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DLN: 93493135057325

-orm 990

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

► Do not enter Social Security numbers on this form as it may be made public By law, the IRS generally cannot redact the information on the form

► Information about Form 990 and its instructions is at <u>www.IRS.gov/form990</u>

OMB No 1545-0047

2013

Open to Public Inspection

| A Fo | r the 20 | 013 cale | endar year, or tax year beginnin | g 07-01-2013 , 2013, and endir | ng 06-30-2014 | | |
|--------------------------------|--------------|--------------|--|--|--------------------|-------------------------------|------------------------------|
| B Che | eck if app | plicable | C Name of organization NRDC Action Fund Inc | | | D Employer i | dentification number |
| ☐ Add | lress cha | nge | | | | 13-39760 | 62 |
| ┌ Nar | ne chang | ge | Doing Business As | | | | |
| ┌ Inıt | ıal return | n | Number and street (or P O box if n | naıl ıs not delivered to street address) F | Room/suite | E Telephone n | ımher |
| ┌ Ten | mınated | | 40 WEST 20TH STREET Suite | 1 | , | · · | |
| ┌ Am | ended re | eturn | City or town, state or province, cou | ntry, and ZIP or foreign postal code | | (212)727 | -2700 |
| Гарр | olication p | pending | NEW YORK, NY 10011 | | | G Gross receipt | ts \$ 1 553 303 |
| | • | | F Name and address of prii | ncipal officer | H(a) I | this a group retu | |
| | | | PETER LEHNER EXEC DIRE | | | ubordinates? | ┌ Yes ┌ No |
| | | | 40 WEST 20TH STREET NEW YORK,NY 10011 | | 11/65 . | | |
| | | | | | | re all subordinate cluded? | s |
| I Tax | x-exemp | t status | 「 501(c)(3) | (insert no) | | | st (see instructions) |
| | ebsite: | ▶ www | v nrdcactionfund org | | H(c) G | Group exemption r | number 🕨 |
| | | | | | 1 (-) | T | |
| | | | Corporation Trust Association | n Other ► | L Year o | of formation 1996 | M State of legal domicile NY |
| Ра | rt I | | mary | | | | |
| | | | escribe the organization's mission C action fund's mission is to bu | on or most significant activities ild political support in the United | d States for prote | cting the planet a | nd its people |
| မွ | | | | | | | |
| anc | _ | | | | | | |
| Ĕ. | | haal th | on how both of the eventuation de | continued its operations or dis- | acad of mare the | - 2 E 0/ of the not | |
| Activities & Governance | 2 C | neck th | is box 🖣 — ii the organization di | scontinued its operations or disp | osed of more tha | in 25% of its het | assets |
| ూ జర | 3 N | umber d | of voting members of the govern | ing body (Part VI, line 1a) . | | з | 29 |
| 8 | 4 N | umber o | of independent voting members | of the governing body (Part VI, I | ıne 1 b) | 4 | . 26 |
| 퉏 | 5 To | otal nun | mber of individuals employed in | calendar year 2013 (Part V , line | 2a) | 5 | 0 |
| FC. | 6 ⊺⊲ | otal nun | mber of volunteers (estimate if r | ecessary) | | 6 | 0 |
| • | 7a ⊤o | otal unr | elated business revenue from P | art VIII, column (C), line 12 . | | 78 | 0 |
| | b N | et unrel | lated business taxable income f | rom Form 990-T, line 34 | | 71 | 0 |
| | | | | | | Prior Year | Current Year |
| а. | 8 | Contrib | butions and grants (Part VIII, li | ne 1h) | | 1,727,296 | 1,553,303 |
| Revenue | 9 | | | ne 2g) | | 0 | 0 |
| ł. | | | · | (A), lines 3, 4, and 7d) | | 0 | 0 |
| _ | 11 | | | lines 5, 6d, 8c, 9c, 10c, and 11 | · — | 270 | 0 |
| | 12 | | | (must equal Part VIII, column (| | 1,727,566 | 1,553,303 |
| | 13 | | | IX, column (A), lines 1-3) | | 0 | 8,000 |
| | 14 | | | X, column (A), line 4) | | 0 | 0 |
| | 15 | | | ee benefits (Part IX, column (A), | | | |
| Expenses | | 5-10) | | | | 813,366 | 709,929 |
| ₫. | 16a | | - , | column (A), line 11e) | • • | 0 | 0 |
| 五 | ь | | ndraising expenses (Part IX, column (D | | | | |
| | 17 | | | lines 11a-11d, 11f-24e) | | 2,463,740 | 740,137 |
| | 1 | | | st equal Part IX, column (A), line | | 3,277,106 | 1,458,066 |
| | 19 | Revenu | ue less expenses Subtract line | 18 from line 12 | | -1,549,540 | 95,237 |
| Net Assets or Fund Balances | | | | | Begin | ning of Current Year | End of Year |
| 20 KB | 20 | Total a | assets (Part X, line 16) | | 🖯 | 1,475,750 | 1,641,382 |
| ₹. 8 | l | | | | | 348,446 | 418,841 |
| ž | 22 | | | line 21 from line 20 | | 1,127,304 | 1,222,541 |
| Par | t II | | ature Block | | - | | |
| my kr | nowledg | ge and b | | amined this return, including acc nplete Declaration of preparer (o | | | |
| | | **** | ** | | | 2015-05-11 | |
| Sign | , [| | ture of officer | | | Date | |
| | | Peter | Lehner executive director | | | | |
| Here | | | | | | | |
| пеге | | Гуре | or print name and title | | | | |
| —— | | Pr | | Preparer's signature | Date | Check If PTIN P00 | N 741490 |

Firm's address ► 757 THIRD AVE 2ND FLOOR

NEW YORK, NY 100172013

May the IRS discuss this return with the preparer shown above? (see instructions)

Preparer

Use Only

Phone no (212) 727-2700

✓ Yes ☐ No

Part IV Checklist of Required Schedules

| | | | Yes | No |
|-----|---|-----|-----|----|
| 1 | Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A | 1 | | Νo |
| 2 | Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? $^{f colored}$ | 2 | Yes | |
| 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^{\bullet} | 3 | Yes | |
| 4 | Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i> | 4 | | |
| 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 | | No |
| 6 | Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i> | 6 | | No |
| 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 | | No |
| 8 | Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i> 2 | 8 | | No |
| 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^{\bullet} | 9 | | No |
| 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 | | No |
| 11 | If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable | | | |
| а | Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI | 11a | Yes | |
| 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 | 11b | | Νo |
| 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 | 11c | | No |
| 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 | 11d | | Νo |
| e | Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X | 11e | Yes | |
| 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. | 11f | Yes | |
| 12a | Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII | 12a | | No |
| 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 | Yes | |
| 13 | Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E | 13 | | No |
| 14a | Did the organization maintain an office, employees, or agents outside of the United States? | 14a | | No |
| 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 | _ | No |
| 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 | | No |
| 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? <i>If</i> " <i>Yes," complete Schedule F, Parts III and IV</i> | 16 | | No |
| 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 | | No |
| 18 | Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i> | 18 | | No |
| 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 | | No |
| 20a | Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H | 20a | | No |
| b | If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? | 20b | | |

| Par | t IV Checklist of Required Schedules (continued) | | | |
|-----|--|-----|-----|----|
| 21 | Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II | 21 | | No |
| 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 | | No |
| 23 | Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J.</i> | 23 | Yes | |
| 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 25a | 24a | | No |
| b | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? | 24b | | |
| С | Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? | 24c | | |
| d | Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? | 24d | | |
| 25a | Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I | 25a | | No |
| 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 | | No |
| 26 | 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 | | No |
| 27 | Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i> | 27 | | No |
| 28 | Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions) | | | |
| а | A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV </i> | 28a | | No |
| b | A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV | 28b | | No |
| c | An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV | 28c | | No |
| 29 | Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M | 29 | | No |
| 30 | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> | 30 | | No |
| 31 | Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I | 31 | | No |
| 32 | Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i> | 32 | | No |
| 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 | | No |
| 34 | Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 | 34 | Yes | |
| 35a | Did the organization have a controlled entity within the meaning of section 512(b)(13)? | 35a | | No |
| 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? <i>If "Yes," complete Schedule R, Part V, line 2</i> | 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 | | No |
| 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 | Yes | |

| Pai | Statements Regarding Other 1R5 Fillings and Tax Compliance | | | _ |
|-----|--|------------|---------|----------|
| | Check if Schedule O contains a response or note to any line in this Part V | • | Yes | .] No |
| 1a | Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 18 | | | .40 |
| | Enter the number of Forms W-2G included in line 1a Enter -0 - if not applicable 1b 0 | | | |
| | Did the organization comply with backup withholding rules for reportable payments to vendors and reportable | | | |
| | gaming (gambling) winnings to prize winners? | 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 | | | |
| b | If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) | 2b | | |
| За | Did the organization have unrelated business gross income of \$1,000 or more during the year? | За | | No |
| b | If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, 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 financial account in a foreign country (such as a bank account, securities account, or other financial account)? | 4a | | No |
| b | If "Yes," enter the name of the foreign country | | | |
| | See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts | | | |
| E | Was the erganization a party to a prohibited tay shelter transaction at any time during the tay year? | E. | | No |
| | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? | 5a | | No |
| b | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? | 5b | | No |
| c | If "Yes," to line 5a or 5b, did the organization file Form 8886-T? | F | | |
| _ | | 5c | ., | |
| | 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 | Yes | |
| | If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? | 6b | Yes | |
| | Organizations that may receive deductible contributions under section 170(c). | | | 1 |
| | 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 | | |
| | 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 to | 7- | | |
| | file Form 8282? | 7 c | | |
| d | If "Yes," indicate the number of Forms 8282 filed during the year | | | |
| e | Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? | 7e | | |
| f | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? | 7f | | |
| g | If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? | 7g | | |
| h | If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? | 7h | | |
| 8 | Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? | _ | | |
| _ | | 8 | | |
| | Sponsoring organizations maintaining donor advised funds. | | | |
| | Did the organization make any taxable distributions under section 4966? | 9a | | |
| b | Did the organization make a distribution to a donor, donor advisor, or related person? | 9b | | |
| LO | Section 501(c)(7) organizations. Enter | | | |
| а | Initiation fees and capital contributions included on Part VIII, line 12 10a | | | |
| b | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities | | | |
| l1 | Section 501(c)(12) organizations. Enter | | | |
| а | Gross income from members or shareholders | | | |
| b | Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) | | | |
| 12a | Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? | 12a | | |
| b | If "Yes," enter the amount of tax-exempt interest received or accrued during the year | | | |
| L3 | Section 501(c)(29) qualified nonprofit health insurance issuers. | | | |
| а | Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O | 13a | | |
| 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 | | | |
| c | Enter the amount of reserves on hand | | | |
| 14a | Did the organization receive any payments for indoor tanning services during the tax year? | 14a | | No |
| | If "Yes " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O | 14h | | |

| Se | ection 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 | | | |
| b | Enter the number of voting members included in line 1a, above, who are independent | | | |
| 2 | Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? | 2 | Yes | " |
| 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 | | No |
| 4 | Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? | 4 | | No |
| 5 | Did the organization become aware during the year of a significant diversion of the organization's assets? | 5 | | No |
| 6 | Did the organization have members or stockholders? | 6 | Yes | |
| | Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or | ٣ | | |
| | more members of the governing body? | 7a | Yes | |
| | Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? | 7b | Yes | |
| 8 | Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following | | | 1 |
| а | The governing body? | 8a | Yes | |
| b | Each committee with authority to act on behalf of the governing body? | 8b | Yes | |
| 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? <i>If "Yes," provide the names and addresses in Schedule O</i> | 9 | | No |
| Se | ection B. Policies (This Section B requests information about policies not required by the Internal R | evenu | ıe Cod | e.) |
| | | | Yes | No |
| l Oa | Did the organization have local chapters, branches, or affiliates? | 10a | | |
| | The die organization have local enapters, branches, or annuces | 104 | | No |
| | 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? | 10a | | No |
| b | If "Yes," did the organization have written policies and procedures governing the activities of such chapters, | | Yes | No |
| b l1a | 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing | 10b | Yes | No |
| b l1a b | If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? | 10b | Yes | No |
| b 11a b 12a | 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? | 10b | | No |
| b l1a b l2a b | If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? | 10b 11a 12a | Yes | No |
| b l1a b l2a b | If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? | 10b 11a 12a 12b | Yes Yes | No |
| b L1a b L2a b | If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? | 10b 11a 12a 12b | Yes Yes Yes | No |
| b 11a b 12a b c | 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? | 10b 11a 12a 12b 12c 13 | Yes Yes Yes | No |
| b l1a b l2a b c | 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? | 10b 11a 12a 12b 12c 13 | Yes Yes Yes | No |
| b 11a b 12a c 13 14 15 | 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? | 10b 11a 12a 12b 12c 13 14 | Yes Yes Yes | No |
| b 11a b 12a c 13 14 15 | 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official | 10b 11a 12a 12b 12c 13 14 | Yes Yes Yes | No |
| b 11a b 12a b c 13 14 15 a b | If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? | 10b 11a 12a 12b 12c 13 14 | Yes Yes Yes | No |
| b l1a b l2a b c l3 l4 l5 | 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? | 10b 11a 12a 12b 12c 13 14 | Yes Yes Yes | No |
| b 11a b 12a c 13 14 15 a b | If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a | 10b 11a 12a 12b 12c 13 14 15a 15b | Yes Yes Yes | |
| b 11a b 12a c 13 14 15 a b | If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the | 10b 11a 12a 12b 12c 13 14 15a 15b | Yes Yes Yes | |
| b l1a b l2a b c l3 l4 l5 a b | If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? | 10b 11a 12a 12b 12c 13 14 15a 15b 16a | Yes Yes Yes Yes Yes Your Service of the service of | No No |

interest policy, and financial statements available to the public during the tax year

▶PETER LEHNER EXEC DIRECTOR 40 WEST 20TH STREET

NEW YORK, NY 10011 (212) 727-2700

19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of

State the name, physical address, and telephone number of the person who possesses the books and records of the organization

| Form 990 | (2013 | |
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|----------|-------|--|

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Part VII 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

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

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

◆ List all of the organization's current key employees, if any See instructions for definition of "key employee"

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

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

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

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

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

| (A) Name and Title | (B) A verage hours per week (list any hours for related organizations below dotted line) | more t | han o | one l both | box, an o | heck sofficer (stee) Highest compensated | Former | (D) Reportable compensation from the organization (W- 2/1099-MISC) | (E) Reportable compensation from related organizations (W- 2/1099- MISC) | (F) Estimated amount of other compensation from the organization and related organizations |
|--------------------|--|--------|-------|---------------|--------------|--|--------|--|--|--|
| | | | | | | | | | | |
| | | | | | | | | | | |

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

| | (A) Name and Title | Name and Title A verage hours per week (list any hours from the and a director/trustee) A verage hours per wore than one box, unless person is both an officer and a director/trustee) A verage hours person is both an officer and a director/trustee) A verage hours person is both an officer organization (W-organization (W-organizat | | (E) Reportable compensation from related organizations (W- | С | (F) Estima nount o ompens from t | ted fother ation he | | | | | | | |
|---------|---|--|-----------------------------------|---|-----------|---|------------------------------|------------|-------------|--------------------|-----------------------------|-----|--------------------------------|---------|
| | | for related organizations below dotted line) | Individual trustee or director | Institutional Trustee | Officei | Ke) employee | Highest compensated employee | Former | 2/1099- | -MISC) | 2/1099-MISC) | | ganızatı relate organıza | ed |
| | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
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| | | | | | | | | | | | | | | |
| 1b c | Sub-Total | | | | | | | <u>►</u> | | | | | | |
| d | Total (add lines 1b and 1c) . | | | ` . | ٠. | ٠. | | Þ | | 0 | 1,537,77 | 3 | | 255,610 |
| 2 | Total number of individuals (in \$100,000 of reportable compe | | | | | | d abov | e) w | ho receive | d more th | an | | | |
| | | | | | | | | | | | | | Yes | No |
| 3 | Did the organization list any fo on line 1a? <i>If "Yes," complete S</i> | | | | | key • | emplo | yee • | or highest | t compen | sated employee | 3 | | No |
| 4 | For any individual listed on line organization and related organ | | | | | | | | | | | · · | | |
| 5 | Individual Did any person listed on line 1 | a receive or ac | rue cor | npen | • satı | • on fr | • • om an | • v uni | related org | • • • anızatıon | or individual for | 4 | Yes | |
| | services rendered to the organ | | | | | | | | | | | 5 | | No |
| Se | ection B. Independent Co | | | | | | | | | | | | | |
| 1 | Complete this table for your five compensation from the organization | | | | | | | | | | | | ax year | |
| | | (A) lame and business | | | | | | | | | (B) cription of services | | (C Comper |) |
| | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |

2 Total number of independent contractors (including but not limited to those listed above) who received more than

\$100,000 of compensation from the organization $\blacktriangleright 0$

| Part V | 7111 | Statement of Check of Schedu | o f Revenue ule O contains a respor | nse or note to any lu | ne in this Part VIII | | | _ |
|---|------|---|---|------------------------|----------------------|--|--------------------------------|--|
| | 12 | Federated cam | | ise of flote to any fi | (A) Total revenue | (B) Related or exempt function revenue | (C) Unrelated business revenue | (D) Revenue excluded from tax under sections 512-514 |
| इं इं | 1a | | | | | | | |
| ran Our | b | Membership du | es 1b | | | | | |
| ĒĞ | c | Fundraising eve | ents 1c | | | | | |
| iffs ar / | d | Related organiz | zations 1d | | | | | |
| 9 := | e | Government grant | s (contributions) 1e | | | | | |
| tributions, Giffs, Grants Other Similar Amounts | l f | All other contribute | ons, gifts, grants, and 1f | 1,553,303 | | | | |
| is is | ١. | sımılar amounts no | ot included above | | | | | |
| 걸 | g | Noncash contribute 1a-1f \$ | ons included in lines | | | | | |
| Contributions, Giffs, Grants and Other Similar Amounts | h | Total. Add lines | s 1a-1f | | 1,553,303 | | | |
| e E | | | | Business Code | | | | |
| Ken | 2a | | | | | | | |
| <u>æ</u> | Ь | | | | | | | |
| 956 | C | | | | | | | |
| <u>.</u> | d | | | | | | | |
| Program Serwoe Revenue | e | | | | | | | |
| <u> </u> | f | All other progra | am service revenue | | | | | |
| ᇫ | g | Total. Add lines | s 2a – 2f | | 0 | | | |
| | 3 | | ome (including dividen | | 0 | | | |
| | 4 | | ar amounts) stment of tax-exempt bond ; | | 0 | | | |
| | 5 | | | _ | 0 | | | |
| | | , | (ı) Real | (II) Personal | | | | |
| | 6a | Gross rents | | | | | | |
| | Ь | Less rental expenses | | | | | | |
| | c | Rental income | 0 | 0 | | | | |
| | d | or (loss) Net rental inco | me or (loss) | | 0 | | | |
| | | | (ı) Securities | (II) Other | | | | |
| | 7a | Gross amount from sales of assets other than inventory | | | | | | |
| | Ь | Less cost or other basis and sales expenses | | | | | | |
| | C | Gain or (loss) | | | | | | |
| | d | | ss) | · · · · • | 0 | | | |
| enne | 8a | Gross income f events (not inc \$ of contributions | | | | | | |
| Other Revenue | Ь | See Part IV, lir | | | | | | |
| ŏ | c | | · (loss) from fundraising (| events 🛌 | 0 | | | |
| | 9a | | rom gaming activities ne 19 a | | | | | |
| | Ь | Less direct ex | penses b | | | | | |
| | | | loss) from gamıng actıv | vities | 0 | | | |
| | 10a | Gross sales of returns and allo | | | | | | |
| | ь | Less cost of g | oods sold b | | | | | |
| | С | | (loss) from sales of inve | • | 0 | | | |
| | | Miscellaneou | s Revenue | Business Code | | | | |
| | 11a | | | | | | | <u> </u> |
| | b | | | | | | | |
| | c | | | | | | | |
| | d | | ue | | | | | |
| | e | | s 11a-11d | | 0 | | | |
| | 12 | Total revenue. | See Instructions | | 1,553,303 | | | |

in the United States See Part IV, line 21

Grants and other assistance to individuals in the

| | | | | . age = • |
|--|-----------------------|------------------------------------|---|---------------------------------------|
| Part IX Statement of Functional Expenses | | | | |
| Section $501(c)(3)$ and $501(c)(4)$ organizations must complete all columns A | ll other organizat | ions must comp | lete column (A) | |
| Check if Schedule O contains a response or note to any line in this | Part IX | | | |
| Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII. | (A) Total expenses | (B) Program service expenses | (C) Management and general expenses | (D) Fundraising expenses |
| Grants and other assistance to governments and organizations | | | | |

8,000

8,000

Part X Balance Sheet

| Cash-non-interest-bearing Beginning of year Beginning of year 1.421.00 1 1.551.50 | Par | 't X | Balance Sheet Check if Schedule O contains a response or note to any line in this Part X | | | |
|--|----------|------|--|-----------|-----|-----------|
| 2 Savings and temporary cash investments 0 2 0 0 0 0 0 0 0 0 | | | | 1 1 | | |
| 3 Pledges and grants receivable, net 0 3 0 0 | | 1 | Cash-non-interest-bearing | 1,421,100 | 1 | 1,631,569 |
| A Accounts receivable, net 0 4 0 0 0 0 0 0 0 0 | | 2 | Savings and temporary cash investments | 0 | 2 | 0 |
| 10 10 14 17 10 10 10 10 10 10 10 | | 3 | Pledges and grants receivable, net | 0 | 3 | 0 |
| Page | | 4 | Accounts receivable, net | 0 | 4 | 0 |
| Compared of the precision of the disqualified persons (as defined under section 4958(n(13)), persons described in section 4958(n(13)), and contributions beneficiary organizations of section 501 (n(90) voluntary employees' beneficiary organizations of section 501 (n/90) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L | | 5 | employees, and highest compensated employees Complete Part II of | | | |
| Preparal expenses and deferred charges 39,830 9 0 | <u>s</u> | 6 | 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' | | | |
| Preparal expenses and deferred charges 39.930 9 0 | <u>@</u> | | | | | |
| Preparal expenses and deferred charges 39.930 9 0 | Ø • | 7 | · | | | |
| 10a | - | 8 | Inventories for sale or use | | | |
| Part VI of Schedule D 108 14,720 10c 9,818 11 1 1 1 1 1 1 1 1 | | 9 | | 39,930 | 9 | 0 |
| 11 Investments—publicly traded securities 0 11 0 0 12 0 0 13 10 0 12 0 0 13 10 0 12 0 0 13 10 0 13 10 0 13 10 0 13 10 0 14 10 0 13 10 0 14 10 0 15 10 0 16 10 10 10 10 10 | | 10a | Part VI of Schedule D 10a 14,720 | 4 | | |
| 12 Investments—other securities See Part IV, line 11 0 12 0 0 13 0 0 14 0 0 15 0 0 14 0 0 15 0 0 15 0 0 15 0 0 15 0 0 15 0 0 15 0 0 15 0 0 15 0 0 15 0 0 15 0 0 15 0 0 15 0 0 15 0 0 15 0 0 15 0 0 15 0 0 15 0 0 0 15 0 0 0 0 0 0 0 0 0 | | Ь | Less accumulated depreciation | 14,720 | 10c | 9,813 |
| 13 | | 11 | Investments—publicly traded securities | 0 | 11 | 0 |
| 14 | | 12 | Investments—other securities See Part IV, line 11 | 0 | 12 | 0 |
| 15 | | 13 | Investments—program-related See Part IV, line 11 | 0 | 13 | 0 |
| 16 Total assets. Add lines 1 through 15 (must equal line 34) 1,475,750 16 1,641,382 | | 14 | Intangible assets | 0 | 14 | 0 |
| 17 Accounts payable and accrued expenses 348,446 17 365,755 18 Grants payable 0 18 0 19 Deferred revenue 0 19 0 20 Tax-exempt bond liabilities 0 20 0 21 Escrow or custodial account liability Complete Part IV of Schedule D 0 21 0 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 0 22 0 23 Secured mortgages and notes payable to unrelated third parties 0 23 0 24 Unsecured notes and loans payable to unrelated third parties 0 24 0 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D 0 25 53,086 26 Total liabilities. Add lines 17 through 25 348,446 26 418,841 27 Unrestricted net assets 0 27 0 28 Temporarily restricted net assets 1,127,304 28 1,222,541 29 Permanently restricted net assets 1,127,304 28 1,222,541 29 Permanently restricted net assets 0 29 0 30 Capital stock or trust principal, or current funds 30 31 Paid-in or capital surplus, or land, building or equipment fund 31 32 Retained earnings, endowment, accumulated income, or other funds 32 33 Total net assets or fund balances 1,122,364 34 Total net assets or fund balances 1,122,364 35 Total net assets or fund balances 1,122,364 36 Total et assets or fund balances 1,122,364 37 Total net assets or fund balances 1,122,364 38 Total net assets or fund balances 1,122,364 39 Total net assets or fund balances 1,122,364 30 Total net assets or fund balances 1,122,364 | | 15 | Other assets See Part IV, line 11 | 0 | 15 | 0 |
| 18 Grants payable 0 18 0 0 19 0 0 19 0 0 0 0 19 0 0 0 0 0 0 0 0 0 | | 16 | Total assets. Add lines 1 through 15 (must equal line 34) | 1,475,750 | 16 | 1,641,382 |
| Page 19 Deferred revenue | | 17 | Accounts payable and accrued expenses | 348,446 | 17 | 365,755 |
| 20 Tax-exempt bond liabilities | | 18 | Grants payable | 0 | 18 | 0 |
| Secretary of the part of the | | 19 | Deferred revenue | 0 | 19 | 0 |
| 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 | | 20 | Tax-exempt bond liabilities | 0 | 20 | 0 |
| Unsecured notes and loans payable to unrelated third parties | Ø | 21 | Escrow or custodial account liability $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$ | 0 | 21 | 0 |
| Unsecured notes and loans payable to unrelated third parties | iiitie | 22 | | | | |
| Unsecured notes and loans payable to unrelated third parties | æ | | persons Complete Part II of Schedule L | 0 | 22 | 0 |
| 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D | | 23 | Secured mortgages and notes payable to unrelated third parties | 0 | 23 | 0 |
| and other liabilities not included on lines 17-24) Complete Part X of Schedule D | | 24 | Unsecured notes and loans payable to unrelated third parties | 0 | 24 | 0 |
| 26 Total liabilities. Add lines 17 through 25 | | 25 | and other liabilities not included on lines 17-24) Complete Part X of Schedule | | | |
| Organizations that follow SFAS 117 (ASC 958), check here and complete lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets | | | | | | <u>.</u> |
| lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets | | 26 | | 348,446 | 26 | 418,841 |
| 30 Capital stock or trust principal, or current funds | S O | | | | | |
| 30 Capital stock or trust principal, or current funds | Ë | 27 | - • | اه | 27 | 0 |
| 30 Capital stock or trust principal, or current funds | <u>8</u> | | | | | 1.222.541 |
| 30 Capital stock or trust principal, or current funds | <u> </u> | | | | | |
| 30 Capital stock or trust principal, or current funds | Ē | | , | | | |
| 30 Capital stock or trust principal, or current funds | <u>.</u> | | | | | |
| 31 Paid-in or capital surplus, or land, building or equipment fund | 0 | 30 | | | 30 | |
| 33 Total net assets or fund balances | Ř | 31 | | | 31 | _ |
| 33 Total net assets or fund balances | AS: | 32 | | | 32 | |
| 34 Total liabilities and net assets/fund balances | ቑ | 33 | Total net assets or fund balances | 1,127,304 | 33 | 1,222,541 |
| | Z | 34 | | 1,475,750 | 34 | 1,641,382 |

| Pai | t XI | Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI | | | | ୮ |
|-----|-----------------|---|----------|----|-----|------------|
| | | | | | | <u> </u> |
| 1 | Total | revenue (must equal Part VIII, column (A), line 12) | 1 | | 1,5 | 553,303 |
| 2 | Total | expenses (must equal Part IX, column (A), line 25) | 2 | | 1,4 | 158,066 |
| 3 | Rever | ue less expenses Subtract line 2 from line 1 | 3 | | | 95,237 |
| 4 | Neta | sets or fund balances at beginning of year (must equal Part X, line 33, column (A)) | 4 | | 1,1 | 127,304 |
| 5 | Netu | realized gains (losses) on investments | 5 | | | |
| 6 | Donat | ed services and use of facilities | 6 | | | |
| 7 | Inves | ment expenses | 7 | | | |
| 8 | Prior | eriod adjustments | 8 | | | |
| 9 | Other | changes in net assets or fund balances (explain in Schedule O) | 9 | | | |
| 10 | Net a | sets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, n (B)) | 10 | | 1,2 | 222,541 |
| Par | t XII | Financial Statements and Reporting | | | | |
| | | Check if Schedule O contains a response or note to any line in this Part XII | | | | <u>. Г</u> |
| | | | | | Yes | No |
| 1 | | nting method used to prepare the Form 990 Cash Accrual Other organization changed its method of accounting from a prior year or checked "Other," explain in ule O | | | | |
| 2a | Were | he organization's financial statements compiled or reviewed by an independent accountant? | | 2a | | No |
| | | ,' check a box below to indicate whether the financial statements for the year were compiled or review rate basis, consolidated basis, or both | ved on | | | |
| | Γs | eparate basis | | | | |
| b | Were | he organization's financial statements audited by an independent accountant? | | 2b | Yes | |
| | | ,' check a box below to indicate whether the financial statements for the year were audited on a sepai consolidated basis, or both | ate | | | |
| | Γs | eparate basis 🔽 Consolidated basis 🗔 Both consolidated and separate basis | | | | |
| С | | s," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversigh review, or compilation of its financial statements and selection of an independent accountant? | t of the | 2c | Yes | |
| | If the Sched | organization changed either its oversight process or selection process during the tax year, explain in ule O | | | | |
| За | | esult of a federal award, was the organization required to undergo an audit or audits as set forth in the Audit Act and OMB Circular A-133? | ! | 3a | | No |
| b | | s," did the organization undergo the required audit or audits? If the organization did not undergo the | | 3b | | |

Software ID: Software Version:

EIN: 13-3976062

Name: NRDC Action Fund Inc

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

| Form 990, Part VII - Compensation Compensated Employees, and Inde | of Officers, pendent Cor | Direct ntracto | ors, ors | Tru | ste | es, i | Сеу | Employees, High | nest | |
|--|--|------------------------------------|---------------------------|----------------------|------------------------|------------------------------|--------|--|---|---|
| (A) Name and Title | (B) Average hours per week (list any hours for related | Posit more th perso and a | ion (e nan o n is b | ne b oth ctor/ | ox, ι an o /trus | inless fficer tee) | | (D) Reportable compensation from the organization (W- 2/1099-MISC) | (E) Reportable compensation from related organizations (W- 2/1099-MISC) | (F) Estimated amount of other compensation from the organization and |
| | organizations below dotted line) | Individual trustae or director | Institutional Trustee | Officei | Ke) emplojee | Highest compensated employee | Former | | | related organizations |
| Wendy Abrams | 1 0 | х | | | | | | 0 | 0 | |
| Director John H Adams | 1 0 | | | | | | | | | |
| Director | 35 0 | Х | | | | | | | 175,000 | 63,296 |
| Christopher Arndt | 1 0 | х | | | | | | | | |
| Director | | | | | | | | | | |
| Richard E Ayres | 1 0 | X | | | | | | | | |
| Director Anne Bartley | 10 | | | | | | | | | |
| Director | | х | | | | | | 0 | 0 | 0 |
| Patricia Bauman | 1 0 | | | | | | | | | |
| Director | 1 0 | Х | | | | | | | | |
| Frances Beinecke | 1 0 | × | | × | | | | | 422,811 | 54,293 |
| President Lucy Blake | 40 0 1 0 | | | | | | | | , | , |
| Director | 10 | Х | | | | | | | | |
| Dayna Bochco | 1 0 | | | | | | | | | |
| Director | | X | | | | | | | | |
| Sherwood Boehlert | 1 0 | Х | | | | | | | | |
| Director | | | | | | | | | | |
| Hamilton Candee | 1 0 | Х | | | | | | | | |
| Director Ari Emanuel | 1 0 | | | | | | | | | |
| Director | | Х | | | | | | | | |
| Bob Epstein | 1 0 | х | | x | | | | 0 | 0 | 0 |
| Director and board chair | | | | | | | | Ů | | |
| Michael Finnegan | 1 0 | х | | | | | | | | |
| Director William Haney | 1 0 | | | | | | | | | |
| Director | | Х | | | | | | | | |
| Barbarına Heyerdahl | 1 0 | х | | | | | | | | |
| Director | | | | | | | | | | |
| Cindy Horn | 1 0 | х | | | | | | | | |
| Director Honorable Hamilton Kean | 1 0 | | | | | | | | | |
| Director | | Х | | | | | | | | |
| Patricia Sullivan | 1 0 | V | | | | | | | F0 030 | |
| Director | | Х | | | | | | | 59,038 | |
| Vernice Miller-Travis | 1 0 | X | | | | | | | | |
| Director Mary Moran | 1 0 | | | | | | | | | |
| Director | | х | | | | | | | | |
| Edward James Olmos | 1 0 | | | | | | | | | |
| Director | | Х | | | | | | | | |
| John Podesta | 1 0 | х | | | | | | | | |
| Director Daniel R Tishman | 1 0 | | | | | | | | | |
| Director | | х | | | | | | | | |
| Douglas N Varley | 1 0 | . | | | | | | | | |
| Director | | Х | | | | | | | | |
| | | | | | | | | | | |

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) (B) (C) (D)

| (A) Name and Title | (B) A verage hours per week (list any hours | (C) Position (do not check more than one box, unless person is both an officer and a director/trustee) | | | | nless ficer | i | | (E) Reportable compensation from related organizations (W- | (F) Estimated amount of other compensation from the |
|--|---|--|-----------------------|---------|--------------|---------------------|--------|--------------|---|---|
| | for related organizations below dotted line) | Individual trustee or director | Institutional Trustee | Officei | Key employee | Highest compensated | Former | 2/1099-MISC) | 2/1099-MISC) | organization and related organizations |
| Eric Wepsic | 10 | х | | | | | | | | |
| Director Ira Zienng | 1 0 | | | | | | | | | |
| - | | х | | | | | | | | |
| Director KATHLEEN WELCH | 1 0 | | | | | | | | | |
| | | х | | | | | | | | |
| Director JOANN KAPLAN | | | | | | | | | | |
| | 1 0 | х | | | | | | | | |
| Director | | | | | | | | | | |
| Sarah A Gillman | 1 0 | | | Х | | | | | 226,500 | 35,020 |
| Chief Financial Officer | 40 0 | | | | | | | | , | |
| Judith A Keefer | 1 0 | | | х | | | | | 234,021 | 41,279 |
| Chief Operating Officer | 40 0 | | | ` | | | | | 254,021 | 41,273 |
| Peter Lehner | 1 0 | | | х | | | | | 296,060 | 49,193 |
| Executive Director | 40 0 | | | ^ | | | | | 290,000 | 49,193 |
| Jennifer Reynoso | 1 0 | | | V | | | | | | _ |
| assistant secretary | | | | Х | | | | | | |
| MARIPAT ALPUCH | 1 0 | | | | | | | | | _ |
| SECRETARY (THRU 5/14) | 1 0 | | | Х | | | | | | |
| Sarah Cogan | 10 | | | | | | | | | |
| CECDETARY (AC OF F/14) | | | | Х | | | | | | |
| SECRETARY (AS OF 5/14) Heather Taylor-Miesle | 1 0 | | | | | | | | | |
| , | | | | | | x | | | 124,343 | 12,529 |
| Director | J | | | | | | l | | | |
| | | | | | | | | | | |

DLN: 93493135057325

Employer identification number

OMB No 1545-0047

SCHEDULE C (Form 990 or 990-EZ)

Name of the organization

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

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

▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ.

▶ See separate instructions. ▶ Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

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

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

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

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

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

◆ Section 501(c)(4), (5), or (6) organizations Complete Part III

| MKI | DC ACTION Fund Inc | | | 13-3976062 | |
|-------------|---|--|--|--|---|
| Par | t I-A Complete if the or | ganization is exempt under | section 501(| c) or is a section 527 | 7 organization. |
| 1 2 3 | Provide a description of the org Political expenditures Volunteer hours | ganızatıon's dırect and ındırect polıt | ıcal campaıgn act | ıvıtıes ın Part IV ▶ | \$104,254 |
| Par | t I-B Complete if the or | ganization is exempt under | section 501(| c)(3). | _ |
| 1 | | e tax incurred by the organization ur | | | \$ |
| 2 | Enter the amount of any excise | e tax incurred by organization mana | gers under sectior | 1 4955 ► | \$ |
| 3 | If the organization incurred a s | ection 4955 tax, did it file Form 47 | 20 for this year? | | ┌ Yes |
| 4a | Was a correction made? | | | | ┌ Yes |
| b | If "Yes," describe in Part IV | | | | |
| Par | t I-C Complete if the or | ganization is exempt under | section 501(| c), except section 50 |)1(c)(3). |
| 1 | Enter the amount directly expe | ended by the filing organization for s | ection 527 exemp | ot function activities 🕨 | \$104,254 |
| 2 | Enter the amount of the filing o exempt function activities | rganızatıon's funds contributed to o | ther organizations | for section 527 | . |
| _ | · | | | 0.001.1.471 | > |
| 3 | Total exempt function expendi | 0-POL, line 1/b | \$ 104,254 | | |
| 4 | Did the filing organization file F | | | | 「Yes ▼ No |
| 5 | organization made payments f amount of political contribution | nd employer identification number (EFor each organization listed, enter the received that were promptly and political action committee (PAC) I | ne amount paid fro directly delivered | m the filing organization's to a separate political orga | funds Also enter the anization, such as a |
| | (a) Name | (b) Address | (c) EIN | (d) A mount paid from filing organization's funds If none, enter -0- | (e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0- |
| | | | | | |
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| | | | | | |

| Sch | nedule C (Form 990 or 990-EZ) 2013 | | | | | Page 2 |
|-----|---|---------------------------|----------------------------------|-----------------------------|--|-------------------------------------|
| Pä | art II-A Complete if the organization | is exempt under | section 501(| c)(3) and file | ed Form 5768 | |
| _ | under section 501(h)). | | Link in Doub TV an | - h - 66:1: - h - d | | a adduces FIN |
| ٠. | Check ► If the filing organization belongs to a expenses, and share of excess lobb | | iist in Part IV ea | ch amiliated gro | up members nam | e, address, EIN, |
| 3 | Check ► ☐ If the filing organization checked bo | | l" provisions app | ly | | |
| | Limits on Lobbying E (The term "expenditures" means ar | | l .) | | (a) Filing organization's totals | (b) Affiliated group totals |
| La | Total lobbying expenditures to influence public o | pinion (grass roots lob | bying) | | | |
| ь | Total lobbying expenditures to influence a legisl | ative body (direct lobby | yıng) | | | |
| c | Total lobbying expenditures (add lines 1a and 1 | o) | | Γ | | |
| d | O ther exempt purpose expenditures | | | Γ | | |
| e | Total exempt purpose expenditures (add lines 1 | c and 1d) | | | | |
| f | Lobbying nontaxable amount Enter the amount is columns | rom the following table | ın both | | | |
| | If the amount on line 1e, column (a) or (b) is: | The lobbying nontax | able amount is: | | | |
| | Not over \$500,000 | 20% of the amount on lir | ne 1e | | | |
| | Over \$500,000 but not over \$1,000,000 | \$100,000 plus 15% of the | e excess over \$500,0 | 00 | | |
| | Over \$1,000,000 but not over \$1,500,000 | \$175,000 plus 10% of the | e excess over \$1,000 | ,000 | | |
| | Over \$1,500,000 but not over \$17,000,000 | \$225,000 plus 5% of the | excess over \$1,500,0 | 000 | | |
| | Over \$17,000,000 | \$1,000,000 | | | | |
| g | Grassroots nontaxable amount (enter 25% of lir | ue 1f) | | | | |
| h | Subtract line 1g from line 1a If zero or less, ent | er-0- | | | | |
| i | Subtract line 1f from line 1c If zero or less, ente | er - 0 - | | | | |
| j | If there is an amount other than zero on either li section 4911 tax for this year? | ne 1h or line 1ı, did the | organization file | Form 4720 repo | orting | ┌ Yes ┌ No |
| | (Some organizations that made a columns below. See t | he instructions fo | ection do not r lines 2a thro | havè to con ough 2f on p | | ne five |
| | Lobbying Exp | enditures During | 4-Year Avera ⊤ | ging Period | 1 | 1 |
| | Calendar year (or fiscal year beginning in) | (a) 2010 | (b) 2011 | (c) 2012 | (d) 2013 | (e) Total |
| 2a | Lobbying nontaxable amount | | | | | |
| b | Lobbying ceiling amount (150% of line 2a, column(e)) | | | | | |
| C | Total lobbying expenditures | | | | | |
| d | Grassroots nontaxable amount | | | | | |

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

Grassroots lobbying expenditures

| | dule C (Form 990 or 990-E2) 2013 | | | | Pa | age 🍮 |
|--------|---|--|---|--|--------------------------------|---------------|
| Pai | t II-B Complete if the organization is exempt under section 501(c)(3) and has N filed Form 5768 (election under section 501(h)). | | | | | |
| For ea | ach "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying | (| a) | 1 | (b) | |
| activi | | Yes | No | A | moun | nt |
| 1 | During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of | | | | | |
| а | Volunteers? | | | _ | | |
| b | Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? | | | 1 | | |
| С | Media advertisements? | | | | | |
| d | Mailings to members, legislators, or the public? | | | | | |
| е | , | | | | | |
| f | Grants to other organizations for lobbying purposes? | | | | | |
| g | Direct contact with legislators, their staffs, government officials, or a legislative body? | | | | | |
| h | Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? | | | | | |
| i | O ther activities? | | | | | |
| j | Total Add lines 1c through 1i | | 1 | | | |
| 2a | Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? | | | - | | |
| Ь | If "Yes," enter the amount of any tax incurred under section 4912 | | | - | | |
| C | If "Yes," enter the amount of any tax incurred by organization managers under section 4912 | | ı | | | |
| d | If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? t III-A Complete if the organization is exempt under section 501(c)(4), section 5 | 01/- | \ <u> </u> | | -ti- | |
| Fell | 501(c)(6). |) T O |)(5), (| JI 56 | CHO | •• |
| | | | | | Yes | No |
| 1 | Were substantially all (90% or more) dues received nondeductible by members? | | Γ | 1 | | |
| 2 | Did the organization make only in-house lobbying expenditures of \$2,000 or less? | | | 2 | | |
| 3 | Did the organization agree to carry over lobbying and political expenditures from the prior year? | | | 3 | | |
| Par | t III-B Complete if the organization is exempt under section 501(c)(4), section 5 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "line 3, is answered "Yes." | | | | | |
| 1 | Dues, assessments and similar amounts from members | 1 | | | | |
| 2 | Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). | | | | | |
| а | Current year | 2a | | | | |
| Ь | Carryover from last year | 2b | | | | |
| c | Total | 2c | | | | |
| 3 | Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues | 3 | | | | |
| 4 | If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and | | | | | |
| | political expenditure next year? | 4 | | | | |
| 5 | Taxable amount of lobbying and political expenditures (see instructions) | 5 | | | | |
| Pa | rt IV Supplemental Information | | | | | |
| | vide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated grou t II-B, line 1 Also, complete this part for any additional information | p lıst), | Part II | -A, lu | ne 2, | and |
| | Return Reference Explanation | | | | | |
| Sche | edule C, Part I-A, Line 1 As 2013 was not an election year, these political expenditures were dire | cted n | naınly t | oward | | |
| | preparation for the 2014 elections. Specifically, the Action Fund began of strategies for key U.S. Senate races in New Hampshire, Michigan, North and Iowa. In addition, the Action Fund produced blogs and social media candidates who were "running clean" and those who support an agenda less states and those who support an agenda less states are supported by 49,981 of the total political expenditures was spent on staff salaries (in overhead), while the remaining \$54,273 was spent on discretionary expenditures and advertising. The total amount of political expenditure organization's overall expenditures for the year. | develo Caroli conten ed by t ncludir enses, | ping nai na, Hav it highli he foss ng bene includi | rrative vaii, C ghting il fuel fits ar ng cor | olora indus id isulta | stry ants, |
| | | | | | | |

| 201104410 0 (101111 330 01 330 12) 2013 | | r age -r | | | |
|---|-----------------------|---------------------|--|--|--|
| Part IV Supplemental Information | on <i>(continued)</i> | | | | |
| Return Reference | Explanation | | | | |
| | | | | | |
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Schedule D (Form 990) 2013

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493135057325

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury

► 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. ► Information about Schedule D (Form 990)

Supplemental Financial Statements

Open to Public

| emal F | Revenue Service and its instruct | tions is at <u>www.irs.gov/roriii990</u> . | | Inspection |
|--------|---|---|-----------|-------------------------------|
| | e of the organization C Action Fund Inc | | Emp | loyer identification number |
| | | | 13- | 3976062 |
| ar | Organizations Maintaining Donor Adv | | unds | or Accounts. Complete if th |
| | organization answered "Yes" to Form 990 | , Part IV, line 6. (a) Donor advised funds | | (b) Funds and other accounts |
| - | Total number at end of year | (a) Donor advised funds | | (b) Fullus and other accounts |
| | Aggregate contributions to (during year) | | | |
| | Aggregate grants from (during year) | | | |
| | Aggregate value at end of year | | | |
| | Did the organization inform all donors and donor advisor funds are the organization's property, subject to the or | <u> </u> | nor advi | sed Yes No |
| | Did the organization inform all grantees, donors, and do used only for charitable purposes and not for the benef | onor advisors in writing that grant funds | | : |
| | conferring impermissible private benefit? | | , στιισ | ☐ Yes ☐ No |
| П | Conservation Easements. Complete if | the organization answered "Yes" | to Forn | n 990, Part IV, line 7. |
| | Purpose(s) of conservation easements held by the org Preservation of land for public use (e g , recreation Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a | or education) Preservation of a | certifie | d historic structure |
| | easement on the last day of the tax year | | | |
| | - | | | Held at the End of the Year |
| | Total number of conservation easements | | 2a | |
| | Total acreage restricted by conservation easements | | 2b | |
| | Number of conservation easements on a certified histo | , , | 2c | |
| | Number of conservation easements included in (c) acq historic structure listed in the National Register | | 2d | |
| | Number of conservation easements modified, transferr the tax year 🛌 | ed, released, extinguished, or terminat | ed by tr | ne organization during |
| | Number of states where property subject to conservat | ion easement is located 🛌 | | |
| | Does the organization have a written policy regarding tenforcement of the conservation easements it holds? | the periodic monitoring, inspection, han | ıdlıng of | violations, and Yes No |
| | Staff and volunteer hours devoted to monitoring, inspe | cting, and enforcing conservation ease | ments o | luring the year |
| | A mount of expenses incurred in monitoring, inspecting \$ \subseteq \$ | g, and enforcing conservation easement | s during | g the year |
| | Does each conservation easement reported on line 2(or and section 170(h)(4)(B)(ii)? | d) above satisfy the requirements of se | ction 17 | 70(h)(4)(B)(ı) |
| | In Part XIII, describe how the organization reports con balance sheet, and include, if applicable, the text of the the organization's accounting for conservation easeme | e footnote to the organization's financia | | |
| | Organizations Maintaining Collection Complete if the organization answered "Y | s of Art, Historical Treasures, | or Otl | her Similar Assets. |
| | If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar asse service, provide, in Part XIII, the text of the footnote t | ts held for public exhibition, education, | orrese | arch in furtherance of public |
| | If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar asse service, provide the following amounts relating to thes | .16 (ASC 958), to report in its revenue | statem | ent and balance sheet |
| | (i) Revenues included in Form 990, Part VIII, line 1 | | | ► \$ |
| | (ii) Assets included in Form 990, Part X | | | |
| | If the organization received or held works of art, histor following amounts required to be reported under SFAS | | | |
| | Revenues included in Form 990, Part VIII, line 1 | · - | | ▶ - \$ |
| | | | | · + |
| | Assets included in Form 990, Part X | | | ▶ \$ |

| Part | Organizations Maintaining Co | ollections of Art, | Hist | <u>tori</u> | cal Tr | <u>easur</u> | es, or O | <u>ther</u> | Similar As | sets (| continued) |
|------------|--|---------------------------|-----------|-------------|-------------------------|-----------------|-----------------------------------|-------------|--------------------------------|-----------------|--|
| 3 | Using the organization's acquisition, access collection items (check all that apply) | ion, and other record | ls, ch | ecka | iny of th | ne follo | wing that a | are a s | significant use | ofits | |
| а | Public exhibition | | d | Γ | Loan | rexcha | ange progr | ams | | | |
| b | Scholarly research | | e | Γ | Other | | | | | | |
| c | Preservation for future generations | | | | | | | | | | |
| 4 | Provide a description of the organization's c Part XIII | ollections and explai | n how | they | furthe | r the or | ganızatıon | 's exe | empt purpose | ın | |
| 5 | During the year, did the organization solicit | | | | | | | | | _ | _ |
| Doe | assets to be sold to raise funds rather than | | | | | | | | | Yes | ☐ No |
| Раг | Escrow and Custodial Arrang Part IV, line 9, or reported an ar | | | | | | answere | u re | es to Form s | 990, | |
| 1a | Is the organization an agent, trustee, custor included on Form 990, Part X? | | | | | | other ass | ets n | | ┌ Yes | ┌ No |
| b | If "Yes," explain the arrangement in Part XI | II and complete the | follow | ıng t | able | | | | | | |
| | | | | | | | | | Ar | nount | |
| c | Beginning balance | | | | | | | 1c | | | |
| d | Additions during the year | | | | | | | 1d | | | |
| e | Distributions during the year | | | | | | | 1e | | | |
| f | Ending balance | | | | | | | 1f | | | |
| 2a | Did the organization include an amount on F | orm 990, Part X, line | 21? | | | | | | | ┌ Yes | ┌ No |
| b | If "Yes," explain the arrangement in Part XI | II Check here if the | expla | natio | n has b | een pr | ovided in F | art X | III | | |
| Par | | | | | | | | | | | |
| | | (a)Current year | (b) | Prior | ear | b (c) Tw | o years back | (d)⊺ | hree years back | (e) Four | years back |
| 1a | Beginning of year balance | | | | | | | - | | | |
| Ь | Contributions | | | | | | | ₩ | | | |
| С | Net investment earnings, gains, and losses | | | | | | | | | | |
| d | Grants or scholarships | | | | | | | | | | |
| e | Other expenditures for facilities | | | | | | | | | | |
| _ | and programs | | | | | | | \vdash | | | |
| r | Administrative expenses End of year balance | | | | | | | + | | | |
| g | • | | 71 | | | / \\ \ | | <u> </u> | | | |
| 2 | Provide the estimated percentage of the cur | rent year end balanc | e (IIne | e 1g, | columr | n (a)) ne | eid as | | | | |
| а | Board designated or quasi-endowment 🕨 | | | | | | | | | | |
| Ь | Permanent endowment ► | | | | | | | | | | |
| С | Temporarily restricted endowment ► The percentages in lines 2a, 2b, and 2c sho | uld equal 100% | | | | | | | | | |
| За | Are there endowment funds not in the posse organization by | _ | tıon t | hat a | re held | and ad | lmınıstered | d for t | _ | Ye | s No |
| | (i) unrelated organizations | | | • | | | | • | 3a(| • • | |
| b | (ii) related organizations | | | | | | | ٠ | 3 | | |
| 4 | Describe in Part XIII the intended uses of t | • | | | | | | - | · · · <u>_ · · · </u> | | <u></u> |
| Par | t VI Land, Buildings, and Equipme | ent. Complete ıf t | he or | gan | zation | answ | ered 'Yes | ' to F | orm 990, Pa | art IV, | line |
| | 11a. See Form 990, Part X, line | 10. | | Τ, | | | lass : | | | . 17.0 | |
| | Description of property | | | | a) Cost o sıs (ınves | | (b) Cost or basis (otl | | (c) Accumulate depreciation | | Book value |
| 1a l | and | | | | | | | | | | |
| b E | Buildings | | | | | | | | | | |
| c l | easehold improvements | | | | | | | | | | |
| d E | Equipment | | | | | | | | | | |
| | 5.11 | | | | | | | | | | |
| | Other | | • | | | | | 4,720 | | ,907 | 9,813 |

| See Form 990, Part X, line 12. (a) Description of security or category | (b)Book value | (c) Method of valuation |
|--|------------------------------|---|
| (including name of security) | (2,200 | Cost or end-of-year market value |
| (1)Financial derivatives | | |
| (2)Closely-held equity interests Other | | |
| Other | | |
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| Total. (Column (b) must equal Form 990, Part X, col (B) line 12) | * | |
| Part VIII Investments—Program Related. C See Form 990, Part X, line 13. | Complete if the organizati | on answered 'Yes' to Form 990, Part IV, line 11c. |
| (a) Description of investment | (b) Book value | (c) Method of valuation |
| | | Cost or end-of-year market value |
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| | | |
| Total. (Column (b) must equal Form 990, Part X, col (B) line 13) | F | |
| Part IX Other Assets. Complete if the organizati | on answered 'Yes' to Form 99 | |
| (a) Desc | | (b) Book value |
| | | |
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| Total. (Column (b) must equal Form 990, Part X, col.(B) line | | |
| Part X Other Liabilities. Complete if the org | janization answered 'Yes' | to Form 990, Part IV, line 11e or 11f. See |
| 1 (a) Description of liability | (b) Book value | |
| Federal income taxes | C | |
| DUE FROM RELATED PARTIES | 53,086 | |
| | · | |
| | | 4 |
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| | | 4 |
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| | | |
| Total. (Column (b) must equal Form 990, Part X, col (B) line 25) | > 53,086 | 6 |

| Par | | Revenue per Audited Financial Statements With Revenue powered 'Yes' to Form 990, Part IV, line 12a. | er R | eturn Complete if |
|---------------|--|--|---|--|
| 1 | | er support per audited financial statements | 1 | |
| 2 | | ut not on Form 990, Part VIII, line 12 | | |
| а | | tments | | |
| ь | Donated services and use of | facilities | | |
| c | | ts | | |
| d | |) | | |
| e | Add lines 2a through 2d | , | 2e | |
| 3 | Subtract line 2e from line 1 . | | 3 | |
| 4 | | 90, Part VIII, line 12, but not on line 1 | | |
| a | | luded on Form 990, Part VIII, line 7b . 4a | | |
| b | |) 4b | | |
| c | | , | 4c | |
| 5 | | Id 4c. (This must equal Form 990, Part I, line 12) | 5 | |
| | | Expenses per Audited Financial Statements With Expenses | | Return. Complete |
| | | nswered 'Yes' to Form 990, Part IV, line 12a. | ρυ. | |
| 1 | Total expenses and losses pe | er audited financial statements | 1 | |
| 2 | Amounts included on line 1 b | ut not on Form 990, Part IX, line 25 | | |
| а | Donated services and use of | facilities | | |
| b | Prior year adjustments | 2b | | |
| c | Otherlosses | | | |
| 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 99 | 90, Part IX, line 25, but not on line 1: | | |
| а | Investment expenses not inc | luded on Form 990, Part VIII, line 7b 4a | | |
| ь | Other (Describe in Part XIII |) 4b | | |
| c | Add lines 4a and 4b | | 4c | |
| 5 | | and 4c. (This must equal Form 990, Part I, line 18) | 5 | |
| Par | Supplemental In | | ı | . <u>I</u> |
| P rov Part | ride the descriptions required fo | r Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, I, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to | | le any additional |
| ĺ | Return Reference | Explanation | | |
| Form XII | 990, Schedule D, Part XI and | NRDC ACTION FUND does not receive standalone financial statements, consolidated for financial reporting purposes with an affiliated organization Defense Council, Inc. Form 990, Schedule D, Part X, Line 2. The FASB Ac established criterion that an individual tax position must meet for some or position to be recognized in an entity's financial statements. This standar position be recognized or derecognized based on a "more likely than not" processes currently in place to ensure the maintenance of its tax-exempt report unrelated income, determine its filing and tax obligations in jurisdic and to review other matters that may be considered a tax position. The ta 2013, and 2014 remain open to audit for both federal and state purposes impact on NRDC's 2014 and 2013 consolidated financial statements. NR 2014 and 2013 consolidated financial statements include any uncertainty. | n, the count rall of required thresh statustions x year DC do | Natural Resources ing Codification (ASC) fithe benefits of that uires that a tax nold NRDC has is, to identify and for which it has nexus, rs ending 2011, 2012, standard had no oes not believe its |
| | | | | |
| | | | | |

| • | <u> </u> | |
|-----------|-------------------|----------------------|
| Part XIII | Supplemental Info | ormation (continued) |
| Ret | turn Reference | Explanation |
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Schedule D (Form 990) 2013

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DLN: 93493135057325

OMB No 1545-0047

Department of the Treasury

Internal Revenue Service

Schedule J (Form 990)

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees**

► Complete if the organization answered "Yes" to Form 990, Part IV, line 23. ► Attach to Form 990. ► See separate instructions.

Compensation Information

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

Open to Public Inspection

Name of the organization NRDC Action Fund Inc

Employer identification number

13-3976062

| Pa | rt I Questions Regarding Compensation | | | |
|----|--|----------|-----|----|
| | | | Yes | No |
| 1a | Check the appropiate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items | | | |
| | First-class or charter travel Housing allowance or residence for personal use | | | |
| | □ Travel for companions □ Payments for business use of personal residence | | | |
| | Tax idemnification and gross-up payments Health or social club dues or initiation fees | | | |
| | Discretionary spending account Personal services (e.g., maid, chauffeur, chef) | | | |
| b | If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain | 1b | | |
| 2 | Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a? | 2 | | |
| | | | | |
| 3 | Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III | | | |
| | Compensation committee Written employment contract | | | |
| | ☐ Independent compensation consultant ☐ Compensation survey or study | | | |
| | Form 990 of other organizations Approval by the board or compensation committee | | | |
| 4 | During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization | | | |
| а | Receive a severance payment or change-of-control payment? | 4a | | No |
| b | Participate in, or receive payment from, a supplemental nonqualified retirement plan? | 4b | | No |
| C | Participate in, or receive payment from, an equity-based compensation arrangement? | 4c | | Νo |
| | If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III | | | |
| | Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9. | | | |
| 5 | For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of | | | |
| а | The organization? | 5a | | No |
| ь | Any related organization? | 5b | | No |
| | If "Yes," to line 5a or 5b, describe in Part III | | | |
| 6 | For persons listed in Form 990, Part VII, Section A, line $1a$, did the organization pay or accrue any compensation contingent on the net earnings of | | | |
| а | The organization? | 6a | | No |
| b | Any related organization? | 6b | | No |
| | If "Yes," to line 6a or 6b, describe in Part III | | | |
| 7 | For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III | 7 | | No |
| 8 | Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was | <u> </u> | | |
| • | subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe | | | |
| | ın Part III | 8 | | No |
| 9 | If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)? | 9 | | |

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(1)-(111) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

| (A) Name and Title | | (B) Breakdown of | W-2 and/or 1099-MIS | SC compensation | (C) Retirement and | (D) Nontaxable | (E) Total of columns | (F) Compensation |
|---|-------------|--------------------------|---|----------------------|--------------------|----------------|----------------------|---|
| | | (i) Base compensation | (ii) Bonus & ıncentıve compensatıon | incentive reportable | | benefits | (B)(ı)-(D) | reported as deferred in prior Form 990 |
| (1)John H Adams Director | (i) (ii) | 175,000 | | | | 63,296 | 238,296 | |
| (2)Frances Beinecke President | (i) (ii) | 422,811 | | | 35,700 | 18,593 | 477,104 | |
| (3)Sarah A Gillman Chief Financial Officer | (i) (ii) | 226,500 | | | 16,427 | 18,593 | 261,520 | |
| (4)Judith A Keefer Chief Operating Officer | (i) (ii) | 234,021 | | | 32,935 | 8,344 | 275,300 | |
| (5)Peter Lehner Executive Director | (i) (ii) | 296,060 | | | 30,600 | 18,593 | 345,253 | |

Schedule J (Form 990) 2013

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II

Also complete this part for any additional information

| Return Reference | Explanation |
|--------------------------|--|
| Compensation Information | Schedule J Part II, John H Adams Column B(I) Base Compensation After thirty-five years of committed service as NRDC's Founder and President, John Adams retired on April 1, 2006 John is a part-time consultant for NRDC and received \$175,000 for these services in calendar year 2013 Column D Nontaxable Benefits. As part of his retirement agreement, NRDC provides John Adams with medical and dental benefits and a long term care plan. The value of these benefits are Medical \$20,312 LTC \$42,985 Form 990, Part VII & Schedule J, Part I The individuals reported on NRDC Action Fund's Form 990, Frances Beinecke, Sarah Gillman, Judith Keefer, Peter Lehner and Heather Taylor-Miesle receive their compensation from the parent organization, Natural Resources Defense Council, Inc. (NRDC) Accordingly, all compensation is being reported on NRDC Action Fund's Form 990 as related organization compensation. However, a portion of each officer's compensation is reimbursed by NRDC Action Fund to NRDC based on services rendered to NRDC Action Fund. In the interest of clarity, NRDC Action Fund is disclosing the following salary and benefits amounts as having been reimbursed by NRDC Action Fund to NRDC for these services. Salary Benefits President Beinecke \$5,739 \$1,567. Chief financial officer Gillman \$4,701 \$1,285. Executive director Lehner \$12,913 \$3,532. Director Taylor-Miesle \$124,343 \$12,529. NRDC. Action Fund reimburses. NRDC for the services of other NRDC employees. Those individuals do not meet the criteria of an officer, key employee or highly compensated employee of the Action Fund and accordingly are not disclosed in Part VII or Schedule J of the 990. |

Schedule J (Form 990) 2013

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DLN: 93493135057325

Inspection

OMB No 1545-0047

SCHEDULE 0 (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

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

Name of the organization NRDC Action Fund Inc

Employer identification number

13-3976062

990 Schedule O, Supplemental Information

| Return Reference | Explanation |
|------------------------------|---|
| Form 990, Part IV | |
| Part VI - Governance | 990 review process form 990, Part VI, Section B, Line 11 NRDC Action Fund's Form 990 is prepared by a nationally recognized accounting firm in conjunction with the organization's senior management and financial team. Upon completion, the Form 990 is distributed to senior management and THE BOARD OF DIRECTORS' Finance and Audit Committee for review and approval A copy of the final Form 990 is shared with the full board of directors prior to its electronic filing with the Internal Revenue Service. Conflict of interest policy monitoring. Enforcement Form 990, part VI, Section B, LINE 12 Each officer, director, and employee is required to annually disclose any conflicts of interest that arise by virtue of relationship to the organization, board service, or position with either NRDC Action Fund or NRDC. NRDC Action Fund monitors compliance with its conflict of interest policy through an annual questionnaire/disclosure statement that is distributed to these individuals. Potential conflicts are investigated immediately. Process to determine compensation Form 990, Part VI, Section B, LINE 15 NRDC Action Fund does not directly compensate any officers, directors and/or employees. All compensation is paid by the parent organization, Natural Resource. Defense Council, and is reimbursed by NRDC Action Fund to NRDC. The processes used for determining compensation as paid by the parent entity are described on that organization's Form 990. |
| FORM 990, PART VI, SECTION C | LINE 19 - NRDC Action Fund makes its Form 990 available to the public by retaining a copy at its place of business. The Action Fund also makes the 990 available on the Action Fund website at www indicactionfund org (and on www guidestar org). The organization's financial statements, governing documents and conflict of interest policy are not ordinarily made a vailable to the public, but, if requested, will be provided at management's discretion |
| form 990, part XII, line 2c | THe NRDC Action Fund does not receive standalone financial statements, for audit purposes its operations are consolidated with an affiliated organization, the Natural Resources Defense Council, Inc. form 990, part XII, line 3a The NRDC Action Fund did not receive any federal funding, nevertheless, its activities are included in the audited financial statements of its parent organization, Natural Resources Defense Council, which did undergo an A-1 33 audit |
| FORM 990 PART IX LINE 11G | DESCRIPTION STRATEGIC PLANNING TOTAL FEES 108016 |
| FORM 990 PART IX LINE 11G | DESCRIPTION DESIGN TOTAL FEES 13056 |
| FORM 990 PART IX LINE 11G | DESCRIPTION WEB SERVICES TOTAL FEES 84286 |
| FORM 990 PART IX LINE 11G | DESCRIPTION WRITING & EDITING TOTAL FEES 9802 |
| FORM 990 PART IX LINE 11G | DESCRIPTION POLITICAL OUTREACH TOTAL FEES 9575 |
| FORM 990 PART IX LINE 11G | DESCRIPTION MISCELLANEOUS TOTAL FEES 16471 |
| FORM 990 PART IX LINE 11G | DESCRIPTION CONSULTING TOTAL FEES 30000 |
| FORM 990 PART IX LINE 11G | DESCRIPTION PRINTING TOTAL FEES 1121 |
| FORM 990 PART IX LINE 11G | DESCRIPTION LESS RECLASSED PROFESSIONAL TOTAL FEES -608 |

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DLN: 93493135057325

2013

OMB No 1545-0047

Open to Public Inspection

Related Organizations and Unrelated Partnerships

► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. ► Attach to Form 990. ► See separate instructions.

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

Department of the Treasury Internal Revenue Service

Name of the organization

(Form 990)

SCHEDULE R

Employer identification number

| NRDC Action Fund Inc | | | | | 13-39760 | 6.2 | | | |
|---|---------------------------|---|----------------------|---------|--|--------------------|--|--------------------------|-------------------|
| Part I Identification of Disregarded Entities Comp | olete if the organization | n answered "Yes" or | Form 990, Pa | art IV, | | 02 | | | |
| (a) Name, address, and EIN (if applicable) of disregarded entity | (b) Primary activity | (c) Legal domicile (state or foreign country) | (d) Total income | | (e) -year assets | D | (f) Pirect controlling entity | | |
| | | | | | | | | | |
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| Part II Identification of Related Tax-Exempt Orga or more related tax-exempt organizations during | nizations Complete If | the organization ar | nswered "Yes" | on Fo | orm 990, Pa | art IV, | line 34 because it | : had oı | ne |
| (a) Name, address, and EIN of related organization | (b) Primary activity | (c) Legal domicile (state or foreign country) | (d) Exempt Code s | ection | (e) Public charity (if section 501 | status L(c)(3)) | (f) Direct controlling entity | Section (13) co en | ontroll itity? |
| (1) NATURAL RESOURCES DEFENSE COUNCIL INC | ENVIRONMENTAL | NY | 501(c)(3) | | 7 | | NA | Yes | No |
| 40 WEST 20TH STREET NEW YORK, NY 10011 | | | | | | | | | |
| 13-2654926 (2) NRDC Limited | Environmental | нк | N/A | | N/A | | NRDC | | No |
| 22/F Bank of China Tower HONG KONG HK | | | | | | | | | |
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| (a) Name, address, and EIN of related organization | domicile controlling income(related, total controlling income(related, total controlling income(related, total controlling income(related, excluded from country) tax under sections 512- | | Predominant income(related, unrelated, excluded from tax under | (f) Share of total income | (g) Share of end-of-year assets | | prtionate | (i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065) | Gene man part | j) eral or aging :ner? | (k) Percentag ownersh | |
|---|---|---|--|--|--|---------------------|-----------------------------------|---|-------------------------------|--|---|-----|
| | | | | 314) | | | Yes | No | 1 | Yes | No | |
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| V Identification of Related Org | | | | | | | were | d "Yes | " on Form | 990, | Part | IV, |
| (a) Name, address, and EIN of related organization | (b) Primary activity | (c) Legal domicile (state or foreign country) | (d) Direct controllin entity | (e) Type of entit (C corp, S corp, or trust) | y Share of income | total Share e of | (g) e of end- year ssets | | (h) ercentage ownership | Section (b) cont | i) on 512 (13) rolled tity? | ! |
| | | | | 1 | | | | _ | | Yes | | No |
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| | Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule | | | | | Yes | No | | | | |
|-------------|--|---------------------------|----------------------|---------------------------|------------|---------|----|--|--|--|--|
| 1 D | uring the tax year, did the orgranization engage in any of the following transactions with one or more r | elated organizations lis | sted in Parts II-IV? | | | | | | | | |
| а | Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity | | | | 1a | | No | | | | |
| b | Gift, grant, or capital contribution to related organization(s) | | | | 1b | | No | | | | |
| c | Gift, grant, or capital contribution from related organization(s) | | | | 1 c | | No | | | | |
| d | Loans or loan guarantees to or for related organization(s) | | | | 1d | | No | | | | |
| е | e Loans or loan guarantees by related organization(s) | | | | | | | | | | |
| | | | | | | | | | | | |
| f | Dividends from related organization(s) | | | | 1f | | | | | | |
| g | Sale of assets to related organization(s) | | | | 1g | | No | | | | |
| h | h Purchase of assets from related organization(s) | | | | | | | | | | |
| i | Exchange of assets with related organization(s) | | | | | | | | | | |
| j | Lease of facilities, equipment, or other assets to related organization(s) | | | | 1j | | No | | | | |
| | | | | | | | | | | | |
| k | Lease of facilities, equipment, or other assets from related organization(s) | | | | 1k | | No | | | | |
| ı | Performance of services or membership or fundraising solicitations for related organization(s) | | | | 11 | | No | | | | |
| m | Performance of services or membership or fundraising solicitations by related organization(s) | | | | 1m | | No | | | | |
| n | Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) | | | | 1n | Yes | | | | | |
| o | Sharing of paid employees with related organization(s) | | | | 10 | Yes | | | | | |
| | | | | | | | | | | | |
| р | Reimbursement paid to related organization(s) for expenses | | | | 1p | Yes | | | | | |
| q | Reimbursement paid by related organization(s) for expenses | | | | 1q | | No | | | | |
| | | | | | | | | | | | |
| r | O ther transfer of cash or property to related organization(s) | | | | 1r | | No | | | | |
| s | Other transfer of cash or property from related organization(s) | | | | 1s | | No | | | | |
| | 76th annual to the control of the co | - No 1 1 1 | | | | | | | | | |
| 2 | If the answer to any of the above is "Yes," see the instructions for information on who must complete (a) | (b) | (c) | (d) | | | | | | | |
| | Name of related organization | Transaction type (a-s) | Amount involved | Method of determining amo | ount II | nvolved | | | | | |
| 1) N | ATURAL RESOURCES DEFENSE COUNCIL INC | N, O, | 906,770 | COST | | | | | | | |
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Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

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

| revenue) that was not a related organization. See instructions i | | | | | | | | | | | | | |
|--|-------------------------|---|--|-----|--|------------------------------------|--|--|----|--|---|----------|---------------------------------------|
| (a) Name, address, and EIN of entity | (b) Primary activity | (c) Legal domicile (state or foreign country) | (d) Predominant income (related, unrelated, excluded from tax under sections 512- 514) | | (e) all partners section 501(c)(3) anizations? | (f) Share of total Income | (g) Share of end-of-year assets | (h) Disproprtiona allocations ⁷ | _ | (i) Code V ² UBI amount in box 20 of Schedule K-1 (Form 1065) | (j) General or managing partner? | _ | (k) Percentage ownership |
| | | | 314) | Yes | No | | | Yes | No | | Yes | No | |
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Schedule R (Form 990) 2013

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R (see instructions)

Return Reference Explanation

Schedule R (Form 990) 2013