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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 private foundations)

► Do not enter Social Security numbers on this form as it may be made public Information about Form 990 and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

<u>A</u>	For the 2	2013 calen	dar year, or ta	x year beginn	ing		, 201	3, and endi	ng					
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Form 990 (2013)

	GINDLIN EDUCATION	FOUNDATION	45-2	552544	Page
		vice Accomplishments			
		esponse or note to any line in this Part III			
_	be the organization's missi				
To educa society	te students and t	the general public on provid	ling for an environ	mentally	_safe_
2 Did the organ	zation undertake any significa	ant program services during the year which we	re not listed on the prior		
Form 990 or	990-EZ?			Yes	X N
•	ribe these new services on			-	—
_	nization cease conducting, or ribe these changes on Scho	or make significant changes in how it condu edule O.	icts, any program services?	Yes	X N
Section 501(c)(3) and 501(c)(4) organizatio	vice accomplishments for each of its three ons and section 4947(a)(1) trusts are required to any, for each program service reported.	largest program services, as r o report the amount of grants ar	measured by old allocations t	expenses o
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	n services. (Describe in Sch) (Revenue \$	\$	

Form 990 (2013) GREEN EDUCATION FOUNDATION Checklist of Required Schedules

	•		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		Х
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for 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		х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	5		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6		Х
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 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, VIII, 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, Part VI	11 a	Х	
!	b Did the organization report an amount for investments – other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII	11 b		Х
(c Did the organization report an amount for investments – program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII	11 c		Х
•	d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX	11 d		Х
•	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e	Х	
í	f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X	11 f		Х
12:	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, and XII	12a		Х
ŀ	b Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		X
14 a	a Did the organization maintain an office, employees, or agents outside of the United States?	14a]	X
t	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		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? 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 other assistance to or for foreign individuals? If 'Yes,' complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions).	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18		Х
19	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	19		Х
20 a	a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20		Х
t	of 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 Ь		

Checklist of Required Schedules (continued)

	•	Ì	Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organizations or government 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 or 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		Х
24	a 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 25a	24a		Х
١	b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
(c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
(d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	a 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
ı	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
	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, 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)			
ā	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		_X
ł	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28ь		Х
	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		X
	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		Х
	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 Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301 7701-3? If 'Yes,' complete Schedule R, Part I	33		Х
	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1	34		Х
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35b		
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		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		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		X
AΑ		Form	990 (2	2013)

FORM SEASON EDUCATION FOUNDATION	45-2552.	344	<u> </u>	agc .
Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V				Г
enest in conductor contains a response of note to any line in any fact v			Yes	No
1 a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1 a	0		
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable .	1b	0		
$oldsymbol{c}$ Did the organization comply with backup withholding rules for reportable payments to vendors and r (gambling) winnings to prize winners?	eportable gaming	1 c		
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	2 a	0		
b If at least one is reported on line 2a, did the organization file all required federal employmen	it tax returns?	2 b		
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see in:	structions)			
3a Did the organization have unrelated business gross income of \$1,000 or more during the year	ar?	3 a		X
b If 'Yes' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation in Schedule O		3 Ь		
4a At any time during the calendar year, did the organization have an interest in, or a signature or other financial account in a foreign country (such as a bank account, securities account, or other financial account.)	er authority over, a inancial account)?	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 F				
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax	•	5 a		X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelf	er transaction?	5 b		Х
c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?		5 с		
6a Does the organization have annual gross receipts that are normally greater than \$100,000, a solicit any contributions that were not tax deductible as charitable contributions?	•	6 a		Х
b If 'Yes,' did the organization include with every solicitation an express statement that such contribution not tax deductible?	ons or gifts were	6Ъ		AW ==0.15
7 Organizations that may receive deductible contributions under section 170(c).				
a Did the organization receive a payment in excess of \$75 made partly as a contribution and p services provided to the payor?	artly for goods and	7 a	d Had	X
b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?		7 b		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w Form 8282?	vas required to file	7 c	1	Х
d If 'Yes,' indicate the number of Forms 8282 filed during the year	7 d			
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal		7 e	45- A	X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal beni		7 f	~	Х
g If the organization received a contribution of qualified intellectual property, did the organization file F as required?	orm 8899	7 g		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the Form 1098-C?	organization file a	7 h		
8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting supporting organization, or a donor advised fund maintained by a sponsoring organization, he holdings at any time during the year?		8		
9 Sponsoring organizations maintaining donor advised funds.				
a Did the organization make any taxable distributions under section 4966?		9 a		
b Did the organization make a distribution to a donor, donor advisor, or related person?		9 b		
10 Section 501(c)(7) organizations. Enter	1	11		
a Initiation fees and capital contributions included on Part VIII, line 12	10a	_		- 4
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10Ь			
11 Section 501(c)(12) organizations. Enter	44.1			- 4
a Gross income from members or shareholders	11 a	_		
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11 b	10		,
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of	4	12a		e geralij.
b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 13 Section 501(c)(29) qualified nonprofit health insurance issuers.	12Ь			
a is the organization licensed to issue qualified health plans in more than one state?		13a		, Š
Note. See the instructions for additional information the organization must report on Schedule	e O.		raging o	15
b Enter the amount of reserves the organization is required to maintain by the states in	13Ы			,
· · · · · · · · · · · · · · · · · · ·	13c			
14a Did the organization receive any payments for indoor tanning services during the tax year?		14a		X

b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule Q

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

Check if Schedule O contains a response or note to any line in this Part VI.

Section A. Governing Body and Management

<u> </u>	tion A. Governing Body and Management				132					
1:	a 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	1 a			Yes	No				
	authority to an executive committee or similar committee, explain in Schedule O									
l	b Enter the number of voting members included in line 1a, above, who are independent	1 b		,						
2	Did any officer, director, trustee, or key employee have a family relationship or a business relations officer, director, trustee or key employee?	ship with	any other	2		Х				
3	Did the organization delegate control over management duties customarily performed by or under to of officers, directors or trustees, or key employees to a management company or other personant company or other	he direc	t supervision	3		Х				
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?			4		Х				
5	Did the organization become aware during the year of a significant diversion of the organization	ition's a	ccatc?	5		X				
6	Did the organization have members or stockholders?	111011 3 6	330131	6	 	X				
_	•	annount /	anom no ano	├	 	 ^				
	7 a 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?									
ł	b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or other persons other than the governing body?									
8	8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following									
ä	a The governing body?			8 a		X				
ŀ	Each committee with authority to act on behalf of the governing body?			8ь		Х				
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who can organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O	not be r	eached at the	9		Х				
Sec	tion B. Policies (This Section B requests information about policies not rec	uıred	by the Internal R	evenu	ie Co	ode.)				
					Yes	No				
	Did the organization have local chapters, branches, or affiliates?			10 a		Х				
t	• If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, operations are consistent with the organization's exempt purposes?	and brand	hes to ensure their	10 ь						
11 a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the	form?		11 a		Х				
	Describe in Schedule O the process, if any, used by the organization to review this Form 99	^{o.} Se	e Schedule O							
	Did the organization have a written conflict of interest policy? If 'No,' go to line 13			12a		Х				
	Were officers, directors, or trustees, and key employees required to disclose annually interests that to conflicts?	3		12 b						
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Schedule O how this was done	Yes,' de:	scribe in	12 c						
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 approximations, comparability data, and contemporaneous substantiation of the deliberation and de		lependent							
а	The organization's CEO, Executive Director, or top management official			15 a		X				
E	Other officers of key employees of the organization			15 b		X				
	If 'Yes' to line 15a or 15b, describe the process in Schedule O (See instructions)									
16 a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar taxable entity during the year?	arrang	ement with a	16a		X				
	olf 'Yes,' did the organization follow a written policy or procedure requiring the organization to evalual participation in joint venture arrangements under applicable federal tax law, and taken steps organization's exempt status with respect to such arrangements?		guard the	16b						
Sec	tion C. Disclosure									
17	List the states with which a copy of this Form 990 is required to be filed ► None									
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, a inspection. Indicate how you make these available. Check all that apply.	nd 990-	T (501(c)(3)s only) a	/ailable	e for p	ublic				
	Own website Another's website Upon request Oth	er <i>(expl</i>	aın ın Schedule O)							
19	Describe in Schedule 0 whether (and if so, how) the organization makes its governing documents, conflict of interest public during the tax year See Schedule 0	oolicy, and	financial statements availa	ble to						
20	State the name, physical address, and telephone number of the person who possesses the books at	nd recor	ds of the organization							
•	Charlene Nimjeh 4238 Meg Drive San Jose CA 95136									
BAA				Form	990 (2	2013)				

Form	990 (2013)	CREEN	FDIICATION	FOUNDATION

45-2552544

age 7

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

Check if Schedule O contains a response or note to any line in this Part VII

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

- 1 a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D). (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any. See instructions for definition of 'key employee.'
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

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

	<u> </u>			(0	;)					
(A) Name and Title	(B) Average	one bo	x, un	less p	oerso	k more t on is bot or/truste	h an e)	(D) Reportable compensation from the consultation	Reportable compensation from	(F) Estimated amount of other compensation
	hours per week (list any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W 2/1099-MISC)	from the from the organization and related organizations
(1) Charlene Nimjeh	0							_		
Chairman	0							0.	0.	0.
(2) Rosemary Cambra Director	00							0.	0.	0.
(3) Norma Sanchez	0							<u> </u>		
Director	0							0.	0.	0.
(4) Salim Nijmeh	0		i						,	
Director	0		[0.	0.	0.
(5) Waffa Mansour	0		İ							•
Director	0		-					0.	0.	0.
								į		
<u></u>										
(8)			Ī							
(9)										
(10)										
(11)				Ì						
(12)		•								
(13)										
(14)				ļ						

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(A) Name and title	Average hours per week (list any	(do box offic	(C) Position (do not check more that box, unless person is be officer and a director/bit.)			than is bot	one h an	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-271099-MISC)	(F) Estimated amount of other compensation from the
	hours for related organiza - tions below dotted line)	ndividual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	Former	(1-2 1035-MIGO)	(2 1033-WI3O)	organization and related organizations
(15)		-								
(16)									 	
(17)										
(18)										
(19)										
(20)										
(21)										
(22)							-			
(23)			+							
(24)										
(25)										
1 b Sub-total c Total from continuation sheets to Part VII, Section	A			1			>	0.	0. 0.	0.
d Total (add lines 1b and 1c) 2 Total number of individuals (including but not limited to from the organization ► 0	those li	sted a	above	e) w	ho r	eceiv	ed r	0. more than \$100,000	0. O of reportable comp	0. ensation
3 Did the organization list any former officer, director on line 1a? If 'Yes,' complete Schedule J for such	r, or trus <i>ındıvıdu</i> a	stee, al	key	emį	ploy	ee, o	or hi	ighest compensate	ed employee	Yes No
4 For any individual listed on line 1a, is the sum of re the organization and related organizations greater such individual	eportable than \$15	e con 50,00	nper	nsat f 'Y	ion es' d	and comp	othe olete	er compensation for Schedule J for	rom	4 X
5 Did any person listed on line 1a receive or accrue of for services rendered to the organization? If 'Yes,'	compens	sation e Sci	n fro hedu	m a ule u	iny i <i>I for</i>	unrel suci	ated h pe	d organization or i	ndıvıdual	5 X
Section B. Independent Contractors 1 Complete this table for your five highest compensa	ted inde	nend	lent	con	trac	tore	that	received more th	an \$100,000 of	
compensation from the organization. Report compensa	tion for t	he ca	lend	ar y	ear	endin	ig w	ith or within the org	anization's tax year	
Name and business address	ss						_	Description of	services	(C) Compensation
			-							
							-			
2 Total number of independent contractors (including but \$100,000 of compensation from the organization ►	0	ed to				abov	e) w	tho received more t	han	Form 900 (2012)

	•	Check if Schedule O	contains	a resp	onse or note to	any line in this Part	VIII		
		,				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
2 2	1:	Federated campaigns		1 a					
¥ Z		b Membership dues		1 b					
SSA	'	c Fundraising events.		1 c					
	(d Related organizations		1 d					
SE SE	(e Government grants (contribut	ions)	1 e					
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	1	f All other contributions, gifts, similar amounts not included		1 f	888,156	<u>5.</u>			
		Noncash contributions include	d in lines 1a	-1f \$_					
<u> </u>		Total. Add lines 1a-1f				888,156			
PROGRAM SERVICE REVENUE	١,,	_		-	Business Code				
2	2 8	'	-				 		
핑	;						-		
₹	`,	´							<u> </u>
S	` ا	.					 	-	
翼	f	All other program servi	ce revenu					 	
Š	l	Total. Add lines 2a-2f				•			
	3	Investment income (inc	ludina div	ıdends	. interest and				
		other similar amounts)			,	>			
	4	Investment income (including divide other similar amounts) Income from investment of tax-exen		xempt	bond proceeds.	•			
	5	Royalties				-			
			(i) Re	eal	(ii) Personal				
		Gross rents							
		Less rental expenses			<u> </u>				
		: Rental income or (loss)	L		<u> </u>	_			
	d	Net rental income or (lo	, <u></u>			>			
	7 a	Gross amount from sales of assets other than inventory.	(i) Secui	rities	(ii) Other	_			
		·			 				
	b	Less cost or other basis and sales expenses							
		: Gain or (loss)				_			
		Net gain or (loss)			_1	<u></u>		;	
		Gross income from fund	***********	onto	<u> </u>				
Ě	δa	(not including \$	maising ev	vents	1				
Ę		of contributions reported	d on line	lc)					
8		See Part IV, line 18		а					
OTHER REVENUE	b	Less direct expenses		b					
0	C	Net income or (loss) fro	m fundrai	sing ev	vents	F			
	9 a	Gross income from gam See Part IV, line 19	ning activit	ties. a					
- 1		Less direct expenses		b					
	С	Net income or (loss) fro	m gaming	activi	ties	•			
	10 a	Gross sales of inventory	, less reti	urns					
İ		and allowances		а					
		Less cost of goods sold		b	<u> </u>				
	С	Net income or (loss) fro		finven		>			
	11	Miscellaneous Revenu	ie		Business Code			1	
Į	11a		-			-	ļ	ļ	
	b		- 	· – –		 			
l	ر C	All other revenue	-	·	=	-	 	<u> </u>	
		Total. Add lines 11a-11c	4	L		- 	15.4		
		Total revenue. See instr			•	888,156.	0	0	0
- 1	-					· OCC+TOO.	i U.		

Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in this Part	X		
		•	(A) Beginning of year		(B) End of year
_	1	Cash — non-interest-bearing	-36,124	. 1	67,154
	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 former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined und section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees beneficiary organizations (see instructions). Complete Part II of Schedule L	s'	6	
A S	7	Notes and loans receivable, net		7	
A S E T S	8	Inventories for sale or use		8	
Ī	9	Prepaid expenses and deferred charges		9	
J	10 <i>a</i>	a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	134.		
	ł		383. 73,836.	10 c	62,751.
	11	Investments – publicly traded securities.	13,333.	11	02,701.
	12	Investments – other securities See Part IV, line 11		12	
	13	Investments – program-related See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	37,712.	16	129,905.
	17	Accounts payable and accrued expenses	4,740.	17	2,547.
l	18	Grants payable	2,7 20 .	18	2/31/.
J	19	Deferred revenue		19	····
L	20	Tax-exempt bond liabilities		20	
L L	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
A B L L T	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		22	* 1
E S	23	Secured mortgages and notes payable to unrelated third parties		23	
ร	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third partie and other liabilities not included on lines 17-24). Complete Part X of Schedu	es, le D 427,740.	25	41,580.
	26	Total liabilities. Add lines 17 through 25	432,480.	26	44,127.
N E T		Organizations that follow SFAS 117 (ASC 958), check here ► and comple lines 27 through 29, and lines 33 and 34.	te		
ŝ	27	Unrestricted net assets		27	
ASSETS	28	Temporarily restricted net assets		28	
	29	Permanently restricted net assets		29	
O R F.		Organizations that do not follow SFAS 117 (ASC 958), check here ► X and complete lines 30 through 34.	ı		
FOZO	30	Capital stock or trust principal, or current funds	-394,768.	30	85,778.
- 1	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
A	32	Retained earnings, endowment, accumulated income, or other funds		32	
641420年の	33	Total net assets or fund balances	-394,768.	33	85,778.
Ĕ	34	Total liabilities and net assets/fund balances	37,712.	34	129,905.
BAA					Form 990 (2013)

Form **990** (2013)

c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit,

If the organization changed either its oversight process or selection process during the tax year, explain

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?

b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audit

review, or compilation of its financial statements and selection of an independent accountant?

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

BAA

ın Schedule O.

3 a

X

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

► Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

2013

OMB No 1545-0047

Name of the organization

Department of the Treasury Internal Revenue Service Employer identification number GREEN EDUCATION FOUNDATION 45-2552544

				(All organizations) See	<u>ınstruc</u>	tions.	
The o	organiza	ation is not a priv	ate foundation becaus	e it is. (For lines 1 thro	ough 11,	check o	only one	box.)				
1	$\bigcap A$	church, conventio	on of churches or asso	ciation of churches des	cribed ii	n sectio	n 170(b)(1)(A)(i).			
2	ПА	school described	in section 170(b)(1)(A)	(ii). (Attach Schedule f	E)							
3	ПА	hospital or a coop	perative hospital service	ce organization describe	ed in se	ction 17	0(b)(1)(A)(iii).				
4	ПА	medical research	organization operated	in conjunction with a h	hospital	describe	ed in se	ction 17	⁷ 0(b)(1)(A)(iii). E	nter the hospital's	
	па	me, city, and sta	te									
5	An 17	organization oper 0(b)(1)(A)(iv) . (C	ated for the benefit of a omplete Part II)	college or university own	ned or op	erated b	y a gove	ernmenta	ıl unıt de	scribed ii	n section	
6				overnmental unit descri								
7	님ㅠ	section 170(b)(1)	(A)(vi). (Complete Par			-	nental ur	nt or fron	n the ge	neral put	olic described	
8	A community trust described in section 170(b)(1)(A)(vi). (Complete Part II)											
9	An organization that normally receives (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions — subject to certain exceptions, and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III)											
10	Ап	organization org	anized and operated e	exclusively to test for pu	ublic saf	ety See	sectio	n 509(a)	(4).			
11	mc لـــا	re publicly suppo	orted organizations des	usively for the benefit of, scribed in section 509(a tion and complete lines	a)(1) or :	section !	509(a)(2	of, or ca 2). See :	rry out th section	ne purpos 509(a)(3	ses of one or). Check the box that	
	а	Туре І	b ∏Type il c	Type III – Function	nally into	egrated		d 🗍 🤺	Type III	- Non-f	unctionally integrated	
е	Do shorture that have been been a got controlled directly as advertible by a second sould be a second											
f		he organization red eck this box	ceived a written determii	nation from the IRS that i	ıs a Туре	і, Туре	II or Typ	e III sup	porting	organizat	ion,	
g	Sır	nce August 17, 20	006, has the organizati	on accepted any gift o	r contrit	oution fr	om any	of the f	ollowing	persons	s?	
											Yes No	
	(i)	A person who helow, the gov	directly or indirectly co erning body of the sup	ontrols, either alone or	togethe	r with pe	ersons c	lescribe	d iu (ii)	and (III)	11g (i)	
	(ii)		ber of a person describ	•							11g (ii)	
	` `	,	•	described in (i) or (ii) a	hovo2							
h	(iii) Pro	•		e supported organization							11 g (iii)	
			(ii) EIN		, ``	- 15-	CA Did in		(.5)	- 45-a	(vii) Amount of monetary	
	(1)	Name of supported organization	(II) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	organiz column (i your go	s the ration in in in income in inco	(v) Did yo the organ column (supp	ization in	organiz colur organiz	s the sation in in in (i) ed in the S ?	support	
					Yes	No	Yes	No	Yes	No		
(A)]	} _		l				
(B)												
(C)												
<u>(C)</u>			 		 	 						
(D)												
<u>(E)</u>							····		, ·-			
Total								:				

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

Schedule A (Form 990 or 990-EZ) 2013

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

Heller.	(Complete only if you checked organization fails to qualify	I the box on line 5,	7, or 8 of Part I or	if the organization	failed to qualify un		
Sec	tion A. Public Support			,			
	endar year (or fiscal year inning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any 'unusual grants')						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4						
Sec	tion B. Total Support						
Cale begi	ndar year (or fiscal year inning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activ	ities, etc (see inst	tructions)			12	
13	First five years. If the Form 990 is organization, check this box and		's first, second, thi	rd, fourth, or fifth t	ax year as a sectio	n 501(c)(3)	▶ □
Sec	tion C. Computation of Pul	blic Support P	ercentage			<u> </u>	
	Public support percentage for 20	· · · · · · · · · · · · · · · · · · ·		e 11, column (f))		14	%
15	Public support percentage from 2	2012 Schedule A,	Part II, line 14			15	%
16a 33-1/3% support test — 2013. If the organization did not check the box on line 13, and the line 14 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization							
ь	33-1/3% support test — 2012. If t and stop here. The organization	he organization di qualifies as a put	id not check a boo	x on line 13 or 16 rganization	a, and line 15 is 3	33-1/3% or more, ch	eck this box
17 a	10%-facts-and-circumstances te or more, and if the organization the organization meets the 'facts	meets the 'facts-a	nd-circumstances	test, check this	box and stop here	e. Explain in Part IV	0% / how
b	10%-facts-and-circumstances te or more, and if the organization organization meets the 'facts-and	meets the 'facts-a	nd-circumstances	test, check this	box and stop here	e. Explain in Part IV	5 is 10% / how the
18	Private foundation. If the organiz	zation did not che	ck a box on line 1	3, 16a, 16b, 17a,	or 17b, check this	s box and see instri	uctions ►

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

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

	ction A. Public Support						
	ndar year (or fiscal yr beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7	Gifts, grants, contributions and membership fees received (Do not include any 'unusual grants.')						2
2	Gross receipts from admis-			.,			0.
	sions, merchandise sold or services performed, or facilities						
	furnished in any activity that is	1	İ				
	related to the organization's	i					_
3	tax-exempt purpose Gross receipts from activities						0.
Ū	that are not an unrelated trade or business under section 513						0.
4							<u>-</u>
	organization's benefit and either paid to or expended on						
5	its behalf The value of services or						0.
,	facilities furnished by a						
	governmental unit to the organization without charge			ł			0
6	Total. Add lines 1 through 5	0.	0.	0.	0.	0.	0.
	a Amounts included on lines 1,	0.1		0.		0.	0.
	2, and 3 received from						•
	disqualified persons b Amounts included on lines 2	0.	0.	0.	0.	0.	0.
	and 3 received from other than						
	disqualified persons that exceed the greater of \$5,000 or			ŀ			
	1% of the amount on line 13						
	for the year	0.	0.	0.	0.	0.	0.
	Add lines 7a and 7b	0.	0.	0.	0.	0.	0.
8	Public support (Subtract line 7c from line 6.)						0.
Sec	tion B. Total Support	· · · · · · · · · · · · · · · · · · ·					
	idar year (or fiscal yr beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
	Amounts from line 6	0.	0.	0.	0.	0.	0.
108	Gross income from interest, dividends, payments received						
	on securities loans, rents,						,
	royalties and income from similar sources						0.
Ł	Unrelated business taxable			-			<u>.</u>
	income (less section 511 taxes) from businesses						
	acquired after June 30, 1975						0.
	Add lines 10a and 10b	0.	0.	0.	0.	0.	0.
11	Net income from unrelated business activities not included in line 10b,		l l	ı	i	1	
	whether or not the humanes is		į.	į.		i	
	whether or not the business is					-	_
12	regularly carried on					_	0.
12	regularly carried on Other income Do not include gain or loss from the sale of		72.03.000				0.
12	regularly carried on Other income Do not include					-	
	regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in	0.	0.	0.	0.	0.	0. 0.
13	regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	s for the organizat					0.
13 14	regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total Support. (Add Ins 9,10c, 11 and 12) First five years. If the Form 990	s for the organizat stop here	ion's first, second				0.
13 14 Sec	regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total Support. (Add Ins 9,10c, 11 and 12) First five years. If the Form 990 organization, check this box and	s for the organizat stop here plic Support Pe	ion's first, second	, third, fourth, or f			0.
13 14 Sec 15	regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total Support. (Add Ins 9,10c, 11 and 12) First five years. If the Form 990 in organization, check this box and tion C. Computation of Puk	s for the organizat stop here plic Support Pe 13 (line 8, column	ion's first, second rcentage (f) divided by line	, third, fourth, or f		section 501(c)(3)	0. 0. ► X
13 14 Sec 15 16 Sec	regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total Support. (Add Ins 9,10c, 11 and 12) First five years. If the Form 990 organization, check this box and tion C. Computation of Put Public support percentage for 20 Public support percentage from 2 tion D. Computation of Investigation.	s for the organizat stop here Dlic Support Pe 13 (line 8, column 2012 Schedule A, F estment Incom	rcentage (f) divided by line Part III, line 15 e Percentage	, third, fourth, or f	ifth tax year as a	section 501(c)(3)	0. 0. ► [X]
13 14 Sec 15 16 Sec 17	regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total Support. (Add Ins 9,10c, 11 and 12) First five years. If the Form 990 organization, check this box and tion C. Computation of Put Public support percentage for 20 Public support percentage from 2 tion D. Computation of Investment income percentage for	s for the organizat stop here Dlic Support Pe 13 (line 8, column 2012 Schedule A, F estment Incom or 2013 (line 10c, co	ercentage (f) divided by line Part III, line 15 e Percentage olumn (f) divided	, third, fourth, or f	ifth tax year as a	section 501(c)(3)	0. 0. ► [X]
13 14 Sec 15 16 Sec 17 18	regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total Support. (Add Ins 9,10c, 11 and 12) First five years. If the Form 990 organization, check this box and tion C. Computation of Put Public support percentage for 20 Public support percentage from 2 tion D. Computation of Investment income percentage for Investment income percentage for Investment income percentage for Investment income percentage for Investment income percentage for Investment income percentage for Investment income percentage for Investment income percentage for Investment income percentage for Investment income percentage for Investment income percentage for Investment income percentage for Investment Income percentage for Investment Income percentage for Investment Income percentage for Investment Income percentage for Investment Income percentage for Investment Income percentage for Investment Income percentage for Investment Income percentage for Investment Income percentage for Investment Income percentage for Investment Income percentage for Investment Income percentage for Investment Income percentage for Investment Income percentage for Investment Income Investment Investment Income Investment Income Investment Investment I	s for the organizat stop here Dlic Support Pe 13 (line 8, column 2012 Schedule A, F estment Incom or 2013 (line 10c, com 2012 Schedule	ercentage (f) divided by line Part III, line 15 e Percentage olumn (f) divided A, Part III, line 1	, third, fourth, or f 13, column (f)) by line 13, column	ifth tax year as a	15 16 17 18	0. 0. ► [X]
13 14 Sec 15 16 Sec 17 18	regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total Support. (Add Ins 9,10c, 11 and 12) First five years. If the Form 990 organization, check this box and tion C. Computation of Put Public support percentage for 20 Public support percentage from 2 tion D. Computation of Investment income percentage for	s for the organizat stop here Dlic Support Pe 13 (line 8, column 2012 Schedule A, F estment Incom or 2013 (line 10c, com 2012 Schedule the organization d	rcentage (f) divided by line Part III, line 15 e Percentage olumn (f) divided A, Part III, line 1	third, fourth, or f 13, column (f)). by line 13, column 7	of th tax year as a	15 16 17 18 than 33-1/3% and	0. 0. ► [X]
13 14 Sec 15 16 Sec 17 18	regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total Support. (Add Ins 9,10c, 11 and 12) First five years. If the Form 990 organization, check this box and tion C. Computation of Put Public support percentage for 20 Public support percentage from 2 tion D. Computation of Investment income percentage from 13-1/3% support tests — 2013. If is not more than 33-1/3%, check 133-1/3% support tests — 2012. If	s for the organizat stop here Dlic Support Pe 13 (line 8, column 2012 Schedule A, Festment Incomor 2013 (line 10c, com 2012 Schedule the organization d this box and stop the organization d	rcentage (f) divided by line Part III, line 15 e Percentage olumn (f) divided A, Part III, line 1 id not check the b here. The organiz	third, fourth, or f 13, column (f)). by line 13, column 7 ox on line 14, and atton qualifies as	I line 15 is more a publicly suppor	15 16 17 18 than 33-1/3%, and ted organization us more than 33.	0. 0.
13 14 15 16 Sec 17 18 19 a	regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total Support. (Add Ins 9,10c, 11 and 12) First five years. If the Form 990 organization, check this box and tion C. Computation of Put Public support percentage for 20 Public support percentage from 2 tion D. Computation of Investment income percentage for Investment income percentage from 33-1/3% support tests — 2013. If is not more than 33-1/3%, check	s for the organizat stop here Dlic Support Pe 13 (line 8, column 2012 Schedule A, Festment Incom or 2013 (line 10c, com 2012 Schedule the organization d this box and stop the organization di, check this box and stop and stop the organization di, check this box and stop the organization di, check this box and stop the organization di, check this box and stop the organization di, check this box and stop the organization di, check this box and stop the organization di, check this box and stop the organization did the organization did the organization did the organization did the organization did the organization did the organization did the organization did the organization did the organization did the organization did the organization did the organization did the organization did the orga	ercentage (f) divided by line Part III, line 15 e Percentage olumn (f) divided A, Part III, line 1 id not check the bene. The organized not check a book of stop here. The	third, fourth, or f 13, column (f)). by line 13, column 7 ox on line 14, and ation qualifies as a on line 14 or line organization quali	of th tax year as a full of the second of th	than 33-1/3%, and ted organization is more than 33-supported organization	0. 0.

Schedule A	(Form 990 or 990-EZ) 2013	<u>GREEN EDUCATION</u>	N FOUNDATION	45-2552544	Page 4
REEW.	Supplemental Information or 17b; and Part III, line (See instructions).	on. Provide the exp 12. Also complete t	olanations required by Pathis part for any addition	art II, line 10; Part II, line 17a al information.	
					- -
					- -
			·		
			-		

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

Attach to Form 990.

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

m990. Specification number

GRI	EEN EDUCATION FOUNDATION			45-2552544		
	Organizations Maintaining Dono	r Advised Funds or Other S	imilar Funds or Acc			
: . '='	Complete if the organization ans	wered 'Yes' to Form 990, Par	t IV, line 6.			
		(a) Donor advised funds	(b) F	unds 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 do are the organization's property, subject to the			funds Yes No		
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Yes No					
	Conservation Easements.	· · · · · · · · · · · · · · · · · · ·				
- Land 1	Complete if the organization ans	wered 'Yes' to Form 990, Pai	t IV, line 7.			
1	Purpose(s) of conservation easements held by	the organization (check all that ap	ply)			
	Preservation of land for public use (e.g , r	ecreation or education) Pr	eservation of an historica	ally important land area		
	Protection of natural habitat	⊢Pr	eservation of a certified h	nistoric structure		
	Preservation of open space					
2	Complete lines 2a through 2d if the organization hast day of the tax year.	eld a qualified conservation contributi	on in the form of a conserv	vation easement on the		
			Н	eld at the End of the Tax Year		
а	Total number of conservation easements		2a			
	Total acreage restricted by conservation easer		2 b			
C	Number of conservation easements on a certif	ied historic structure included in (a)	2 c			
d	Number of conservation easements included in structure listed in the National Register	n (c) acquired after 8/17/06, and no	t on a historic 2d			
3	Number of conservation easements modified, trantax year ►	sferred, released, extinguished, or term	ninated by the organization	n during the		
4	Number of states where property subject to conse	vation easement is located >				
5	Does the organization have a written policy re-	_	pection, handling of viola			
_	and enforcement of the conservation easemer	•		∐ Yes ☐ No		
6	Staff and volunteer hours devoted to monitoring, if	nspecting, and enforcing conservation	easements during the year	ſ		
7	Amount of expenses incurred in monitoring, inspe	cting, and enforcing conservation ease	ements during the year			
8	Does each conservation easement reported or and section $170(h)(4)(B)(ii)$?	line 2(d) above satisfy the requirer	ments of section 170(h)(4	1)(B)(i) Yes No		
9	in Part XIII, describe how the organization reports include, if applicable, the text of the footnote t conservation easements					
Fig	Organizations Maintaining Collections Complete of the organization answers	ctions of Art, Historical Trea vered 'Yes' to Form 990, Par	sures, or Other Sim t IV, line 8.	ilar Assets.		
1 a	If the organization elected, as permitted under art, historical treasures, or other similar assets he in Part XIII, the text of the footnote to its finan	d for public exhibition, education, or re	esearch in furtherance of pr	t and balance sheet works of ublic service, provide,		
b	If the organization elected, as permitted under historical treasures, or other similar assets held fo following amounts relating to these items	SFAS 116 (ASC 958), to report in republic exhibition, education, or resear	ts revenue statement and rch in furtherance of public	d balance sheet works of art, c service, provide the		
	(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, he amounts required to be reported under SFAS	storical treasures, or other similar ass 16 (ASC 958) relating to these iten	ets for financial gain, provi is	de the following		
	Revenues included in Form 990, Part VIII, line			► \$		
b	Assets included in Form 990, Part X			► \$		

Schedule D (Form 990) 2013 GREE Organizations Mainta	N EDUCATION	N FOUNDATION	torical T	reasures. o	45-2 or Other Similar	2552544 Assets (6	contin	Page 2
3 Using the organization's acquisition								
items (check all that apply)		ما السالم	or avaba	naa nraarama				
a Public exhibition b Scholarly research		H		inge programs	•			
b Scholarly research c Preservation for future gene	rations	e U Othe	··		·			
4 Provide a description of the organi		s and explain how the	ey further t	he organization	n's exempt purpose in			
Part XIII. 5 During the year, did the organization	ation solicit or re	ceive donations of a	art, histori	cal treasures,	or other similar asse	ets 🗀		┌┐
to be sold to raise funds rather t						Yes		No
Escrow and Custodia line 9, or reported an	amount on Fo	orm 990, Part X	the orga , line 21	anization ai	nswered Yes to	Form 99	u, Par	πιν,
1 a Is the organization an agent, tru on Form 990, Part X?	stee, custodian,	or other intermedia	y for cont	tributions or of	ther assets not includ	ded Tyes	;	∏No
b If 'Yes,' explain the arrangemen					[
- Pasinging halance						Amour)[
 c Beginning balance d Additions during the year 					1 c			
Distributions during the year					1 e	··		
f Ending balance					16			
2a Did the organization include an a	amount on Form	990. Part X. line 21	7			Yes	. 1	No
b If 'Yes,' explain the arrangement				been provide	d in Part XIII			\dashv
				•			· ·	_
Endowment Funds. C	complete if the	e organization a	nswered	'Yes' to Fo	orm 990, Part IV,	line 10.		
	(a) Current yea	r (b) Prior ye	ar ((c) Two years bad	ck (d) Three years b	ack (e)	Four yea	rs back
1 a Beginning of year balance								
b Contributions								
c Net investment earnings, gains, and losses								
d Grants or scholarships			-					
 Other expenditures for facilities and programs 								
f Administrative expenses						<u> </u>	.	
g End of year balance								
2 Provide the estimated percentag	e of the current y	ear end balance (li	ne 1g, col	lumn (a)) held	as	· · · · · · · · · · · · · · · · · · ·		
a Board designated or quasi-endowm	ent ►	%						
b Permanent endowment ►	%							
c Temporarily restricted endowmer		%						
The percentages in lines 2a, 2b,	and 2c should ed	qual 100%						
3a Are there endowment funds not in t	he possession of	the organization that	are held ai	nd administere	d for the	ſ	V	T Na
organization by (i) unrelated organizations						20(1)	Yes	No
(ii) related organizations						3a(i) 3a(ii)		+
b If 'Yes' to 3a(ıı), are the related of	organizations liste	ed as required on S	chedule B	27		3b		+
4 Describe in Part XIII the intended	-	•				<u> </u>		<u> </u>
Land, Buildings, and								
Complete if the organi		red 'Yes' to Form	n 990, F	Part IV, line	11a. See Form 9	990, Part	X, Iır	ne 10.
Description of property	(a)	Cost or other basis	(b) Co	st or other	(c) Accumulated	(d) i	Book va	alue
		(ınvestment)		is (other)	depreciation	``		
1 a Land								
b Buildings	ļ							
c Leasehold improvements	<u> </u>		<u> </u>		<u> </u>			
d Equipment	 	50,017.		51,117.	38,383	-	62	<u>,751.</u>
e Other Total. Add lines 1a through 1e. (Column	un (d) must agus	Form 990 Part V	column #	2) line 10/e) \				751
TOTAL AUG IIITES TO UITOUGH TE. (COIUM	ii (u) iiiust equal	TOTTI 330, FAILA,	coluititi (E	<u>), iiiie 10(0))</u>		<u>- L </u>	62,	<u>,751.</u>

BAA

Schedule **D** (Form 990) 2013

Investments – Other Securities. Complete if the organization answered	'Yes' to Form 990	N/A Part IV line 11h See For	rm 990 Part Y line 12
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost of	
(1) Financial derivatives			
(2) Closely-held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E) (E)			
(F)			
(G)			
(H)			
(1)			र्था रहें में हैं जो करान राज्यस्य संज्ञान का स्टून ^{की} सामानी के सम्बद्धीय
Total. (Column (b) must equal Form 990, Part X, column (B) line 12)			
Investments – Program Related. Complete if the organization answered	'Yes' to Form 990.	N/A Part IV. line 11c. See For	m 990. Part X. line 13.
(a) Description of investment type	(b) Book value	(c) Method of valuation Cost o	
(1)			
(2)			
(3)	·		
(4)			
(5)	~ ~~		
(6)			
(7)			
(8)			
(9)			
(10)			
Total (Column (b) must equal Form 990, Part X, column (B) line 13.)			
Other Assets. Complete if the organization answered	'Yes' to Form 990	Part IV line 11d See For	m 000 Part V line 15
	cription	rattiv, line riu. See i oi	(b) Book value
(1)			(3) 20011 14114
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9) (10)			
Total. (Column (b) must equal Form 990, Part X, column (B	1) line 15.)		<u> </u>
Other Liabilities.	y, iiie 13)		
Complete if the organization answered 'Yes' to Fo	rm 990. Part IV. line 11e	e or 11f. See Form 990. Part X. lin	e 25
(a) Description of liability	(b) Book value		
(1) Federal income taxes		50 AT	
(2) Loans payable	41,580) <u>.</u> [186]	
(3)		·	
(4)			
(5)			
(6)		<u></u>	
(7)			
(8)			
(10)			
(11)			
Total. (Column (b) must equal Form 990, Part X, column (B) line 25.)	► 41,580		
2. Liability for uncertain tax positions. In Part XIII, provide the text of the fool			tion's liability for uncertain
ners and the second contract of the sec	as been provided in Part XIII	opo. a. a. o o guincu	

Schedule D (Form 990) 2013 GREEN EDUCATION FOUNDATION	45-2552544 Page 4
Reconciliation of Revenue per Audited Financial Statements With Revenue	enue per Return. N/A
Complete if the organization answered 'Yes' to Form 990, Part IV, line 1	2a.
1 Total revenue, gains, and other support per audited financial statements	1
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12	
a Net unrealized gains on investments	
b Donated services and use of facilities 2b	· · · · · · · · · · · · · · · · · · ·
c Recoveries of prior year grants	
d Other (Describe in Part XIII.)	
e Add lines 2a through 2d	2 e
3 Subtract line 2e from line 1	3
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1	
a Investment expenses not included on Form 990, Part VIII, line 7b.	
b Other (Describe in Part XIII.)	
c Add lines 4a and 4b	4c
	5
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	<u>. </u>
Reconciliation of Expenses per Audited Financial Statements With Exp	•
Complete if the organization answered 'Yes' to Form 990, Part IV, line 1	2a.
1 Total expenses and losses per audited financial statements	1
2 Amounts included on line 1 but not on Form 990, Part IX, line 25	
a Donated services and use of facilities 2a	
b Prior year adjustments	
c Other losses 2c	
d Other (Describe in Part XIII.)	
e Add lines 2a through 2d	2e
3 Subtract line 2e from line 1	3
4 Amounts included on Form 990, Part IX, line 25, but not on line 1	
a Investment expenses not included on Form 990, Part VIII, line 7b. 4a	
b Other (Describe in Part XIII.) 4b	
c Add lines 4a and 4b	4 c
5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5
Supplemental Information.	
rovide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4; Part IV, lines 1i ne 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part t	b and 2b, Part V, o provide any additional information.
_ <i></i>	

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.

OMB No 1545-0047

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

GREEN EDUCATION FOUNDATION	45-2552544
Form 990, Part VI, Line 11b - Form 990 Review Process	
No review was or will be conducted.	
Form 990, Part VI, Line 19 - Other Organization Documents Publicly	Available
No documents available to the public.	
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