOAN PETERSON         2.00         X         0.         0.         0.           TRUSTEE         X         0.         0.         0.         0.           (16) GENITA ROBINSON         2.00         X         0.         0.         0.         0.           TRUSTEE         X         0.         0.         0.         0.         0.         0.           TRUSTEE         X         0.         0.         0.         0.         0.         0.		2 00	X	<del> </del>	1	╁	-	-	0.	0.	0.
Column   C		2.00	١,,	1		1					
TRUSTEE		2 00	X	-	-	<del>                                     </del>	ļ	1	<u> </u>	0.	0.
(16) GENITA ROBINSON         2.00           TRUSTEE         X           (17) MICHAEL SMALL         2.00           TRUSTEE         X		2.00	١.,								
TRUSTEE X 0. 0. 0. 0. (17) MICHAEL SMALL 2.00 X 0. 0. 0. 0.		2 00	X	$\vdash$	-	-	-	╀	<u> </u>	0.	<u> </u>
TRUSTEE XX 0. 0. 0.		2.00	١.,								_
TRUSTEE X 0. 0. 0.			<u>X</u>	$\vdash$	<del> </del>	┼	$\vdash$	+	0.	0.	U .
		2.00	J.								
	<del></del>		ĮΛ	<u> </u>	<u> </u>	<u> </u>	ــــــــــــــــــــــــــــــــــــــ	Щ.		<u> </u>	<del></del>

232007 12-10-12

Form 990 (2012)

Part VII Section A. Officers, Directors, Tra (A)	(B)	1 ' 1 - ' '						(D)	(E)			(F)	
Name and title	Average	l (dc	not c		ition	than	one	Reportable	Reportable		Es	tımate	ed
	hours per	box	ι, unle	ss pe	erson	is bot	h an	compensation	compensation	ı		ount	of
	week (list any		1		T	1	100,	from	from related			other	<b>.</b>
	hours for	direct				_		the organization	organizations (W-2/1099-MISC	ا ه		pensa om th	
	related	50	trustee			nsate		(W·2/1099·MISC)	(11 12 1000 111100	′		anızat	
	organizations	慧	ם		9g/s	dwo.		`			_	d relat	
	below	Individual trustee or director	Institutional t	Officer	emp	Highest compensated employee	je j				orga	ınızatı	ons
	line)	홀	E	₹	<u>ş</u>	돌	Ğ			4			
(18) RACHEL SMITH	2.00	<b>₩</b>	}						,	۱ ،			^
TRUSTEE	2.00	X	-	-	-	-		0.		<u>) .</u>			0.
(19) MARCELLUS WILEY TRUSTEE	2.00	X	ŀ	ŀ				0.	,	o.			0.
(20) ANNETTE WILSON	2.00	Λ	-	├─	<del> </del>	-	$\vdash$	0.	<u>`</u>	<del>'</del> +			<u> </u>
TRUSTEE	2.00	X						0.	(	ا. د			0.
(21) HEIDI YEWMAN	2.00		$\vdash$	<del> </del>	T	-	<del> </del>	-		+			•
TRUSTEE		X						0.	(	o .			0.
(22) DENNIS HENIGAN	0.00									十			
VICE PRESIDENT-POLICY AND LAW	40.00	1		Х				0.	256,644	4.	3	3,3	64.
(23) JON LOWY	0.00												
DIRECTOR LEGAL ACTION PROJECT	40.00					X		0.	141,724	1.	1	8,4	24.
(24) BRIAN MALTE	40.00												
NATIONAL POLICY DIRECTOR		L		ļ	<u> </u>	X		113,773.	(	0.	1	4,7	<u>90.</u>
(25) JACQUELINE WERSHBALE	0.00	4								_	_		
DIRECTOR - DEVELOPMENT	40.00	_	<u> </u>	<u> </u>	-	X	<u> </u>	0.	112,115	2 •	1	4,5	75.
	<u> </u>	-											
dh Cub A-A-I	<u> </u>		<u> </u>			_		233,473.	717,214	$\rightarrow$	12	3,5	00
1b Sub-total c Total from continuation sheets to Part	VII Continu A							233,473.		0.	12	3,3	09.
d Total (add lines 1b and 1c)	vii, Section A							233,473.		<u> </u>	12	3,5	
Total number of individuals (including but	not limited to the	1056	e liste	ed a	bov	e) w	ho re	<del></del>	·	- •1		<del>5 , 5</del>	<u> </u>
compensation from the organization						~, ···		occirca more man proc	,,ood of roportable				2
												Yes	No
3 Did the organization list any former office	er, director, or tr	uste	e, ke	еу е	mple	oyee	, or	highest compensated e	mployee on	ſ			
line 1a? If "Yes," complete Schedule J fo.	r such individual	1								L	3		Х
4 For any individual listed on line 1a, is the	sum of reportab	le c	omp	ens	atio	n an	d oti	her compensation from	the organization				
and related organizations greater than \$1	50,000? If "Yes	," cc	ompl	ete	Sch	edul	e J t	for such individual		ļ	4	X	
5 Did any person listed on line 1a receive of							relat	ed organization or indiv	idual for services				
rendered to the organization? If "Yes," co	mplete Schedu	le J	for s	uch	per	noz					5		X
Section B. Independent Contractors									<b></b>				
1 Complete this table for your five highest									· ·	ensa	ation 1	rom	
the organization. Report compensation for (A)	or the calendar y	ear	ena	ing v	WILLI	OI W	/14111	(B)	year.		((	٠,	
Name and busine	ss address	N	ON	E				Description of s	services	Cr		nsatio	n
					•								
							ļ	- 10.4					
2 Total number of independent contractors	(including but	no+ 1	Imita	n+ +-	the	see l	l	d above) who received =	nore than				
\$100,000 of compensation from the orga		.00		((		0	3150	above, who received h	noro man				

Form **990** (2012)

Form 990 (2012) BRADY CA Part VIII Statement of Revenue

		Check if Schedule O conta	ains a response t	o any question	in this Part VIII			
	•		<u> </u>	o any quoquon	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
nts	1 a	Federated campaigns	1a					
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues	1b 1,	223,542.				
Am Am	c	Fundraising events	1c					
트를 받는	d	Related organizations .	1d					
imi,	е	Government grants (contributi	ions) 1e					
e tio	f	All other contributions, gifts, grant						
章		similar amounts not included abov	ve <b>1f 3</b> ,	652 <b>,</b> 900.				
<u> </u>	9	Noncash contributions included in lines	1a-1f \$	23,171.				
<u>0 9</u>	h	Total. Add lines 1a-1f		<u> </u>	4,876,442.			
				Business Code				
is	2 a							
Program Service Revenue	b	)						
	c	•						
Regi	C							
Š	e	•						
_	f	All other program service reve	enue					
				<u> </u>				
	3	Investment income (including	dividends, intere	st, and	11,617.			11 617
	4	other similar amounts)			11,01/.			11,617.
	4 5	Income from investment of tax Royalties	x-exempt bond p	roceeas	17,253.			17,253.
	3	noyanies	(i) Real	(II) Personal	17,255.			17,255.
	6 a	Gross rents	(i) neai	(ii) Personai	-			
	U a				-			
		Rental income or (loss)						
	,	Net rental income or (loss)	L	<b>•</b>	-	Î i		
		Gross amount from sales of	(i) Securities	(II) Other				
		assets other than inventory	39,781.	(ii) Other				
	Ŀ	Less: cost or other basis						
		and sales expenses	31,245.					
	•	Gain or (loss)	8,536.		1			
	•	Net gain or (loss)		<b></b>	8,536.			8,536.
an	8 8	Gross income from fundraising	g events (not					
		ıncludıng \$	of					
Şe,		contributions reported on line	1c). See					
erF		Part IV, line 18	а					
Other Reven	t	Less: direct expenses	b					
		Net income or (loss) from fund		<u> </u>				
	9 a	Gross income from gaming ac	ctivities. See					
		Part IV, line 19	а		-			
		Less: direct expenses	ь.	L	-			
		Net income or (loss) from gam	_	<u> </u>				
	10 a	Gross sales of inventory, less						
		and allowances	a		-			
		Less cost of goods sold	b		1			
		Net income or (loss) from sale		Puole con Card				
	11 -	Miscellaneous Revenu EVENTS	<u></u>	Business Code 900099	750.	750.		1
		MISCELLANEOUS	<del></del>	900099	223.	223.		<del> </del>
	-					223.		<del> </del>
		All other revenue			<del></del>			
		Total. Add lines 11a-11d		<b></b>	973.	, , , , , , , , , , , , , , , , , , ,		
	12	Total revenue. See instructions		•	4,914,821.	973.	0.	37,406.
23200	9			-	- • • •		<u>.</u>	Form <b>990</b> (2012)

Sect	on 501(c)(3) and 501(c)(4) organizations must comp	olete all columns. All othe	er organizations must co	mplete column (A).	
	Check if Schedule O contains a respons	se to any question in this			X
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the United States See Part IV, line 21				
2	Grants and other assistance to individuals in				
	the United States. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States. See Part IV, lines 15 and 16	- <u>-</u>			
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	125 261	100 000	22 112	
	trustees, and key employees	135,261.	100,899.	22,113.	12,249.
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)	200 205	200 040	50 644	
7	Other salaries and wages	380,385.	290,948.	50,644.	38,793.
8	Pension plan accruals and contributions (include				
_	section 401(k) and 403(b) employer contributions)	60 200	26 200	22.026	1.64
9	Other employee benefits	60,309.	36,209.	23,936.	164.
10	Payroll taxes	57,873.	44,490.	13,294.	89.
11	Fees for services (non-employees).				
a	Management	210.	129.		81.
b	Legal	13,000.	13,000.		
C	Accounting	13,000.	13,000.		<del></del>
d	Lobbying  Professional fundraising convices. See Part IV, line 17.				
e f	Professional fundraising services See Part IV, line 17 Investment management fees				<del></del>
9	Other. (If line 11g amount exceeds 10% of line 25,	<del></del>			
9	column (A) amount, list line 11g expenses on Sch 0	378,047.	147,789.	36,277.	193 981
12	Advertising and promotion	1,252.	658.	591.	193,981. 3.
13	Office expenses	102,637.	50,435.	41,691.	10,511.
14	Information technology	30,371.	30,371.	11/0310	10/311.
15	Royalties	00,0,20	00,0,10		
16	Occupancy	356,987.	276,443.	63,562.	16,982.
17	Travel	62,047.	60,093.	896.	1,058.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	14,624.	12,067.	127.	2,430.
20	Interest	40,629.	30,955.	7,739.	1,935.
21	Payments to affiliates		· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	
22	Depreciation, depletion, and amortization				·
23	Insurance	37,607.	28,653.	7,163.	1,791.
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
а	PRINTING	319,354.	161,954.	222.	157,178.
ь	POSTAGE AND SHIPPING	282,785.	151,907.	882.	129,996.
c	MAILING SERVICES	192,702.	121,300.		71,402.
d	DATA PROCESSING	148,680.	62,317.		86,363.
	All other expenses	104,645.	28,725.	2,067.	73,853.
25	Total functional expenses. Add lines 1 through 24e	2,719,405.	1,649,342.	271,204.	798,859.
26	Joint costs. Complete this line only if the organization		, , , , , , , , , , , ,		
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation				
	Check here X if following SOP 98-2 (ASC 958-720)	764,467.	362,795.	0.	401,672.

	Check if Schedule O contains a response to any question in this Part X			
		(A) Beginning of year		(B) End of year
1	Cash - non-interest-bearing	141,452.	1	2,158,220
2	Savings and temporary cash investments		2	
3	Pledges and grants receivable, net		3	
4	Accounts receivable, net	16,219.	4	4,634
5	Loans and other receivables from current and former officers, directors,			····
	trustees, key employees, and highest compensated employees. Complete			
	Part II of Schedule L		5	
6	Loans and other receivables from other disqualified persons (as defined unc	ler		
	section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contribute	ting		
	employers and sponsoring organizations of section 501(c)(9) voluntary			
	employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
7	Notes and loans receivable, net		7	
8	Inventories for sale or use		8	
9	Prepaid expenses and deferred charges	23,427.	9	16,206
10a				
	basis. Complete Part VI of Schedule D 10a 326, 66	55.		
	Less: accumulated depreciation 10b 326, 66		10c	0 349,357
	Investments - publicly traded securities	309,858.	11	349,357
12	Investments - other securities. See Part IV, line 11		12	
	Investments - program-related. See Part IV, line 11		13	
14	Intangible assets		14	
15	Other assets. See Part IV, line 11		15	10,092
				10,092 2,538,509 352,117
	•	304,620.	17	352,117
	• •		18	
			19	
	•		20	<del></del>
	• ,		21	
22		·		
		•		
	•	07.151	-	00 570
	. ,	87,151.		80,578
			24	
25				
	•	0.95 0.20		777 217
00				777,317
20			26	1,210,012
		10		
27	- ·	_925_605		1 200 202
				1,300,292 28,205
	• •	39,700.		20,203
29	·	7	29	
		_		
30	•		20	
33		-885,845.		1,328,497
	Total net assets or fund balances	-005,045.	33	2,538,509
	2 3 4 5 6 7 8 9 10a b 11 12 13 14	2 Savings and temporary cash investments 3 Pledges and grants receivable, net 4 Accounts receivable, net 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 6 Loans and other receivables from other disqualified persons (as defined und section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributed employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part IV of Schedule D 1 Less: accumulated depreciation 1 Investments - publicly traded securities 1 Investments - publicly traded securities 1 Investments - other securities. See Part IV, line 11 1 Intangible assets 1 Other assets. See Part IV, line 11 1 Intangible assets 2 Other assets. See Part IV, line 11 1 Total assets. Add lines 1 through 15 (must equal line 34) 1 Accounts payable and accrued expenses 8 Grants payable 1 Deferred revenue 1 Tax-exempt bond liabilities 1 Escrow or custodial account liability. Complete Part IV of Schedule D 2 Loans and other payables to current and former officers, directors, trustees key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 2 Secured mortgages and notes payable to unrelated third parties 2 Unsecured notes and loans payable to unrelated third parties 2 Unsecured notes and loans payable to unrelated third parties 2 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 2 Total liabilities. Add lines 17 through 25  Organizations that follow SFAS 117 (ASC 958), check here	Beginning of year  1 Cash - non-interest-bearing 1 Al 1, 452. 2 Savings and temporary cash investments 3 Pledges and grants receivable, net 4 Accounts receivable, net 5 Loans and other receivable from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(I)), persons described in section 4958(c)(3)(6), and contributing employees and sponsoming organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L 7 Notes and loans receivable, net 8 Inventiones for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part II of Schedule D 1 Less: accumulated depreciation 1 Investments - publicity traded securities 1 Investments - other securities. See Part IV, line 11 1 Investments - other securities. See Part IV, line 11 1 Investments - other securities. See Part IV, line 11 1 Intragible assets 1 Other assets. See Part IIV, line 11 1 Intragible assets 1 Other assets. See Part IV, line 11 1 Intragible assets 2 Other assets. See Part IV, line 11 2 Investments - publicity traded securities 3 Other assets. See Part IV, line 11 3 Investments payable and accrued expenses 4 Grants payable 5 Other assets. See Part IV, line 11 5 Capanization by a see and accrued expenses 6 Grants payable 7 Escrow or custodial account liability. Complete Part IV of Schedule D 7 Escrow or custodial account liability. Complete Part IV of Schedule D 8 Escrow or custodial account liability. Complete Part IV of Schedule D 9 Capanizations that follow SFAS 117 (ASC 958), check here    1 Organizations that follow SFAS 117 (ASC 958), check here    2 Organizations that follow SFAS 117 (ASC 958), check here    3 Organizations that tollow SFAS 117 (ASC 958), check here    3 Organizations that on tof follow or current funds 9 Retained earnings, endownent, accumulated	Cash - non-interest-bearing   141,452. 1     Savings and temporary cash investments   2     Savings and temporary cash investments   3     Pledges and grants receavable, net   3     Accounts receivable, net   16,219. 4     Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L   5     Canas and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(8), and contributing employees and sponsoring organizations (see instr). Complete Part II of Sch L   6     Notes and loans receivable, net   7     Inventories for sale or use   23,427. 9     Prepaid expenses and deferred charges   23,427. 9     Inventories for sale or use   23,427. 9     Prepaid expenses and deferred charges   23,427. 9     Inventories for sale or use   23,427. 9     Prepaid expenses and deferred charges   23,427. 9     Investments - publicly traded securities   10a   326,665.   0   10c     10a   326,665.   0   10c     11a   Investments - publicly traded securities   10a   326,665.   0   10c     12   Investments - program-related. See Part IV, line 11   11   11   11   11   11   11   11

Form **990** (2012)

	90 (2012) BRADY CAMPAIGN TO PREVENT GUN VIOLENCE	23-73	21017	_Pag	ge <b>12</b>
Part	XI Reconciliation of Net Assets	<del>-</del>			
	Check if Schedule O contains a response to any question in this Part XI				
1 T	otal revenue (must equal Part VIII, column (A), line 12)	1	4,91	4,8	21.
2 T	otal expenses (must equal Part IX, column (A), line 25)	2	2,71		
3 R	levenue less expenses. Subtract line 2 from line 1	3	2,19	5,4	16.
4 N	let assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	-88		
5 N	let unrealized gains (losses) on investments	5	1	8,9	26.
6 D	onated services and use of facilities	6			
<b>7</b> Ir	nvestment expenses .	7			
8 P	rior period adjustments	8			
<b>9</b> C	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
10 N	let assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
С	olumn (B))	10	1,32	8,4	97.
Part	XII Financial Statements and Reporting		-	<u> </u>	
	Check if Schedule O contains a response to any question in this Part XII				X
			*	Yes	No
1 A	ccounting method used to prepare the Form 990: Cash X Accrual Other				
lf	the organization changed its method of accounting from a prior year or checked "Other," explain in Schedul	e O.			
2a V	Vere the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
lf	"Yes," check a box below to indicate whether the financial statements for the year were compiled or reviews	d on a			
s	eparate basis, consolidated basis, or both:				
-	Separate basis Consolidated basis Both consolidated and separate basis				
ь۷	Vere the organization's financial statements audited by an independent accountant?	_	2b	X	
lf	"Yes," check a box below to indicate whether the financial statements for the year were audited on a separa	ite basis,			
	onsolidated basis, or both:				
ļ	Separate basis Consolidated basis X Both consolidated and separate basis				
c If	"Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of t	he audit.			
	eview, or compilation of its financial statements and selection of an independent accountant?	·	2c	X	Ì
	the organization changed either its oversight process or selection process during the tax year, explain in Sci	nedule O.			
	is a result of a federal award, was the organization required to undergo an audit or audits as set forth in the S				
	act and OMB Circular A-133?		3a		x
	"Yes," did the organization undergo the required audit or audits? If the organization did not undergo the req	uired audit			<b></b>
	r audits, explain why in Schedule O and describe any steps taken to undergo such audits		3ь		

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Form **990** (2012)

### **SCHEDULE C** (Form 990 or 990-EZ)

### **Political Campaign and Lobbying Activities**

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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

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

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

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

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

If the organization answered "Yes." to Form 990, Part IV, line 5 (Proxy Tax), or Form 990-FZ, Part V, line 35c (Proxy Tax), then

	Section 501(c)(4), (5), or (6) organizat		ky 10kg, of 7 Offil 990-1	,	iony iung, then
	e of organization	iono. Compiete i art III.			Employer identification number
	•	AMPAIGN TO PREVI	ENT GUN VIOI		23-7321017
Pa		anization is exempt un			
1	Provide a description of the organiz	ation's direct and indirect politi	cal campaign activities	ın Part IV	
	Political expenditures	ation 3 direct and maneet point	cai campaign activities	in i artiv.	<b>▶</b> \$ 0
	Volunteer hours				0
•	volumosi media			•	
Pa	rt I-B Complete if the org	anization is exempt un	der section 501(c	)(3).	.,
	Enter the amount of any excise tax			7.4-7-	▶\$
	Enter the amount of any excise tax	• •		5	▶\$
3	If the organization incurred a section	n 4955 tax, did it file Form 4720	o for this year?		Yes N
	Was a correction made?		•		Yes N
b	If "Yes," describe in Part IV				
	rt I-C Complete if the org	anization is exempt un	der section 501(c	), except section	501(c)(3).
1	Enter the amount directly expended	by the filing organization for s	ection 527 exempt fund	ction activities	<b>&gt;</b> \$
2	Enter the amount of the filing organ	ization's funds contributed to d	ther organizations for	section 527	
	exempt function activities				<b>&gt;</b> \$
3	Total exempt function expenditures	. Add lines 1 and 2. Enter here	and on Form 1120-PO	L,	
	line 17b				<b>&gt;</b> \$
4	Did the filing organization file Form	1120-POL for this year?			Yes N
5	Enter the names, addresses and en	nployer identification number (E	IN) of all section 527 p	oolitical organizations to	which the filing organization
	made payments. For each organization	•			•
	contributions received that were pro-				separate segregated fund or a
	political action committee (PAC). If	additional space is needed, pro	ovide information in Par	rt IV.	
	(a) Name	(b) Address	(c) EIN	(d) Amount paid f	1
				filing organizatio	
				funds. If none, ent	delivered to a separate
					political organization
					If none, enter -0
	<del>-</del>				
					ŀ
	-				
For	Panerwork Reduction Act Notice	see the Instructions for Form	990 or 990-E7	School	lule C (Form 990 or 990-FZ) 20

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Schedule C (Form 990 or 990-EZ) 2012  Part II-A   Complete if the org	BRADY	CAMPA	IGN TO PREV	VENT GUN VIO	LENCE 23-	7321017 Page 2
(election under sec			npt under secut	on soricito) and in	ea Form 5/68	
A Check Inf the filing organiza expenses, and shall	tion belonger	gs to an affiles lobbying		n Part IV each affiliated	group member's nar	me, address, EIN,
Limi	ts on Lobi	bying Expe			(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to infli	ience pub	lic oninion (	orass roots lobbying)	****		<del>                                     </del>
<b>b</b> Total lobbying expenditures to infli						
c Total lobbying expenditures (add li			, (,,			
d Other exempt purpose expenditure	es					
e Total exempt purpose expenditure	s (add line	s 1c and 1c	i) .			
f Lobbying nontaxable amount. Enter	er the amo	unt from the	e following table in bo	th columns.		
If the amount on line 1e, column (a) o			bying nontaxable an	1	,	
Not over \$500,000		20% of	the amount on line 1e	e		
Over \$500,000 but not over \$1,00	0,000	\$100,00	00 plus 15% of the ex	cess over \$500,000.		
Over \$1,000,000 but not over \$1,5	00,000	\$175,00	00 plus 10% of the ex	cess over \$1,000,000		
Over \$1,500,000 but not over \$17	,000,000	\$225,00	00 plus 5% of the exc	ess over \$1,500,000.		
Over \$17,000,000	,	\$1,000,	000.			
g Grassroots nontaxable amount (er	iter 25% c	of line 1f)				
h Subtract line 1g from line 1a. If zer	o or less, e	enter -0-				
i Subtract line 1f from line 1c. If zero	or less, e	nter -0-		-		
j If there is an amount other than ze reporting section 4911 tax for this		er line 1h or	line 1i, did the organi	zation file Form 4720		Yes No
(Sama armania	rations the		eraging Period Unde	r Section 501(h) on do not have to comp	alata all af the five	
· · · · · · · · · · · · · · · · · · ·			• •	es 2a through 2f on pa		
	Lob	bying Expe	nditures During 4-Ye	ear Averaging Period		<del></del>
Calendar year (or fiscal year beginning in)	(a)	2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) Total
2a Lobbying nontaxable amount						
<b>b</b> Lobbying ceiling amount (150% of line 2a, column(e))						
c Total lobbying expenditures						
d Grassroots nontaxable amount						
e Grassroots celling amount (150% of line 2d, column (e))						
	1		I	1		[

Schedule C (Form 990 or 990-EZ) 2012

# Schedule C (Form 990 or 990-EZ) 2012 BRADY CAMPAIGN TO PREVENT GUN VIOLENCE 23-7321017 Page 3 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)).

Fore	ach "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description	(á	3)	(b	(b)	
of the	e lobbying activity.	Yes	No Amou		unt	
1 a	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:  Volunteers?					
	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
	Media advertisements?					
d	Mailings to members, legislators, or the public?					
	Publications, or published or broadcast statements?					
f	Grants to other organizations for lobbying purposes?					
9	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					
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		ļ			
	If "Yes," enter the amount of any tax incurred under section 4912					
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912	<u> </u>		<del></del>		
·	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	504(-)	\ <u>(</u> \(\)	•:		
Par	t III-A Complete if the organization is exempt under section 501(c)(4), secti 501(c)(6).	on 501(c)	(5), or se	ction		
		_		Yes	No	
1	Were substantially all (90% or more) dues received nondeductible by members?		1	X		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2		X		
_3_	Did the organization agree to carry over lobbying and political expenditures from the prior year?		3		X	
Hai	t III-B Complete if the organization is exempt under section 501(c)(4), secti 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."				ne 3, is	
1	Dues, assessments and similar amounts from members		1		·	
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political	ical				
	expenses for which the section 527(f) tax was paid).					
а	Current year .		2a			
b	Carryover from last year		2b			
c	Total .		2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the ex- does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and					
	expenditure next year?		4			
5	Taxable amount of lobbying and political expenditures (see instructions)		5			
Com and SC1	tiv   Supplemental Information  plete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; P  Part II-B, line 1. Also, complete this part for any additional information.  HEDULE C, PART I-A LINE 1- OPERATED POLITICAL ACTION  OCA.	·				
	<del>-</del>					

### **SCHEDULE D**

(Form 990)

Department of the Treasury Internal Revenue Service

### **Supplemental Financial Statements**

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

OMB No 1545-0047 Open to Public Inspection

Name of the organization

BRADY CAMPAIGN TO PREVENT GUN VIOLENCE

Employer identification number 23-7321017

Par	t I Organizations Maintaining Donor Advise	d Funds or Other Similar Funds	or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line	e 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		183
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in v	writing that the assets held in donor advise	ed funds
	are the organization's property, subject to the organization's	<del>-</del>	Yes No
6	Did the organization inform all grantees, donors, and donor a	_	used only
	for charitable purposes and not for the benefit of the donor o		
	impermissible private benefit?		Yes No
Par	t II Conservation Easements. Complete if the org	janization answered "Yes" to Form 990, P	art IV, line 7.
1	Purpose(s) of conservation easements held by the organization	on (check all that apply).	
	Preservation of land for public use (e.g., recreation or e		torically important land area
	Protection of natural habitat	Preservation of a certi	
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	ied conservation contribution in the form	of a conservation easement on the last
	day of the tax year.		
			Held at the End of the Tax Year
а	Total number of conservation easements	_	2a
b	Total acreage restricted by conservation easements		2b
c	Number of conservation easements on a certified historic stru	ucture included in (a)	2c
đ	Number of conservation easements included in (c) acquired a	· •	ıre
	listed in the National Register	·	2d
3	Number of conservation easements modified, transferred, rel	leased, extinguished, or terminated by the	organization during the tax
	year >	,	
4	Number of states where property subject to conservation eas	sement is located	
5	Does the organization have a written policy regarding the per	***************************************	
	violations, and enforcement of the conservation easements if	t holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,	and enforcing conservation easements de	uring the year 🕨
7	Amount of expenses incurred in monitoring, inspecting, and		
8	Does each conservation easement reported on line 2(d) above	ve satisfy the requirements of section 170	(h)(4)(B)(ı)
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservati	on easements in its revenue and expense	statement, and balance sheet, and
	include, if applicable, the text of the footnote to the organization		
	conservation easements		
Pa	t III Organizations Maintaining Collections o	f Art, Historical Treasures, or O	ther 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 (AS	SC 958), not to report in its revenue staten	nent and balance sheet works of art,
	historical treasures, or other similar assets held for public exh	nibition, education, or research in furthera	nce of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that descri	bes these items.	
b	If the organization elected, as permitted under SFAS 116 (AS	SC 958), to report in its revenue statement	and balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, ed	ducation, or research in furtherance of pul	blic service, provide the following amounts
	relating to these items:		
	(i) Revenues included in Form 990, Part VIII, line 1		<b>&gt;</b> \$
	(ii) Assets included in Form 990, Part X		► \$ ► \$
2	If the organization received or held works of art, historical tre	asures, or other similar assets for financia	
	the following amounts required to be reported under SFAS 1	16 (ASC 958) relating to these items:	
а	Revenues included in Form 990, Part VIII, line 1		<b>&gt;</b> \$
b	Assets included in Form 990, Part X		► \$ ► \$

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

Schedule D (Form 990) 2012

Schedule D (Form 990) 2012

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Scho	dule D (Form 990) 2012 BRADY CAMPAIGN TO PREVENT G	IINI '	VIOLENCE	23_	 7321017 <sub>Page</sub> 4
	*XI Reconciliation of Revenue per Audited Financial Statemen				
1	Total revenue, gains, and other support per audited financial statements		<u> </u>	1	4,933,747.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				· · · · · · · · · · · · · · · · · · ·
а	Net unrealized gains on investments	2a	18,926.		
b	Donated services and use of facilities	2b			
С	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d			2e	18,926.
3	Subtract line 2e from line 1			3	4,914,821.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
С	Add lines 4a and 4b		-	4c	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)			5	4,914,821.
Pa	rt XII Reconciliation of Expenses per Audited Financial Stateme	nts V	Vith Expenses per	Retu	
1	Total expenses and losses per audited financial statements		-	1	2,719,405.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a	·		
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIII.)	2d			_
е	Add lines 2a through 2d			2e	0.
3	Subtract line 2e from line 1			3	2,719,405.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII)	4b	· · · · · · · · · · · · · · · · · · ·	1 1	
c	Add lines 4a and 4b			4c	0.
Pa	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)  rt XIII Supplemental Information			5	2,719,405.
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III,	lines 1	la and 4: Part IV. lines 1	b and	2b: Part V. line 4: Part
	e 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to p				
	RT X, LINE 2: THE CORPORATION HAS ADOPTED F				G
ST	ANDARDS BOARD INTERPRETATION NO. 48, ACCOUN	TIN	G FOR UNCERT	AIN	TY IN
INC	COME TAXES, (FIN 48), AS PERMITTED BY FASB	STA	FF POSITION	(FS	P) FIN
48-	-3, WHICH IS CODIFIED AS FASB ASC 740. FAS	В А	SC 740 REQUI	RES	CHANGES IN
REC	COGNITION AND MEASUREMENT FOR UNCERTAIN TAX	PO	SITIONS. TH	E C	ORPORATION
HA	S ANALYZED ITS TAX POSITIONS AND HAS CONCLU	DED	THAT NO LIA	BIL	ITY SHOULD
BE	RECORDED RELATED TO ANY UNCERTAIN TAX POSI	TIO	NS. THE COR	POR	ATION IS
NO'	I AWARE OF ANY TAX POSITIONS WHICH IT BELIE	VES	WILL CHANGE	MA.	TERIALLY IN

Schedule D (Form 990) 2012

Schedule D (Form 990) 2012 BRADY CAMPAIGN TO PREVENT GUN VIOLENCE 23-7321017 Page 5
Part XIII Supplemental Information (continued)
THE NEXT TWELVE MONTHS. IF THIS POSITION CHANGES, THE CORPORATION WILL
ASSESS THE IMPACT OF ANY SUCH MATTERS ON ITS FINANCIAL POSITION AND
RESULTS OF OPERATIONS.
RESULTS OF OPERATIONS.
Schedule D (Form 990) 201

### **SCHEDULE J** (Form 990)

# **Compensation Information**

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

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

Open to Public

Inspection

OMB No 1545-0047

Internal Revenue Service Name of the organization

Department of the Treasury

Attach to Form 990. ► See separate instructions.

BRADY CAMPAIGN TO PREVENT GUN VIOLENCE

Employer identification number 23-7321017

Pa	art I Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
ь	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors,			
	trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2		
_				
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.  X Compensation committee  X Written employment contract			
	X Compensation committee X Written employment contract X Independent compensation consultant X Compensation survey or study			
	X Form 990 of other organizations  X Approval by the board or compensation committee			
	Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization.			
а	Receive a severance payment or change-of-control payment?	4a		X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		Х
c	Participate in, or receive payment from, an equity-based compensation arrangement?	_4c		Х
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			
а	The organization?	5a		X
þ	Any related organization?	5b		Х
	If "Yes" to line 5a or 5b, describe in Part III.			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of.			
а	The organization?	6a		X
b	Any related organization?	6b	<u> </u>	X
	If "Yes" to line 6a or 6b, describe in Part III.			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments			
	not described in lines 5 and 6? If "Yes," describe in Part III	7	<u> </u>	X
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			1
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		X
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9	<u>L</u>	.1 .

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

Schedule J (Form 990) 2012

23-7321017 BRADY CAMPAIGN TO PREVENT GUN VIOLENCE

Page 2

Part if Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed. Schedule J (Form 990) 2012

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

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

		(B) Breakdown of	(B) Breakdown of W-2 and/or 1099-MISC compensation	SC compensation	(C) Retirement and	eje	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(O)-(i)(B)	reported as deferred in prior Form 990
SOOGS NAT (1)	9	0	0	0	0	0	0	0
SI	<b>E</b>	206,73		0		26,875.	233,606.	
(2) DENNIS HENIGAN	€		0	0	0	0	0	• 0
	<b>E</b>	256,644.	0	0		33,364.	290,008.	0
(3) JON LOWY	Ξ		0	0				0.
	<u> </u>	141,724.	0.	0	0	18,424.	160,148.	0
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Schedule J (Form 990) 2012

Part III | Supplemental Information

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COMPENSATION.	Schedule J (Form 990) 2012	
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### **SCHEDULE L**

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

**Transactions With Interested Persons** 

· ► Complete if the organization answered

"Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

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

OMB No 1545-0047

2012
Open To Public

Name of the organization

Inspection
Employer identification number

					NI GON VIO		123	<u>-/3</u>	210	<u> </u>		
Part I Excess Ben	efit Transacti	ons (section 50	01(c)(3	) and s	section 501(c)(4) orga	anizations only).						
Complete if the	organization answ	vered "Yes" on I	Form 9	90, Pa	ırt IV, line 25a or 25b	o, or Form 990-EZ, F	art V,	ine 40	)b			
1	( <b>b</b> ) R	elationship bety	ween c	lisqual	rfied ,					(d)	Corre	cted?
(a) Name of disqualified	person	person and or	ganiza	ation	(C	) Description of tran	nsactio	'n		Y	es	No
						· ·					-	
2 Enter the amount of tax	incurred by the o	rganization man	agers	or disc	qualified persons dui	ring the year under						
section 4958								▶ \$				
3 Enter the amount of tax	, if any, on line 2, a	above, reimburs	ed by	the or	ganization			▶ \$				
Part II Loans to an	d/or From Int	erested Per	sons	•								
Complete if the	organization ansv	vered "Yes" on	Form 9	990-EZ	, Part V, line 38a or f	Form 990, Part IV, III	ne 26;	or if th	ne orga	anızatı	on	
reported an am	ount on Form 990											
(a) Name of	(b) Relationship with	(c) Purpose	(d) Lo	an to or	(e) Original	(f) Balance due		ln	(h) Ap by bo	proved ard or	(") "	ritten
interested person	organization	of loan		zation?	principal amount		defa	ault?	comm	ittee?	agree	ment?
			То	From			Yes	No	Yes	No	Yes	No
							<u></u>		Ĺ			

Total

Part III Grants or Assistance Benefiting Interested Persons.

	answered "Yes" on Form 990, Pa		(a) Type of	(a) Durage of
(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance
		,		
	_			

▶ \$

 $\label{eq:LHA} \textbf{ For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.}$ 

Schedule L (Form 990 or 990-EZ) 2012

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	organia	zation's
				Yes	No
CHRISTOPHER CARR	FORMER EMPLOYEE/OFF	48,595.	CONSULTING		X
				<del></del>	
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Part V Supplemental Information		0 1 1/1 /		•	1.
SCH L, PART IV, BUSINESS	TRANSACTIONS INVOLVI	NG INTEREST	ED PERSONS:	<u> </u>	
(A) NAME OF PERSON: CHRI	STOPHER CARR				
(B) RELATIONSHIP BETWEEN	INTERESTED PERSON ANI	O ORGANIZAT	CION:		
FORMER EMPLOYEE/OFFICER					
ORMER EMPLOTEE/OFFICER		<u> </u>			
(D) DESCRIPTION OF TRANS	ACTION: CONSULTING SE	RVICES			
		transaction transa			
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	<del></del>				
			<del>-</del> -		

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

### **Noncash Contributions**

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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

Attach to Form 990.

Open to Public Inspection

BRADY	CAMPAIGN	TO	PREVENT	GUN	VIOLENCE

Employer identification number 23-7321017

Par	t I Types of Property							<del></del>
<b>L</b>		(a) Check if	(b) Number of	(c) Noncash contribution	(d) Method of de	termini	Ing	
		applicable	contributions or	amounts reported on Form 990, Part VIII, line 1g	noncash contribu	tion ar	nount	s
1	Art - Works of art		items contributed	Form 990, Part VIII, line 1g				
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes						,	
8	Intellectual property	:						
9	Securities - Publicly traded	X	6	23,171.	FMV			
10	Securities - Closely held stock							
11	Securities - Partnership, LLC, or							
• •	trust interests		1					
12	Securities · Miscellaneous							
13	Qualified conservation contribution -							
-	Historic structures		j					
14	Qualified conservation contribution - Other							
15	Real estate - Residential							
16	Real estate - Commercial							
17	Real estate - Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other							
26	Other ()							
27	Other ()							
28	Other ( )							
29	Number of Forms 8283 received by the organ	ization durin	g the tax year for c	ontributions	<u> </u>			
	for which the organization completed Form 82	283, Part IV,	Donee Acknowled	gement 29				
							Yes	No
30a	During the year, did the organization receive b	y contributi	on any property rep	oorted in Part I, lines 1-28 th	at it must hold for			
	at least three years from the date of the initial	contribution	, and which is not	required to be used for exer	npt purposes for			
	the entire holding period?					30a		Х
b	If "Yes," describe the arrangement in Part II.							
31	Does the organization have a gift acceptance	policy that r	equires the review	of any non-standard contrib	utions?	31		Х
32a	Does the organization hire or use third parties							
	contributions?		·-			32a	Х	
b	If "Yes," describe in Part II.			-				
33	if the organization did not report an amount in	column (c)	for a type of prope	rty for which column (a) is cl	necked,			
	describe in Part II.	, ,			•			
LHA		the Instruc	tions for Form 99	0.	Schedule M	(Form	990) (	(2012)

Schedule M						AMPAIG									73210		Page 2
Part II	the	organ	ization is i	reporting i	ın Pa	1. Complete rt I, column ditional info	(b), the r	numbe	ovide r of co	the inform intribution	nation in the	required by number of	y Part I, line items recei	s 30b, ved, or	32b, and a combi	33, and nation o	I whether of both.
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SCHEDU	ILE	М,	LINE	32B:	A	STOCK	BRO	KER	IS	USED	ТО	SELL	GIFTS	OF			
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### SCHEDULE O (Form 990 or 990-EZ)

## 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.

2012
Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

BRADY CAMPAIGN TO PREVENT GUN VIOLENCE

Employer identification number 23-7321017

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
AT SCHOOL, AT WORK, AND IN OUR COMMUNITIES. THE BRADY CAMPAIGN WORKS
PASS AND ENFORCE SENSIBLE FEDERAL AND STATE GUN LAWS, REGULATIONS, AND
PUBLIC POLICIES THROUGH GRASSROOTS ACTIVISM, ELECTING PUBLIC OFFICIALS
WHO SUPPORT COMMON SENSE GUN LAWS, AND INCREASING PUBLIC AWARENESS OF
GUN VIOLENCE. THROUGH OUR MILLION MOM MARCH AND BRADY CHAPTERS, WE
WORK LOCALLY TO EDUCATE PEOPLE ABOUT THE DANGERS OF GUNS, HONOR VICTIMS
OF GUN VIOLENCE, AND PASS SENSIBLE GUN LAWS, BELIEVING THAT ALL
AMERICANS ESPECIALLY CHILDREN, HAVE THE RIGHT TO LIVE FREE FROM THE
THREAT OF GUN VIOLENCE.
FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
GRASSROOTS ACTIVISM, ELECTING PUBLIC OFFICIALS WHO SUPPORT COMMON SENSE
GUN LAWS, AND INCREASING PUBLIC AWARENESS OF GUN VIOLENCE. THROUGH OUR
MILLION MOM MARCH AND BRADY CHAPTERS, WE WORK LOCALLY TO EDUCATE PEOPLE
ABOUT THE DANGERS OF GUNS, HONOR VICTIMS OF GUN VIOLENCE, AND PASS
SENSIBLE GUN LAWS, BELIEVING THAT ALL AMERICANS ESPECIALLY CHILDREN,
HAVE THE RIGHT TO LIVE FREE FROM THE THREAT OF GUN VIOLENCE.
FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:
WORK TO ELECT CANDIDATES ON THE LOCAL AND STATE LEVEL.
FORM 990, PART VI, SECTION A, LINE 2: BUSINESS RELATIONSHIP: MICHAEL
SMALL IS THE PRESIDENT/CEO OF AN ORGANIZATION AND JON COBIN IS AN EMPLOYEE
OF THE SAME ORGANIZATION.

Schedule O (Form 990 or 990-EZ) (2012) Page 2 Name of the organization **Employer identification number** BRADY CAMPAIGN TO PREVENT GUN VIOLENCE 23-7321017 FORM 990, PART VI, SECTION A, LINE 6: THE ORGANIZATION HAS MEMBERS WHICH PAY MEMBERSHIP DUES. FORM 990, PART VI, SECTION A, LINE 7A: IN ALTERNATE YEARS MEMBERS CONTRIBUTING \$15 OR MORE IN A 24 MONTH PERIOD ARE ALLOWED TO PARTICIPATE IN THE ELECTION OF ONE BOARD MEMBER. IN ALTERNATE YEARS, AFFILIATED CHAPTERS ARE ALLOWED TO PARTICIPATE IN THE ELECTION OF A BOARD MEMBER FROM THE RANKS OF THE CHAPTER MEMBERS. FORM 990, PART VI, SECTION B, LINE 11: THE 990 IS PREPARED BY AN OUTSIDE CPA. THE FORM IS REVIEWED BY THE CONTROLLER, ASSISTANT TREASURER AND PRESIDENT. THE FINANCE COMMITTEE REVIEWS THE DOCUMENT. THE FORM 990 IS SENT TO THE BOARD FOR REVIEW AND COMMENT PRIOR TO FILING. FORM 990, PART VI, SECTION B, LINE 12C: ALL FINANCIAL TRANSACTIONS WITH BOARD MEMBERS ARE TRACKED AND REPORTED TO THE PRESIDENT AND CHAIR OF THE ORGANIZATION, INCLUDING ANY DONATIONS RECEIVED BY THE ORGANIZATION. FORM 990, PART VI, SECTION B, LINE 15: THE MEMBERS OF THE BOARD OF TRUSTEES WHO ARE RESPONSIBLE FOR SETTING MANAGEMENT COMPENSATION REVIEW THE 990'S OF OTHER COMPARABLE ORGANIZATIONS AND CONSULT WITH OUTSIDE HUMAN RESOURCE COMPENSATION SPECIALISTS TO ENSURE MANAGEMENT IS BEING COMPENSATED CONSISTENT WITH THE MARKET FOR SIMILAR ORGANIZATIONS. THE PRESIDENT AND VICE PRESIDENT POSITIONS ARE EXAMINED. THIS PROCESS LAST TOOK PLACE IN 2012.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990: AK,AL,AR,AZ,CA,CO,CT,DC,FL,GA,HI,IL,KY,LA,MA,MD,ME,MI,MN,MO,MS,NC,ND,NH,NJ Schedule O (Form 990 or 990-EZ) (2012)

THE PROCESS HAS NOT CHANGED FROM THE PREVIOUS YEAR.

Department of the Treasury Internal Revenue Service SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.

Attach to Form 990.

2012 Open to Public Inspection OMB No 1545-0047

Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.) BRADY CAMPAIGN TO PREVENT GUN VIOLENCE Name of the organization

Part

Employer identification number 23-7321017

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets		(f) Direct controlling entity	_
				<b>-</b>			
	<b>1</b>						
Part It organization of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)	stions (Complete if the organization a	nswered "Yes" to Form 990,	Part IV, line 34 beca	use it had one	or more related tax-exe	empt	
(a)	(q)	(0)	(p)	(e)	<b>(</b> )	(9)	1000000
Name, address, and EIN	Primary activity	Legal domicile (state or	Exempt Code	Public charity	Direct controlling entity	controlled entity?	olled
כן יפומיפל כישמיינים		ioreign country)		501(c)(3))		Yes	₽ P
BRADY CENTER TO PREVENT GUN VIOLENCE -							
52-1285097, 1225 EYE STREET NW SUITE 1100,	ADVOCACY, EDUCATION AND						
WASHINGTON, DC 20005	LEGAL ACTION	DISTRICT OF COLUMBIA 501 (C)(3)		LINE 7	N/A		×

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

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Schedule R (Form 990) 2012

Page 2

Schedule R (Form 990) 2012 BRADY CAMPAIGN TO PREVENT GUN VIOLENCE

part III Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(C) Legal domicile (state or foreign country)	(d) Direct controlling entity	Predoming (related, excluded from sections	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets		(h) Disproportionate allocations? Yes No	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(i) San General or managing partner? (idle partner?) (65) Yes No	or Perc	General or Percentage managing ownership
Part IV Identification of Related Organizations Taxable as a Corporation organizations treated as a corporation or trust during the tax year.)	ganizations Taxable a	s a Corport g the tax		omplete if th	or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related	n answered "	Yes" to Forn	י 990, Part	IV, line 34	because It ha	ad one or n	nore rel	ated
(a) Name, address, and EIN of related organization	Z. c	Prim	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity		(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income		(g) Share of end-of-year assets	(h) Percentage ownership		Section 512(b)(13) controlled entity?
					•	:							
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													(
232162 12-10-12			-	41						Sche	Schedule R (Form 990) 2012	ırm 990	) 2012

Page 3

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# Schedule R (Form 990) 2012 BRADY CAMPAIGN TO PREVENT GUN VIOLENCE

Part V Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35b, or 36.)	swered "Yes" to Form	1 990, Part IV, line 34, 35b	, or 36.)	
0	ns with one or more r	elated organizations listed	In Parts II-IV?	e 1 1 1 4
<ul> <li>e Loans or loan guarantees by related organization(s)</li> <li>f Dividends from related organization(s)</li> <li>g Sale of assets to related organization(s)</li> <li>h Purchase of assets from related organization(s)</li> <li>i Exchange of assets with related organization(s)</li> <li>j Lease of facilities, equipment, or other assets to related organization(s)</li> </ul>				+ 4 +
<ul> <li>k Lease of facilities, equipment, or other assets from related organization(s)</li> <li>f Performance of services or membership or fundraising solicitations for related organization(s)</li> <li>m Performance of services or membership or fundraising solicitations by related organization(s)</li> <li>n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)</li> <li>o Sharing of paid employees with related organization(s)</li> </ul>	anization(s) anization(s) tion(s)			* = E t 2
<ul> <li>p Reimbursement paid to related organization(s) for expenses</li> <li>q Reimbursement paid by related organization(s) for expenses</li> <li>r Other transfer of cash or property to related organization(s)</li> </ul>				10 17 1s
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.	who must complete t	his line, including covered	relationships and transaction thresholds.	
(a) Name of other organization	(b) Transaction type (a-s)	<b>(c)</b> Amount involved	(d) Method of determining amount involved	olved
(1) BRADY CENTER TO PREVENT GUN VIOLENCE	đ	938,461.FMV	FMV	
(2) BRADY CENTER TO PREVENT GUN VIOLENCE	Q	371,255.	FMV	
(3)				

Schedule R (Form 990) 2012

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Schedule R (Form 990) 2012

Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 37) Part VI Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(k) ercentage wnership					
General or Pormanaging of partner?		-			
Code V-UBI General or Percentage amount in box 20 managing of Schedule K-1 partner? (Form 1065) Yes No					
(h) Disproportional allocations? Yes No					
(g) Share of end-of-year assets					
(f) Share of total Income					
Are all Are all Solicio(3) orgs ?					
(d) Predominant income (related, unrelated, excluded from tax under section 512-514) y					
(c) Legal domicile (state or foreign country)					
(b) Primary activity					
(a) Name, address, and EIN of entity					

232164 12-10-12

Schedule R	(Form 990) 2012	BRADY	CAMPAIGN	TO	PREVENT	GUN	VIOLENCE	23-7321017	Page 5
Part VII	(Form 990) 2012  Supplemental Inf	formation	•					<u>.</u>	
<u> </u>	Complete this part to	orovide addition	al information for r	ocoon	ses to augstion	s on Sch	adula R (see instru	ictions)	
	Complete this part to	provide addition	ai imormation for i	espon	ses to question	S OII SCI	reduie i i (See ii iStru	ictions).	
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232165 12-10-12

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	868 (Rev 1-2013)	<u> </u>	<del> </del>			Page 2
	u are filing for an Additional (Not Automatic) 3-Month Ex					X
	Only complete Part II if you have already been granted an a u are filing for an Automatic 3-Month Extension, comple			ed Form	8868.	
Part				I (no c	onies needed)	
1.371.3	Nadicolal (Not Automato) o Month E	ALCHIO				
Type o	r Name of exempt organization or other filer, see instru	ictions	I		ng number, see ins r identification numb	
File by th	BRADY CAMPAIGN TO PREVENT G	UN VI	OLENCE		23-732101	. 7
due date filing you return Se	Number, street, and room or suite no. If a P.O box, s	ee instruc	· · · · · · · · · · · · · · · · · · ·	Social se	curity number (SSN	
instructio			lress, see instructions.			
Enter ti	ne Return code for the return that this application is for (file	e a separa	te application for each return)			0 1
Applic	ation	Return	Application			Return
Is For Code Is For						
Form 9	90 or Form 990-EZ	01				
Form 9	90-BL	02	Form 1041-A			08
Form 4	720 (ındıvıdual)	03	Form 4720			09
Form 9	90-PF	04	Form 5227			10
Form 9	90-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11
	90-T (trust other than above)	06	Form 8870			12
STOP!	Do not complete Part II if you were not already granted		matic 3-month extension on a previo	ously file	ed Form 8868.	
	THE ORGANIZATIO					
• The	books are in the care of $\triangleright$ 1225 EYE STREE?	r, NW		0005		
	phone No. ► 202-218-4650		FAX No. ▶		<del></del>	
	e organization does not have an office or place of business				<b>•</b>	
	is is for a Group Return, enter the organization's four digit	_			- ,	
			ach a list with the names and EINs of a	all memb	ers the extension is	for.
			BER 15, 2013.			
	for calendar year $2012$ , or other tax year beginning		, and ending	7 <u>-                                    </u>		<del></del> •
6 II	the tax year entered in line 5 is for less than 12 months, o	heck reas	on. Initial return	_ Final i	return	
7 0	Change in accounting period					
	State in detail why you need the extension ADDITIONAL TIME IS NEEDED TO	FILE	A COMPLETE AND ACCU	RATE	RETURN	
_						
8a li	this application is for Form 990-BL, 990-PF, 990-T, 4720,	or 6069, e	nter the tentative tax, less any			
r	onrefundable credits. See instructions.			8a	l <b>s</b>	0.

Signature and Verification must be completed for Part II only.

Under penalties of perjury, declare trat 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 have authorized to prepare this form

Signature >

Title ► PRESIDENT

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

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.

Date >

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Form 8868 (Rev. 1-2013)

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previously with Form 8868.