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Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

OMB No 1545-0047
2012
Open to Public Inspection

	A F	or th	e 2012 calendar year, or tax year beginning and en	nding						
	B	Check if upplicab	C Name of organization		D Employer identific	cation number				
		_Addre	SEE FORWARD FUND, INC.							
		Name chan	Doing Business As		20-5	490000				
		Initial	Number and street (of P.U. box if mail is not delivered to street address)	oom/surte	E Telephone number	7				
	느	Termi ated Amer	150 MAIN SIREEI	6	413-	582-0085				
	누	return	City, town, or post office, state, and ZIP code		G Gross receipts \$ 1,150,845					
	Щ	tion pend	NORTHAMPTON, MA 01000		H(a) Is this a group re					
			F Name and address of principal officer W. DAVID ROSENMILLER 150 MAIN STREET SUITE 26, NORTHAMPTON, 1		for affiliates?	Yes X No				
	$\overline{}$	ax-ex	tempt status: 501(c)(3) X 501(c) (4) (insert no.) 4947(a)(1) or		H(b) Are all affiliates inc	luded? Yes Mo				
			ite: N/A	<u> </u>	H(c) Group exemption	•				
			f organization: X Corporation Trust Association Other	L Year o	of formation; 2006	State of legal domicile: DE				
	Pε	art I	Summary			· · · · · · · · · · · · · · · · · · ·				
	ø	1	Briefly describe the organization's mission or most significant activities. SEE SC	CHEDU	LE O					
, D	Governance	l								
5 P 1 P 3	Ē	2	Check this box if the organization discontinued its operations or disposed	d of more	than 25% of its net as	_				
 L	g.	3	Number of voting members of the governing body (Part VI, line 1a)		3	2				
		4	Number of independent voting members of the governing body (Part VI, line 1b)		4	2				
	Activities &	5	Total number of individuals employed in calendar year 2012 (Part V, line 2a) Total number of volunteers (estimate if necessary)		5	9				
	cţ	7 a	Total unrelated business revenue from Part VIII, column (C), line 12		7a	0.				
υ	⋖		Net unrelated business taxable income from Form 990-T, line 34		7b	0.				
-				Ī	Prior Year	Current Year				
	9	8	Contributions and grants (Part VIII, line 1h)		354,000.	774,000.				
, >	Revenue	9	Program service revenue (Part VIII, line 2g)		0.	0.				
ن ک	Re		Investment income (Part VIII, column (A), lines 3, 4, and 7d)		36,889.	79,371.				
アンマのか			Other revenue (Part VIII, column (A) lines 5, 6d, 8c, 9c, 10c, and 11e)	_	0.	0.				
il.		12	Total revenue - add lines 8 through 1 must enal Part VIII, column (A), line 12) Grants and similar amounts paid (Part IX, column (A), lines 1-3)		390,889. 280,000.	853,371. 622,720.				
		14	Benefits paid to or for members (Part IX column (A), line4)	-	0.	022,720.				
	စ္ဆ	15	Salanes, other compensation, employee benefits (Part IX, column (A), lines 5-10)	28,272.	49,509.					
	Expenses	16a	Professional fundraising fees (PartilX, column (A) June 11e)		0.	43,439.				
	×	ь	Total fundraising expenses (Part IX, column (D), line 25) 43,435	9.						
	۳	17	Other expenses (PartilX, column (A), lines 1) a 11d, 11f-24e)		44,642.	75,730.				
			Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	<u> </u>	352,914.	791,398.				
•	<u>> &</u>	19	Revenue less expenses. Subtract line 18 from line 12	-	37,975.	61,973.				
-	20 E	20 21 22	Total assets (Part X, line 16)	Per Per	inning of Current Year 1,123,807.	End of Year 1,231,118.				
-	888 888	21	Total liabilities (Part X, line 26)	<u> </u>	50,841.	60,574.				
		22	Net assets or fund balances. Subtract line 21 from line 20		1,072,966.	1,170,544.				
	Pa	ert II	Signature Block							
			afties of perjury, I declare that I have examined this return, including accompanying schedules a			knowledge and belief, it is				
1	rue,	corre	ct, and complete. Declaration of preparer (other than officer) is based on all information of which	h preparer l	nas any knowledge.	1				
	Sign		Signature of officer	-		113				
	Hero		W. DAVID ROSENMILLER, EXECUTIVE DIRECTO	OR						
		_	Type or print name and title							
•			Print/Type preparer's name Preparer's signature	. 0	ate Check	PTIN				
	Paid		CRAIG A STEVENS CPA Cray a Stevens	<u>ک</u>	-9-13 If self-employe					
	•	arer	Firm's name CALIBRE CPA GROUP PLC	A	Firm's EIN	47-0900880				
'	U26	Only	Firm's address 7501 WISCONSIN AVENUE, SUITE 1200	U WES		2021221				
;	Mare	the !!	BETHESDA, MD 20814		Phone no. (202)331-9880				
-		1 12-1	RS discuss this return with the preparer shown above? (see instructions) 10-12 LHA For Paperwork Reduction Act Notice, see the separate instruction			Yes No No Form 990 (2012)				
•	.0206	12-1	The separate instruction act reduces, see the separate instructions	3.		rom 330 (2012)				

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orm	990 (2012) SEE FORWARD FUND, INC.		20-5490000	Page 2
Pai	rt III Statement of Program Service Accomplishments			
	Check if Schedule O contains a response to any question in this	Part III		
1	Briefly describe the organization's mission			
	THE ORGANIZATION'S PURPOSE IS TO SUI	PPORT SOCIAL WELFARE	PURPOSES,	
	PRIMARILY PUBLIC EDUCATION AND ADVO			,
	ENVIRONMENTAL PROTECTION, CIVIL RIGH			
2	Did the organization undertake any significant program services during	the year which were not listed on		
~	the prior Form 990 or 990-EZ?	the year which were not noted on	Ves	X No
	If "Yes," describe these new services on Schedule O			
•	·	and the second control of the second control	□ v _{oo}	X No
3	Did the organization cease conducting, or make significant changes in	now it conducts, any program services?	res	LV NO
	If "Yes," describe these changes on Schedule O.			
4	Describe the organization's program service accomplishments for each			_
	Section 501(c)(3) and 501(c)(4) organizations are required to report the	amount of grants and allocations to othe	rs, the total expenses, a	ind
	revenue, if any, for each program service reported	600 700		
4a	(Code) (Expenses \$675,029 • including grants	of \$ 622,720.) (Revenue	ie\$	<u>0.</u>)
	THE ORGANIZATION PRIMARILY MAKES GRA			ER
	NONPROFIT ORGANIZATIONS THAT WORK IN	OR FOR THE BENEFIT	OF SOCIAL	
	WELFARE PURPOSES.			
			-	
41	,	\ /		
4b	(Code) (Expenses \$ including grants	of \$) (Revenu	ле\$,
			- .	
		· · · · · · · · · · · · · · · · · · ·		
4c	(Code) (Expenses \$ including grants) (Royan)	¢	
40	(Code) (Expenses \$ including grants	or \$	ле ф	
				
				
				<u>_</u>
			<u>. </u>	
			_	
			-	
4d	Other program services (Describe in Schedule O.)		-	
) (Revenue \$	1	
4e	675 020) (nevenue 9		
c	Total program service expenses P 01010231		Ω	90 (2012)
	M		Form 9	30 (2012)

Form 990 (2012) SEE FORWARD FUND, INC.

Part IV Checklist of Required Schedules

			Yes	No
1	ls the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1_		_X_
2	Is the organization required to complete Schedule B, Schedule of Contributors	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for		v	
_	public office? If "Yes," complete Schedule C, Part I	3	Х	
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? If "Yes," complete Schedule C, Part II	_ 4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	_		Х
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	_	<u> </u>
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	6		Х
7	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	- 0		
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
Ŭ	Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
•	amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		Х
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.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 107 If "Yes," complete Schedule D,			
	Part VI	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	1		
	assets reported in Part X, line 167 If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments · program related in Part X, line 13 that is 5% or more of its total			٠,,
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	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			v
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
_	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	11f	х	
120	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	111	21	
120	Schedule D. Parts XI and XII	12a	х	
ь	Was the organization included in consolidated, independent audited financial statements for the tax year?	120		_
_	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			
	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,		١,,	
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	X	<u> </u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			v
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			l v
00-	complete Schedule G, Part III	19		X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		
<u> </u>	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		Ь—

Form **990** (2012)

Form 990 (2012) SEE FORWARD FUND, Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
24a				
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			١,,
	Schedule K If "No", go to line 25	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		-
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a	05.		х
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		Х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified	230		
20	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
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):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Х
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Х
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			,,
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			x
20	Schedule N, Part II	32		Α_
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? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	35		
5 4	Part V, line 1	34	Х	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	-		
_	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		ĺ
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	<u> </u>	Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	Х	<u> </u>
		Form	990	(2012

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Form 990 (2012) SEE FORWARD FUND, INC. Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response to any question in this Part V					
			• •	į	Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a	3			Ź
ь	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and re	eporta	ble gamıng			
	(gambling) winnings to prize winners?		·	1c	Х	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,					
	filed for the calendar year ending with or within the year covered by this return	2a	9			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns	ns?		2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions	s)				
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?			За		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O			3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other	author	ity over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial	accou	nt)?	4a		Х
b	If "Yes," enter the name of the foreign country.					
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial A	Accou	nts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa	ction?		5b		Х
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did th	ne orga	anızatıon solicit			
	any contributions that were not tax deductible as charitable contributions?			6a	X	
b	If "Yes," did the organization include with every solicitation an express statement that such contribut	ions o	r gifts			
	were not tax deductible?			6b_	X	
7	Organizations that may receive deductible contributions under section 170(c).					
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and se	rvices p	rovided to the payor?	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w	as req	uıred			
	to file Form 8282?			7c	ļ	X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d		•		
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of	ontrac	it?	7e	↓	X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract			7f	├	X
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo			7g_		<u> </u>
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization			7h	1	
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations D		· · · -	ŀ		•
_	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at	any tim	ne during the year?	8	<u> </u>	
9	Sponsoring organizations maintaining donor advised funds.					ŧ
а	Did the organization make any taxable distributions under section 4966?			9a		
ь	Did the organization make a distribution to a donor, donor advisor, or related person?			9b	ļ	
10	Section 501(c)(7) organizations. Enter:	ا مدا				
a	Initiation fees and capital contributions included on Part VIII, line 12	10a				1
_ b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	Section 501(c)(12) organizations. Enter:	144				1
a	Gross income from members or shareholders	11a	<u> </u>			
b	Gross income from other sources (Do not net amounts due or paid to other sources against	446				
100	amounts due or received from them.) Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	11b	<u> </u>	12a		f
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b		120	ļ	
_	•	120				
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			120	 	
a	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			13a	 	
L	Note. See the instructions for additional information the organization must report on Schedule O.]		Ī
D	Enter the amount of reserves the organization is required to maintain by the states in which the	13b	<u> </u>			1
_	organization is licensed to issue qualified health plans Enter the amount of reserves on hand	13b		1		ŧ
с 14а	Did the organization receive any payments for indoor tanning services during the tax year?	130	<u> </u>	14a	 	X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedul	e ()		14b	<u> </u>	†
	in 1995, mas it med a Form (20 to report these payments). If 190, provide an explanation in Schedul				n aan	/2012

Form 990 (2012) SEE FORWARD FUND, INC. 20-5490000 Page
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 C) See	nstructions						
	Check if Schedule O contains a response to any question in this Part VI	_			_	X			
Sec	tion 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	1a	2						
	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		_						
b	Enter the number of voting members included in line 1a, above, who are independent	1b	2						
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationsh	ip with	any other						
	officer, director, trustee, or key employee?			2		<u>X</u> _			
3	Did the organization delegate control over management duties customarily performed by or under the	ne dire	ct supervision						
	of officers, directors, or trustees, or key employees to a management company or other person?			3		X			
4	Did the organization make any significant changes to its governing documents since the prior Form		as filed?	4		X			
5	Did the organization become aware during the year of a significant diversion of the organization's as	sets?		5		X			
6	Did the organization have members or stockholders?			6		X			
7a	Did the organization have members, stockholders, or other persons who had the power to elect or a	ppoint	one or			Х			
	more members of the governing body?								
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,	stockh	olders, or			Х			
	persons other than the governing body?								
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the ye	ar by th	ie following		х				
а									
b	Each committee with authority to act on behalf of the governing body?			8b	Х				
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be real	ached	at the			v			
<u></u>	organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9		X			
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal R	evenu	e Code)			-			
40-	Did the average transfer have level about the same have about the same of the transfer at the same of			40-	Yes	No X			
	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of such c	h 4 - 11		10a		Λ			
U	and branches to ensure their operations are consistent with the organization's exempt purposes?	парсег	s, aniliates,	10b					
11a									
b									
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a	х				
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give risi	e to con	flicts?	12b	X				
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If ")								
	in Schedule O how this was done	00, 0	3307.30	12c	Х				
13	Did the organization have a written whistleblower policy?			13		Х			
14	Did the organization have a written document retention and destruction policy?			14	Х				
15	Did the process for determining compensation of the following persons include a review and approve	al by ir	dependent			-			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	-							
а	The organization's CEO, Executive Director, or top management official			15a		Х			
	Other officers or key employees of the organization			15b		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 arrange	ment v	vith a						
	taxable entity during the year?			16a		Х			
ь	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate	ate its p	participation						
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the orga	nizatio	n's						
	exempt status with respect to such arrangements?			16b					
Sec	tion C. Disclosure								
17	List the states with which a copy of this Form 990 is required to be filed ►MA								
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-	T (Sect	ion 501(c)(3)s only)	avaılab	le				
	for public inspection. Indicate how you made these available. Check all that apply.								
	Own website Another's website X Upon request Other (explain	ın Sci	hedule O)						
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, co	onflict	of interest policy, an	d finar	icial				
	statements available to the public during the tax year								
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ▶ JEFFREY ROSEN - 413-582-0085								
	150 MAIN ST, SUITE 26, NORTHAMPTON, MA 01060								
232000 12-10-				Form	990	(2012)			

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

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

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- 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.

(A)	(B)			nization compensate (C)				(D)	(E)	(F)
Name and Title	Average hours per week	box	not c	ss pe	more than one rson is both an irector/trustee)		h an	Reportable compensation from	Reportable compensation from related	Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustæe	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) LINDA STOUT	1.00							_		
PRESIDENT AND DIRECTOR	1	X		Х				0.	0.	0
(2) RICHARD HEALEY	1.00									•
SECR/TREASURER AND DIRECTOR	1 00	X	_	Х				0.	0.	0
(3) W. DAVID ROSENMILLER EXECUTIVE DIRECTOR	1.00			Х				889.	14,697.	0
EXECUTIVE DIRECTOR				Λ				000.	14,057.	
		-		i ·						
		_								

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Form 990 (2012)

	(A) Name and title	(B) Average hours per week	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					h an	(D) Reportable compensation from	(E) Reportable compensation from related	ı	am	(F) timate tount o other	
		(list any hours for related organizations below line)	Individual trustee or director	Institutional frustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC		comp fro orga and	pensa om the anizati d relate nizatio	e on ed
												_		
											_			
			ļ ——	_				_			\perp			
						_		_			\perp			
				_				_			\perp			
											_			
									889.	14 60	_			
	Sub-total Total from continuation sheets to Part V	I, Section A					>		0.		0.			0.
<u>d</u> 2	Total (add lines 1b and 1c) Total number of individuals (including but n	ot limited to th	ose	liste	ed al	bov	e) wh	no re	889. eceived more than \$100	14,69 ,000 of reportable				0.
	compensation from the organization										F		Yes	No
3	Did the organization list any former officer, line 1a? If "Yes," complete Schedule J for s	uch individual			•	-	-		-			3		Х
4	For any individual listed on line 1a, is the su and related organizations greater than \$15	0,000 <i>° If "Yes</i> ,	" co	mple	ete S	Sch	edule	e J f	for such individual			4		X
5	Did any person listed on line 1a receive or a rendered to the organization? If "Yes," com							elat	ed organization or indivi	dual for services	\bot	5		X
Sec 1	tion B. Independent Contractors Complete this table for your five highest co	mpensated inc	depe	ende	ent c	ont	racto	ors t	hat received more than	\$100,000 of comp	 oensa	ition f	rom	
	the organization. Report compensation for	•												
	(A) Name and business	address	NC	INC	<u> </u>				(B) Description of s	ervices	Cc	(C omper	s) nsatio	n
			_									_		
									·			-		
2	Total number of independent contractors (in \$100,000 of compensation from the organic		ot lu	mıte	d to		se li: 0	stec	d above) who received m	nore than				

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Forn	n 990		FORWARD F	<u>UN</u> D, INC	·		<u> 20-5490</u>	000 Page 9
Pa	rt VI	Statement of Reve	nue					
		Check if Schedule O con	itains a response t	o any question	ın this Part VIII			
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
nts	1 a	Federated campaigns	1a					
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues	1b					
	٥	Fundraising events	1c					
	ء	Related organizations	1d	385,000.				
is,	e	Government grants (contribu	itions) 1e					
is	f	All other contributions, gifts, gra	nts, and					
ğğ.		similar amounts not included ab-	ove 1f	389,000.			•	
탈	g	Noncash contributions included in line	es 1a-1f \$					
<u>ರ್ಜಿ</u>	h	Total. Add lines 1a-1f		>	774,000.			
				Business Code				
ဗ္ဗ	2 a)						
Program Service Revenue	b		1					
n Se	c	>						
e S	d	j						
5	е							
<u>α</u>	f	All other program service rev	enue					
	9	Total. Add lines 2a-2f		<u> </u>				
	3	Investment income (including	g dividends, intere	st, and	10 104			10.104
		other similar amounts)		>	19,124.			19,124.
	4	Income from investment of ta	ax-exempt bond pr	roceeds				
	5	Royalties		<u> </u>				
			(i) Real	(II) Personal	4			
	6 a				-			
	b				-			
	C	` '			-			
		Net rental income or (loss)		() OII				
	7 a	Gross amount from sales of	(i) Securities 357,721.	(II) Other	-			
;		assets other than inventory	337,721.		-			
i	D	Less: cost or other basis	297,474.					
	_	and sales expenses Gain or (loss)	60,247.	····	-			
		Net gain or (loss)	00,247.		60,247.		•	60,247.
ne		Gross income from fundraising			00,247.			00,247.
Other Revenue		including \$						
Re		contributions reported on line	e 1c) See				:	
her		Part IV, line 18	a		-			
రౌ		Less: direct expenses	b	<u> </u>	-		:	
		Net income or (loss) from fun	- ·					
	9 а	 Gross income from gaming a Part IV, line 19 	į.					
		Less direct expenses	a b		-			
		 Less direct expenses Net income or (loss) from gar 			-	1		
		Gross sales of inventory, less	-					
		and allowances	a					
	h	Less: cost of goods sold	ь		1			
		: Net income or (loss) from sale		•	1]		
		Miscellaneous Reven		Business Code				
	11 a			23011.033 0000	1	ĺ	•	
	b							-
	c							
	d		·					
		Total. Add lines 11a-11d	7				-	
	12	Total revenue. See instructions			853,371.	0.	0.	79,371.
23200 12-10	9 12							Form 990 (2012)

Form 990 (2012) SEE FORWARD F Part IX Statement of Functional Expenses

Sect	ion 501(c)(3) and 501(c)(4) organizations must com	plete all columns All oth	ner organizations must co	omplete column (A)	
	Check if Schedule O contains a respon	se to any question in th	is Part IX		
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the United States See Part IV, line 21	622,720.	622,720.		
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	1,848.	1,478.	370.	
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	47,661.	27,167.	20,494.	
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				<u> </u>
10	Payroll taxes				
11	Fees for services (non-employees).				
а	Management	0 106	6 405	1 (21	
b	Legal	8,106.	6,485.	1,621.	
С	· · · · · · · · · · · · · · · · · · ·	7,650.		7,650.	
d	Lobbying	42 420			42 420
e	Professional fundraising services See Part IV, line 17	43,439.	93.	12 200	43,439.
f	Investment management fees	12,392.	93.	12,299.	
9	,	500.	500.		
40	column (A) amount, list line 11g expenses on Sch O)	300.			
12	Advertising and promotion	1,293.	646.	647.	
13	Office expenses	1,293.	040.	047.	
14	Information technology				
15 16	Royalties				
17	Occupancy Travel	4,005.	2,616.	1,389.	
18	Payments of travel or entertainment expenses	1,003.	2,010.	173031	
.0	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	669.	543.	126.	
20	Interest		0.20.	220	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	1,474.		1,474.	· · ·
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 0)				
а	ADMINISTRATIVE SERVICE	21,846.	12,781.	9,065.	
ь	EXCISE TAXES	17,795.		17,795.	
С					
d					
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	791,398.	675,029.	72,930.	43,439.
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 I if following SOP 98-2 (ASC 958-720)				Form 990 (2012)

Part X	Balance Sheet				
	Check if Schedule O contains a response to any	question in this Part X	<u> </u>		
			(A) Beginning of year		(B) End of year
1	Cash · non-interest-bearing		143,497.	1	181,433
2	Savings and temporary cash investments		9,236.	2	249,248
3	Pledges and grants receivable, net		41,000.	3	
4	Accounts receivable, net			4	
5	Loans and other receivables from current and fo	ormer officers, directors,			
-	trustees, key employees, and highest compensa	ated employees Complete			
	Part II of Schedule L			5	
6	Loans and other receivables from other disquali	fied persons (as defined under			
	section 4958(f)(1)), persons described in section	4958(c)(3)(B), and contributing			
	employers and sponsoring organizations of sect	ion 501(c)(9) voluntary			
,	employees' beneficiary organizations (see instr)	Complete Part II of Sch L		6	
j 7	Notes and loans receivable, net			7	
7 8 8	Inventories for sale or use			8	
9	Prepaid expenses and deferred charges		10,806.	9	28,298
10:	Land, buildings, and equipment cost or other				
	basis Complete Part VI of Schedule D	10a			
	Less accumulated depreciation	106		10c	
11	Investments - publicly traded securities	-	919,268.	11	772,139
12	Investments - other securities See Part IV, line 1	F	·····	12	
13	Investments - program-related See Part IV, line	11		13	
14	Intangible assets			14	·-
15	Other assets See Part IV, line 11	1 100 007	15	1 221 110	
16	Total assets. Add lines 1 through 15 (must equa	1,123,807.	16	1,231,118	
17	Accounts payable and accrued expenses	20,841.	17	30,574 30,000	
18	Grants payable	30,000.	18	30,000	
19	Deferred revenue	-		19	
20	Tax-exempt bond liabilities			20	
21	Escrow or custodial account liability Complete I	T T		21	
	Loans and other payables to current and former	· · · · · · · · · · · · · · · · · · ·			
	key employees, highest compensated employee Complete Part II of Schedule L	s, and disqualified persons.		22	
23	Secured mortgages and notes payable to unrela	stad third parties		23	
24	Unsecured notes and loans payable to unrelated	·		24	
25	Other liabilities (including federal income tax, par	· •			
	parties, and other liabilities not included on lines	·			
	Schedule D	2 1,1 2 1,1 2 1,1 2 1,1 2 1		25	
26	Total liabilities. Add lines 17 through 25		50,841.	26	60,574
	Organizations that follow SFAS 117 (ASC 958), check here ▶ X and			······································
e	complete lines 27 through 29, and lines 33 an	t			
27	Unrestricted net assets		67,542.	27	122,452
27 28 29 30 31 32	Temporarily restricted net assets		1,005,424.	28	1,048,092
29	Permanently restricted net assets			29	
5	Organizations that do not follow SFAS 117 (A	SC 958), check here ▶ 🔙			
5	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 eq	uipment fund		31	
32	Retained earnings, endowment, accumulated in			32	
33	Total net assets or fund balances		1,072,966.	33	1,170,544
34	Total liabilities and net assets/fund balances		1,123,807.	34	1,231,118
					Form 990 (20

Form	990 (2012) SEE FORWARD FUND, INC.	20-549	90000	Pag	ge 12	
Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response to any question in this Part XI					
1 2 3 4 5 6 7 8 9 10	Total revenue (must equal Part VIII, column (A), line 12) Total expenses (must equal Part IX, column (A), line 25) Revenue less expenses Subtract line 2 from line 1 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) Net unrealized gains (losses) on investments Donated services and use of facilities Investment expenses Prior period adjustments Other changes in net assets or fund balances (explain in Schedule O) Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,	1 2 3 4 5 6 7 8 9	79 6 1,07	1,9	98. 73. 66.	
	column (B))	10	1,17	0,5	44.	
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response to any question in this Part XII					
1 2a	Accounting method used to prepare the Form 990					
b	separate basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separate basis Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both X Separate basis Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the 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 Sch	·	2c	Х		
	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the S Act and OMB Circular A-133?	ingle Audit	3a		X	
	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audits, explain why in Schedule O and describe any steps taken to undergo such audits	ured audit	3b	gan	(2012)	
			i Onli	000	(2012)	

232012 12-10-12

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

► See separate instructions.

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.

Open to Public Inspection

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

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

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

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

 Section 501(c)(3) organizations that 	have NOT filed Form 5768 (election	n 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	Γax), or Form 990-EZ,	Part V, line 35c (Proxy	Tax), then
 Section 501(c)(4), (5), or (6) organization 	ations: Complete Part III.			
Name of organization			Em	oloyer identification numbe
SEE FOR	RWARD FUND, INC.			20-5490000
Part I-A Complete if the or	ganization is exempt unde	r section 501(c) o	r is a section 527	organization.
-				
1 Provide a description of the organi	zation's direct and indirect political	campaign activities in	Part IV	
2 Political expenditures	zation 3 direct and monest pointed	campaign activities in	→	s 333,679
3 Volunteer hours				<u> </u>
3 Volunteer nours				
Part I-B Complete if the or	ganization is exempt unde	r section 501(c)(3).	
	k incurred by the organization under			\$
2 Enter the amount of any excise tax	k incurred by organization managers	s under section 4955	•	\$
3 If the organization incurred a section	on 4955 tax, did it file Form 4720 fo	r this year?		Yes No
4a Was a correction made?				Yes No
b If "Yes," describe in Part IV.				
Part I-C Complete if the or	ganization is exempt unde	r section 501(c), (except section 501	
1 Enter the amount directly expende	ed by the filing organization for secti	on 527 exempt function	on activities	\$ 28,449
2 Enter the amount of the filing organ	nization's funds contributed to othe	r organizations for sec	tion 527	
exempt function activities			•	\$ <u>305,230</u>
3 Total exempt function expenditure	s. Add lines 1 and 2 Enter here and	d on Form 1120-POL,		
line 17b			>	\$ 333 , 679
4 Did the filing organization file Form	1120-POL for this year?			X Yes No
5 Enter the names, addresses and e	mployer identification number (EIN)	of all section 527 politi	ical organizations to wh	ich the filing organization
made payments For each organize	ation listed, enter the amount paid f	rom the filing organiza	tion's funds Also enter	the amount of political
contributions received that were p	romptly and directly delivered to a s	separate political organ	nization, such as a sepai	ate segregated fund or a
political action committee (PAC). If	additional space is needed, provid	e information in Part I\	/	
(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
		!	filing organization's	contributions received and
			funds. If none, enter -0	promptly and directly delivered to a separate
				political organization.
				If none, enter -0
WORKING FAMILIES	BROOKLYN, NY	•		
PARTY	11217	20-0957795	80,000	
CHINESE PROGRESSIVE	28 ASH STREET			
POLITICAL ACTIO	BOSTON, MA 02111	45-2481016	5,413	
CITIZEN ACTION OF	94 CENTRAL AVENUE			
NEW YORK	ALBANY, NY 12206	11-2644562	25,000	
COALITION FOR SOCIAL			•	
JUSTICE	02740	04-3541018	46,290	
ELEANOR CHAVEZ FOR	ALBUQUERQUE, NM	-	····································	
SENATE	87121		2.300	ا ا

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

FLORIDA NEW MAJORITYBLVD MIAMI, FL 33

8330 BISCAYNE

SEE PART IV FOR CONTINUATION

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27-0167620

20,000.

Schedule C (Form 990 or 990-EZ) 2012

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Scheo	dule C (Form 990 o	r 990-EZ) 2012	SEE F	ORWARD	FUND, INC.		20-5	5490000 Page 2
						n 501(c)(3) and fil		
L		n under sed			•			
A Ch	eck 🕨 🔲 ıf th	e filing organiza	tion belon	gs to an affi	liated group (and list in	n Part IV each affiliated	group member's nar	ne, address, EIN.
		enses, and sha					3	,,
B Ch	`				nd "limited control" pro	ovisions apply		
							(a) Filing	(b) Affiliated group
	(Th			bying Expe neans amoเ	nditures ınts paid or incurred.)	organization's totals	totals
1 a	Total lobbying expe	enditures to infl	uence pub	olic opinion (grass roots lobbying)			
b	Total lobbying expe	enditures to infl	uence a le	gislative boo	dy (direct lobbying)			
c	Total lobbying exp	enditures (add l	ines 1a an	- d 1b)				· · · · · · · · · · · · · · · · · · ·
	Other exempt purp	•		,				
	Total exempt purpo	•		s 1c and 1c	(t		,	
					e following table in bot	th columns		
	If the amount on line				bying nontaxable am			
	Not over \$500,000		. (2) .		the amount on line 1e			
	Over \$500,000 but		0.000		00 plus 15% of the exc			
	Over \$1,000,000 b				00 plus 10% of the exc			
	Over \$1,500,000 b		·		00 plus 5% of the exce			
	Over \$17,000,000	at hot over with	,000,000	\$1,000,		33 Ονει ψ1,500,000.		
	Over \$17,000,000			Ψ1,000,				
	Grassroots nontax	able amount (er	tor 25% c	f line 1ft				
_	Subtract line 1g fro	-		•				·—·
	Subtract line 1f from						• •	
					line 11 did the evention	ation file Form 4700		.l
	reporting section 4			er line in or	line 1i, did the organiz	ation life Form 4720		Yes No
	reporting section 4	911 tax for this	year.	1-Voor Avo	eraging Period Under	Section 501/h		1e5 140
		(Some organiz	ations tha			n do not have to com	olete all of the five	
						es 2a through 2f on pa		
	<u>-</u>		Lobi	ying Exper	nditures During 4-Yea	ar Averaging Period		
				 7				T
	Calendar ye		(a)	2009	(b) 2010	(c) 2011	(d) 2012	(e) Total
	(or fiscal year begi	nning in)						
								
2a	Lobbying nontaxat	ole amount						
	Lobbying ceiling ar							
	(150% of line 2a, c							
	•	. , ,						
c ·	Total lobbying expe	enditures						
d	Grassroots nontax	able amount						
e	Grassroots ceiling	amount						
((150% of line 2d, c	olumn (e))				!		
	<u> </u>							
f (Grassroots lobbyin	g expenditures						

Schedule C (Form 990 or 990-EZ) 2012

Schedule C (Form 990 or 990-EZ) 2012 SEE FORWARD FUND, INC. 20-549000 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)).

For e	ach "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description	(a	1)	(b)
	e lobbying activity.	Yes	No	Amo	unt
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				
а	Volunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
С	Media advertisements?				
d	Mailings to members, legislators, or the public?				
е	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)?				
	If "Yes," enter the amount of any tax incurred under section 4912				
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			<u></u>	
Par	Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6).	ion 501(c)	(5), or se	ection	
				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		
1	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members		1 (b) Par	t III-A, III	ie 3, is
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political	tical		-	
	expenses for which the section 527(f) tax was paid).				
а	Current year		2a		
	Carryover from last year		2b		
	Total		2c		
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3		·
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the ex	cess			
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and				
	expenditure next year?		4		
5	Taxable amount of lobbying and political expenditures (see instructions)		5		
Par					·
Comp	olete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5; I	Part II-A (affilia	ated group	list), Part II-	A, line 2,
and F	art II-B, line 1. Also, complete this part for any additional information. TI-A, LINE 1:			· 	
THE	FUND MAKES PERMISSIBLE CONTRIBUTIONS ON BEHALF O	F CANDI	DATES	, AND	
<u>OTH</u>	ER REGISTERED ORGANIZATIONS, WITHIN FEDERAL, STAT	E AND I	OCAL		
LIM	ITATIONS FOR THE BENEFIT OF SOCIAL WELFARE, CONSI	STENT V	ITH T	не	
ORG	ANIZATION'S PRIMARY PURPOSE.		<u>-</u>		

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Schedule C (Form 990 or 990-EZ) 2012 SEE FORWARD FUND, INC. Part IV Supplemental Information (continued)	20-5490000 Page 4
400 CAPITOL MALL, SUITE 1545 SACRAMENTO, CA 95814	
EIN: 46-0968666 COL (D) AMOUNT: 20000. COL (E) AMOUNT:	0.
VIRGINIA NEW MAJORITY	
P.O. BOX 22063 ALEXANDRIA, VA 22304	
EIN: 26-1377619 COL (D) AMOUNT: 50000. COL (E) AMOUNT:	0.
ELIVER TO TO THE OWN T	
	· · · · · · · · · · · · · · · · · · ·
	
	<u> </u>

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

OMB No 1545-0047 Open to Public Inspection

Employer identification number

Name of the organization

SEE EORWARD FIND 20-5490000 TNC

Par	rt I Organizations Maintaining Donor Advise		or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line		
		(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 advis	ed funds
	are the organization's property, subject to the organization's		Yes No
6	Did the organization inform all grantees, donors, and donor a		
-	for charitable purposes and not for the benefit of the donor o		
	impermissible private benefit?		Yes No
Par		panization answered "Yes" to Form 990. P	
1	Purpose(s) of conservation easements held by the organizati		
-	Preservation of land for public use (e.g., recreation or e		torically important land area
	Protection of natural habitat	· —	Ifled historic structure
	Preservation of open space	recontailor of a cont	
2	Complete lines 2a through 2d if the organization held a qualif	ied conservation contribution in the form	of a conservation easement on the last
_	day of the tax year	iod dender varieti dentribation in the form	or a sometration easement on the last
			Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
c	Number of conservation easements on a certified historic stri	ucture included in (a)	2c
d	Number of conservation easements included in (c) acquired a	` '	——————————————————————————————————————
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, rel	leased, extinguished, or terminated by the	
	year▶	· · · · · · · · · · · · · · · · · · ·	
4	Number of states where property subject to conservation eas	sement is located	
5	Does the organization have a written policy regarding the per	riodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements it	t holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,	and enforcing conservation easements d	uring the year ▶
7	Amount of expenses incurred in monitoring, inspecting, and	enforcing conservation easements during	the year ▶ \$
8	Does each conservation easement reported on line 2(d) above	ve satisfy the requirements of section 170	(h)(4)(B)(ı)
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservation	on easements in its revenue and expense	statement, and balance sheet, and
	include, if applicable, the text of the footnote to the organizat	tion's financial statements that describes	the organization's accounting for
	conservation easements.		
Par	t III Organizations Maintaining Collections of	f Art, Historical Treasures, or O	ther Similar Assets.
	Complete if the organization answered "Yes" to Form	990, Part IV, line 8.	
1a	If the organization elected, as permitted under SFAS 116 (AS	SC 958), not to report in its revenue staten	nent and balance sheet works of art,
	historical treasures, or other similar assets held for public ext	nibition, education, or research in furthera	nce of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that descri	bes these items.	
b	If the organization elected, as permitted under SFAS 116 (AS	C 958), to report in its revenue statement	and balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, ed	ducation, or research in furtherance of pul	olic service, provide the following amounts
	relating to these items:		
	(i) Revenues included in Form 990, Part VIII, line 1		▶ \$
	(ii) Assets included in Form 990, Part X		► \$ ► \$
2	If the organization received or held works of art, historical treatment	asures, or other similar assets for financia	
	the following amounts required to be reported under SFAS 1	16 (ASC 958) relating to these items:	
а	Revenues included in Form 990, Part VIII, line 1		> \$
þ	Assets included in Form 990, Part X		▶ \$

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 232051 12-10-12

Sche	edule D (Form 990) 2012 SEE FOR	WARD FUND,	INC.			20-5	490000	Page 2
	rt III Organizations Maintaining C			reasures,	or Other			
3	Using the organization's acquisition, accessi							
	(check all that apply).							
а	Public exhibition	ď	Loan or ex	change progra	ams			
ь	Scholarly research	e		0 . 0				
c	Preservation for future generations	_						
4	Provide a description of the organization's co	ollections and explai	in how they further	the organizati	on's exemp	t nurnose in P	art XIII	
5	During the year, did the organization solicit of						art 7tm.	
Ū	to be sold to raise funds rather than to be ma				Cr Sirinar as	50.5	Yes	☐ No
Pa	rt IV Escrow and Custodial Arran				"Yes" to For	m 000 Part IV		
	reported an amount on Form 990, Pa		oto ii tiio organizati	on anowered	103 (010)	111 000, 1 411 1	v, mic 5, 0i	
1a	Is the organization an agent, trustee, custod	·	diany for contribution	ns or other as	seate not inc	luded		
·u	on Form 990, Part X?	ian or other intermet	Jiary for contribution	ons or other as	sacta not inc	laded	Yes	No
		and animalate the fa	llavena a tabla			ι	res	NO
b	If "Yes," explain the arrangement in Part XIII	and complete the id	bllowing table.		-		A	
_	Decrease training						Amount	
С.	Beginning balance					1c		
d	Additions during the year					1d		
e	Distributions during the year					1e		
f	Ending balance					1f		
	Did the organization include an amount on F					L	Yes	∐ No
	If "Yes," explain the arrangement in Part XIII.							
Pa	rt V Endowment Funds. Complete						1	
_		(a) Current year	(b) Prior year	(c) Two year	rs back (d)	Three years bad	ck (e) Foury	ears back
1a	Beginning of year balance							
b	Contributions							
С	Net investment earnings, gains, and losses							
d	Grants or scholarships							
е	Other expenditures for facilities							
	and programs			1				
f	Administrative expenses			<u> </u>				
9	End of year balance			<u> </u>			1	
2	Provide the estimated percentage of the curr	rent year end baland	ce (line 1g, column	(a)) held as				
a	Board designated or quasi-endowment	 	_%					
b	Permanent endowment ►	%						
С	Temporarily restricted endowment ►	%						
	The percentages in lines 2a, 2b, and 2c shou	uld equal 100%.						
3a	Are there endowment funds not in the posse	ession of the organiz	ation that are held	and administe	ered for the o	organization	_	
	by						\	es No
	(i) unrelated organizations						3a(i)	
	(ii) related organizations						3a(ii)	
b	If "Yes" to 3a(II), are the related organizations						3b	
4	Describe in Part XIII the intended uses of the							
Par	t VI Land, Buildings, and Equipm	nent. See Form 990), Part X, line 10.	· · · · · · · · · · · · · · · · · · ·				
	Description of property	(a) Cost or o	1 7 7	st or other	(c) Accu		(d) Book	value
		basis (investr	ment) basis	s (other)	depred	ciation	-	
1a								
b	Buildings							
С	Leasehold improvements							
d	Equipment							
<u>e</u>	Other							
Total	. Add lines 1a through 1e. (Column (d) must e	gual Form 990. Part	X. column (B), line	10(c))		▶		0.

232053 12-10-12

	•				
	dule D (Form 990) 2012 SEE FORWARD FUND, INC.	. 11			5490000 Page 4
	t XI Reconciliation of Revenue per Audited Financial Statemen	its W	ith Revenue per H	i i	888,976.
1	Total revenue, gains, and other support per audited financial statements			1	000,970.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	1 _ 1	25 605		
	Net unrealized gains on investments	2a	35,605.		
· b	Donated services and use of facilities	2b			
	Recoveries of prior year grants	2c			
	Other (Describe in Part XIII)	2d			25 605
е	Add lines 2a through 2d			2e	35,605.
3	Subtract line 2e from line 1			3	853,371.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1	1 1			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
С	Add lines 4a and 4b			4c	0.
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)			5	853,371.
Pa	1 XII Reconciliation of Expenses per Audited Financial Stateme	nts V	Vith Expenses per	Retu	
1	Total expenses and losses per audited financial statements			1	791,398.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
а	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
С	Other losses	2c			
d	Other (Describe in Part XIII)	2d			
е	Add lines 2a through 2d			2e	0.
3	Subtract line 2e from line 1			3	791,398.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
	Other (Describe in Part XIII)	4b			
	Add lines 4a and 4b			4c	0.
	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)			5	791,398.
	T XIII Supplemental Information				
K, line	polete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, e 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b Also complete this part to part X , LINE 2: THE ORGANIZATION ACCOUNTS FOR	orovide	any additional informat		⊇b; Part V, line 4, Part
	CORDANCE WITH THE ACCOUNTING STANDARDS CODI			TOP	IC INCOME
ΓAΣ	KES. THESE PROVISIONS PROVIDE CONSISTENT G	UID	ANCE FOR THE	AC	COUNTING
OF	R UNCERTAINTY IN INCOME TAXES RECOGNIZED IN	AN	ENTITY'S FI	NAN	CIAL
STA	ATEMENTS AND PRESCRIBE A THRESHOLD OF "MORE	LI	KELY THAN NO	т" :	FOR

RECOGNITION AND DERECOGNITION OF TAX POSITIONS TAKEN OR EXPECTED TO BE

TAKEN IN A TAX RETURN. THE ORGANIZATION PERFORMED AN EVALUATION OF

UNCERTAIN TAX POSITIONS FOR THE YEAR ENDED DECEMBER 31, 2012, AND

SCHEDULE G (Form'990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

Department of the Treasury
Internal Revenue Service

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

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

OMB No 1545-0047

2012

Open To Public Inspection

Name of the organization							ntification number
	RWARD FUND, INC.					<u>20-5490</u>	
Part I Fundraising Activities required to complete this pa	Complete if the organization answrt	vered "Y	es" to	Form 990, Part IV, I	ine 17.	Form 990-EZ	filers are not
 1 Indicate whether the organization rail a X Mail solicitations b X Internet and email solicitation c X Phone solicitations d X In-person solicitations 2 a Did the organization have a written key employees listed in Form 990, F b If "Yes," list the ten highest paid indicompensated at least \$5,000 by the 	e Solicit f Solicit g Special or oral agreement with any individu Part VII) or entity in connection with dividuals or entities (fundraisers) pui	ation of ation of al fundra al (includ profess	non-g gover using ding o ional f	overnment grants rnment grants events fficers, directors, trus fundraising services?	stees o	X Yes	
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) fundr have c or con contrib	ustody trol of	(iv) Gross receipts from activity	to (or fu	mount paid retained by) indraiser ed in col (i)	(vi) Amount paid to (or retained by) organization
ALEXANDRA RUSSELL - 14	FUNDRAISING AND	Yes	No				
ELIZABETH STREET, ELLEN GURZINSKY - 430 EAST	DEVELOPMENT		Х	49,000.		32,220.	16,780.
6TH STREET, #4-B, NEW YORK,	FUNDRAISING AND DEVELOPMENT		х	0.		9,600.	<9,600.>
Total 3 List all states in which the organization or licensing. MA	on is registered or licensed to solici	t contrib	utions	49,000.s or has been notified	d it is e	41,820. xempt from re	7,180. egistration
LHA Panenwork Reduction Act Notice	see the Instructions for Farm 000	0.000				hodulo C (For	m 000 or 000 E7) 2012

232081 01-07-13 SEE PART IV FOR CONTINUATIONS

232082 01-07-13

Schedule G (Form 990 or 990-EZ) 2012

Schedule G (Form 990 or 990-EZ) 2012 SEE FORWARD FUND, INC.	20-5490000 Page 3
11 Does the organization operate gaming activities with nonmembers?	Yes No
12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed	
to administer charitable gaming?	Yes No
13 Indicate the percentage of gaming activity operated in	
a The organization's facility	13a %
b An outside facility	13b%
14 Enter the name and address of the person who prepares the organization's gaming/special events books and reco	ords.
Name ▶	
Address ▶	
15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Yes No
b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the am	ount
of gaming revenue retained by the third party > \$	
c If "Yes," enter name and address of the third party	
Name ▶	
Address ▶	
16 Gaming manager information	
Name ▶	
Gaming manager compensation \$	
Description of services provided	
Director/officer Employee Independent contractor	
17 Mandatory distributions	
a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?	Yes No
b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spen	
organization's own exempt activities during the tax year > \$	· III (III)
Part IV Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b, co	lumns (III) and (v), and Part III,
lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional in	formation (see instructions).
SCHEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDR.	ATSERS.
SCHEDOLE G, PART I, DINE 2D, DIST OF TEN HIGHEST PAID FONDER	AIDERO:
(I) NAME OF FUNDDATCED. ALEVANDDA DUCCETT	
(I) NAME OF FUNDRAISER: ALEXANDRA RUSSELL	<u> </u>
(I) ADDRESS OF FUNDRAISER: 14 ELIZABETH STREET, NORTHAMPTON	, MA 01060
(I) NAME OF FUNDATORS TITTED OVERTICATE	
(I) NAME OF FUNDRAISER: ELLEN GURZINSKY	
(I) ADDRESS OF FUNDRAISER: 430 EAST 6TH STREET, #4-B, NEW YOU	ORK, NY 10009
232083 01-07-13 Schedule	e G (Form 990 or 990-EZ) 2012

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

OMB No 1545-0047

Open to Public Inspection

Name of the organization SEE FORWARD FUND,	RD FUND,	INC.					Employer identification number 20-5490000
Part I General Information on Grants and Assistance	nd Assistance			:			
1 Does the organization maintain records to substantiate the amount of th	to substantiate the	e amount of the grants	or assistance, the	grantees' eligibility	for the grants or ass	e grants or assistance, the grantees' eligibility for the grants or assistance, and the selection	lion
criteria used to award the grants or assistance? 2 Describe in Part IV the organization's procedures for monitoring the use	stance?	toring the use of grant	of crant funds in the United States	States			X Yes No
<u>7</u>	Governments an	d Organizations in the	United States. C	omplete if the orga	nization answered "Y	'es" to Form 990, Part	IV, line 21, for any
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CENTER FOR CIVIC ACTION PO BOX 27616 ALBUQUERQUE, NM 87125	02-0779812	501(C)(4)	20,000.	0			DIRECT AND GRASSROOTS LOBBYING
CITIZEN ACTION OF NEW YORK 94 CENTRAL AVENUE ALBANY, NY 12206	11-2644562	501(C)(4)	.000,26	0			DIRECT AND GRASSROOTS LOBBYING
NEIGHBOR TO NEIGHBOR MASSACHUSETTS ACTION FUND - 262 WASHINGTON ST. 3RD FLOOR - BOSTON, MA 02108	04-3507714	501(C)(4)	30,000.	.0			DIRECT LOBBYING
WORKING FAMILIES ORGANIZATION 2 NEVINS STREET 3RD FLOOR BROOKLYN, NY 11217	20-4994004	501(C)(4)	15,000.	.0			DIRECT AND GRASSROOTS
NEW YORK STATE IMMIGRANT ACTION FUND - 137-139 WEST 25TH ST, 12TH FLOOR, SUITE 2 - NEW YORK, NY 10001	61-1613175	501(C)(4)	10,000.	0			DIRECT LOBBYING
VIRGINIA NEW MAJORITY PO BOX 22063 ALEXANDRIA, VA 22304	26-1377619	501(C)(4)	10,000.	.0			DIRECT LOBBYING
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 3 Enter total number of other organizations listed in the line 1 table	nd government or	ganizations listed in the	e line 1 table				1.
LHA For Paperwork Reduction Act Notice, see the Instructions for Form	see the Instruct	ions for Form 990.					Schedule I (Form 990) (2012)

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Page 1

Scheduje I (Form 990) SEE FORWARD FUND,	RD FUND,	INC.				2	20-5490000 Page 1
Part II Continuation of Grants and Other Assistance to Governments	Assistance to Go	vernments and Organ	nizations in the Ur	nited States (Sche	and Organizations in the United States (Schedule I (Form 990), Part II.)	1 11.)	
(a) Name and address of organization or government	(p)	(c) IRC sectron if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FLORIDA NEW MAJORITY INC PO BOX 370961 MIAMI, FL 33137-0961	27-0167620	501(C)(4)	.000,010	0			DIRECT LOBBYING
ASIAN PACIFIC ENVIRONMENTAL NETWORK ACTION - 310 8TH STREET, SUITE 309 - OAKLAND, CA 94607	45-4027112	501(C)(4)	.000,020	0			DIRECT AND GRASSROOTS LOBBYING
CHINESE PROGRESSIVE POLITICAL ACTION - 28 ASH STREET - BOSTON, MA 02111	45-2481016	501(C)(4)	20,000.	0.			GRASSROOTS LOBBYING
COMMUNITY COALITION FOR SUBSTANCE ABUSE PREVENTION AND TREATMENT - 8101 SOUTH VERMONT AVENUE - LOS ANGELES, CA 90044	95-4298811	501(C)(3)	30,000.	0.			GENERAL SUPPORT
COMMUNITY VOICES HEARD POWER, INC. 115 EAST 106TH STREET, 3RD FLOOR NEW YORK, NY 10029	27-3095637	501(C)(4)	20,000.	0.			DIRECT LOBBYING
NEW MEXICO JUSTICE LEAGUE ACTION FUND - P.O. BOX 4573 - SANTA FE, NM 87502	45-4381634	501(C)(4)	10,000.	0.			DIRECT LOBBYING
NEW MEXICO NEW MAJORITY 211 10TH STREET, SW ALBUQUERQUE, NM 87102	45-3080080	501(C)(4)	10,000.	0.			GRASSROOTS LOBBYING
MOVEMENT STRATEGY CENTER ACTION FUND - 436 14TH STREET, 5TH FLOOR - OAKLAND, CA 94612	14-1996986	501(C)(4)	10,000.	0			DIRECT LOBBYING
UNITED TEEN EQUALITY CENTER 34 HURD STREET LOWELL, MA 01852	38-3669532	501(C)(4)	2,000,2	0.	,		
							Cohodiilo I (Como DOO)

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Schedule I (Form 990) SEE FORWARD FUND, INC. Dark 11 Continuation of Grants and Other Assistance to Concernments and Organizations in the Hair of Grants and Other Assistance to Concernments and O	RD FUND,	INC.	I odt ni sacitoria	otos Robe	dulo I (Exem 000) De		20-5490000 Page 1
_	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WORKING FAMILIES PARTY 2 NEVINS STREET 3RD FLOOR BROOKLYN, NY 11217	20-0957795	527	.000,08	0			SECTION 527 EXEMPT FUNCTION ACTIVITIES
CHINESE PROGRESSIVE POLITICAL ACTION - 28 ASH STREET - BOSTON, MA 02111	45-2481016	501(C)(4)	5,413.	0			SECTION 527 EXEMPT FUNCTION ACTIVITIES
CITIZEN ACTION OF NEW YORK 94 CENTRAL AVENUE ALBANY, NY 12206	11-2644562	501(C)(4)	25,000.	0			SECTION 527 EXEMPT FUNCTION ACTIVITIES
COALITION FOR SOCIAL JUSTICE 105 WILLIAM STREET NEW BEDFORD, MA 02740	04-3541018	501(C)(4)	46,290.	0.			SECTION 527 EXEMPT FUNCTION ACTIVITIES
ELEANOR CHAVEZ FOR SENATE 1307 DEL MASTRO ROAD, SW ALBUQUERQUE, NM 87121		527	2,300.	0			SECTION 527 EXEMPT FUNCTION ACTIVITIES
FLORIDA NEW MAJORITY INC 8330 BISCAYNE BLVD MIAMI, FL 33138	27-0167620	501(C)(4)	20,000.	0			SECTION 527 EXEMPT FUNCTION ACTIVITIES
MASS ALLIANCE 8 BEACON STREET BOSTON, MA 02108	20-4272351	501(C)(4)	4,930.	0.			SECTION 527 EXEMPT FUNCTION ACTIVITIES
NATIONAL PEOPLE'S ACTION CAMPAIGN 810 NORTH MILWAUKEE AVENUE CHICAGO, IL 60642	23-7241567	501(C)(4)	15,000.	0			SECTION 527 EXEMPT FUNCTION ACTIVITIES
NEIGHBOR TO NEIGHBOR MASSACHUSETTS ACTION FUND - 262 WASHINGTON ST. 3RD FLOOR - BOSTON, MA 02108	04-3507714	501(C)(4)	31,297.	0.			SECTION 527 EXEMPT FUNCTION ACTIVITIES

Schedule I (Form 990)

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Schedule I (Form 990) SEE FORWARD FUND, INC. Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II)	RD FUND, Assistance to Go	INC.	nizations in the Ur	nited States (Sche	dule I (Form 990), Par		20-5490000 Page 1	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	•
NEW MEXICO NEW MAJORITY 211 10TH STREET, SW ALBUQUERQUE, NM 87102	45-3080080	501(C)(4)	5,000.	0			SECTION 527 EXEMPT FUNCTION ACTIVITIES	
OAKLAND RISING COMMITTEE 400 CAPITOL MALL, SUITE 1545 SACRAMENTO, CA 95814	46-0968666	527	20,000.	.0			SECTION 527 EXEMPT FUNCTION ACTIVITIES	
VIRGINIA NEW MAJORITY P.O. BOX 22063 ALEXANDRIA, VA 22304	26-1377619	501(C)(4)	.000,000	0			SECTION 527 EXEMPT FUNCTION ACTIVITIES	_
							Schedule I (Form 990)	

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Schedule I (Form 990) (2012)

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

2012
Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

SEE FORWARD FUND, INC.

Employer identification number

SEE FORWARD FUND, INC.	20-5490000
FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MIS	SION:
ADVOCACY ON ISSUES OF SOCIAL JUSTICE, ENVIRONMENTAL PROTE	CTION, CIVIL
RIGHTS AND CIVIC PARTICIPATION.	
FORM 990, PART VI, SECTION B, LINE 11: AT LEAST TWO DIRECT	TORS/OFFICERS
INCLUDING THE TREASURER REVIEW THE RETURNS WITH THE DIRECT	TOR OF FINANCE AND
THE 3RD PARTY AUDITORS PRIOR TO FILING.	
FORM 990, PART VI, SECTION B, LINE 12C: THE FOUNDATION RE	GULARLY AND
CONSISTENTLY MONITORS AND ENFORCES COMPLIANCE WITH THE CO	NFLICT OF INTEREST
POLICY. AT EACH BOARD MEETING, THE BOARD MEMBERS ARE REQ	UIRED TO UPDATE
THEIR CONFLICT OF INTEREST STATEMENT. THE SIGNED STATEMEN	NTS ARE ATTACHED
TO THE BOARD MINUTES AND FILED. BOARD MEMBERS ABSTAIN FRO	OM VOTING ON ANY
ISSUES RELATED TO ORGANIZATIONS AND GRANTS TO WHICH THEY	HAVE AN
AFFILIATION.	
FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION R	EPLIES TO ANY
REQUEST FOR INFORMATION. ITS TAX RETURN IS AVAILABLE FOR	VIEWING VIA
GUIDESTAR, AMONG OTHER SITES THAT COMPILE SUCH INFORMATION	N •
	
	

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

Related Organizations and Unrelated Partnerships

2012 Open to Public Inspection

OMB No 1545-0047

Employer identification number, 20-5490000Direct controlling entity Identification of Related Tax-Exempt Organizations (Complete If the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.) End-of-year assets **e** ► Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37. Total income 9 ▶ See separate instructions. Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.) Legal domicile (state or foreign country) ▶ Attach to Form 990. Primary activity € SEE FORWARD FUND, INC. Name, address, and EIN (if applicable) of disregarded entity Name of the organization Parti Part #

(g) Section 512(b)(13) ŝ × controlled entity? Yes Direct controlling N/A status (if section Public charity 501(c)(3)) LINE 7 Exempt Code section 501(C)(3) চ Legal domicile (state or foreign country) DELAWARE ENV, SOCIAL & INT'L POLICY EDUCATION ON MATTERS OF Primary activity RESEARCH AND PUBLIC Name, address, and EIN SOLIDAGO FOUNDATION - 20-2963670 of related organization .50 MAIN STREET SUITE 24 NORTHAMPTON, MA 01060

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

232161 12-10-12 LHA

Schedule R (Form 990) 2012 SEE FORWARD FUND, INC.

Page 2

20-5490000

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity		(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) of Disproportion- ear ate allocations? Yes No	oortion- attions?	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	General or managing street partner?	ar or Perc	General or Percentage managing ownership yes No
									1				
					:								
part iv Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)	janizations Taxable a poration or trust during	is a Corpoig the tax)	ration or Trust (Corear.)	omplete if th	e organization a	answered "Ye	s" to Form 9	90, Part IV, II	ne 34 be	cause it had	d one or r	more rel	ated
(a) Name, address, and EIN of related organization	Z c	Primi	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)		(f) Share of total income	e end	(g) Share of Fend-of-year assets	(h) Percentage ownership		(i) Section 512(b)(13) controlled entity?
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Page 3

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Schedule R (Form 990) 2012 SEE FORWARD FUND, INC.

Page 4

Part Vi Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

(d) (e) (e) (f) (f) (g) (h) (h) (h) (h) (h) (h) (h) (h) (h) (h				
(b) (c) Primary activity Legal domicile (state or foreign country)				
(a) Name, address, and EIN of entity				

Schedule R	(Form 990) 2012	SEE	FORWARD	FUND,	INC.		20-5490000	Page 5
Part VII	(Form 990) 2012 Supplemental Info	rmation		•				
	Complete this part to pre	ovide addi	tional informatio	n for respon	ises to questions on	Schedule R (see instru	ctions)	
	osinploto tino part to pr	oride dadi		11101100001	isos to questions on	Concadie 11 (See Institut	5110113)	
								
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