

Return of Organization Exempt From Income Tax

2011

Department of the Treasury
Internal Revenue Service

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

Open to Public Inspection

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

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

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C NATIONAL SPACE SOCIETY 1155 15TH STREET, NW #500 WASHINGTON, DC 20005	D Employer Identification Number 23-7417411
		E Telephone number 202-429-1600
F Name and address of principal officer: PAUL E. DAMPHOUSSE SAME AS C ABOVE		G Gross receipts \$ 806,476.
I Tax-exempt status <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () H (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If 'No,' attach a list. (see instructions)
J Website: G WWW.NSS.ORG		H(c) Group exemption number G
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> OtherG		L Year of Formation: 1974 M State of legal domicile: DC

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: <u>THE VISION OF NSS IS PEOPLE LIVING AND WORKING IN THRIVING COMMUNITIES BEYOND THE EARTH, AND THE USE OF THE VAST RESOURCES OF SPACE FOR THE DRAMATIC BETTERMENT OF HUMANITY. (SEE SCHEDULE O FOR ENTIRE MISSION)</u>		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	32
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	31
	5 Total number of individuals employed in calendar year 2011 (Part V, line 2a)	5	1
	6 Total number of volunteers (estimate if necessary)	6	320
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
b Net unrelated business taxable income from Form 990-T, line 34	7b	0.	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	600,105.	557,942.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	227,492.	240,381.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	411.	7,617.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	8,191.	536.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	836,199.	806,476.
	14 Benefits paid to or for members (Part IX, column (A), line 4)		
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	66,667.	69,633.
	16a Professional fundraising fees (Part IX, column (A), line 11e)		
	b Total fundraising expenses (Part IX, column (D), line 25) G 14,109.		
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	821,233.	840,954.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	887,900.	910,587.	
19 Revenue less expenses. Subtract line 18 from line 12	-51,701.	-104,111.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21 Total liabilities (Part X, line 26)	249,218.	156,301.
	22 Net assets or fund balances. Subtract line 21 from line 20	70,750.	90,234.
		178,468.	66,067.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	A _____ Signature of officer	_____	Date
	A PAUL E. DAMPHOUSSE Type or print name and title.	EXECUTIVE DIRECTOR	
Paid Preparer Use Only	Print/Type preparer's name JEFF CORYDON, IV, CPA, CFP	Preparer's signature	Date
	Firm's name G LYDON FETTEROLF CORYDON, P. A.	Check <input type="checkbox"/> if self-employed	PTIN P00297218
	Firm's address G 9401 KEY WEST AVENUE ROCKVILLE, MD 20850	Firm's EIN G 52-1185156	Phone no. (301) 948-4400

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

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:

SEE SCHEDULE O

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [] Yes [X] No

If 'Yes,' describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [] Yes [X] No

If 'Yes,' describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code: []) (Expenses \$ 590,813. including grants of \$) (Revenue \$ 493,945.)

THE EDUCATION AND COMMUNICATION PROGRAM PROVIDES SPACE RELATED EDUCATION AND COMMUNICATION FOR APPROXIMATELY 10,000 MEMBERS THROUGH REGIONAL MEETINGS, TOPICAL WORKSHOPS AND PUBLICATION OF MAGAZINE (AD ASTRA).

4b (Code: []) (Expenses \$ 237,609. including grants of \$) (Revenue \$ 263,220.)

THE POLICY AND RESEARCH PROGRAM PROVIDES SPACE RELATED RESEARCH AND POLICY DISSEMINATION TO APPROXIMATELY 10,000 MEMBERS AND THE GENERAL PUBLIC THROUGH SEMINARS, PUBLICATIONS, AND THE MEDIA.

4c (Code: []) (Expenses \$ including grants of \$) (Revenue \$)

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

(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses G 828,422.

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If 'Yes,' complete Schedule A</i>	1 X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)?	2 X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If 'Yes,' complete Schedule C, Part I</i>	3	X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If 'Yes,' complete Schedule C, Part II</i>	4 X	
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If 'Yes,' complete Schedule C, Part III</i>	5	X
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If 'Yes,' complete Schedule D, Part I</i>	6	X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? <i>If 'Yes,' complete Schedule D, Part II</i>	7	X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If 'Yes,' complete Schedule D, Part III</i>	8	X
9 Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If 'Yes,' complete Schedule D, Part IV</i>	9	X
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If 'Yes,' complete Schedule D, Part V</i>	10	X
11 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.		
a Did the organization report an amount for land, buildings and equipment in Part X, line 10? <i>If 'Yes,' complete Schedule D, Part VI</i>	11a	X
b Did the organization report an amount for investments ' other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If 'Yes,' complete Schedule D, Part VII</i>	11b	X
c Did the organization report an amount for investments ' program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If 'Yes,' complete Schedule D, Part VIII</i>	11c	X
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? <i>If 'Yes,' complete Schedule D, Part IX</i>	11d	X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If 'Yes,' complete Schedule D, Part X</i>	11e X	
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)? <i>If 'Yes,' complete Schedule D, Part X</i>	11f X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If 'Yes,' complete Schedule D, Parts XI, XII, and XIII</i>	12a X	
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional</i>	12b	X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If 'Yes,' complete Schedule E</i>	13	X
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a	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? <i>If 'Yes,' complete Schedule F, Parts I and IV</i>	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? <i>If 'Yes,' complete Schedule F, Parts II and IV</i>	15	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? <i>If 'Yes,' complete Schedule F, Parts III and IV</i>	16	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? <i>If 'Yes,' complete Schedule G, Part I (see instructions)</i>	17	X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If 'Yes,' complete Schedule G, Part II</i>	18	X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If 'Yes,' complete Schedule G, Part III</i>	19	X
20 a Did the organization operate one or more hospital facilities? <i>If 'Yes,' complete Schedule H</i>	20	X
b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	

Part IV Checklist of Required Schedules (continued)

	Yes	No
21 Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? <i>If 'Yes,' complete Schedule I, Parts I and II</i>		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? <i>If 'Yes,' complete Schedule I, Parts I and III</i>		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? <i>If 'Yes,' complete Schedule J</i>		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, and that was issued after December 31, 2002? <i>If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No,' go to line 25</i>		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?		
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? <i>If 'Yes,' complete Schedule L, Part I</i>		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? <i>If 'Yes,' complete Schedule L, Part I</i>		X
26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If 'Yes,' complete Schedule L, Part II</i>		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? <i>If 'Yes,' complete Schedule L, Part III</i>		X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, or key employee? <i>If 'Yes,' complete Schedule L, Part IV</i>	X	
b A family member of a current or former officer, director, trustee, or key employee? <i>If 'Yes,' complete Schedule L, Part IV</i>		X
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If 'Yes,' complete Schedule L, Part IV</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If 'Yes,' complete Schedule M</i>		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If 'Yes,' complete Schedule M</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If 'Yes,' complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If 'Yes,' complete Schedule N, Part II</i>		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? <i>If 'Yes,' complete Schedule R, Part I</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1</i>		X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
b Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If 'Yes,' complete Schedule R, Part V, line 2</i>		X
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If 'Yes,' complete Schedule R, Part V, line 2</i>		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If 'Yes,' complete Schedule R, Part VI</i>		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	X	

BAA

Form 990 (2011)

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

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

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

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 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.		
	1a 32		
b	Enter the number of voting members included in line 1a, above, who are independent		
	1b 31		
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?		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	X	
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders? SEE SCHEDULE O	X	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? SEE SCHEDULE O	X	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or other persons other than the governing body?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	X	
b	Each committee with authority to act on behalf of the governing body?	X	
9	Is there any officer, director or 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		X

Section 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?	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?	X	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990. SEE SCHEDULE O		
12a	Did the organization have a written conflict of interest policy? If 'No,' go to line 13	X	
b	Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done. SEE SCHEDULE O	X	
13	Did the organization have a written whistleblower policy?	X	
14	Did the organization have a written document retention and destruction policy?	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a	The organization's CEO, Executive Director, or top management official	X	
b	Other officers of key employees of the organization SEE SCHEDULE O	X	
	If 'Yes' to line 15a or 15b, describe the process in Schedule O. (See instructions.)		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		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 taken steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed G SEE SCHEDULE O
- 18** Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.
 Own website Another's website Upon request
- 19** Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. SEE SCHEDULE O
- 20** State the name, physical address, and telephone number of the person who possesses the books and records of the organization:
 G NAVI STA, INC. 1155 15TH STREET NW, SUITE 500 WASHINGTON DC 20005 202-530-5910

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

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

? List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

? List all of the organization's **current** key employees, if any. See instructions for definition of 'key employee.'

? List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

? List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

? List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A) Name and title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) HUGH DOWNS BOG CHAIRMAN	0.2	X		X				0.	0.	0.
(2) KIRBY I KIN BOG CHAIRMAN	2	X		X				0.	0.	0.
(3) GARY BARNHARD EXECUTIVE DIRECTOR	40	X		X			60,000.	0.	0.	0.
(4) KEN MONEY PRESIDENT	3	X		X			0.	0.	0.	0.
(5) VERONICA ZABALA-ALIBERT COORDIN. EVENTS	8	X		X			0.	0.	0.	0.
(6) MARK HOPKINS CHAIR EXEC COMM	8	X		X			0.	0.	0.	0.
(7) ROBBY GAINES VP DEVELOPMENT	8	X		X			0.	0.	0.	0.
(8) DAVID STUART VP MEMBERSHIP	8	X		X			0.	0.	0.	0.
(9) CANDACE PANKANIAN VP CHAPTERS	8	X		X			0.	0.	0.	0.
(10) BILL GARDINER SECRETARY	8	X		X			0.	0.	0.	0.
(11) JOE REDFIELD TREASURER	8	X		X			0.	0.	0.	0.
(12) ED BURNS ASSIST TREAS	8	X		X			0.	0.	0.	0.
(13) JOSH POWERS SENIOR VP	16	X		X			0.	0.	0.	0.
(14) SHERRY BELL ASST SECRETARY	2	X		X			0.	0.	0.	0.

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

(A) Name and title	(B) Average hours per week (describe hours for related organizations in Sch O)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee			
(15) LYNNE ZIELINSKI VP PUBLIC AFFAI	2	X		X			0.	0.	0.
(16) RICK ZUCKER EXECUTIVE VP	2	X		X			0.	0.	0.
(17) MAC CANTER, ESQ GENERAL COUNSEL	0.1	X		X			0.	0.	0.
(18) LARRY AHEARN DI RECTOR	2	X					0.	0.	0.
(19) DALE AMON DI RECTOR	2	X					0.	0.	0.
(20) AMARA ANGELICA DI RECTOR	2	X					0.	0.	0.
(21) FRED BECKER DI RECTOR	2	X					0.	0.	0.
(22) DAVI D BRANDT-ERICHSEN DI RECTOR	2	X					0.	0.	0.
(23) ANI TA GALE DI RECTOR	2	X					0.	0.	0.
(24) PETE GARRETSON DI RECTOR	2	X					0.	0.	0.
(25) AL GLOBUS DI RECTOR	2	X					0.	0.	0.
1b Sub-total						G	60,000.	0.	0.
c Total from continuation sheets to Part VII, Section A						G	0.	0.	0.
d Total (add lines 1b and 1c)						G	60,000.	0.	0.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization G 0

	Yes	No
3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If 'Yes,' complete Schedule J for such individual.</i>	3	X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If 'Yes' complete Schedule J for such individual.</i>	4	X
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If 'Yes,' complete Schedule J for such person.</i>	5	X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
SILVER MARKETING, INC 7910 WOODMONT AVE, STE 914 BETHESDA, MD 20814	PRINTING/MAILINGS	232,658.
AMS 1155 15TH STREET, NW, STE 500 WASHINGTON, DC 20005	ADMINISTRATIVE	187,591.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization G 2

Part VIII Statement of Revenue

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	1a Federated campaigns	1a 26,030.					
	b Membership dues	1b 299,863.					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above	1f 232,049.					
	g Noncash contributions included in lns 1a-1f: \$						
	h Total. Add lines 1a-1f.	G	557,942.				
PROGRAM SERVICE REVENUE	2a CONFERENCE						
	b MEMBER SERVICES		127,513.	127,513.			
	c MAGAZINE		99,954.	99,954.			
	d		12,914.	12,914.			
	e						
	f All other program service revenue						
	g Total. Add lines 2a-2f.		G	240,381.			
	OTHER REVENUE	3 Investment income (including dividends, interest and other similar amounts)	G	7,617.			7,617.
4 Income from investment of tax-exempt bond proceeds		G					
5 Royalties		G					
6a Gross rents		(i) Real	(ii) Personal				
		b Less: rental expenses					
		c Rental income or (loss)					
		d Net rental income or (loss)	G				
7a Gross amount from sales of assets other than inventory		(i) Securities	(ii) Other				
		b Less: cost or other basis and sales expenses					
		c Gain or (loss)					
		d Net gain or (loss)	G				
8a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18		a					
		b Less: direct expenses	b				
		c Net income or (loss) from fundraising events	G				
9a Gross income from gaming activities. See Part IV, line 19		a					
		b Less: direct expenses	b				
		c Net income or (loss) from gaming activities	G				
10a Gross sales of inventory, less returns and allowances		a					
	b Less: cost of goods sold	b					
	c Net income or (loss) from sales of inventory	G					
Miscellaneous Revenue		Business Code					
11a ROYALTIES			510.		510.		
b MISCELLANEOUS			26.	26.			
c							
d All other revenue							
e Total. Add lines 11a-11d.	G		536.				
12 Total revenue. See instructions	G		806,476.	240,407.	0.	8,127.	

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the United States. See Part IV, line 21.				
2 Grants and other assistance to individuals in the United States. See Part IV, line 22.				
3 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16.				
4 Benefits paid to or for members.				
5 Compensation of current officers, directors, trustees, and key employees.	64,562.	56,492.	4,842.	3,228.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B).	0.	0.	0.	0.
7 Other salaries and wages.				
8 Pension plan accruals and contributions (include section 401(k) and section 403(b) employer contributions).				
9 Other employee benefits.				
10 Payroll taxes.	5,071.	4,323.	501.	247.
11 Fees for services (non-employees):				
a Management.	187,591.	164,142.	14,069.	9,380.
b Legal.	1,517.	1,327.	114.	76.
c Accounting.	13,300.	11,638.	997.	665.
d Lobbying.				
e Professional fundraising services. See Part IV, line 17.				
f Investment management fees.				
g Other.				
12 Advertising and promotion.	3,085.	3,085.		
13 Office expenses.	72,398.	47,353.	25,045.	
14 Information technology.	25,862.	21,629.	4,233.	
15 Royalties.				
16 Occupancy.				
17 Travel.	15,393.	11,545.	3,848.	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials.				
19 Conferences, conventions, and meetings.	161,210.	161,639.	-429.	
20 Interest.	989.		989.	
21 Payments to affiliates.				
22 Depreciation, depletion, and amortization.				
23 Insurance.	7,341.	6,423.	551.	367.
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a PRINTING AND PUBLICATIONS	171,649.	171,284.	219.	146.
b POSTAGE AND SHIPPING	106,747.	101,869.	4,878.	
c TEMPORARY HELP	25,385.	25,385.		
d RECRUITMENT INCENTIVES	15,616.	15,616.		
e All other expenses.	32,871.	24,672.	8,199.	
25 Total functional expenses. Add lines 1 through 24e.	910,587.	828,422.	68,056.	14,109.
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 G <input type="checkbox"/> if following SOP 98-2 (ASC 958-720).				

Part X Balance Sheet

		(A) Beginning of year		(B) End of year
ASSETS	1	Cash - non-interest-bearing		1
	2	Savings and temporary cash investments	84,068.	2 42,857.
	3	Pledges and grants receivable, net		3
	4	Accounts receivable, net	57,318.	4 41,595.
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions)		6
	7	Notes and loans receivable, net		7
	8	Inventories for sale or use		8
	9	Prepaid expenses and deferred charges	1,042.	9 1,046.
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D		10a
	b	Less: accumulated depreciation		10c
	11	Investments - publicly traded securities	106,790.	11 70,803.
	12	Investments - other securities. See Part IV, line 11		12
	13	Investments - program-related. See Part IV, line 11		13
	14	Intangible assets		14
	15	Other assets. See Part IV, line 11		15
16	Total assets. Add lines 1 through 15 (must equal line 34)	249,218.	16 156,301.	
LIABILITIES	17	Accounts payable and accrued expenses	21,984.	17 29,956.
	18	Grants payable		18
	19	Deferred revenue	48,766.	19 46,978.
	20	Tax-exempt bond liabilities		20
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22
	23	Secured mortgages and notes payable to unrelated third parties		23
	24	Unsecured notes and loans payable to unrelated third parties		24
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25 13,300.
	26	Total liabilities. Add lines 17 through 25	70,750.	26 90,234.
NET ASSETS OR FUND BALANCES	Organizations that follow SFAS 117, check here G <input checked="" type="checkbox"/> and complete lines 27 through 29 and lines 33 and 34.			
	27	Unrestricted net assets	178,468.	27 66,067.
	28	Temporarily restricted net assets		28
	29	Permanently restricted net assets		29
	Organizations that do not follow SFAS 117, check here G <input type="checkbox"/> and complete lines 30 through 34.			
	30	Capital stock or trust principal, or current funds		30
	31	Paid-in or capital surplus, or land, building, or equipment fund		31
	32	Retained earnings, endowment, accumulated income, or other funds		32
	33	Total net assets or fund balances.	178,468.	33 66,067.
34	Total liabilities and net assets/fund balances.	249,218.	34 156,301.	

BAA

Form 990 (2011)

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	806,476.
2	Total expenses (must equal Part IX, column (A), line 25)	2	910,587.
3	Revenue less expenses. Subtract line 2 from line 1	3	-104,111.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	178,468.
5	Other changes in net assets or fund balances (explain in Schedule O) ... SEE SCHEDULE O	5	-8,290.
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	66,067.

Part XII Financial Statements and Reporting

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

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		X
2b	Were the organization's financial statements audited by an independent accountant?	X	
2c	If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	X	
d	If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		X
3b	If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		

BAA

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support
Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

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

OMB No. 1545-0047

2011

Open to Public Inspection

Name of the organization NATIONAL SPACE SOCIETY	Employer identification number 23-7417411
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Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

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

- 1 A church, convention of churches or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E.)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 An organization that normally receives: (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions ' subject to certain exceptions, and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 10 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h.
 - a Type I
 - b Type II
 - c Type III ' Functionally integrated
 - d Type III ' Other
- e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f If the organization received a written determination from the IRS that is a Type I, Type II or Type III supporting organization, check this box
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

	Yes	No
(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?		
(ii) A family member of a person described in (i) above?		
(iii) A 35% controlled entity of a person described in (i) or (ii) above?		

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

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in column (i) listed in your governing document?		(v) Did you notify the organization in column (i) of your support?		(vi) Is the organization in column (i) organized in the U.S.?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
(A)									
(B)									
(C)									
(D)									
(E)									
Total									

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) G	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants'.)	740,500.	705,738.	584,235.	600,105.	557,942.	3,188,520.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf.						0.
3 The value of services or facilities furnished by a governmental unit to the organization without charge.						0.
4 Total. Add lines 1 through 3.	740,500.	705,738.	584,235.	600,105.	557,942.	3,188,520.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f).						19,398.
6 Public support. Subtract line 5 from line 4.						3,169,122.

Section B. Total Support

Calendar year (or fiscal year beginning in) G	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7 Amounts from line 4.	740,500.	705,738.	584,235.	600,105.	557,942.	3,188,520.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources.	16,557.	13,987.	9,908.	8,377.	8,127.	56,956.
9 Net income from unrelated business activities, whether or not the business is regularly carried on.						0.
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) SEE PART IV.	8,631.	8,862.	16,864.	225.	26.	34,608.
11 Total support. Add lines 7 through 10.						3,280,084.
12 Gross receipts from related activities, etc (see instructions)					12	1,253,613.
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here .						G <input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2011 (line 6, column (f) divided by line 11, column (f))	14	96.62%
15 Public support percentage from 2010 Schedule A, Part II, line 14	15	95.09%
16a 33-1/3% support test ' 2011. If the organization did not check the box on line 13, and the line 14 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	G <input checked="" type="checkbox"/>	
b 33-1/3% support test ' 2010. If the organization did not check a box on line 13 or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	G <input type="checkbox"/>	
17a 10%-facts-and-circumstances test ' 2011. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization	G <input type="checkbox"/>	
b 10%-facts-and-circumstances test ' 2010. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization	G <input type="checkbox"/>	
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions	G <input type="checkbox"/>	

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

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

Section A. Public Support

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

Section B. Total Support

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

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**. G

Section C. Computation of Public Support Percentage

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

Section D. Computation of Investment Income Percentage

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

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

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

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

PART II, LINE 10 - OTHER INCOME

NATURE AND SOURCE	2011	2010	2009	2008	2007
OTHER INCOME	26.	225.	16,864.	8,862.	8,631.
TOTAL	<u>\$ 26.</u>	<u>\$ 225.</u>	<u>\$ 16,864.</u>	<u>\$ 8,862.</u>	<u>\$ 8,631.</u>

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

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

G Attach to Form 990, Form 990-EZ, or Form 990-PF

OMB No. 1545-0047

2011

Name of the organization

NATIONAL SPACE SOCIETY

Employer identification number

23-7417411

Organization type (check one):

Filers of:

Form 990 or 990-EZ

Section:

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

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

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

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

501(c)(3) taxable private foundation

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

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

General Rule

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

Special Rules

For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33-1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc, purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc, purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc, contributions of \$5,000 or more during the year G \$ _____

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

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2011)

Name of organization

Employer identification number

NATIONAL SPACE SOCIETY

23-7417411

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

(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	THE BOEING COMPANY ----- 13100 SPACE CENTER BLVD ----- HOUSTON, TX 77058 -----	\$ 15,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
2	SPACE CANADA ----- 141 DUKE STREET EAST ----- KITCHENER, ONTARIO N2H 1A6 CANADA -----	\$ 22,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
---	----- ----- ----- -----	\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
---	----- ----- ----- -----	\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
---	----- ----- ----- -----	\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
---	----- ----- ----- -----	\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Name of organization
NATIONAL SPACE SOCIETY

Employer identification number
23-7417411

Part III Exclusively religious, charitable, etc, individual contributions to section 501(c)(7), (8), or (10) organizations that total more than \$1,000 for the year. Complete cols (a) through (e) and the following line entry.

For organizations completing Part III, enter total of *exclusively* religious, charitable, etc, contributions of **\$1,000 or less** for the year. (Enter this information once. See instructions.) G \$ _____ N/A
 Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	N/A		

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

SCHEDULE C
(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

2011

Open to Public Inspection

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

G Complete if the organization is described below.

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

Department of the Treasury
Internal Revenue Service

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

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

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

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

If the organization answered 'Yes,' to Form 990, Part IV, line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35a (Proxy Tax), then

- ? Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization NATIONAL SPACE SOCIETY	Employer identification number 23-7417411
---	---

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.
- 2 Political expenditures G \$ _____
- 3 Volunteer hours

Part I-B Complete if the organization is exempt under section 501(c)(3).

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 G \$ _____ 0.
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 G \$ _____ 0.
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No
- 4a Was a correction made? Yes No
- b If 'Yes,' describe in Part IV.

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities G \$ _____
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities G \$ _____
- 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b G \$ _____
- 4 Did the filing organization file **Form 1120-POL** for this year? Yes No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.
(1)	-----			
(2)	-----			
(3)	-----			
(4)	-----			
(5)	-----			
(6)	-----			

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

Schedule C (Form 990 or 990-EZ) 2011

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A** Check if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).
B Check if the filing organization checked box A and 'limited control' provisions apply.

Limits on Lobbying Expenditures (The term 'expenditures' means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1 a Total lobbying expenditures to influence public opinion (grass roots lobbying)															
b Total lobbying expenditures to influence a legislative body (direct lobbying)															
c Total lobbying expenditures (add lines 1a and 1b)		0.	0.												
d Other exempt purpose expenditures		910,587.													
e Total exempt purpose expenditures (add lines 1c and 1d)		910,587.	0.												
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.		161,588.													
<table border="1"> <thead> <tr> <th>If the amount on line 1e, column (a) or (b) is:</th> <th>The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e.														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.														
Over \$17,000,000	\$1,000,000.														
g Grassroots nontaxable amount (enter 25% of line 1f)		40,397.	0.												
h Subtract line 1g from line 1a. If zero or less, enter -0-		0.	0.												
i Subtract line 1f from line 1c. If zero or less, enter -0-		0.	0.												
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?			<input type="checkbox"/> Yes <input type="checkbox"/> No												

4-Year Averaging Period Under Section 501(h)
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) Total
2 a Lobbying non-taxable amount	174,178.	151,280.	158,185.	161,588.	645,231.
b Lobbying ceiling amount (150% of line 2a, column (e))					967,847.
c Total lobbying expenditures					0.
d Grassroots nontaxable amount	43,545.	37,820.	39,546.	40,397.	161,308.
e Grassroots ceiling amount (150% of line 2d, column (e))					241,962.
f Grassroots lobbying expenditures					0.

BAA

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)).

	(a)		(b)
	Yes	No	Amount
<i>For each 'Yes' response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.</i>			
1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a Volunteers?			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c Media advertisements?			
d Mailings to members, legislators, or the public?			
e Publications, or published or broadcast statements?			
f Grants to other organizations for lobbying purposes?			
g Direct contact with legislators, their staffs, government officials, or a legislative body?			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i Other activities?			
j Total. Add lines 1c through 1i			
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b If 'Yes,' enter the amount of any tax incurred under section 4912			
c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

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

	Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?	1	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	
3 Did the organization agree to carry over lobbying and political expenditures from the prior year?	3	

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No' OR (b) Part III-A, line 3, is answered 'Yes.'

1 Dues, assessments and similar amounts from members	1	
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a Current year	2a	
b Carryover from last year	2b	
c Total	2c	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5 Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV Supplemental Information

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

**SCHEDULE D
(Form 990)**

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

OMB No. 1545-0047

2011

Open to Public Inspection

Name of the organization

Employer identification number

NATIONAL SPACE SOCIETY

23-7417411

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

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year.....		
2 Aggregate contributions to (during year).....		
3 Aggregate grants from (during year).....		
4 Aggregate value at end of year.....		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).

<input type="checkbox"/> Preservation of land for public use (e.g., recreation or education)	<input type="checkbox"/> Preservation of an historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> Preservation of open space	

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

	Held at the End of the Tax Year
a Total number of conservation easements.....	2a
b Total acreage restricted by conservation easements.....	2b
c Number of conservation easements on a certified historic structure included in (a).....	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register.....	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year G _____

4 Number of states where property subject to conservation easement is located G _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

Yes No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year G _____

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year G \$ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

Yes No

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

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered 'Yes' to Form 990, Part IV, line 8.

1 a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenues included in Form 990, Part VIII, line 1..... G\$ _____

(ii) Assets included in Form 990, Part X..... G\$ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

a Revenues included in Form 990, Part VIII, line 1..... G\$ _____

b Assets included in Form 990, Part X..... G\$ _____

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

- a Public exhibition
- b Scholarly research
- c Preservation for future generations
- d Loan or exchange programs
- e Other _____

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

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

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

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

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

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

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

b If 'Yes,' explain the arrangement in Part XIV.

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

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

- a Board designated or quasi-endowment G _____ %
- b Permanent endowment G _____ %
- c Temporarily restricted endowment G _____ %

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

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

	Yes	No
(i) unrelated organizations	3a(i)	
(ii) related organizations	3a(ii)	
b If 'Yes' to 3a(ii), are the related organizations listed as required on Schedule R?	3b	

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

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment				
e Other				

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) G 0.

Part VII Investments ' Other Securities. See Form 990, Part X, line 12. N/A

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A) -----		
(B) -----		
(C) -----		
(D) -----		
(E) -----		
(F) -----		
(G) -----		
(H) -----		
(I) -----		
Total. (Column (b) must equal Form 990 Part X, column (B) line 12.) . . . G		

Part VIII Investments ' Program Related. See Form 990, Part X, line 13. N/A

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

Part IX Other Assets. See Form 990, Part X, line 15. N/A

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total. (Column (b) must equal Form 990, Part X, column (B), line 15.) G	

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

(a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) OTHER CURRENT LIABILITIES	13,300.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	
Total. (Column (b) must equal Form 990, Part X, column (B) line 25.) G	13,300.

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

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

1	Total revenue (Form 990, Part VIII, column (A), line 12)		806,476.
2	Total expenses (Form 990, Part IX, column (A), line 25)		910,587.
3	Excess or (deficit) for the year. Subtract line 2 from line 1		-104,111.
4	Net unrealized gains (losses) on investments		-8,290.
5	Donated services and use of facilities		
6	Investment expenses		
7	Prior period adjustments		
8	Other (Describe in Part XIV.)		
9	Total adjustments (net). Add lines 4 through 8		-8,290.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9		-112,401.

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

1	Total revenue, gains, and other support per audited financial statements	1	798,186.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	-8,290.
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV.)	2d	
e	Add lines 2a through 2d	2e	-8,290.
3	Subtract line 2e from line 1	3	806,476.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV.)	4b	
c	Add lines 4a and 4b	4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	806,476.

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

1	Total expenses and losses per audited financial statements	1	910,587.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV.)	2d	
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	910,587.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV.)	4b	
c	Add lines 4a and 4b	4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	910,587.

Part XIV Supplemental Information

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

--- PART X - FIN 48 FOOTNOTE ---

--- INCOME TAX STATUS: ---

--- THE SOCIETY IS EXEMPT FROM INCOME TAX UNDER SECTION 501(C)(3) OF THE INTERNAL ---

--- REVENUE CODE. INCOME FROM NONEXEMPT FUNCTIONS IS SUBJECT TO INCOME TAXES TO THE ---

--- EXTENT THAT THE REVENUE EXCEEDS RELATED COSTS. NO MATERIAL AMOUNT OF NET UNRELATED ---

--- BUSINESS TAXES WAS DUE BY THE SOCIETY AT DECEMBER 31, 2011. IN ADDITION, THE ---

--- INTERNAL REVENUE SERVICE HAS DETERMINED THE SOCIETY IS NOT A "PRIVATE FOUNDATION." ---

Part XIV Supplemental Information (continued)

PART X - FIN 48 FOOTNOTE (CONTINUED)

THE SOCIETY FOLLOWS THE ACCOUNTING STANDARD ON ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES, WHICH ADDRESSES THE DETERMINATION OF WHETHER TAX BENEFITS CLAIMED OR EXPECTED TO BE CLAIMED ON A TAX RETURN SHOULD BE RECORDED IN THE FINANCIAL STATEMENTS. UNDER THIS GUIDANCE, THE SOCIETY MAY RECOGNIZE THE TAX BENEFIT FROM AN UNCERTAIN TAX POSITION ONLY IF IT IS MORE LIKELY THAN NOT THAT THE TAX POSITION WILL BE SUSTAINED ON EXAMINATION BY TAXING AUTHORITIES, BASED ON THE TECHNICAL MERITS OF THE POSITION. THE TAX BENEFITS RECOGNIZED IN THE FINANCIAL STATEMENTS FROM SUCH A POSITION ARE MEASURED BASED ON THE LARGEST BENEFIT THAT HAS A GREATER THAN 50% LIKELIHOOD OF BEING REALIZED UPON ULTIMATE SETTLEMENT. THE GUIDANCE ON ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES ALSO ADDRESSES DE-RECOGNITION, CLASSIFICATION, INTEREST AND PENALTIES ON INCOME TAXES, AND ACCOUNTING IN INTERIM PERIODS.

MANAGEMENT EVALUATED SOCIETY'S TAX POSITIONS AND CONCLUDED THAT THE SOCIETY HAD TAKEN NO UNCERTAIN TAX POSITIONS THAT REQUIRE ADJUSTMENT TO THE FINANCIAL STATEMENTS TO COMPLY WITH THE PROVISIONS OF THIS GUIDANCE. WITH FEW EXCEPTIONS, THE SOCIETY IS NO LONGER SUBJECT TO INCOME TAX EXAMINATIONS BY THE U.S. FEDERAL, STATE OR LOCAL TAX AUTHORITIES FOR YEARS BEFORE 2009.

SCHEDULE L
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Transactions With Interested Persons

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

OMB No. 1545-0047

2011

**Open to Public
Inspection**

Name of the organization

NATIONAL SPACE SOCIETY

Employer identification number

23-7417411

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

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

1	(a) Name of disqualified person	(b) Description of transaction	(c) Corrected?	
			Yes	No
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

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

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

Part II Loans to and/or From Interested Persons.

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

(a) Name of interested person and purpose	(b) Loan to or from the organization?		(c) Original principal amount	(d) Balance due	(e) In default?		(f) Approved by board or committee?		(g) Written agreement?	
	To	From			Yes	No	Yes	No	Yes	No
(1)										
(2)										
(3)										
(4)										
(5)										
(6)										
(7)										
(8)										
(9)										
(10)										

Total G \$

Part III Grants or Assistance Benefiting Interested Persons.

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

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount and type of assistance
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		

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

Schedule L (Form 990 or 990-EZ) 2011

SCHEDULE O
(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No. 1545-0047

2011

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.
G Attach to Form 990 or 990-EZ.

Name of the organization

NATIONAL SPACE SOCIETY

Employer identification number

23-7417411

FORM 990, PART III, LINE 1 - ORGANIZATION MISSION

NSS VISION:

THE VISION OF NSS IS PEOPLE LIVING AND WORKING IN THRIVING COMMUNITIES BEYOND THE EARTH, AND THE USE OF THE VAST RESOURCES OF SPACE FOR THE DRAMATIC BETTERMENT OF HUMANITY.

NSS MISSION:

THE MISSION OF NSS IS TO PROMOTE SOCIAL, ECONOMIC, TECHNOLOGICAL, AND POLITICAL CHANGE IN ORDER TO EXPAND CIVILIZATION BEYOND EARTH, TO SETTLE SPACE AND TO USE THE RESULTING RESOURCES TO BUILD A HOPEFUL AND PROSPEROUS FUTURE FOR HUMANITY. ACCORDINGLY, WE SUPPORT STEPS TOWARD THIS GOAL, INCLUDING HUMAN SPACEFLIGHT, COMMERCIAL SPACE DEVELOPMENT, SPACE EXPLORATION, SPACE APPLICATIONS, SPACE RESOURCE UTILIZATION, ROBOTIC PRECURSORS, DEFENSE AGAINST ASTEROIDS, RELEVANT SCIENCE, AND SPACE SETTLEMENT ORIENTED EDUCATION.

FORM 990, PART VI, LINE 6 - EXPLANATION OF CLASSES OF MEMBERS OR SHAREHOLDER

THE NATIONAL SPACE SOCIETY IS A MEMBERSHIP BASED ORGANIZATION.

FORM 990, PART VI, LINE 7A - HOW MEMBERS OR SHAREHOLDERS ELECT GOVERNING BODY

THE BOARD OF DIRECTORS IS ELECTED BY THE MEMBERSHIP.

FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS

MANAGEMENT AND THE BOARD TREASURER DISCUSSED AND REVIEWED THE 990 WITH THE INDEPENDENT ACCOUNTANTS. THE ORGANIZATION THEN PROVIDED A COPY OF THE FORM 990 TO THE BOARD OF DIRECTORS FOR REVIEW AND COMMENTS PRIOR TO FILING.

FORM 990, PART VI, LINE 12C - EXPLANATION OF MONITORING AND ENFORCEMENT OF CONFLICTS

NSS HAS A CONFLICT OF INTEREST POLICY THAT APPLIES TO ALL OFFICERS, BOARD MEMBERS, AND EMPLOYEES. ALL ARE REQUIRED TO SIGN THE CONFLICT OF INTEREST STATEMENT ANNUALLY.

IF A CONFLICT OF INTEREST WAS DISCLOSED IT WOULD BE ADDRESSED AND HANDLED AT THE

Name of the organization

NATIONAL SPACE SOCIETY

Employer identification number

23-7417411

FORM 990, PART VI, LINE 12C - EXPLANATION OF MONITORING AND ENFORCEMENT OF CONFLICTS (CONTINUED)

DISCRETION OF THE EXECUTIVE COMMITTEE.

FORM 990, PART VI, LINE 15B - COMPENSATION REVIEW & APPROVAL PROCESS FOR OFFICERS & KEY EMPLOYEES

THE EXECUTIVE COMMITTEE, WITH THE APPROVAL OF THE BOARD OF DIRECTORS APPOINTS AND EMPLOYS THE EXECUTIVE DIRECTOR, AND IS RESPONSIBLE FOR DETERMINING THE TERMS AND CONDITIONS OF THE EXECUTIVE DIRECTOR'S EMPLOYMENT.

FORM 990, PART VI, LINE 17 - LIST OF STATES WHICH THIS RETURN IS FILED

AL AK AZ AR CA CO CT FL GA HI IL KS KY ME MD MA MI MN MS NH NJ NM NY NC ND OH OK
OR PA RI SC TN VA WA WV WI

FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AVAILABLE

DOCUMENTS ARE AVAILABLE TO THE PUBLIC UPON REQUEST AND THROUGH THE NSS WEBSITE
WWW.NSS.ORG.

FORM 990, PART XI, LINE 5
OTHER CHANGES IN NET ASSETS OR FUND BALANCES

NET UNREALIZED GAINS OR LOSSES ON INVESTMENTS.....	\$	-8,290.
TOTAL	\$	<u>-8,290.</u>

**SCHEDULE O (Form 990)
SUPPLEMENTAL INFORMATION TO FORM 990
2011
NATIONAL SPACE SOCIETY**

EIN: 23-7417411

FORM 990, PART III, LINE 1, ORGANIZATION MISSION: (Continued)

NSS RATIONALE:

A. SURVIVAL — OF HUMAN SPECIES AND EARTH'S BIOSPHERE

IT IS THE NATURE OF EVERY FORM OF LIFE, WHETHER ANIMAL OR PLANT, TO STRIVE TO SURVIVE.

1. SURVIVAL OF THE HUMAN SPECIES

THE HUMAN SPECIES IS ENCOUNTERING INCREASED NATURAL, MAN-MADE, AND EXTRATERRESTRIAL THREATS, INCLUDING DISEASE, RESOURCE DEPLETION, POLLUTION, URBAN VIOLENCE, TERRORISM, NUCLEAR WAR, ASTEROIDS, AND COMETS.

2. SURVIVAL OF EARTH'S BIOSPHERE

MANY FORMS OF ANIMAL AND PLANT LIFE ON EARTH ARE SUFFERING INCREASED LOSS OF POPULATION AND QUALITY HABITAT BECAUSE OF THE GROWING PRESENCE OF HUMANS ON PLANET EARTH, VIA EXPANSION, POLLUTION, DEFORESTATION, FISHING, FARMING, MINING, AND PROMOTION OF CERTAIN SPECIES OF ANIMALS AND PLANTS.

SPACE TECHNOLOGY PROVIDES BOTH MEANS TO MONITOR THREATS TO LIFE ON EARTH AND WAYS TO HELP CURTAIL THEM. SPACE INDUSTRIALIZATION AND SETTLEMENT PROVIDE SAFETY VALVES TO RELIEVE THE PRESSURES THAT CAUSE EARTH-BOUND THREATS. THEY ALSO PROVIDE ESCAPE ROUTES IN CASE OF CATASTROPHIC MAN-MADE OR EXTRATERRESTRIAL THREATS. HUMANITY HAS INHERITED THE STEWARDSHIP OF THE PLANET EARTH. IT WILL THEREFORE NEED THE VAST RESOURCES OF OUTER SPACE TO REVERSE THE DAMAGE IT HAS CAUSED TO THE EARTH'S BIOSPHERE, AND ULTIMATELY ENHANCE ALL LIFE ON EARTH.

B. GROWTH — UNLIMITED ROOM FOR EXPANSION

IT IS THE NATURE OF EVERY FORM OF LIFE, WHETHER ANIMAL OR PLANT, TO GROW AND MULTIPLY.

1. NEW HABITATS FOR LIFE

THE HUMAN SPECIES, AS WELL AS ALL OTHER ANIMAL AND PLANT LIFE ON EARTH, NEED ROOM TO GROW AND MULTIPLY. EARTH HAS A FINITE SUPPLY OF LAND, AIR, AND WATER, FOR WHICH HUMANS, ANIMALS, AND PLANTS MUST COMPETE. OF ALL EARTH SPECIES, ONLY HUMANS HAVE OR CAN ACQUIRE AND UTILIZE THE KNOWLEDGE TO CREATE NEW HABITATS ON OTHER WORLDS OR IN SPACE FROM THE RAW MATERIALS OF MOONS AND ASTEROIDS.

SCHEDULE O (Form 990)
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FORM 990, PART III, LINE 1, ORGANIZATION MISSION: (Continued)

2. NEW FRONTIERS FOR HUMANITY

TO PROVIDE THE HUMAN SPECIES WITH A NEW "FRONTIER" FOR EXPLORATION AND ADVENTURE, AND TO THOUGHT AND EXPRESSION, CULTURE AND ART, AND MODES OF GOVERNMENT. THE OPENING OF "THE NEW WORLD" TO WESTERN CIVILIZATION BROUGHT ABOUT AN UNPRECEDENTED 500-YEAR PERIOD OF GROWTH AND EXPERIMENTATION IN SCIENCE, TECHNOLOGY, LITERATURE, MUSIC, ART, RECREATION, AND GOVERNMENT (INCLUDING THE DEVELOPMENT AND GRADUAL ACCEPTANCE OF DEMOCRACY). THE PRESENCE OF A FRONTIER LED TO THE DEVELOPMENT OF THE "OPEN SOCIETY" FOUNDED ON THE PRINCIPLES OF INDIVIDUAL RIGHTS AND FREEDOMS. MANY OF THESE RIGHTS AND FREEDOMS ARE BEING PLACED UNDER INCREASINGLY STRINGENT LIMITATIONS AS HUMAN POPULATION GROWS AND HUMANITY MOVES TOWARDS A "CLOSED SOCIETY", WHERE EVENTUALLY EVERYONE EATS THE SAME, SPEAKS THE SAME, AND DRESSES THE SAME. "CULTURES THAT DO NOT EXPLORE, DIE!"

C. PROSPERITY — UNLIMITED RESOURCES

IT IS THE NATURE OF THE HUMAN SPECIES TO STRIVE TO IMPROVE THE QUALITY OF ITS MANY LIVES AND TO PROVIDE A BETTER FUTURE FOR ITS CHILDREN.

1. IMPROVED STANDARDS OF LIVING

TO PROVIDE HUMANITY WITH THE RESOURCES IT NEEDS TO IMPROVE THE QUALITY OF LIFE FOR ALL HUMANS ON THE PLANET EARTH. THE MAJORITY OF HUMANITY LIVES AT AN ECONOMIC LEVEL THAT IS FAR BELOW THAT OF THE WESTERN DEMOCRACIES. OUTER SPACE HOLDS VIRTUALLY LIMITLESS AMOUNTS OF ENERGY AND RAW MATERIALS, WHICH CAN BE HARVESTED FOR USE BOTH ON EARTH AND IN SPACE. QUALITY OF LIFE CAN BE IMPROVED DIRECTLY BY UTILIZATION OF THESE RESOURCES AND ALSO INDIRECTLY BY MOVING HAZARDOUS AND POLLUTING INDUSTRIES AND/OR THEIR WASTE PRODUCTS OFF PLANET EARTH.

2. ECONOMIC OPPORTUNITY

TO PROVIDE EVERY HUMAN INDIVIDUAL WITH THE OPPORTUNITY TO IMPROVE THE WELL BEING OF HIMSELF OR HERSELF, AND HIS OR HER FAMILY. VAST NEW RESOURCES MUST BE DEVELOPED IF ALL PERSONS ARE TO BE GIVEN ECONOMIC OPPORTUNITIES FOR THEMSELVES AND THEIR CHILDREN EVEN marginally EQUAL TO WHAT MANY WOULD CONSIDER A MINIMALLY TOLERABLE STANDARD OF LIVING.

SCHEDULE O (Form 990)
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FORM 990, PART III, LINE 1, ORGANIZATION MISSION: (Continued)

3. TECHNOLOGICAL DEVELOPMENT

TO PROVIDE REMOTE LOCATIONS FOR THE DEVELOPMENT, TESTING, AND “PERFECTION” OF PROMISING, BUT POTENTIALLY HAZARDOUS TECHNOLOGIES, SUCH AS BIOLOGICAL EXPERIMENTATION; NUCLEAR, FUSION, CHEMICAL AND ANTIMATTER POWER GENERATION; AND SPACE PROPULSION. SUCH DEVELOPMENTAL FACILITIES COULD BE PLACED EITHER IN SPACE OR ON OTHER WORLDS FAR FROM BOTH SPACE SETTLEMENTS AND UNRELATED FACILITIES.

D. CURIOSITY — THE QUEST FOR KNOWLEDGE

IT IS THE NATURE OF THE HUMAN SPECIES TO LEARN MORE ABOUT ITS ORIGINS, ITS PAST, ITS FELLOW LIFE FORMS, ITS ENVIRONMENT, ITS LIMITATIONS, AND ITS POSSIBILITIES FOR THE FUTURE. EARTH IS BUT A TINY CONTAINER OF KNOWLEDGE COMPARED TO THE ENTIRE INCREDIBLY VAST UNIVERSE. “WE ARE PART OF THE UNIVERSE, THROUGH OUR EYES, EARS AND MINDS, THE UNIVERSE MAY KNOW ITSELF.”

NSS PRINCIPLES:

THESE ARE THE GUIDING PRINCIPLES OF THE NSS BY WHICH WE WILL CONDUCT OUR MISSION IN PURSUIT OF OUR VISION.

A. HUMAN RIGHTS

NSS SHALL PROMOTE THE PRINCIPLE OF FUNDAMENTAL RIGHTS OF EVERY HUMAN BEING.

B. ETHICS

NSS SHALL OBSERVE, PRACTICE, AND PROMOTE ETHICAL CONDUCT.

C. PRAGMATISM

WITHIN THE BOUNDS OF THESE PRINCIPLES, NSS SHALL PROMOTE AND SUPPORT ANY AND ALL METHODS AND PRACTICES THAT SUPPORT ACHIEVEMENT OF OUR VISION.

NSS BELIEFS:

WHILE WE CANNOT SAY THAT THE FOLLOWING ARE ABSOLUTELY ESSENTIAL FOR SPACE SETTLEMENT WE BELIEVE AND SUPPORT THE FOLLOWING:

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FORM 990, PART III, LINE 1, ORGANIZATION MISSION: (Continued)

A. INDIVIDUAL RIGHTS

NSS BELIEVES THAT SPACE DEVELOPMENT AND SETTLEMENT WILL OCCUR MOST EFFICIENTLY, AND HUMANITY'S PROSPERITY WILL BE BEST ENSURED, IF EVERY HUMAN BEING IS GIVEN THE FREEDOM OF THOUGHT AND ACTION.

B. UNRESTRICTED ACCESS TO SPACE

NSS BELIEVES THAT SPACE DEVELOPMENT AND SETTLEMENT WILL OCCUR MOST EFFICIENTLY, AND HUMANITY'S SURVIVAL AND GROWTH WILL BE BEST ENSURED, IF EVERY HUMAN BEING IS ALLOWED THE OPPORTUNITY TO TRAVEL, LIVE, AND/OR WORK IN OUTER SPACE.

C. PERSONAL PROPERTY RIGHTS

NSS BELIEVES THAT SPACE DEVELOPMENT AND SETTLEMENT WILL OCCUR MOST EFFICIENTLY, AND HUMANITY'S SURVIVAL AND GROWTH WILL BE BEST ENSURED, IF EVERY HUMAN BEING IS ALLOWED THE OPPORTUNITY TO OWN PROPERTY IN SPACE AND/OR ON OTHER WORLDS.

D. FREE MARKET ECONOMICS

NSS BELIEVES THAT SPACE DEVELOPMENT AND SETTLEMENT WILL OCCUR MOST EFFICIENTLY, AND HUMANITY'S PROSPERITY WILL BE BEST ENSURED, IF THE "FREE MARKET" DRIVERS OF COMPETITION AND PROFIT USED.

E. GOVERNMENT FUNDING OF HIGH RISK R&D

NSS BELIEVES THAT SPACE DEVELOPMENT AND SETTLEMENT WILL OCCUR MOST EFFICIENTLY, AND HUMANITY'S PROSPERITY WILL BE BEST ENSURED, IF NATIONAL GOVERNMENTS FUND THE RESEARCH AND DEVELOPMENT OF SPACE TECHNOLOGIES DEEMED TOO "HIGH RISK" BY THEIR INDUSTRIES.

F. INTERNATIONAL COOPERATION

NSS BELIEVES THAT SPACE DEVELOPMENT AND SETTLEMENT WILL OCCUR MOST EFFICIENTLY, AND HUMANITY'S SURVIVAL AND PROSPERITY WILL BE BEST ENSURED, IF NATIONS COOPERATE ON SPACE RESEARCH AND DEVELOPMENT, AND LEAVE COMPETITION TO INDIVIDUAL COMPANIES.

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FORM 990, PART III, LINE 1, ORGANIZATION MISSION: (Continued)

G. DEMOCRATIC VALUES

NSS BELIEVES THAT HUMANITY'S GROWTH AND PROSPERITY WILL BE BEST ENSURED IF THE FUNDAMENTALS OF DEMOCRACY ARE APPLIED TO AND INCORPORATED BY SPACE SETTLEMENTS.

H. ENHANCEMENT OF EARTH'S ECOLOGY

NSS BELIEVES THAT ONE OF THE GOALS AND BENEFITS OF SPACE DEVELOPMENT AND SETTLEMENT IS TO RESTORE AND ENHANCE THE BIOSPHERE OF THE PLANET EARTH.

I. PROTECTION OF NEW ENVIRONMENTS

NSS BELIEVES THAT SPACE DEVELOPMENT AND SETTLEMENT SHOULD BE PURSUED IN A MANNER THAT SAFEGUARDS ALIEN LIFE FORMS, NATURAL WONDERS, AND HISTORICAL MONUMENTS.

NSS FIVE YEAR GOALS:

- ESTABLISH THE SPACE MOVEMENT AS AN INTERNATIONALLY-RECOGNIZED "MOVEMENT" WITH NSS AS THE LEADER
- ESTABLISH AN INTERNATIONAL CONSENSUS THAT THE VAST RESOURCES OF SPACE WILL BE USED FOR THE DRAMATIC BETTERMENT OF HUMANITY
- ESTABLISH NSS AS THE PREDOMINANT ORGANIZATION SUPPORTING SPACE SETTLEMENT

ORGANIZATIONAL OBJECTIVES:

1. IMPROVE THE IDENTITY, EFFECTIVENESS AND VISIBILITY OF THE SPACE MOVEMENT
2. PROMOTE ACTIONS WHICH ENABLE SPACE SETTLEMENT AS A SOCIETAL IMPERATIVE
3. SUPPORT APPLICATIONS OF SPACE RESOURCES TO CRITICAL TERRESTRIAL NEEDS
4. PROMOTE THE RELEVANCE AND VALUE OF SPACE (THE IDEAS IN THE NSS PHILOSOPHY STATEMENT, OUTLINED ABOVE) TO THE PUBLIC, AND ENCOURAGE ITS PARTICIPATION AND SUPPORT
5. PROMOTE AND FOSTER THE REMOVAL OF THE BARRIERS TO SPACE SETTLEMENT
6. SUPPORT ACTIVITIES WHICH COULD SIGNIFICANTLY REDUCE THE COST OF PUTTING HUMANS INTO SPACE, AND CARGO INTO SPACE AND IN-SPACE TRANSPORT
7. SHAPE NATIONAL AND INTERNATIONAL SPACE POLICY TO FURTHER OUR GOALS