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Department of the Treasury Internal Revenue Service

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

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

OMB No. 1545-0047

Open to Public ...

Α	For the	2012 calendar year, or tax year beginning and en	n <u>ding</u>						
В	Check if applicable	GREENTOWNLADS.ORG, INC (FORMERLI	_	D Employer Identific	cation number				
	Addre	GREENTOWN LABS, INC.							
	Name chang	Doing Business As		45-4788246					
	tnittat return Termir	Number and street (or P O box if mail is not delivered to street address)	oom/suite	E Telephone number 617-646-9466					
Ϊ	— ated Amen			G Gross receipts \$	218,304.				
F	return Applic tton			H(a) is this a group re					
ــا	tion tion	F Name and address of principal officer: JASON HANNA		for affiliates?	Yes X No				
		3347 SUMMER ST BOSTON MA 02110							
			52/		list (see instructions)				
		e: ► HTTP://GREENTOWNLABS.ORG	1	H(c) Group exemption					
		organization X Corporation	IL Year	of formation. ZOIII	State of legal domicile MA				
		Summary TO OPI	ED AME	FOD CHADIM	ADT D				
9	1	Bnefly describe the organization's mission or most significant activities: TO OPI EDUCATIONAL, SCIENTIFIC AND CULTURAL PURPO	OCEC	TNCTUDING	NDLE,				
Activities & Governance									
ē	í	Check this box if the organization discontinued its operations or dispose	ea or more	than 25% of its net as	sets. 5				
ဓ္ဗ	1	Number of voting members of the governing body (Part VI, line 1a)	, ,	3	5				
প্ত		Number of Independent voting members of the governing body (Part VI, line 1b)	• ••	. 4					
iës		Total number of individuals employed in calendar year 2012 (Part V, line 2a)		. 5					
Ξ	1	Total number of volunteers (estimate if necessary) ,		6	<u>_</u>				
AC	,	Total unrelated business revenue from Part VIII, column (C), line 12							
	Ь	Net unrelated business taxable income from Form 990-T, line 34	 -		0.				
	}		<u> </u>	Prior Year	Current Year				
ē	8	Contributions and grants (Part VIII, line 1h)	<u> </u>	25,000.	66,220.				
ě	9	Program service revenue (Part VIII, line 2g)	ļ	80,558.	128,109.				
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	<u> </u>	0.	0.				
_	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0.	-1,931.				
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	<u> </u>	105,558.	192,398.				
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	.	0.					
		Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.				
8	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) $$		0.	0.				
Expenses	16a	Professional fundralsing fees (Part IX, column (A), line 11e)	2	0.	0.				
×	Ь	Total fundraising expenses (Part IX, column (D), line 25)	<u>0. 🏥</u>		#45 Mg WN 1744				
ш	1 17	Other expenses (Part IX, column (A), lines 11a·1/d, 11f·24e)	<u> </u>	0.	190,204.				
	18	Total expenses. Add lines 13-17 (must equal Part IX, column @ thre 25)		0.	190,204.				
	19	Revenue less expenses. Subtract line 18 from line 12		105,558.	2,194.				
sets or		Si SED	Be.	ginning of Current Year	End of Year				
. Set	20	Total assets (Part X, line 16)		15,577.	21,321.				
Net As	21	Total liabilities (Part X, line 26)		9,107.	12,657.				
2.	22	Net assets or fund balances. Subtract line 21 from line 20	<u>L_</u>	6,470.	8,664.				
		Signature Block ;							
		lties of perjury, I declare that I have examined this return, including accompanying schedules a			y knowledge and belief, it is				
true	, correc	t, and complete. Declaration of preparer (other than officer) is based on all information of whic	ch preparer	has any knowledge					
		Law Car							
Sig	ın	Signature of officer	حلہ مہ	Date	1-017				
He	re	Jason / Etail Clerk+ Dir	ecio	1 1/16	12913				
		Type or print name and title		Nata					
		Print/Type preparer's name Preparer's signature Preparer's signature	{	9-16-13 Check C	PTIN				
Pai		Peter J Luzu CPT petil 2							
	parer	Time	& LEN	ZA Firm's EIN	04-3243262				
ปรย	Only	Firm's address 275 TURNPIKE ST			01 001 6400				
		CANTON, MA 02021		Phone no. /	81-821-6400				
		S discuss this return with the preparer shown above? (see instructions)		<u> </u>	. X Yes No				
232	001 12-1	0-12 LHA For Paperwork Reduction Act Notice, see the separate instruction		NTO CONTRACTOR	Form 990 (2012)				
	S	EE SCHEDULE O FOR ORGANIZATION MISSION STA	WITHE	NT CONTINUA	TION				

GREENTOWNLABS.ORG, INC (FORMERLY 45-4788246 Page 2 GREENTOWN LABS, INC. Part III Statement of Program Service Accomplishments X Check if Schedule O contains a response to any question in this Part III Briefly describe the organization's mission: TO OPERATE FOR CHARITABLE, EDUCATIONAL, SCIENTIFIC AND CULTURAL PURPOSES. INCLUDING BUT NOT LIMITED TO CREATING AN INCUBATOR SPACE FOR START-UP COMPANIES IN THE CLEAN TECHNOLOGY FIELD AND TO CARRY ON ANY OTHER CHARITABLE, EDUCATIONAL OR CULTURAL (WITHIN THE MEANING OF Did the organization undertake any significant program services during the year which were not listed on Yes X No the prior Form 990 or 990-EZ? If "Yes," describe these new services on Schedule O. Yes X No Did the organization cease conducting, or make significant changes in how it conducts, any program services? If "Yes," describe these changes on Schedule O. Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported. 128,109.) 175,809 including grants of \$) (Revenue \$) (Expenses \$ THE ORGANIZATION CREATED FOR EDUCATIONAL SCIENTIFIC AND CULTURAL PURPOSES AN INCUBATOR SPACE FOR START UP COMPANIES IN THE CLEAN TECHNOLOGY FIELD AS OUTLINED IN THEIR MISSION STATEMENT. THE ORGANIZATION COLLECTED \$128,109 FROM ITS MEMBERS AND INCURRED \$175,809 TO OPERATE THE FACILITY. ______) (Revenue \$ ____ (Code) (Expenses \$ ___ ______) (Revenue \$ (Code ______) (Expenses \$ ___ _____ including grants of \$

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

4e Total program service expenses

175,809.

45-4788246 GREENTOWN LABS, INC. Page 3 Part IV Checklist of Required Schedules Yes No is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? 1 If "Yes," complete Schedule A ... X 2 2 Is the organization required to complete Schedule B, Schedule of Contributors? 3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for Х 3 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 5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or X similar amounts as defined in Revenue Procedure 98-197 If "Yes," complete Schedule C, Part III Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to Х provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I в 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 Х Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Х 8 Schedule D, Part III 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? Х If "Yes," complete Schedule D, Part IV 10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent Х 10 endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable. a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, X 11a b Did the organization report an amount for investments other securities in Part X, line 12 that is 5% or more of its total 11b Х assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total Х assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 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 Х 11d Part X, line 16? If "Yes," complete Schedule D, Part IX X e 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 Х the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 11f 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete X Schedule D. Parts XI and XII 12a b Was the organization included in consolidated, independent audited financial statements for the tax year? Х If "Yes," and if the organization answered "No" to line 12s, 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 Х 14a Did the organization maintain an office, employees, or agents outside of the United States? 14a 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 X 14b or more? If "Yes," complete Schedule F, Parts I and IV

located outside the United States? If "Yes," complete Schedule F, Parts III and IV Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, 17

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals

15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization

column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I . . Did the organization report more than \$15,000 total of fundralsing event gross income and contributions on Part VIII, lines 18 1c and 8a? If "Yes," complete Schedule G, Part II

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

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

or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV

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

X

X

X

X

X

15

16

17

18

19

20a 20b

16

	*** Officerular of Heddings Seriestics formation		- I	·
~4	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the		Yes	No
21	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		x
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,	<u> </u>		
~~	A CONTRACTOR OF THE CONTRACTOR	22		Х
23	Column (A), line 27 If "Yes," complete Schedule I, Parts I and III Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			<u> </u>
20	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete		i i	ĺ
	Schedule J	23		Х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25	24a		Х
ь	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	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		
d	Did the organization act as an "on behalf of" Issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
ь	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		İ	i
	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			
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			1
	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		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV	, , , ,		,
	instructions for applicable filing thresholds, conditions, and exceptions):	Κ.,	()	٠. ٠
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
þ	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
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		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			v
	contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations?			v
	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			v
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	22		v
24	sections 301.7701-2 and 301.7701-37 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	34	:	х
250	Part V, line 1 Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	-	X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	000		
U	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	505		
-	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		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	x	

GREENTOWNLABS.ORG, INC (FORMERLY GREENTOWN LABS, INC. Part V Statements Regarding Other IRS Filings and Tax Compliance

march 5	Check if Schedule O contains a response to any question in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		á.	
			,	É
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			-
	(gambling) winnings to prize winners?	1c		Ĺ
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	,		ſ.
	filed for the calendar year ending with or within the year covered by this return		*	
Ь	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	7	,	1 .
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		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 authority over, a			1
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country:			1
	See instructions for filling requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.	•		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
C	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
ва	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every sollcitation an express statement that such contributions or gifts			1
	were not tax deductible?	<u>6b</u>	*.*	ļ
7	Organizations that may receive deductible contributions under section 170(c).	3.	,	
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X
ь	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		 -
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	l _		l .
	to file Form 8282?	7c		X
				х
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e 7f		X
1	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			X
9	If the organization received a contribution of qualified intellectual property, dld the organization file Form 8899 as required? If the organization received a contribution of cars, boats, airplanes, or other vehicles, dld the organization file a Form 1098-C?	7g 7h	 	X
h 8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting	· · · · · · · · · · · · · · · · · · ·	<u> </u>	
•	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8	Ì	1
9	Sponsoring organizations maintaining donor advised funds.	ļ		-
а	Did the organization make any taxable distributions under section 4966?	9a	Ì `	İ
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
ь	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	1	, `	
11	Section 501(c)(12) organizations. Enter:			3
а	Gross income from members or shareholders] (;	
ь	Gross income from other sources (Do not net amounts due or paid to other sources against		. ,	1 × 1
	amounts due or received from them.)	ļ.,		· · ·
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	<u> </u>	
ь	If "Yes," enter the amount of tax-exempt interest received or accrued during the year . 12b	ļ``	4.	h ^ ^
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
a	is the organization licensed to issue qualified health plans in more than one state?	13a	ļ	ļ
	Note. See the instructions for additional information the organization must report on Schedule O.	[`.	1	
b	Enter the amount of reserves the organization is required to maintain by the states in which the	[
	organization is licensed to issue qualified health plans		0.1	5.5
C	Enter the amount of reserves on hand	<u> </u>	<u> </u>	<u> </u>
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	-	X
<u>b</u>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	146		100:5:
		Forn	ายยบ	(2012)

GREENTOWNLABS.ORG, INC (FORMERLY GREENTOWN LABS, INC.

45-4788246

Form 990 (2012) GREENTOWN LABS, INC. 45-4788246 Page Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response Page 6 to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions

	Check if Schedule O contains a response to any question in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	;	> "	, , , ,
	If there are material differences in voting rights among members of the governing body, or if the governing]		; ^ <
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.	~;.	; ;	```
ь	Enter the number of voting members included in line 1a, above, who are independent	; ()	5.	()
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	7 } ;	`.	`
	officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, or trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a		Х
ь	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following	₹ N	.,,	7
а	The governing body?	8a	X	}
ь	Each committee with authority to act on behalf of the governing body?	8ь	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
Ь	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			!
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	200	% .	4 (
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		X
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	ın Schedule O how this was done	12c		
13	Did the organization have a written whistleblower policy?	13		X
14	Did the organization have a written document retention and destruction policy?	14		X
15	Did the process for determining compensation of the following persons include a review and approval by independent	1	,	
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	'		
а	The organization's CEO, Executive Director, or top management official	15a		X
b	Other officers or key employees of the organization	15b		Х
40	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		93	
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	, ;	3	1
	taxable entity during the year?	16a	سكسلسا	X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	1		
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's	1		
<u></u>	exempt status with respect to such arrangements?	16b		
	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 (Section 501(c)(3)s only)	avallab	ie	
	for public inspection. Indicate how you made these available. Check all that apply. Own website Another's website X Upon request Other (explain in Schedule O)			
40				
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, are statements available to the multiple during the tay year.	id finan	icial	
20	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 organiza $JASON\ HANNA\ -\ 617-646-9466$	tion.		
	337 SUMMER ST, BOSTON, MA 02210			

GREENTOWNLABS.ORG, INC (FORMERLY

GREENTOWN LABS, INC.

45-4788246

Form 990 (2012) Reft 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

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

- 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 employees.'
- 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.

X Check this box if neither the organiza (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)				than dispos	one n an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(list any hours for related organizations below line)	individual trustee or director	institutional trustee	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) EMILY REICHERT	10.00									
PRESIDENT/DIRECTOR		X		X				0.	0.	0
(2) JEREMY PITTS	10.00									
TREASURER/DIRECTOR		X		X		Ш		0.	0.	0
(3) JASON ETHIER	10.00							_		
CLERK/DIRECTOR		X		X		Ш		0.	0.	0
(4) JASON HANNA	10.00									-
BOARD CHAIR/DIRECTOR		Х	<u></u>	Х	Ш.			0.	0.	0
(5) ADAM REIN	10.00									
DIRECTOR		X		_	L		ļ	0.	0.	0
		_			_					
		-	-	-	-					

Part VII Section A. Officers, Directors, Trus (A) Name and title	(B) Average hours per week (list any	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)			than is bot	one h an	(D) Reportable compensation from the	(E) Reportable compensation from related organizations		other		
	hours for related organizations below Ilne)	Individual trustee or director	Institutional pustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MIS		from the organization and relate organization	e Ion e d
		<u> </u>	_			_						
		_	 							-		
		-										
			_									
1b Sub-total								0.		0.		0.
c Total from continuation sheets to Part V d Total (add lines 1b and 1c)	II, Section A					>		0.		0.		0.
2 Total number of individuals (including but r compensation from the organization	not limited to th	ose	liste	ed al	bove	e) wi	10 re	eceived more than \$100	,000 of reportabl	e 	Yes	0
3 Did the organization list any former officer line 1a? If "Yes," complete Schedule J for s	such individual										3	No X
 For any individual listed on line 1a, is the sign and related organizations greater than \$15 Did any person listed on line 1a receive or 	0,000? If "Yes,	" co	mple	ete S	Sche	eduk) J	or such individual .			4	Х
rendered to the organization? If "Yes," con Section B. Independent Contractors	•				_						5	X
Complete this table for your five highest or the organization. Report compensation for	•	•								pensat	on from	
(A) Name and business	address	N	INC	<u> </u>				(B) Description of s	ervices	Co	(C) mpensation	n
							_					
							-					
			-				\dashv			<u>-</u>	<u> </u>	
			, <u>-</u>				+					
2 Total number of independent contractors (including but n	ot III	mite	d to	tho	se li:	sted	above) who received m	ore than	37/17	7. 7. 1.	

			Check if Schedule O cont	ains a response		n 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
Contributions, Gifts, Grants and Other Similar Amounts	•	b c d e f		ts, and	66,220.				
<u> </u>			Noncash contributions included in lines						33.37.57
9 2		_	Total. Add lines 1a-1f		•	66,220.	2.5 33370	$\mathbb{N}^{(Q_{n+1})}$	\ <u>`</u>
	2	a b	TENANT COMPANY	FEES	Business Code 531120	128,109.	128,109.	***	
Program Service Revenue	,	c d e	All_ab_						
_		T ~	All other program service revertoral. Add lines 2a:2f	enue		128,109.	,, ,,	. ,, ,	
	3 4 5		Investment income (including other similar amounts) Income from investment of tal Royalties	dividends, interes	est, and proceeds				
				(i) Real	(ii) Personal	ŀ			
		b	Gross rents Less: rental expenses Rental income or (loss)						
			Net rental income or (loss)		<u> </u>			0.00	
		b	Gross amount from sales of assets other than inventory Less: cost or other basis and sales expenses Gain or (loss) Net gain or (loss)	(i) Securities	(ii) Other				
Other Revenue	8	a	Gross income from fundraisin including \$ contributions reported on line Part IV, line 18 Less: direct expenses	of					
δ			Net income or (loss) from fund	•	. ▶	-1,931.	1		-1,931
	9	a b	Gross income from gaming at Part IV, line 19 Less: direct expenses	ctivities. See a					
	10	a	Net income or (loss) from gan Gross sales of inventory, less and allowances	returns		13. 33.53 13. 33.53			,
			Net income or (loss) from sale	es of inventory		<u></u>		ļ	1
			Miscellaneous Revenu	ne	Business Code		W 2 ()	F	
		а b с							
		d	All other revenue		L	ļ	The ax is suite an second	 	
23200 12-10	12	e	Total. Add lines 11a-11d Total revenue. See instructions		>	192,398.	128,109		-1,931 Form 990 (2012

Porm 990 (2012) GREENTOWN LABS
Part IX Statement of Functional Expenses

<u> </u>	Check if Schedule O contains a respo			ompiete column (ry.	
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part Vill.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and		•		35 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5
	organizations in the United States. See Part IV, line 21				
2	Grants and other assistance to individuals in			Washing St. 119	
	the United States. See Part IV, line 22				30034400
3	Grants and other assistance to governments,				Section Section 1
	organizations, and individuals outside the				***
	United States. See Part IV, lines 15 and 16			<u> </u>	
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
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				
8	Pension plan accruals and contributions (include				
_	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes		-		
11	Fees for services (non-employees): Management	25,000.	25,000.		
a	Legal	23,000.	2370001		
b	Accounting				
4	Lobbying				
	Professional fundraising services See Part IV, line 17		77.73 7 A A O S 7	2777 77738 22	
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,				
_	column (A) amount, list line 11g expenses on Sch O)				
12	Advertising and promotion				
13	Office expenses	2,153.		2,153.	
14	Information technology				
15	Royalties		- · · · · · · · · · · · · · · · · · · ·		
16	Occupancy .	138,451.	138,451.		
17	Travel		·-··		
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates Depreciation, depletion, and amortization	1,265.	1,265.		
22	Insurance	1,203.	1,203.		
23 24	Other expenses Itemize expenses not covered	*,			· · · · · · · · · · · · · · · · · · ·
24	above (List miscellaneous expenses in line 24e If line	300 300 000 300 300		` ,	1 1 1
	24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				2.2
а	TELECOMMUNICATIONS	11,093.	11,093.		
b	EVENTS	6,574.		6,574.	
c	SECURITY	2,375.		2,375.	
d	SUPPLIES	1,617.		1,617.	
е	All other expenses	1,676.		1,676.	
25	Total functional expenses. Add lines 1 through 24e	190,204.	175,809.	14,395.	0.
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 It following SOP 98-2 (ASC 958-720)				Form 990 (2012)

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		7,458.	1	3,247
2	Savings and temporary cash investments			2	
3	Pledges and grants receivable, net			3	
4	Accounts receivable, net		4		
5	Loans and other receivables from current and fo	ormer officers, directors,			2
	trustees, key employees, and highest compens		34	₹7 × 1 × 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
1	Part II of Schedule L	, ,	5	j	
6	Loans and other receivables from other disqual		1.	1	
•	section 4958(f)(1)), persons described in section				
1	employers and sponsoring organizations of sec	9 100 200	``	1	
				6	1 ' ' '
١	employees' beneficiary organizations (see instr)		-	7	
7	Notes and loans receivable, net		•	 	
8	Inventories for sale or use			8	
9	Prepaid expenses and deferred charges		20.2	9	
10a	Land, buildings, and equipment: cost or other	20.075	, []		ľ
1	basis. Complete Part VI of Schedule D	10a 20,077 10b 2,003	<u></u>		10 074
Ь	Less: accumulated depreciation	10b 2,003	8,119.	10c	18,074
11	Investments · publicly traded securities			11	
12	Investments · other securities. See Part IV, line			12	
13	Investments - program-related. See Part IV, line	11		13	
14	Intangible assets			14	
15	Other assets. See Part IV, line 11			15	
16	Total assets. Add lines 1 through 15 (must equ	al line 34)	15,577.	16	21,321
17	Accounts payable and accrued expenses			17	
18	Grants payable			18	<u> </u>
19	Deferred revenue			19	
20	Tax-exempt bond liabilities			20	
21	Escrow or custodial account liability. Complete	Part IV of Schedule D		21	
22	Loans and other payables to current and forme			1	*
	key employees, highest compensated employe		132 (13)		,
	Complete Part II of Schedule L	oo, and and dealine paragraph		22	
23	Secured mortgages and notes payable to unrel	ated third parties		23	
24				24	
1 -	Unsecured notes and loans payable to unrelate			27	
25	Other liabilities (including federal income tax, pa				
	parties, and other liabilities not included on line	s 17-24). Complete Part A of	9,107	05	12,657
	Schedule D		9,107		12,657
26	Total liabilities. Add lines 17 through 25	<u> </u>		20	12,037
	Organizations that follow SFAS 117 (ASC 95)	••			Ì
1	complete lines 27 through 29, and lines 33 ar	nd 34.	* * * * * * * * * * * * * * * * * * * *		,
27	Unrestricted net assets			27	
28	Temporarily restricted net assets		28	 	
29	Permanently restricted net assets .	٠ .		29	
	Organizations that do not follow SFAS 117 (A	NSC 958), check here $\triangleright LX$		1 :	
	and complete lines 30 through 34.			1 1	
30	Capital stock or trust principal, or current funds		0	30	<u> </u>
31	Paid-in or capital surplus, or land, building, or e	quipment fund .	0	+	C
32	Retained earnings, endowment, accumulated in	ncome, or other funds	6,470	_	8,664
33	Total net assets or fund balances		6,470		8,664
34	Total liabilities and net assets/fund balances		15,577	34	21,321

	GREENTOWNLABS.ORG, INC (FORMERLY				
Form	990 (2012) GREENTOWN LABS, INC.	45-478	<u>8246</u>	Pa	ge 12
Pa	TXI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI	· · · · · · · · · · · · · · · · · · ·			
		1 1			
1	Total revenue (must equal Part VIII, column (A), line 12)	1		2,3	
2	Total expenses (must equal Part IX, column (A), line 25)	2			04.
3	Revenue less expenses. Subtract line 2 from line 1	3			94.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		6,4	70.
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7	_		
8	Prior period adjustments	В			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				~ .
	column (B))	10		8,6	64.
Pa	TIXII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				No
			r	Yes	NO
1	Accounting method used to prepare the Form 990: X Cash Accrual Other		ļ		
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	: O.	ļ _		.,
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X_
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewe	d on a	1	(,)	
	separate basis, consolidated basis, or both:				13.5
	Separate basis Consolidated basis Both consolidated and separate basis			CO 2	
b	Were the organization's financial statements audited by an independent accountant?		2b		X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separa	te basis,	1.		ł
	consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	ne audit,		`	
	review, or compilation of its financial statements and selection of an independent accountant?		2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Audit	1	1	v
	Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi	ared audit			İ

Form **990** (2012)

or audits, explain why in Schedule O and describe any steps taken to undergo such audits

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

2012

Open to Public.
Inspection

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

See separate instructions.

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.

		t have NOT filed Form 5768 (election			
Sectio	n 501(c)(4), (5), or (6) organiz rganization GREENT(OWNLABS.ORG, INC (oyer identification number $45-4788246$
Part I-A	Complete if the or	OWN LABS, INC. rganization is exempt under	r section 501(c	c) or is a section 527 or	rganization.
2 Politic 3 Volum	cal expenditures teer hours	nization's direct and indirect politica			
Part I-I		rganization is exempt unde			
	•	x incurred by the organization unde x incurred by organization manage:		▶ \$ 55 ▶ \$	
3 If the 4a Was	organization incurred a sect a correction made? s,* describe in Part IV.	ion 4955 tax, did it file Form 4720 fo	or this year?		Yes No
Part I-C	· · · · · · · · · · · · · · · · · · ·	ganization is exempt unde			c)(3).
		ed by the filing organization for sec			
	• •	anization's funds contributed to oth	er organizations for		
	pt function activities exempt function expenditure		d on Form 1120-PC	> \$	
	7b		3 01. 1 01 1 123 1 0	▶\$	
5 Enter made contr	payments. For each organizations received that were particularly	n 1120-POL for this year? employer identification number (EIN cation listed, enter the amount paid promptly and directly delivered to a if additional space is needed, provi	from the filing organ separate political or	nization's funds. Also enter th rganization, such as a separa	e amount of political
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0

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

Schedule C (Form 990 or 990-EZ) 2012

GREENTOWNLABS.ORG, INC (FORMERLY Schedule C (Form 990 or 990-EZ) 2012 GREENTOWN LABS, INC. 45-4788246 Page 2 Part I-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)). if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures). if the filing organization checked box A and "limited control" provisions apply. B Check ▶ (a) Filing (b) Affiliated group Limits on Lobbying Expenditures organization's totals (The term "expenditures" means amounts paid or incurred.) totals 1 a Total lobbying expenditures to influence public opinion (grass roots lobbying) b Total lobbying expenditures to influence a legislative body (direct lobbying) c Total lobbying expenditures (add lines 1a and 1b) d Other exempt purpose expenditures e Total exempt purpose expenditures (add lines 1c and 1d) f Lobbying nontaxable amount. Enter the amount from the following table in both columns If the amount on line 1e, column (a) or (b) is: The lobbying nontaxable amount is: Not over \$500,000 20% of the amount on line 1e. \$100,000 plus 15% of the excess over \$500,000. Over \$500,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,500,000 \$175,000 plus 10% of the excess over \$1,000,000 \$225,000 plus 5% of the excess over \$1,500,000. Over \$1,500,000 but not over \$17,000,000 Over \$17,000,000 \$1,000,000. g Grassroots nontaxable amount (enter 25% of line 1f) h Subtract line 1g from line 1a. If zero or less, enter .0. i Subtract line 1f from line 1c. If zero or less, enter -0j if there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 Yes reporting section 4911 tax for this year? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a sectlon 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.) **Lobbying Expenditures During 4-Year Averaging Period** Calendar year (d) 2012 (e) Total (a) 2009 (b) 2010 (c) 2011 (or fiscal year beginning in) 2a Lobbying nontaxable amount **b** Lobbying ceiling amount (150% of line 2a, column(e)) c Total lobbying expenditures

Schedule C (Form 990 or 990-EZ) 2012

d Græsroots nontaxable amount
 Græsroots ceiling amount
 (150% of line 2d, column (e))

f Grassroots lobbying expenditures

Schedule C (Form 990 or 990 EZ) 2012 GREENTOWN LABS, INC. 45-478824 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 each "Yes," response to lines 1a through 1ı below, provide ın Part IV a detailed description	(a)		(b)	
of the 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:				
a Volunteers?	[]	,	1	,
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			1.:	. .
c Media advertisements?				
·			 	
d Mailings to members, legislators, or the public?		_		
e Publications, or published or broadcast statements?	1			
f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body?	-			
 g Ulrect 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)?		3777 S.S.	<u> </u>	
b If "Yes," enter the amount of any tax incurred under section 4912	1.7	1.3		
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912	4684		 	
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Part III-A: Complete If the organization is exempt under section 501(c)(4), sec	tion 501(c)	(5), or se	ection	<u> </u>
501(c)(6).				
			Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?		1		X
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2	X	
3 Did the organization agree to carry over lobbying and political expenditures from the prior year? .		3		X
answered "Yes." 1 Dues, assessments and similar amounts from members		1		
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures)	itical			
expenses for which the section 527(f) tax was paid).				
a Current year		. 2a	ļ <u>.</u>	
b Carryover from last year , , , , , , , , , , , , , , , , , , ,		. 2b	<u> </u>	
c Total .		2c		
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3	<u> </u>	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the	excess			
does the organization agree to carryover to the reasonable estimate of nondeductible lobbying an	d political			
expenditure next year?		4	<u> </u>	
Taxable amount of lobbying and political expenditures (see instructions)		5		
Part IV Supplemental Information				
Complete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5;	Part II-A (affili	ated group	list); Part II	A, line 2
and Part II-B, line 1. Also, complete this part for any additional information.				
	·			

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

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

OMB No 1545-0047 Open to Public Inspection .:

Name of the organization

GREENTOWNLABS.ORG, INC (FORMERLY GREENTOWN LABS, INC.

Employer identification number 45-4788246

Pa	Organizations Maintaining Donor Advise	ed Funds or Other Similar Funds or	r Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, lin		
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advised	funds
	are the organization's property, subject to the organization's	exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor a	advisors in writing that grant funds can be use	ed only
	for charitable purposes and not for the benefit of the donor	or donor advisor, or for any other purpose cor	nferring
	impermissible private benefit?		Yes No
Pa	Conservation Easements. Complete if the or		IV, line 7.
1	Purpose(s) of conservation easements held by the organizat	· -	
•	Preservation of land for public use (e.g., recreation or		ically important land area
	Protection of natural habitat	Preservation of a certified	
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form of a	conservation easement on the last
_	day of the tax year.		
	day of the tax your.		Held at the End of the Tax Yea
а	Total number of conservation easements		2a
, ,	Total acreage restricted by conservation easements		2b
•	Number of conservation easements on a certified historic str	ructure included in (a)	2c
C	Number of conservation easements included in (c) acquired		
d		alter 0/1/700; and not on a matoric structure	2d
2	listed in the National Register Number of conservation easements modified, transferred, re	looped extinguished or terminated by the or	· · · · · · · · · · · · · · · · · · ·
3	year	neased, extinguished, or terminated by the or	ganization coming the tax
4	Number of states where property subject to conservation ea	sement is legated	
5	Does the organization have a written policy regarding the pe		
3			Yes No
	violations, and enforcement of the conservation easements in Staff and volunteer hours devoted to monitoring, inspecting,		. —
6		_	
7	Amount of expenses incurred in monitoring, inspecting, and		· · · · · · · · · · · · · · · · · · ·
8	Does each conservation easement reported on line 2(d) about	ve satisfy the requirements of section 170(n)(
^	and section 170(h)(4)(B)(ii)?		—
9	In Part XIII, describe how the organization reports conservat	•	
	include, if applicable, the text of the footnote to the organiza	tion's financial statements that describes the	organization's accounting for
Sin	conservation easements. Till: Organizations Maintaining Collections o	f Art. Historical Transcrups, or Othe	- Similar Assats
Fa	Organizations Maintaining Collections o Complete if the organization answered 'Yes' to Form		er Similar Assets.
1a	If the organization elected, as permitted under SFAS 116 (AS		
	historical treasures, or other similar assets held for public ex		of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that descr		
Þ	If the organization elected, as permitted under SFAS 116 (AS		
	treasures, or other similar assets held for public exhibition, e	ducation, or research in furtherance of public	service, provide the following amount
	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 tre	asures, or other similar assets for financial ga	un, provide
	the following amounts required to be reported under SFAS 1	16 (ASC 958) relating to these items:	
а	Revenues included in Form 990, Part VIII, line 1		▶ \$
b	Assets included in Form 990, Part X		▶ \$

GREENTOWNLABS.ORG, INC (FORMERLY

Sche		WN LABS, I				45-47		
Pai	作机 Organizations Maintaining C	Collections of A	rt, Historica	l Treasures, or	Other S	<u>Similar Asse</u>	ts(continu	ed)
3	Using the organization's acquisition, accessi	ion, and other record	ds, check any o	the following that a	re a signif	icant use of its	collection	items
	(check all that apply):							
8	Public exhibition	d	Loan o	r exchange programs	s			
b	Scholarly research	e	Other_	 . — — .				
C	Preservation for future generations							
4	Provide a description of the organization's co	ollections and explai	n how they furt	her the organization'	s exempt	purpose in Par	t XIII.	
5	During the year, did the organization solicit of	or receive donations	of art, historical	treasures, or other s	simılar as:	sets	_	
	to be sold to raise funds rather than to be ma	aintained as part of t	the organization	's collection?			Yes	No_
Par	★₩ Escrow and Custodial Arran		ete if the organi	zation answered "Ye	s' to For	m 990, Part IV, I	ıne 9, or	
	reported an amount on Form 990, Pa							
1a	Is the organization an agent, trustee, custod	ian or other intermed	diary for contrib	utions or other asset	ts not incl	luded	,	
	on Form 990, Part X?			•		ـــــــــــــــــــــــــــــــــــ	Yes	L No
þ	If 'Yes,' explain the arrangement in Part XIII	and complete the fo	llowing table:		ſ			
							Amount	
	Beginning balance					1c		
	Additions during the year ,					1d		
e	Distributions during the year				1			
f	Ending balance					1f	7	
	Did the organization include an amount on F					Ĺ	」 Yes	⊢ No
	If 'Yes,' explain the arrangement in Part XIII.							
Pa	tt V : Endowment Funds. Complete							
_		(a) Current year	(b) Prior yea	ar (c) Two years b	ack (d)	Three years back	(e) Four y	ears back
	Beginning of year balance						 	
ъ	Contributions							
C	Net investment earnings, gains, and losses							
d	Grants or scholarships	ļ	 					
e	Other expenditures for facilities			,			ĺ	
	and programs	<u> </u>					ļ. <u> </u>	
	Administrative expenses	<u> </u>			-+			
. ~	End of year balance			(-)) 5 -1			L	
2	Provide the estimated percentage of the cur	rent year end balant		nn (a)) neid as:				
	Board designated or quasi-endowment Permanent endowment P	%	%					
-		% %						
C	Temporarily restricted endowment ► The percentages in lines 2a, 2b, and 2c shot							
7-	Are there endowment funds not in the posses		ration that are h	old and administare	d for the	racelzation		
Ja	by:	sssion of the organiz	ation that are in	eid and administered	u ioi tiie t	organization	Ī,	res No
							3a(i)	140
	### 1 4 4 T		• ••				3a(ii)	
h	If "Yes" to 3a(ii), are the related organizations						3b	
4	Describe in Part XIII the intended uses of the				• • •	•	700	
	rt:Vl∍ Land, Buildings, and Equipm							
t	Description of property	(a) Cost or o	other (b)	Cost or other	(c) Accu		(d) Book	value
		basis (investi	ment) b	asis (other)	depred	ciation	<u>-</u>	
_	Land .	<u> </u>						
	Buildings	ļ						
	Leasehold improvements	-						
	Equipment	·		20,077.		2 003	10	074
	Other					2,003.		,074.
<u>i ota</u>	I. Add lines 1a through 1e. (Column (d) must e	equal Form 990, Part	x, column (B),	iine 10(c).)			7.8	,074.

GREENTOWNLABS.ORG, INC (FORMERLY 45-4788246 Page 4 GREENTOWN LABS, INC. Schedule D (Form 990) 2012 Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Total revenue, gains, and other support per audited financial statements Amounts included on line 1 but not on Form 990, Part VIII, line 12: a Net unrealized gains on investments 2a b Donated services and use of facilities 2b 2c c Recoveries of prior year grants d Other (Describe in Part XIII.) 2đ e Add lines 2a through 2d 2e 3 Subtract line 2e from line 1 . . . 3 Amounts included on Form 990, Part VIII, line 12, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b **b** Other (Describe in Part XIII.) 40 c Add lines 4a and 4b Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities .. . 2b **b** Prior year adjustments 2c c Other losses . . 2d d Other (Describe in Part XIII) e Add lines 2a through 2d 2e Subtract line 2e from line 1 ... 3 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b 4a 4b b Other (Describe in Part XIII.) c Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) 5 Part XIII Supplemental Information Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

SCHEDULE G

(Form 990 or 990-EZ)

Name of the organization

Supplemental Information Regarding Fundraising or Gaming Activities

2012

Open To Public ?

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.

GREENTOWNLABS.ORG, INC (FORMERLY

A 5

Employer identification number

GREENTO	WN LABS, INC.				45-4/88	246														
Fundraising Activities.	Complete if the organization answ	ered "Y	'es" to	Form 990, Part IV, I	ine 17 Form 990-EZ	filers are not														
1 Indicate whether the organization rais a Mail solicitations b Internet and email solicitations c Phone solicitations d In-person solicitations 2 a Did the organization have a written of key employees listed in Form 990, P. b If "Yes," list the ten highest paid indicompensated at least \$5,000 by the	e Solicition f Solicition g Special r oral agreement with any individual art VII) or entity in connection with viduals or entities (fundraisers) pur	ation of ation of al fundra al (inclue profess	non-g gover alsing ding o ional f	overnment grants inment grants events fficers, directors, tru fundraising services?	stees or Yes															
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundralser have custody or control of contributions?		have custody or control of		fundralser have custody or control of		have custody or control of		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization								
		Yes	No																	
		1																		
		 																		
		-																		
F-4-1		1																		
Ist all states in which the organizatio or licensing.	n is registered or licensed to solicit	contrib	outions	s or has been notified	d it is exempt from re	egistration														
																				
	· · · · · · · · · · · · · · · · · · ·																			
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GREENTOWNLABS.ORG, INC (FORMERLY

Schedule G (Form 990 or 990-EZ) 2012 GREENTOWN LABS, INC.

232082 01-07-13

45-4788246 Page 2

Schedule G (Form 990 or 990-EZ) 2012

Part if Fundraising Events. Complete if the organization answered 'Yes' to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (b) Event #2 (c) Other events (a) Event #1 (d) Total events NONE HACKATHON (add col. (a) through SUSTAINABILI col. (c)) (event type) (event type) (total number) Revenue 23,975. 1 Gross receipts 23,975. 2 Less: Contributions 23,975. 23,975. 3 Gross Income (line 1 minus line 2) 4 Cash prizes 5 Noncash prizes Direct Expenses 6 Rent/facility costs 7 Food and beverages 8 Entertainment 25,906. 25,906. 9 Other direct expenses 25,906; 10 Direct expense summary. Add lines 4 through 9 in column (d) -1,931.11 Net income summary. Combine line 3, column (d), and line 10 Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. (b) Pull tabs/instant (d) Total gaming (add (a) Bingo (c) Other gaming Revenue bingo/progressive bingo col. (a) through col (c)) 1 Gross revenue 2 Cash prizes Direct Expenses 3 Noncash prizes 4 Rent/facility costs 5 Other direct expenses Yes Yes 6 Volunteer labor No 7 Direct expense summary. Add lines 2 through 5 in column (d) 8 Net gaming income summary. Combine line 1, column d, and line 7 9 Enter the state(s) in which the organization operates gaming activities: a is the organization licensed to operate gaming activities in each of these states? b If "No," explain: _ Yes 10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? b If "Yes," explain:

GREENTOWNLABS.ORG, INC (FORMERLY 45-4788246 Page 3 Schedule G (Form 990 or 990 EZ) 2012 GREENTOWN LABS, INC. 11 Does the organization operate gaming activities with nonmembers? 12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed Yes No to administer chantable gaming? 13 Indicate the percentage of gaming activity operated in: 13a a The organization's facility 13b b An outside facility 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records: Address > Yes No 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? b If 'Yes,' enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶\$ _____. c if "Yes," enter name and address of the third party: 16 Gaming manager information: Name Name Gaming manager compensation ▶ \$_____ Description of services provided ▶ Independent contractor Director/officer Employee 17 Mandatory distributions: a is the organization required under state law to make charitable distributions from the gaming proceeds to Yes No retain the state gaming license? b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year > \$ Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, Part IV lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).

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 Rublic Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

GREENTOWNLABS.ORG, INC (FORMERLY GREENTOWN LABS, INC.

Employer identification number 45-4788246

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
LIMITED TO CREATING AN INCUBATOR SPACE FOR START-UP COMPANIES IN THE
CLEAN TECHNOLOGY FIELD AND TO CARRY ON ANY OTHER CHARITABLE,
EDUCATIONAL OR CULTURAL (WITHIN THE MEANING OF SECTION 501 (C)(3))
ACTIVITY.
FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
SECTION 501 (C)(3)) ACTIVITY.
FORM 990, PART VI, SECTION B, LINE 11: A COPY OF THE 990 IS SENT TO THE
GOVERNING BODY FOR REVIEW PRIOR TO THE RETURN BEING SIGNED AND FILED. ALL
MEMBERS REVIEW THE RETURN AND ASK ANY QUESTIONS THEY MAY HAVE. ONCE ALL
QUESTIONS AND COMMENTS ARE SATISFIED, THE OFFICER WILL SIGN AND FILE THE
RETURN.
FORM 990, PART VI, SECTION C, LINE 19: THE ITEMS LISTED ON LINE 19 IF
APPLICABLE ARE MADE AVAILABLE TO THE GENERAL PUBLIC UPON REQUEST AND A COPY
OF THE 990 IS AVAILABLE AT THE STATES OFFICE AS PART OF THE MASSACHUSETTS
FORM PC.