

# Short Form Return of Organization Exempt From Income Tax

# 2012

Open to Public Inspection

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

▶ Sponsoring organizations of donor advised funds, organizations that operate one or more hospital facilities, and certain controlling organizations as defined in section 512(b)(13) must file Form 990 (see instructions). All other organizations with gross receipts less than \$200,000 and total assets less than \$500,000 at the end of the year may use this form.

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

Department of the Treasury  
Internal Revenue Service

**A** For the 2012 calendar year, or tax year beginning \_\_\_\_\_, and ending \_\_\_\_\_

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

**C** Name of organization: **PRISMS, Inc**

Number and street (or P O box, if mail is not delivered to street address): **21800 Town Center Plaza** Room/suite: **266A-633**

City or town: **Sterling** state or country: **VA** ZIP + 4: **20164**

**D** Employer identification number: **54-1652029**

**E** Telephone number: **(972) 231-0035**

**F** Group Exemption Number ▶ \_\_\_\_\_

**G** Accounting Method:  Cash  Accrual Other (specify) ▶ \_\_\_\_\_

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

**I** Website: ▶ **www.prisms.org**

**J** Tax-exempt status (check only one) —  501(c)(3)  501(c) ( ) ◀ (insert no)  4947(a)(1) or  527

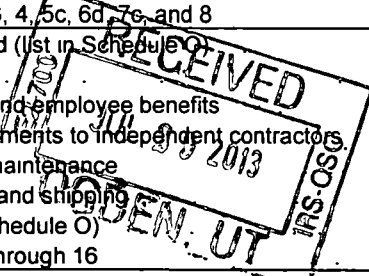
**K** Check  if the organization is not a section 509(a)(3) supporting organization or a section 527 organization and its gross receipts are normally not more than \$50,000. A Form 990-EZ or Form 990 return is not required though Form 990-N (e-postcard) may be required (see instructions). But if the organization chooses to file a return, be sure to file a complete return.

**L** Add lines 5b, 6c, and 7b, to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, line 25, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ. ▶ \$ **198,047**

**Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances** (see the instructions for Part I)  
 Check if the organization used Schedule O to respond to any question in this Part I

	Description		Amount
<b>Revenue</b>	<b>1</b> Contributions, gifts, grants, and similar amounts received	<b>1</b>	128,638
	<b>2</b> Program service revenue including government fees and contracts	<b>2</b>	49,535
	<b>3</b> Membership dues and assessments	<b>3</b>	10,895
	<b>4</b> Investment income	<b>4</b>	733
	<b>5a</b> Gross amount from sale of assets other than inventory	<b>5a</b>	
	<b>5b</b> Less cost or other basis and sales expenses	<b>5b</b>	
	<b>5c</b> Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	<b>5c</b>	0
	<b>6</b> Gaming and fundraising events		
	<b>a</b> Gross income from gaming (attach Schedule G if greater than \$15,000)	<b>6a</b>	
	<b>b</b> Gross income from fundraising events (not including \$ _____ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000)	<b>6b</b>	
<b>c</b> Less direct expenses from gaming and fundraising events	<b>6c</b>		
<b>d</b> Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	<b>6d</b>	0	
<b>Expenses</b>	<b>7a</b> Gross sales of inventory, less returns and allowances	<b>7a</b>	8,246
	<b>b</b> Less cost of goods sold	<b>7b</b>	6,398
	<b>c</b> Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	<b>7c</b>	1,848
	<b>8</b> Other revenue (describe in Schedule O)	<b>8</b>	
	<b>9 Total revenue.</b> Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	<b>9</b>	191,649
	<b>10</b> Grants and similar amounts paid (list in Schedule O)	<b>10</b>	
	<b>11</b> Benefits paid to or for members	<b>11</b>	
<b>Net Assets</b>	<b>12</b> Salaries, other compensation, and employee benefits	<b>12</b>	
	<b>13</b> Professional fees and other payments to independent contractors	<b>13</b>	21,338
	<b>14</b> Occupancy, rent, utilities, and maintenance	<b>14</b>	
	<b>15</b> Printing, publications, postage, and shipping	<b>15</b>	6,811
	<b>16</b> Other expenses (describe in Schedule O)	<b>16</b>	121,095
	<b>17 Total expenses.</b> Add lines 10 through 16	<b>17</b>	149,244
	<b>18</b> Excess or (deficit) for the year (Subtract line 17 from line 9)	<b>18</b>	42,405
<b>Net Assets</b>	<b>19</b> Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	<b>19</b>	245,688
	<b>20</b> Other changes in net assets or fund balances (explain in Schedule O)	<b>20</b>	
	<b>21</b> Net assets or fund balances at end of year. Combine lines 18 through 20	<b>21</b>	288,093

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9.9

**Part II Balance Sheets.** (see the instructions for Part II)

Check if the organization used Schedule O to respond to any question in this Part II

	(A) Beginning of year	(B) End of year
22 Cash, savings, and investments	232,186	22 277,253
23 Land and buildings		23
24 Other assets (describe in Schedule O)	15,190	24 13,000
25 Total assets	247,376	25 290,253
26 Total liabilities (describe in Schedule O)	1,688	26 2,160
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	245,688	27 288,093

**Part III Statement of Program Service Accomplishments** (see the instructions for Part III)

Check if the organization used Schedule O to respond to any question in this Part III

What is the organization's primary exempt purpose? support to families of persons with SMS

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title

**Expenses**  
(Required for section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts, optional for others)

28 PRISMS, Inc. provides information and support to families of persons with Smith-Magenis Syndrome, sponsors research and fosters partnerships with professionals to increase awareness and understanding of SMS (Grants \$ ) If this amount includes foreign grants, check here <input type="checkbox"/>	28a	131,036
29 (Grants \$ ) If this amount includes foreign grants, check here <input type="checkbox"/>	29a	
30 (Grants \$ ) If this amount includes foreign grants, check here <input type="checkbox"/>	30a	
31 Other program services (describe in Schedule O) (Grants \$ ) If this amount includes foreign grants, check here <input type="checkbox"/>	31a	
32 Total program service expenses. (add lines 28a through 31a)	32	131,036

**Part IV List of Officers, Directors, Trustees, and Key Employees** List each one even if not compensated (see the instructions for Part IV)

Check if the organization used Schedule O to respond to any question in this Part IV

(a) Name and title	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC) (if not paid, enter -0-)	(d) Health benefits contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
Randy Beall President	Hr/WK 2 00			
Philip Ruedl Treasurer	Hr/WK 2 00			
Margaret Miller Vice President	Hr/WK 2 00			
John Mayer Secretary	Hr/WK 2 00			
Percy Huston Director	Hr/WK 1 00			
Julia Hethenngton Director	Hr/WK 1 00			
Sarah H Elsea, Ph D, FACMG Director	Hr/WK 1.00			
Mary Kate McCauley Director	Hr/WK 1 00			
Tina McGrevy Director	Hr/WK 1 00			
	Hr/WK			
	Hr/WK			
	Hr/WK			

**Part V Other Information** (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V ) Check if the organization used Schedule O to respond to any question in this Part V.

		Yes	No
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O		X
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)	X	
35 a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?		X
b	If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O		
35c	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III		X
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N		X
37 a	Enter amount of political expenditures, direct or indirect, as described in the instructions <input type="text" value="37a"/>		
b	Did the organization file Form 1120-POL for this year?		
38 a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?		X
b	If "Yes," complete Schedule L, Part II and enter the total amount involved <input type="text" value="38b"/>		
39	Section 501(c)(7) organizations Enter		
a	Initiation fees and capital contributions included on line 9 <input type="text" value="39a"/>		
b	Gross receipts, included on line 9, for public use of club facilities <input type="text" value="39b"/>		
40 a	Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4911 <input type="text"/> , section 4912 <input type="text"/> , section 4955 <input type="text"/>		
b	Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I		X
c	Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 <input type="text"/>		
d	Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c reimbursed by the organization <input type="text"/>		
e	All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T		X
41	List the states with which a copy of this return is filed <input type="text"/>		
42 a	The organization's books are in care of <input type="text" value="Phil Ruedi"/> Telephone no <input type="text" value="(972) 231-0035"/> Located at <input type="text" value="21800 Town Center Plaza"/> City <input type="text" value="Sterling"/> ST <input type="text" value="VA"/> ZIP + 4 <input type="text" value="20164"/>		
b	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)? If "Yes," enter the name of the foreign country <input type="text"/> See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		X
c	At any time during the calendar year, did the organization maintain an office outside the U S ? If "Yes," enter the name of the foreign country: <input type="text"/>		X
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year <input type="text" value="43"/>		
44 a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ		X
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ		X
c	Did the organization receive any payments for indoor tanning services during the year?		X
d	If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		
45 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
45 b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)		X

46 Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I

	Yes	No
46		X

**Part VI Section 501(c)(3) organizations only**

All section 501(c)(3) organizations must answer questions 47-49b and 52, and complete the tables for lines 50 and 51.

Check if the organization used Schedule O to respond to any question in this Part VI

47 Did the organization engage in lobbying activities or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II

	Yes	No
47		X

48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

48		X
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49 a Did the organization make any transfers to an exempt non-charitable related organization?

49a		X
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b If "Yes," was the related organization a section 527 organization?

49b		
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50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None"

(a) Name and title of each employee paid more than \$100,000	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
Name None				
Title	Hr/WK 00			
Name	Hr/WK 00			
Title	Hr/WK 00			
Name	Hr/WK .00			
Title	Hr/WK .00			
Name	Hr/WK .00			
Title	Hr/WK .00			
Name	Hr/WK 00			
Title	Hr/WK 00			

f Total number of other employees paid over \$100,000

51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None"

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation
Name None		
City		
Name		
City		
Name		
City		
Name		
City		
Name		
City		

d Total number of other independent contractors each receiving over \$100,000

52 Did the organization complete Schedule A? Note: All section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A

Yes  No

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

Signature of officer: *Philip Ruedi*

Type or print name and title: Philip Ruedi, Treasurer

Date: 7/25/13

Paid Preparer Use Only

Pnn/Type preparer's name: Leonard Sonnenberg

Preparer's signature: *Leonard Sonnenberg*

Date: 5/30/2013

Check  if self-employed

PTIN: P00287581

Firm's name: Sonnenberg & Co CPAs

Firm's EIN: 95-3749711

Firm's address: 5190 Governor Dr, Ste 201, San Diego, CA 92122

Phone no: 858-457-5252

May the IRS discuss this return with the preparer shown above? See instructions.  Yes  No

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

**Public Charity Status and Public Support**

OMB No 1545-0047

**2012**

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

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

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

Name of the organization

P R I S M S , Inc

Employer identification number

54-1652029

**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 to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h
  - a  Type I    b  Type II    c  Type III—Functionally integrated    d  Type III—Non-functionally integrated
- 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 it 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?
  - (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? 

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		
  - (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 col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U S ?		(vii) Amount of monetary support
			Yes	No	Yes	No	Yes	No	
(A)									
(B)									
(C)									
(D)									
(E)									
<b>Total</b>									<b>0</b>

**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) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	53,629	83,385	81,108	73,522	139,533	431,177
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge						0
<b>4 Total.</b> Add lines 1 through 3	53,629	83,385	81,108	73,522	139,533	431,177
<b>5</b> 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)						
<b>6 Public support.</b> Subtract line 5 from line 4						431,177

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
<b>7</b> Amounts from line 4	53,629	83,385	81,108	73,522	139,533	431,177
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	4,843	2,384	1,407	1,241	733	10,608
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on						0
<b>10</b> Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	8,106	65,099	4,642	3,714	57,781	139,342
<b>11 Total support.</b> Add lines 7 through 10						581,127
<b>12</b> Gross receipts from related activities, etc (see instructions)					12	
<b>13 First five years.</b> 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 <b>stop here</b> ▶ <input type="checkbox"/>						

**Section C. Computation of Public Support Percentage**

<b>14</b> Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f))	<b>14</b>	74.20%
<b>15</b> Public support percentage from 2011 Schedule A, Part II, line 14	<b>15</b>	69.01%
<b>16a 33 1/3% support test—2012.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization ▶ <input checked="" type="checkbox"/>		
<b>b 33 1/3% support test—2011.</b> 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 <b>stop here.</b> The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
<b>17a 10%-facts-and-circumstances test—2012.</b> 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 <b>stop here.</b> Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
<b>b 10%-facts-and-circumstances test—2011.</b> 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 <b>stop here.</b> Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
<b>18 Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶ <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 year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						0
<b>2</b> 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						0
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513						0
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge						0
<b>6 Total.</b> Add lines 1 through 5	0	0	0	0	0	0
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons						0
<b>b</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						0
<b>c</b> Add lines 7a and 7b	0	0	0	0	0	0
<b>8 Public support</b> (Subtract line 7c from line 6)						0

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
<b>9</b> Amounts from line 6	0	0	0	0	0	0
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						0
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						0
<b>c</b> Add lines 10a and 10b	0	0	0	0	0	0
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						0
<b>12</b> Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						0
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12)	0	0	0	0	0	0

**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

**Section C. Computation of Public Support Percentage**

<b>15</b> Public support percentage for 2012 (line 8, column (f) divided by line 13, column (f))	<b>15</b>	0.00%
<b>16</b> Public support percentage from 2011 Schedule A, Part III, line 15	<b>16</b>	0.00%

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for 2012 (line 10c, column (f) divided by line 13, column (f))	<b>17</b>	0.00%
<b>18</b> Investment income percentage from 2011 Schedule A, Part III, line 17	<b>18</b>	0.00%

**19a 33 1/3% support tests—2012.** 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

**b 33 1/3% support tests—2011.** 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

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



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

**Supplemental Information to Form 990 or 990-EZ**

OMB No 1545-0047

**2012**

**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.  
▶ Attach to Form 990 or 990-EZ.

Name of the organization

P R I S M S , Inc

Employer identification number

54-1652029

Form 990-EZ, Part I, Line 16, Other Expenses: Fundraising: 4,059

Form 990-EZ, Part I, Line 16, Other Expenses: Conferences, conventions, and meetings: 107,252

Form 990-EZ, Part I, Line 16, Other Expenses: Equipment rental and maintenance: 2,639

Form 990-EZ, Part I, Line 16, Other Expenses: Supplies: 2,469

Form 990-EZ, Part I, Line 16, Other Expenses: Telephone: 358

Form 990-EZ, Part I, Line 16, Other Expenses: Bank service charges: 1,254

Form 990-EZ, Part I, Line 16, Other Expenses: Insurance: 2,669

Form 990-EZ, Part I, Line 16, Other Expenses: Miscellaneous: 395

Form 990-EZ, Part II, Line 24, Other Assets: Contributions Receivable: Beginning of year

9,299, End of year: 11,160

Form 990-EZ, Part II, Line 24, Other Assets: Prepaid Expenses: Beginning of year: 5,891, End

of year: 1,840

Form 990-EZ, Part II, Line 26, Liabilities: Accounts Payable: Beginning of year: 1,688, End of

year: 2,160

**BYLAWS  
Of  
Parents and Researchers Interested in Smith-Magenis Syndrome  
(P.R.I.S.M.S.), Inc.**

**ARTICLE I  
Name and Office**

**Section 1. Name:** The name of the Corporation shall be Parents and Researchers Interested in Smith-Magenis Syndrome (P.R.I.S.M.S.), Inc. (hereinafter referred to as the "Corporation").

**Section 2. Office:** The principal office of the Corporation shall be 21800 Town Center Plaza, Ste. 266A-633, Sterling, VA 20164, or as otherwise designated by the Board of Directors.

**ARTICLE II  
Purposes and Mission Statement**

**Section 1. Purposes:** The purposes for which the Corporation is formed and shall operate are to educate its members, medical professionals, and the general public about Smith-Magenis Syndrome (SMS). Also, the Corporation is to encourage, support and fund SMS related research and to support individuals and families affected by SMS and related disorders and to promote other activities related to SMS.

**Section 2. Mission Statement:** PRISMS is dedicated to providing information and support to families of persons with Smith-Magenis Syndrome (SMS), sponsoring research and fostering partnerships with professionals to increase awareness and understanding of SMS.

**ARTICLE III  
Membership**

Membership shall consist of any individual or organization interested in Smith-Magenis Syndrome and/or PRISMS, Inc. Membership dues shall be specified by the Board of Directors and collected on a regular basis as deemed by the Directors. Membership is not limited in any such way until otherwise designated by the Directors and these Bylaws amended to reflect any changes to membership terms and conditions.

**ARTICLE IV  
Board of Directors**

**Section 1. Composition:** The Board of Directors shall be individual members in good standing of the Corporation, with the exception of employees or paid consultants of the Corporation. The Board of Directors will not exceed 11 members. It shall be comprised of executive officers, the Immediate Past President, the Chair of the Professional Advisory Board, and additional board members. All board members will be voting positions. The Board of Directors shall designate other positions of the Board of Directors as needed. The President, by virtue of the office, is Chairman of the Board of Directors.

An emeritus member of the Board is an honorary position given to recognize service and dedication to PRISMS. An emeritus member serves in an advisory capacity and upon the request of the board. As such, emeritus members do not have the duties or responsibilities of a regular board member.

**Section 2. Selection of Directors:** The Board of Directors shall nominate and elect its successors from among the general membership population. The process by which Board of Directors is selected can only be modified as part of an amendment to these Bylaws.

**Section 3. Terms and Length of Service:** Each member of the Board of Directors will serve a three-year term and may serve additional consecutive terms. Terms shall be staggered. Emeritus members shall have no term.

**Section 4. Removal of Directors:** Any Director who shall violate any material provision of these Bylaws, or do any act injurious to the Corporation or refuse or willfully neglect to comply with any rule, regulation, resolution, order or direction of the Board or a duly authorized Committee, may be removed from the Board by a 2/3-majority vote of the Directors present at the meeting where such matter is considered. The Directors shall have been furnished a full statement of the charges against the Director in writing and shall have been given an adequate opportunity for a hearing therein, prior to any action of the Board.

**Section 5. Resignations:** The resignation of any Director shall be in writing to the President, and shall become effective upon receipt and acceptance by the standing Board of Directors of the Corporation. The Director offering resignation shall circulate a copy of the resignation to all members of the Board of Directors.

**Section 6. Vacancies:** A vacancy of an office shall be filled from the membership, as designated by the Board of Directors, and shall serve until the next election.

**Section 7. Duties and Powers:** The Board of Directors shall have the control and management of the affairs and business of the Corporation. Such Board of Directors shall only act in the name of the Corporation when it shall be regularly convened by its chairman after due notice to all the directors of such meeting.

**Section 8. Compensation:** Directors shall not receive any compensation for their services as Directors but may be reimbursed for actual expenses incurred in the performance of their duties for the benefit of the Corporation.

**Section 9. Indemnification:** The Corporation and its members shall indemnify, defend and hold harmless the Board of Directors, whether individually or collectively, from and against any claim, liability, cost, expense, damage, deficiency, loss, or obligation of any kind or nature (including, without limitation, reasonable attorneys' fees and other costs and expenses of litigation), based upon or arising out of the fulfillment of their Director's duties, when they discharge the duties of their position in good faith and with that degree of diligence, care, and skill which ordinarily prudent persons would exercise under similar circumstances in like positions.

**Section 10. Conflict of Interest:** Annually each member of the Board of Directors and each officer of the Corporation shall sign and abide by the Corporation's conflict of interest policy.

**ARTICLE V**  
**Executive Officers**

**Section 1. Titles:** The Executive Officers shall be President, Vice President, Secretary, and Treasurer. These officers will make up the Executive Committee.

**Section 2. Duties and Powers:** The duties and powers of the Executive Officers shall be provided in these Bylaws, or by direction or authorization of the Board of Directors, and they shall have such other duties and powers as generally pertain to their offices. All Executive Officers in their public capacities shall represent the policies and views of the Corporation as a whole, as determined by the Board of Directors.

**Section 3. President:** The President shall be the Chief Executive Officer of the Corporation; shall preside at meetings of the Board of Directors; shall be an ex-officio member of all committees and the Professional Advisory Board; shall be one of the officers who may sign the checks or drafts of the Corporation, and shall perform such other duties as the Board of Directors may, from time to time, prescribe.

**Section 4. Vice President:** The Vice President shall in the event of the absence or inability of the President to exercise their office become acting president of the Corporation with all the rights, privileges and powers as if they had been duly elected president; shall be one the officers who may sign the checks or drafts of the Corporation, and shall perform such other duties as the Board of Directors may, from time to time, prescribe.

**Section 5. Secretary:** The Secretary shall ensure that all members of the Board of Directors are notified of all meetings of the Board of Directors; shall record all minutes of the meetings of the Board of Directors, and shall ensure that the minutes of these meetings are prepared timely and distributed; shall ensure that the office seal of the Corporation is affixed on documents when required; and shall perform such other duties as the Board of Directors may, from time to time, prescribe.

**Section 6. Treasurer:** The Treasurer shall be responsible for the management of the financial affairs of the Corporation and for its accounting methods and procedures; shall render such reports of the accounts thereof as the Board of Directors may, from time to time, request; shall cause to have deposited the funds and securities of the Corporation in the Corporation's name in a bank or banks, or other appropriate depositories and shall authorize the disbursement of funds in accordance with policies established by the Board of Directors; shall cause to have prepared such tax and other financial reports or returns as may be necessary in accordance with generally accepted accounting principles; and shall perform such other duties pertinent to the financial management of the Corporation as the Board of Directors may, from time to time, prescribe.

**ARTICLE VI**  
**Meetings**

**Section 1. General:** The Board of Directors shall meet at least twice per year in order to carry out the duties and functions of the Corporation. Publicly held meetings, such as conferences, shall be conducted, at the discretion of the Board of Directors, when and where possible to facilitate the functions of the Corporation. The Board of Directors and/or committees, as deemed necessary by

those groups, may hold any other meetings. These Bylaws may be amended to reflect specific meeting activity as deemed by the Board of Directors.

**Section 2. Quorum:** The presence of 2/3 of the Board of Directors shall constitute a quorum and shall be necessary for voting purposes, with the exception of amending these Bylaws.

**Section 3. Action Without a Meeting:** If the duly elected Directors entitled to vote at a meeting of the Board of Directors agree unanimously, in writing (via letter or email), regarding an action contemplated by the Board of Directors, such a vote will have the same force and effect as if taken at a duly called meeting. The action to be taken shall be submitted and consented to in writing (via letter or email) by all Directors and shall be made a part of the Corporate minutes.

**Section 4. Conduct of Meetings:** The meetings of the Board of Directors shall be conducted under the Robert's Rules of Order.

## **ARTICLE VII** **Committees**

The Corporation shall have standing committees consisting of a Finance/Audit Committee, Fundraising Committee, a Conference Planning Committee, and a Professional Advisory Board.

The Finance/Audit Committee is responsible for ensuring that financial statements and procedures are evaluated to determine that adequate fiscal controls and procedures are in place and that the Corporation is in good financial health. The Treasurer of the Board shall always be a member of the Finance/Audit Committee.

There may be other committees as the Board of Directors and/or President deems necessary. Each committee shall have, and may exercise such powers as shall be designated for it by the Board of Directors and/or President. Committees shall record votes by mail or telephone in the same manner as they would if the votes were recorded at a formal meeting. Each Committee Chairperson shall report to the Officer designated with the responsibility for the committee. The President and/or Board of Directors shall appoint committee Chairpersons.

## **ARTICLE VIII** **Affiliates**

The Board of Directors shall, from time to time in its discretion, establish various categories, chapters or affiliates, and shall determine the terms and conditions for such affiliation.

## **ARTICLE IX** **Fiscal Year**

**Section 1. Fiscal Year:** The fiscal year for the Corporation shall be the calendar year, from January 1<sup>st</sup> to December 31<sup>st</sup> of any given year. All accounting records of the Corporation shall reflect this period.

## **ARTICLE X** **Record Keeping**

The Corporation shall keep an accurate record of account. Records may consist of meeting minutes for all general meetings, Board of Directors meetings, and any designated Committee meetings. The records shall be made available to those designated by the Board of Directors.

**ARTICLE XI**  
**Invalid Provisions**

If any provision of these Bylaws is held to be illegal, invalid or unenforceable under present or future laws, such provision shall be fully severable; the Bylaws shall be construed and enforced as if such illegal, invalid or unenforceable provision had never comprised a part of the Bylaws; and the remaining provisions of the Bylaws shall remain in full force and effect and shall not be affected by the illegal, invalid or unenforceable provision or by its severance from the Bylaws. Furthermore, in lieu of such illegal, invalid or unenforceable provision, there shall be added automatically as a part of these Bylaws a provision as similar in terms to such illegal, invalid or unenforceable provision as may be possible and be legal, valid and enforceable.

**ARTICLE XII**  
**Confidentiality**

The Corporation recognizes the need to hold in confidence certain information. All membership lists are to be held in the strictest of confidence. Mailing lists, which identify membership, are considered strictly confidential. Any information identifying contributors shall be strictly confidential. Information determined to be confidential can only be released by written or verbal permission by the person or organization identified. Verbal permission can only be given for a specific release. Any general release must be in writing.

**ARTICLE XIII**  
**Amendments**

Any amendments to these Bylaws shall be voted on by the entire Board of Directors and must pass by a 2/3-majority vote. Proposed amendments to these Bylaws may be submitted in writing to the Secretary.

[Bylaws approved by Board of Directors on June 13, 2013.]

## Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

▶ **File a separate application for each return.**

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box
  - If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form)
- Do not complete Part II unless** you have already been granted an automatic 3-month extension on a previously filed Form 8868

**Electronic filing (e-file).** You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit [www.irs.gov/efile](http://www.irs.gov/efile) and click on *e-file for Charities & Nonprofits*

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

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

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

Enter filer's identifying number, see instructions

<b>Type or print</b>  File by the due date for filing your return. See instructions.	Name of exempt organization or other filer, see instructions <b>P R I S M S , Inc</b>	Employer identification number (EIN) or <b>54-1652029</b>
	Number, street, and room or suite no. If a P O box, see instructions <b>21800 Town Center Plaza, Room 266A-633</b>	Social security number (SSN)
	City, town or post office, state, and ZIP code. For a foreign address, see instructions <b>Sterling VA 20164</b>	

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

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

- The books are in the care of ▶ Phil Ruedi
- Telephone No ▶ (972) 231-0035 FAX No. ▶ \_\_\_\_\_
- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) \_\_\_\_\_ If this is for the whole group, check this box  If it is for part of the group, check this box  and attach a list with the names and EINs of all members the extension is for

**1** I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until 8/15/2013, to file the exempt organization return for the organization named above. The extension is for the organization's return for  calendar year 2012 or  tax year beginning \_\_\_\_\_, and ending \_\_\_\_\_

**2** If the tax year entered in line 1 is for less than 12 months, check reason  Initial return  Final return  Change in accounting period

<b>3a</b> If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	<b>3a</b>	\$	0
<b>b</b> If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	<b>3b</b>	\$	0
<b>c Balance due.</b> Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	<b>3c</b>	\$	0