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<u>990</u>

SCANNED SEP 1 5 2015

Return of Organization Exempt From Income Tax

OMB No 1545-0047

2013

Open to Public Inspection

Department of the Treasury

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter Social Security numbers on this form as it may be made public.

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

Internal Revenue Service For the 2013 calendar year, or tax year beginning September 1 2013, and ending August 31 20 14 C Name of organization Sustainable Markets Foundation D Employer identification number Check if applicable Doing Business As Address change 13-4188834 Number and street (or P O box if mail is not delivered to street address) Room/suite E Telephone number Name change 45 West 36th Street Initial return 6th Floor 212-764-0521 City or town, state or province, country, and ZIP or foreign postal code Terminated Amended return New York, NY 10018 G Gross receipts \$ 7133969 F Name and address of principal officer Application pending Geoff Boehm, Secretary/Treasurer H(a) Is this a group return for subordinates? Yes No 45 West 36th St., 6th Floor, New York, NY 10018 H(b) Are all subordinates included? Tyes No.) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527 If "No," attach a list (see instructions) Tax-exempt status 501(c)(3) ☐ 501(c) (Website: ▶ H(c) Group exemption number ▶ Form of organization 🗸 Corporation 🗌 Trust Association L Year of formation M State of legal domicile NY Part I Summary Briefly describe the organization's mission or most significant activities: Promote environmental protection, energy 1 Activities & Governance efficiency, consumer protection, health and safety, and good government. Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets. 2 Number of voting members of the governing body (Part VI, line 1a) 3 3 Number of independent voting members of the governing body (Part VI, line 1b) 4 3 Total number of individuals employed in calendar year 2013 (Part V, line 2a) 5 0 Total number of volunteers (estimate if necessary) 6 150 Total unrelated business revenue from Part VIII, column (C), line 12 7a 7a 0 Net unrelated business taxable income from Form 990-T, line 34 7b 0 **Current Year** Contributions and grants (Part VIII, line 1h) AUG -2 -4 2015 -6577817 7129293 Program service revenue (Part VIII, line 2g) 0 0 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) : : 4672 4676 11 Other revenue (Part VIII, column (A), lines 5,6d, 8c,9c, 10c, and 11e)..... 5801 0 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 12 6588290 7133969 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 1680135 2615287 14 Benefits paid to or for members (Part IX, column (A), line 4) . . . 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 0 0 16a Professional fundraising fees (Part IX, column (A), line 11e) 0 b Total fundraising expenses (Part IX, column (D), line 25) ▶ 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 3654034 4732023 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 5334169 7347310 Revenue less expenses. Subtract line 18 from line 12 . . . 1254121 -213341 Beginning of Current Year **End of Year** 20 Total assets (Part X, line 16) 3453232 3318471 21 Total liabilities (Part X, line 26) 204186 278836 22 Net assets or fund balances. Subtract line 21 from line 20 3249046 3039635 Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge Sign Signature of officer Here Type or print name and title Paid Preparer Firm's name Firm's EIN ▶ **Use Only**

For Paperwork Reduction Act Notice, see the separate instructions.

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

Firm's address ▶

Cat No 11282Y

Form **990** (2013)

Part	Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III
_ <u></u> -	Briefly describe the organization's mission:
•	·
	The mission of the organization is to promote environmental protection, energy efficiency, consumer protection, health and safety,
	and good government.
2	Did the organization undertake any significant program services during the year which were not listed on the
_	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program
	services?
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by
	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others,
	the total expenses, and revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ 3086171 including grants of \$ 900744) (Revenue \$)
	CLIMATE CHANGE - A program to research and develop reports and educational materials for the public on the need for bold
	action to address global warming and climate change. Activities include dissemination of public education materials through
	the media, blogs and educational institutions; and holding public events across the U.S. to raise public awareness of the impact of
	climate change.
4b	(Code:) (Expenses \$ 989861 including grants of \$ 324510) (Revenue \$)
	FOSSILE FUEL EXTRACTION - A program to research and provide public education about the environmental impact of fossil fuel
	extraction, including natural gas, oil and coal. Activities include organanizing public forums and events and producing reports for
	distribution.
	(Code) \(\(\(\)\\\\\\\\\\\\\\\\\\\\\\\\\\\
4c	(Code:) (Expenses \$ 2218658 including grants of \$ 1089338) (Revenue \$)
	ENVIRONMENTAL HEALTH, PROTECTION AND PRESERVATION - A program to research and educate the public about the
	importance of preserving and protecting forests, drinking water, food supply and the environment from the negative impacts of
	pollution and chemical contaminants. Activities include creating printed and multimedia materials and distributing them to
	educational institutions and others, as well as presentations and other public events.
4d	Other program services (Describe in Schedule O.)
4d	Other program services (Describe in Schedule O.) (Expenses \$ 959004 including grants of \$ 300695) (Revenue \$)
4d 4e	Other program services (Describe in Schedule O.) (Expenses \$ 959004 including grants of \$ 300695) (Revenue \$) Total program service expenses > 7253694

Part	V 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	✓	<u> </u>
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	✓	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		/
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	1	
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		•	1
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	5		√
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	6		
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		1
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9	_	1
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		1
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		✓
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		1
С	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		1
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		✓
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		1
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		· /
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII		1	•
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.	12a		1
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		1
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	<u> </u>	1
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	1	
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	1	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16		1
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		1
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II.	18	-	1
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	<u> </u>	
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	19 20a		1
_	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a	-	

Part	V Checklist of Required Schedules (continued)		•	age
٠,			Yes	No
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	1	
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		1
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	✓	
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		1
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 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	24d 25a		✓
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b	_	√
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		1
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		1
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):		-7 -7 -7 -7 -7 -7 -7 -7 -7 -7 -7 -7 -7 -	
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		√
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		V ✓
29 30	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	29		1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		1
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		1
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? <i>If "Yes," complete Schedule R, Part I</i>	33		1
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		1
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a 35b		√
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36	-	1
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? <i>If "Yes," complete Schedule R,</i>			
38	Part VI	37		✓
		1 50	-	

Part					
	Check if Schedule O contains a response or note to any line in this Part V		<u> </u>		
4		_ 1	F	Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a 99	, ,		* 4
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b 0	, ,	,	
C	Did the organization comply with backup withholding rules for reportable payments t reportable gaming (gambling) winnings to prize winners?	o vendors and			سنخمد
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax		1c	∀	×, ,
	Statements, filed for the calendar year ending with or within the year covered by this return	2a 0	333	19	
b	If at least one is reported on line 2a, did the organization file all required federal employment t		2b	<u></u>	
•	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instr		25	. 80	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year	•	3a	·	1
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Sc		3b	-	Ť
4a	At any time during the calendar year, did the organization have an interest in, or a signature o				
	over, a financial account in a foreign country (such as a bank account, securities account, or	r other financial			
	account)?		4a		✓
b	If "Yes," enter the name of the foreign country: ▶		2.1	, h,	
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financi				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax	•	5a		✓
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter		5b		✓
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,00				
b	organization solicit any contributions that were not tax deductible as charitable contributions? If "Yes," did the organization include with every solicitation an express statement that such		6a		~
D		Contributions of	6b		
7	gifts were not tax deductible? Organizations that may receive deductible contributions under section 170(c).		90	13277	香蕉
'а	Did the organization receive a payment in excess of \$75 made partly as a contribution and	partly for goods			Anne'
	and services provided to the payor?		7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		- - -
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for				
	required to file Form 8282?		7c		✓
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d		1987	S S
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal b	enefit contract?	7e		✓
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal bene		7f		✓
g	If the organization received a contribution of qualified intellectual property, did the organization file Form	•	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file		7h		170 0 1
8	Sponsoring organizations maintaining donor advised funds and section 509(a)			i negini	2
	organizations. Did the supporting organization, or a donor advised fund maintained by	y a sponsoring	<u>G</u>		 .
0	organization, have excess business holdings at any time during the year?		8	35.200	<i>\$2.</i> 300
9	Sponsoring organizations maintaining donor advised funds. Did the organization make any taxable distributions under section 4966?		_	PAR	
a b	Did the organization make a distribution to a donor, donor advisor, or related person?		9a 9b	<u> </u>	-
10	Section 501(c)(7) organizations. Enter:				4 4
а	Initiation fees and capital contributions included on Part VIII, line 12	10a			16000
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities .	10b		(M	4.00
11	Section 501(c)(12) organizations. Enter:	<u> </u>			18
а	Gross income from members or shareholders	11a		13.3	
b	Gross income from other sources (Do not net amounts due or paid to other sources			**************************************	2.1
	against amounts due or received from them.)	11b	13	, 	ر المالة الم
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of		12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b		- , , , , , , ,	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		, 5	7.7	ļ.,
а	Is the organization licensed to issue qualified health plans in more than one state?		13a	ļ	ļ.,
1_	Note. See the instructions for additional information the organization must report on Schedul	e O.	J. ', '		1
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	المدا		[[, ,
_	Enter the amount of reserves on hand	13b	<i>∧</i> ;	.* ′	
C 140		13c	3.	- '	-
14a b	Did the organization receive any payments for indoor tanning services during the tax year? . If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in S		14a 14b		✓
	in 100, had a mod a rotti rzo to report these payments: It invo, provide an explanation in s	ocifedule U .	1140	ı	1

Part \	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S	ee ins	tructi	ons.
	Check if Schedule O contains a response or note to any line in this Part VI	<u> </u>		<u>√</u>
Section	on A. Governing Body and Management			
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.		Yes	No
b 2	Enter the number of voting members included in line 1a, above, who are independent . 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		/
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		1
4 5 6 7a	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders? Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	4 5 6		√ √ √
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		1
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
a b 9	The governing body?	8a 8b	√	
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		✓_
Section	on B. Policies (This Section B requests information about policies not required by the Internal Reven	ue Co	<u>-</u>	
	5111		Yes	No
10a b	Did the organization have local chapters, branches, or affiliates?	10a	•	✓
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	✓	
b 12a b	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? <i>If "No," go to line 13 </i>	12a 12b	<u>₹</u>	<u> </u>
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	<u>·</u>	
13 14 15	Did the organization have a written whistleblower policy?	13 14	✓ ✓	
a b 16a	• • • • • • • • • • • • • • • • • • •	15a 15b	✓ ✓	
b	with a taxable entity during the year?	16a 16b		
Secti	on C. Disclosure			
17 18	List the states with which a copy of this Form 990 is required to be filed New York Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section available for public inspection. Indicate how you made these available. Check all that apply.	n 501(c)(3)s	only)
19	☐ Own website ☑ Another's website ☐ Upon request ☐ Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of infinancial statements available to the public during the tax year.	:erest	polic	y, and
20	State the name, physical address, and telephone number of the person who possesses the books and records organization: Jay P. Halfon, 45 West 36th Street, 6th floor, NV, NV, 10018	of the)	

Form	990	(2013)	

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, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

☐ Check this box if neither the organization	nor any relate	d org	aniz			ompe	nsa	ated any curren	t officer, director	, or trustee.
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	box, office individual	unles	Pos neck ss pe	rson	e than of trust Highest compensated employee	an	(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
(4) Flinshadh Haahanak	10		8			ated				
(1) Elizabeth Hitchcock President	1.0	1		1				0.00	0.00	0.00
(2) Steve Kleinberg Vice President	1.0	1		1				0.00	0.00	0.00
(3) Geoff Boehm	1.0									-
Secretary/Treasurer		✓	 	<u> </u>		!		0.00	0.00	0.00
(4) Jay Halfon Director & General Counsel	5.0	1		1				0.00	0.00	0.00
(5)								0.00	0.30	0.00
(6)		-								11.118 18.11 21.81
(7)		-			-		ļ			
(8)										
(9)										
(10)		1								
(11)							-			
(12)			 							
(13)										
(14)		-								

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)												
					(0	C)						
	(A)	(B)				ition			(D)	(E)		(F)
	Name and title	Average					than one that the second		Reportable	Reportab	le	Estimated
		hours per					or/trusi		compensation	compensation		amount of
		week (list any						, 	from	related	i	other
		hours for related	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the	organizatio		compensation
		organizations	<u>8</u> 2		ď	<u> </u>	S S	Ę	organization (W-2/1099-MISC)	(W-2/1099-N	1150)	from the organization
		below dotted	Q ==	nai		9	# 8		(** 4, 1000 ***,000,		ĺ	and related
		line)	ਲੂ	Ę		8	ਜੂ	1			į	organizations
			8	ster			nsa		İ		ŀ	
				(a			<u> </u>	İ				
(15)												
32		†									-	
(16)			-		_			 				
3.19/			-									
		 	-	_				-				
(17)		ļ									1	
											İ	
(18)												
		†	1				İ					
(19)		· · · · · · · · · · · · · · · · · · ·						 				
3		 	1				ļ					
(00)				H			<u> </u>	├-	<u> </u>			
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						<u> </u>						
(21)												
		1	1							ļ		
(22)							_	 				
35.57			1								1	
(00)			-	H	-				<u> </u>			
(23)		ļ		1	İ							
				<u> </u>								
(24)								ļ	ļ			
]			1		1				
(25)						1						
3		† 	1									
1b	Sub-total	<u>.</u>	J	l	i	Ь	<u> </u>	┖				
_									0.00		0.00	0.00
С	Total from continuation sheets to Part							•	0.00		0.00	0.00
<u>d</u>	Total (add lines 1b and 1c)	<u> </u>						<u> </u>	0.00		0.00	0.00
2	Total number of individuals (including but	t not limited	d to th	nose	list	ted .	above	e) w	ho received m	ore than \$1	00,000	of
	reportable compensation from the organi	zation ► o						•			•	
										 		Yes No
3	Did the organization list any former of	ficer direc	tor c	or tr	uet	۵۵	kov d	amr	Novee or high	est compa	hatean	
•	employee on line 1a? If "Yes," complete							5111F	oloyee, or riigi	iest compe	iisaieu	
	•							•				3 /
4	For any individual listed on line 1a, is the											
	organization and related organizations	greater th	an \$1	150,	,000)? /	f "Ye	s, "	complete Sch	edule J fo	r such	التدر الكاليط
	individual											4 /
5	Did any person listed on line 1a receive of	r accrue co	ompe	nsat	tion	fro	m anv	z un	related organiz	ration or inc	lividual	
•	for services rendered to the organization											5 🗸
Contin								-		• • • •		13 4
	on B. Independent Contractors											
1	Complete this table for your five highest											
	compensation from the organization. Rep	oort compe	ensatio	on fo	or th	ne c	alend	lar y	year ending wit	h or within	the org	anızation's tax
	year.											
	(A)								(B)			(C)
	Name and business add	Iress						Ì	Description of s	ervices	(Compensation
B.	Charles II O 4445 D II O 2	4000 11	Nr1	B 13 /	400			_				
	essen Strategies, LLC, 1115 Broadway, Suite						 	_	ogram Managen			654900.00
	essage Productions, LLC, 101 West 23rd Stre				VY.	1001	11		ogram Managen			458345.00
Our No	ext Economy, LLC, 8419 West Blvd. Drive, Al	exandria, V	A 223	808				Pro	ogram Coordina	ition		321200.00
<u>Fentor</u>	Communications, Inc., 1000 Vermont Ave, I	NW, #200, W	/ashin	igtoi	n, D	<u>C</u> 20	0005	Ме	edia Services			307315.00
	Targeting, Inc., 215 N. Cayuga Street, Suite							т-	ogram Coordina	ition		295000.00
2	Total number of independent contractor					lımit	ted to					20000.00
-	received more than \$100,000 of compen							,	notou ab	, 11110		

Part	VIII	Statement of Reve	nue							
		Check if Schedule O		onse or note t	o anv	line in this	Part VIII			
'			, () , ()	***		(A) tal revenue	(B)	(C) Unrelated		_ (D)
		*			Tot	tal revenue	Related or exempt	Unrelated business	e	Revenue xcluded from tax
'		4	₹. ₫. *-				exempt function revenue	revenue	İ	under sections 512-514
्ठ छ	1a	Federated campaigns			₹ ·	9734.2.	4.965.6	3. 32.	-621/Jul. 3	
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues .			, 2					
ع ۾	c	Fundraising events .			1	1	el Ç			, .
fts		Related organizations			•		`			
요 를	d	Government grants (con			ł	.1	× .	. S	1,	i,
Sis	e f	All other contributions, gi			17.	1 12 15	The state of the s		- 20 Tris	. A .
훈	•	and similar amounts not inc			* '	· .	, <u>′</u> ,′ <u>,</u> ,	, ,	*	****
흔뒴				7129293	ļ				1	,
달	9	Noncash contributions includ			ļ		*			~,
	<u>h</u>	Total. Add lines 1a-1	<u>f.,.,.</u>	<u> ▶</u>	2.3	7129293	***	24.	2 7.1	<u> </u>
Program Service Revenue				Business Code		," (\$P\$)\"\"\"\"		1533855	(3 % %	
Ş	2a									
æ	b									
.8	С									
Ę	d									
Ē	е									
g	f	All other program sen								
Pro	g	Total. Add lines 2a-2	f	•		0	/3 % *	-7% (V	13.6	
	3	Investment income					·			
		and other similar amo				4676				4676
	4	Income from investment	t of tax-exempt be	ond proceeds ▶						
	5	Royalties	· ·	•	.——					
		rioyanioo	(ı) Real	(II) Personal	5.74	1.36.0	·	4K/m		48.44.67
	6a	Gross rents	<u> </u>	\	35 44.5 ·				رازا الري	
		Less: rental expenses			- No.					
	b	•						1 (484) 1	**	
	C	Rental income or (loss)		<u> </u>	<u> </u>	380	<u>~~~</u>	<u>**</u> *	-	
	d	Net rental income or ((i) Securities	(II) Other	88% T.			15 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8	California Socialia	and see to be the second
	7a	Gross amount from sales of	(i) Securities	(ii) Other		* 5		4.5		
		assets other than inventory				i Militare				
	b	Less: cost or other basis					Ġ,	3		**
		and sales expenses .			, , , , , , , , , , , , , , , , , , ,					5.5. x
	С	Gain or (loss)			Livina	285	4	Lilliania	حشت انتكمت	
	d	Net gain or (loss) .		<u> ▶</u>						
d)						** 1 <u>\$</u> *			~~~~~~~~ <u>~</u>	`
ž	8a	Gross income from fu	undraising					\$0. . ta	1	12%
Š	1	events (not including \$			f .	1.44		1. 250	4 7 :	, s ² ,
æ		of contributions reporte	ed on line 1c).		\$. 2.0.	- 18 July 1				
ē		See Part IV, line 18 .	a			, پین	2108 11	(1,3%)	_ , [' '	
Other Revenue	b	Less: direct expenses	s b		1.		3			*
0	С	Net income or (loss) f	rom fundraising	events . >						
	9a	Gross income from ga			3_		1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	J. 84 J	4731	
		See Part IV, line 19 .	a		1 ·	1,000		277	·- 4	
	Ь	Less: direct expenses	s b		1		,			۲.
	C	Net income or (loss) f			<u> </u>			<u> </u>	\neg	
	_	Gross sales of in	-					1 1 1 2		,
		returns and allowance				v. (4 v	19 1 1914		i di rec	
	Ь	Less: cost of goods s	_	<u> </u>	1	-	•			65
	C	Net income or (loss) f			+-					
	۳-	Miscellaneous F		Business Code	-					
	44-	14113CGIIdHGOUS F	- CANALIS	Duames Coue	 	· · · · · · · · · · · · · · · · · · ·		ļ 		
	11a				┼			 	- -	
	b				-					
	C.	All 11			 			 		
	d	All other revenue .			 			ļ		
	е	Total. Add lines 11a-			<u></u>		<u> </u>	<u> </u>		
_	12	Total revenue. See i	nstructions	<u> ▶</u>		7133969				

Part IX	Statement	of Functiona	I Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).								
	Check if Schedule O contains a respon	se or note to any lir	ne in this Part IX .					
	t include amounts reported on lines 6b, 7b, , and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses			
1	Grants and other assistance to governments and							
	organizations in the United States. See Part IV, line 21	2520287	2520287	* **,				
2	Grants and other assistance to individuals in the United States. See Part IV, line 22			* 37.4				
3	Grants and other assistance to governments,		- · ·	i di constitui				
	organizations, and individuals outside the							
	United States. See Part IV, lines 15 and 16	95000	95000	The second				
4	Benefits paid to or for members	20000		4, 5 * 3	-,			
5	Compensation of current officers, directors,				(%			
	trustees, and key employees	1						
6	Compensation not included above, to disqualified		-					
•	persons (as defined under section 4958(f)(1)) and							
	persons described in section 4958(c)(3)(B)							
7	Other salaries and wages							
8	Pension plan accruals and contributions (include			 				
	section 401(k) and 403(b) employer contributions)							
9	Other employee benefits							
10	Payroll taxes							
11	Fees for services (non-employees):							
''a	Management							
b	Legal	440500	400500	5000	5000			
C	Accounting	112500	102500	5000	5000			
d	Lobbying	17955		17955				
e	Professional fundraising services. See Part IV, line 17	0		· · · · · · · · · · · · · · · · · · ·				
f	Investment management fees	0						
g	Other. (If line 11g amount exceeds 10% of line 25, column	0						
9	(A) amount, list line 11g expenses on Schedule O.)							
10	- 1	0						
12 13	Advertising and promotion							
14	Office expenses				 -			
15	.							
16	Royalties							
17	Occupancy	15438	5438	10000				
18	Travel	184651	184651					
10	for any federal, state, or local public officials							
19	Conferences, conventions, and meetings .	0						
20	_	1723	1723					
21	Interest							
22	Depreciation, depletion, and amortization .							
23	Insurance	0000						
		9820	6211	3609				
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If	ľ l						
	line 24e amount exceeds 10% of line 25, column							
	(A) amount, list line 24e expenses on Schedule O.)	***	į					
а	Bank Charges	2809	2590	219	2/425			
b	Dues and Subscriptions	2362	2362	219				
C	Internet and Computer Expenses	18358	18358					
d	Telephone			· · · · · · · · · · · · · · · · · · ·	 			
e	All other expenses See Schedule O	3133	3133		-			
25	Total functional expenses. Add lines 1 through 24e	4363274 7347310	4311441					
26	Joint costs. Complete this line only if the	/34/310	7253694	88616	5000			
	organization reported in column (B) joint costs							
	from a combined educational campaign and fundraising solicitation. Check here ▶ ☐ if							
	fundraising solicitation. Check here I if following SOP 98-2 (ASC 958-720)							
	- · · · · · · · · · · · · · · · · · · ·		i	i .	i e			

Part X Balance Sheet

	,	Check if Schedule O contains a response or note to any line in this Pa	rt X		🗆
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	435631	1	471161
	2	Savings and temporary cash investments	2652319	2	2553462
İ	3	Pledges and grants receivable, net	269832	3	131902
	4	Accounts receivable, net	0	4	0
	5	Loans and other receivables from current and former officers, directors,	***	,	
		trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
छ	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L.		6	
Assets	7	Notes and loans receivable, net		7	
As	8	Inventories for sale or use		8	
}	9	Prepaid expenses and deferred charges	76434	9	139000
	10a	Land, buildings, and equipment: cost or			Pro Mis Sis
		other basis. Complete Part VI of Schedule D 10a		i sy 🌹	
	b	Less: accumulated depreciation 10b		10c	######################################
	11	Investments—publicly traded securities	19016	11	22946
	12	Investments—other securities. See Part IV, line 11	1,50,1	12	
	13	Investments – program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	3453232	16	3318471
	17	Accounts payable and accrued expenses	204186	17	278836
-	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
}	21	Escrow or custodial account liability. Complete Part IV of Schedule D .		21	
Liabilities	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
<u>.e</u>	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	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		25	
	26	Total liabilities. Add lines 17 through 25	204186	26	278836
ces		Organizations that follow SFAS 117 (ASC 958), check here ▶ ✓ and complete lines 27 through 29, and lines 33 and 34.		(2)	
ā	27	Unrestricted net assets	269795	27	599067
Bal	28	Temporarily restricted net assets	2979251	28	2440568
고	29	Permanently restricted net assets		29	
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 30 through 34.			
ts (30	Capital stock or trust principal, or current funds		30	A STATE OF THE STA
Se	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Ä	32	Retained earnings, endowment, accumulated income, or other funds.		32	
Net	33	Total net assets or fund balances	3249046	33	3039635
	34	Total liabilities and net assets/fund balances	3453232		3318471

Part	XI - Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		713	33969
2	Total expenses (must equal Part IX, column (A), line 25)	2	-		17310
3	Revenue less expenses. Subtract line 2 from line 1	3		-21	13341
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		324	19046
5	Net unrealized gains (losses) on investments	5			3930
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	10		303	<u> 39635</u>
Part	XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII	<u></u>		<u> </u>	
				Yes	No
1	Accounting method used to prepare the Form 990: Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," expended to the schedule O.	plaın ın			**
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were correviewed on a separate basis, consolidated basis, or both:		2a		
b	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audit separate basis, consolidated basis, or both:	 ed on a	2b	~	
С	✓ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for of the audit, review, or compilation of its financial statements and selection of an independent account of the organization changed either its oversight process or selection process during the tax year, experiences.	untant?	2c	✓	** <u></u>
	Schedule O.		2 1 2	cacare	
3а	As a result of a federal award, was the organization required to undergo an audit or audits as set the Single Audit Act and OMB Circular A-133?		За		✓
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not und required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a		3b		
			Forr	n 990	(2013)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

2013

OMB No 1545-0047

Department of the Treasury Internal Revenue Service ► Attach to Form 990 or Form 990-EZ.
► Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Name	of the organization							Employer id	lentificatio	n number
	inable Markets Fou									88834
Pai			rity Status (All orga						nstructio	ons.
	<u> </u>	-	ition because it is: (Fo		~	-	•	•		
1	_		hes, or association of			ed in sec	tion 170((b)(1)(A)(i).	
2										
3			spital service organiza							
4			on operated in conjun	ction with	a hospit	al descrit	oed in se	ction 170)(b)(1)(A)	(iii). Enter the
		e, city, and state								
5	section 170(b	(1)(A)(iv). (Com	•	_	-				vernment	tal unit described in
6 7	=									
8	☐ A community t	rust described i	n section 170(b)(1)(A))(vi). (Cor	nplete Pa	rt II.)				
9										
10	☐ An organizatio	n organized and	l operated exclusively	to test fo	or public s	safety. Se	e sectio	n 509(a)(4).	
11			nd operated exclusive							or to carry out the
	purposes of o	ne or more pub	olicly supported organ	nizations	described	d in sect	on 509(a	a)(1) or se	ection 50	9(a)(2). See section
	509(a)(3). Che	ck the box that	describes the type of	supportir	ng organiz	zation and	d comple	te lines 1	1e through	gh 11h.
	a 🗌 Type I	b 🗌 Type	II c - ☐ Type II	I-Functio	nally inte	grated	d 🗆 .	Type III–N	lon-funct	ionally integrated
е		ndation manage	that the organization ers and other than one							
f			a written determination	on from	the IRS 1	hat it is	a Type	I. Type I	I. or Tvr	e III supporting
		heck this box .								
g	Since August following pers		he organization acce	pted any	gift or co	ontributio	n from a	ny of the	,	
			ndirectly controls, eithody of the supported					described	d in (11) at	nd Yes No
	(ii) A family m	ember of a pers	on described in (i) abo	ove?						11g(ii)
	(iii) A 35% cor	trolled entity of	a person described in	i) or (ii) a	above?.					11g(iii)
h			ion about the support							<u> </u>
(i)	Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	in col (i) lis	organization sted in your document?	the organ	ou notify nization in of your port?	organizat (i) organi	s the tion in col zed in the S.?	(vii) Amount of monetary support
			` "	Yes	No	Yes	No	Yes	No	1
/A)										
(A)										
(B)										
(C)										
(D)										
(E)										
Tota	I									

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2009 **(b)** 2010 (c) 2011 (d) 2012 (e) 2013 (f) Total Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") . . . 3921966 4343644 4128051 6577817 7129293 26100771 revenues levied for the 2 organization's benefit and either paid to or expended on its behalf . . . The value of services or facilities 3 furnished by a governmental unit to the organization without charge Total. Add lines 1 through 3. . . . 3921966 26100771 4343644 4128051 6577817 7129293 5 The portion of total contributions by each person (other than a governmental unit publicly or supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 4244926 Public support. Subtract line 5 from line 4. 21855845 Section B. Total Support **(b)** 2010 Calendar year (or fiscal year beginning in) (a) 2009 (c) 2011 (e) 2013 (d) 2012 (f) Total Amounts from line 4 3921966 4343644 4128051 6577817 7129293 26100771 8 Gross income from interest, dividends. payments received on securities loans, rents, royalties and income from similar sources 9887 3933 3492 4672 4676 26660 Net income from unrelated business activities, whether or not the business is regularly carried on Other income. Do not include gain or 10 loss from the sale of capital assets (Explain in Part IV.) Total support. Add lines 7 through 10 11 26127431 Gross receipts from related activities, etc. (see instructions) 12 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) 13 Section C. Computation of Public Support Percentage Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f)) 83.65 % Public support percentage from 2012 Schedule A, Part II, line 14 15 16a 331/2% support test - 2013. If the organization did not check the box on line 13, and line 14 is 331/2% or more, check this \square 331/3% support test-2012. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 10%-facts-and-circumstances test - 2013. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported 10%-facts-and-circumstances test-2012. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly

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

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

Section	Section A. Public Support							
Calen	dar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total	
1	Gifts, grants, contributions, and membership fees							
	received. (Do not include any "unusual grants.")	1	ļ		ļ			
2	Gross receipts from admissions, merchandise							
	sold or services performed, or facilities furnished in any activity that is related to the							
	organization's tax-exempt purpose							
3	Gross receipts from activities that are not an							
	unrelated trade or business under section 513							
4	Tax revenues levied for the							
	organization's benefit and either paid							
	to or expended on its behalf							
5	The value of services or facilities							
	furnished by a governmental unit to the							
	organization without charge							
6	Total. Add lines 1 through 5		ļ					
7a	Amounts included on lines 1, 2, and 3							
	received from disqualified persons .							
b	Amounts included on lines 2 and 3							
	received from other than disqualified							
	persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year							
	Add lines 7a and 7b				 	<u> </u>		
8	Public support (Subtract line 7c from				-		<u> </u>	
·	line 6.)							
Secti	on B. Total Support	L	·	<u></u>	<u> </u>			
	dar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total	
9	Amounts from line 6	()	1				(7)	
10a	Gross income from interest, dividends,							
	payments received on securities loans, rents,	ĺ	1					
	royalties and income from similar sources .	_						
b	Unrelated business taxable income (less							
	section 511 taxes) from businesses							
	acquired after June 30, 1975							
C	Add lines 10a and 10b							
11	Net income from unrelated business							
	activities not included in line 10b, whether					:		
	or not the business is regularly carried on				ļ			
12	Other income. Do not include gain or							
	loss from the sale of capital assets (Explain in Part IV.)	1						
42		<u> </u>	-	 	-	 		
13	Total support. (Add lines 9, 10c, 11, and 12.)							
14	First five years. If the Form 990 is for the	he organizatio	n's first, secon	d. third. fourth	n. or fifth tax v	ear as a section	on 501(c)(3)	
	organization, check this box and stop he	_			•		* * : : *	
Secti	on C. Computation of Public Suppo							
15	Public support percentage for 2013 (line			(f))		15	%	
16	Public support percentage from 2012 Sc	hedule A, Part	III, line 15	<u>.</u>		16	%	
Secti	on D. Cemputation of Investment In							
17	Investment income percentage for 2013						%	
18	Investment income percentage from 201.					18	%	
19a	331/3% support tests—2013. If the organ							
	17 is not more than 331/3%, check this box							
b	331/3% support tests—2012. If the organi							
	line 18 is not more than 33½%, check this			-			. —	
20	Private foundation. If the organization d	itu not check a	LUOX OF TIME 14	, 19a, or 19b,	Check this dox	and see instru	ictions 🕨 🔲	

scheaule A (r	Form 990 or 990-EZ) 2013	Page 4
Part IV	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17 Part III, line 12. Also complete this part for any additional information. (See instructions).	7b; and
		
		••••
		

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

201

Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service 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.

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

Name	ection 501(c)(4), (5), or (6) orga of organization		··	Employer iden	tification number
Susta	inable Markets Foundation				13-4188834
Part	I-A Complete if the	e organization is exempt unde	er section 501(d	c) or is a section 527 o	organization.
1	Provide a description of t	he organization's direct and indire	ct political campa	ign activities in Part IV.	
2	Political expenditures .			▶ \$	
3	Volunteer hours			<i></i> .	
Part		e organization is exempt unde			
1		excise tax incurred by the organiza			
2		excise tax incurred by organization			
3		ed a section 4955 tax, did it file For			
4a					Yes No
b	If "Yes," describe in Part			· · · · · · · · · · · · · · · · · · ·	() (0)
		e organization is exempt und			(c)(3).
1		ly expended by the filing organiz		· ·	
2		filing organization's funds contrib			
2		vities			
3		expenditures. Add lines 1 and 2.			
4		n file Form 1120-POL for this year			Yes No
5	• •	ses and employer identification nur			
3		ents. For each organization listed,			
		ontributions received that were pro			
		fund or a political action committee			
	(a) Nama	(b) Address	(a) EIN	(d) Amount noid from	(a) Amount of political
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's	(e) Amount of political contributions received and
				funds If none, enter -0-	promptly and directly
					delivered to a separate political organization. If
					none, enter -0-
(1)					
	<u> </u>				
(2)					
(3)					
(4)					,
···					
(5)					
(6)					

Sched	ule C (Form 990 or 990-EZ) 2013					Page 2
Part	II-A . Complete if the organizat	ion is exempt u	nder section 50	01(c)(3) and filed	d Form 5768 (ele	
	section 501(h)).				•	
A C	heck ▶ ☐ if the filing organization I	pelongs to an aff	iliated group (ar	nd list in Part IV	each affiliated gro	oup member's
	name, address, EIN, exp					
<u>B</u> C	heck ▶ ☐ if the filing organization of			rol" provisions a	ipply.	
		bbying Expenditu		_	(a) Filing	(b) Affiliated
	(The term "expenditures"			<u> </u>	organization's totals	group totals
1a	Total lobbying expenditures to influen				0	
b	Total lobbying expenditures to influen			_	0	
C	Total lobbying expenditures (add lines	· ·			0	
d	Other exempt purpose expenditures				7253694	
e	Total exempt purpose expenditures (a				7253694	
f	Lobbying nontaxable amount. Ente columns.	er the amount tr	om the following	table in both		
					512685	·
	If the amount on line 1e, column (a) or (b)		nontaxable amoun	t is:		
	Not over \$500,000		ount on line 1e			
	Over \$500,000 but not over \$1,000,000		15% of the excess			
	Over \$1,000,000 but not over \$1,500,000		10% of the excess			
	Over \$1,500,000 but not over \$17,000,000 Over \$17,000,000	\$225,000 plus \$1,000,000.	5% of the excess o	ver \$1,500,000.		
g	Grassroots nontaxable amount (enter				400474	·
9 h	Subtract line 1g from line 1a. If zero o	-			128171	
i	Subtract line 1f from line 1c. If zero or				0	
i	If there is an amount other than ze		 1h or line 1i. did			
•	reporting section 4911 tax for this yes	_				Yes No
		•				
		Year Averaging F			alaka all af tha fice	_
	(Some organizations that i			not have to comp through 2f on pa		,
			dons for lines 20	i unough zi on pa	age 4./	
	Lobbyi	ng Expenditures	During 4-Year Av	veraging Period		
	Calendar year (or fiscal year	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(a) Total
	beginning in)	(a) 2010	(b) 2011	(0) 2012	(a) 2013	(e) Total
						·-···
2a	Lobbying nontaxable amount					
		347977	340223	418530	512685	1619415
b						
	(150% of line 2a, column (e))		7.75			2429123
С	Total lobbying expenditures					
						0
d	Grassroots nontaxable amount	00004	orosa	404000	4004-1	****
е	Grassroots ceiling amount	86994	<u>85056</u>	104633	128171	404854
·	(150% of line 2d, column (e))					607204
		5 8 2 >		* * * * * * * * * * * * * * * * * * *	The State of State of the State of	607281
f	Grassroots lobbying expenditures				1	

Schedule C (Form 990 or 990-EZ) 2013

Part	I-B Complete if the organization is exempt under section 501(c)(3) and has NOT find (election under section 501(h)).	iled	Form	1 576 8	}	
For e	ach "Yes," response to lines 1a through 1i below, provide in Part IV a detailed	(8	1)		(b)	
	ption of the lobbying activity.	Yes	No	A	moun	t
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?		-X-2842			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					, s **;
c	Media advertisements?			1		
d	Mailings to members, legislators, or the public?					
е	Publications, or published or broadcast statements?		-	<u> </u>		
f	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?					
ĥ	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			<u> </u>		
i	Other activities?					
i	Total. Add lines 1c through 1	1.X.	13.7%			
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?	-3036	**************************************	C. 130	(A. 17)	1026
b	If "Yes," enter the amount of any tax incurred under section 4912	1 12	9.4	ئى دىمىسىنىك	<u>ئىشىكىنىڭ</u>	<u> </u>
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912 .					
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	A	المستختفظية	W 47.	18 × 18	
Part	II-A Complete if the organization is exempt under section 501(c)(4), section 501(c)	(5) , c	or se	ction		
	501(c)(6).					
			•		Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		
3	Did the organization agree to carry over lobbying and political expenditures from the prior year? .			3	T	
1	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," Ol answered "Yes." Dues, assessments and similar amounts from members					3, is
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts political expenses for which the section 527(f) tax was paid).				•	•
a	Current year	•	2a			
b	Carryover from last year	•	2b	ļ		-
C	Total		2c	ļ.		
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 excess does the organization agree to carryover to the reasonable estimate of nondeductible lobby and political expenditure next year?	ing				
5	Taxable amount of lobbying and political expenditures (see instructions)		5	<u> </u>		
	V Supplemental Information	•	3			
Provi	e the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated groups. B, line 1. Also, complete this part for any additional information.	up lis	t); Pa	rt II-A,	line 2	; and
						•••
				· · · · · · · · · · · · ·		

	n 990 or 990-EZ) 2013	Page 4
Part IV .	Supplemental Information (continued)	
•		
	·	
·		
	·	
		·
		- -

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

► Attach to Form 990.

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

2013

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Open to Public Inspection

			Employer identification number
	hable Markets Foundation		13-4188834
Par	Organizations Maintaining Dono	r Advised Funds or Other Similar Fur	nds or Accounts.
	Complete if the organization answ	ered "Yes" to Form 990, Part IV, line 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year) .		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and	donor advisors in writing that the assets h	acid in depar advised
•	funds are the organization's property, subject		
•			
6	Did the organization inform all grantees, do	fors, and donor advisors in writing that gra	int funds can be used
	only for charitable purposes and not for the		for any other purpose
			· · · · · Yes _ No
Part			
		ered "Yes" to Form 990, Part IV, line 7.	
1	Purpose(s) of conservation easements held to	by the organization (check all that apply).	
		recreation or education) Preservation of	of an historically important land area
	☐ Protection of natural habitat	<u> </u>	of a certified historic structure
	☐ Preservation of open space		
2	Complete lines 2a through 2d if the organiza	tion held a qualified conservation contributi	on in the form of a conservation
	easement on the last day of the tax year.		Held at the End of the Tax Year
а			**************************************
b	Total acreage restricted by conservation eas		
C	Number of conservation easements on a cer		
d	Number of conservation easements includ		
u	historic structure listed in the National Regis		1 1
•			
3	Number of conservation easements modified	i, transferred, released, extinguished, or ter	minated by the organization during the
	tax year ►		
4	Number of states where property subject to		
5	Does the organization have a written pol		
	violations, and enforcement of the conservat		
6	Staff and volunteer hours devoted to monito	ring, inspecting, and enforcing conservatior	n easements during the year
	>		
7	Amount of expenses incurred in monitoring,	inspecting, and enforcing conservation eas	ements during the year
	▶\$,
8	Does each conservation easement reported	on line 2(d) above satisfy the requirements	of section 170(h)(4)(B)
9	In Part XIII, describe how the organization re		
•	balance sheet, and include, if applicable, the		
	organization's accounting for conservation e		nancial statements that describes the
Dart		ctions of Art, Historical Treasures, o	Mother Cimiley Assets
Fait	Complete if the examination ensur	ered "Yes" to Form 990, Part IV, line 8.	r Other Similar Assets.
та	If the organization elected, as permitted und	ter SFAS 116 (ASC 958), not to report in it	s revenue statement and balance sheet
	works of art, historical treasures, or other	similar assets neid for public exhibition, e	ducation, or research in furtherance of
	public service, provide, in Part XIII, the text of		
b	If the organization elected, as permitted un	nder SFAS 116 (ASC 958), to report in its	revenue statement and balance sheet
	works of art, historical treasures, or other	similar assets held for public exhibition, e	ducation, or research in furtherance of
	public service, provide the following amount		
	(i) Revenues included in Form 990, Part VIII.	line 1	> \$
	(ii) Assets included in Form 990, Part X		> \$
2	If the organization received or held works	of art, historical treasures, or other simila	ir assets for financial gain, provide the
	following amounts required to be reported u		
а	Revenues included in Form 990, Part VIII, lin		
	Assets included in Form 990, Part X	-	· · · · • •
	Additional and American Americ	<u> </u>	<u>· · · · • • • </u>

Part	Organizations Maintaining								
3,	Using the organization's acquisition, a collection items (check all that apply):	accession, and oth	ner recor	ds, chec	k any of the	e follov	ving that are a si	gnificant	use of its
а	☐ Public exhibition		d (☐ Loan	or exchang	e prog	rams		
b	☐ Scholarly research		e [Other	•				
С	☐ Preservation for future generations								
4	Provide a description of the organizate XIII.		nd expla	in how th	hey further	the org	janization's exem	ipt purpo	se in Part
5	During the year, did the organization assets to be sold to raise funds rather	than to be maintai							s 🗌 No
Part	Complete if the organization 990, Part X, line 21.	answered "Yes"					•		Form
1a	Is the organization an agent, trustee, included on Form 990, Part X?								s 🗌 No
b	If "Yes," explain the arrangement in Pa	art XIII and comple	te the fo	llowing ta	able:		Ar	nount	
С	Beginning balance					10	:		
d	Additions during the year					10	1		
е	Distributions during the year					16)		
f	Ending balance					11			
2a	Did the organization include an amour	it on Form 990, Pa	art X, line	21? .				☐ Ye	s 🗌 No
b	If "Yes," explain the arrangement in Pa	art XIII. Check here	e if the ex	planation	n has been	provid	ed in Part XIII .		
	t V Endowment Funds.			•					
	Complete if the organization	answered "Yes"	' to Forr	n 990, P	art IV, line	10.			
		(a) Current year	(b) Pro		(c) Two year		(d) Three years back	(e) Four	years back
1a	Beginning of year balance			-					
b	Contributions	-							
С	Net investment earnings, gains, and losses			•					
d	Grants or scholarships					•			
e	Other expenditures for facilities and programs								
f	Administrative expenses			-				1	
g	End of year balance								
2	Provide the estimated percentage of the	he current vear en	d balanc	e (line 1a	ı. column (a)) held	as:		
а	Board designated or quasi-endowmer	nt ▶	%	` •	,,	•			
b	Permanent endowment ▶	%							
c	Temporarily restricted endowment ▶	····/							
_	The percentages in lines 2a, 2b, and 2		0%.						
3a	Are there endowment funds not in the	•		zation tha	at are held	and ac	ministered for th	е	
	organization by:	•	•					_	Yes No
	(i) unrelated organizations							3a(i)	
	(ii) related organizations							3a(ii)	
b	If "Yes" to 3a(ii), are the related organi							3b	
4	Describe in Part XIII the intended uses							1.00	
Part									
	Complete if the organization		" to Forr	n 990. F	Part IV. line	11a.	See Form 990	Part X Ii	ne 10
	Description of property	(a) Cost or ot			or other basis		Accumulated	(d) Bool	
	Section 5. property	(investme		l ' '	other)		epreciation	(3) 2001	
1a	Land					SHIP			
b	Buildings								
С	Leasehold improvements								
d	Equipment				-				
e	Other					_			
Total.	. Add lines 1a through 1e. (Column (d) n	nust equal Form 9	90. Part 2	X. columi	n (B). line 10	2(c).)			

Part VII	Investments – Other Securities. Complete if the organization answered "Y	es" to Forn	n 990. Part IV. line	e 11b. See Form	990. Part X. line 12.
······································	(a) Description of security or category (including name of security)		(b) Book value	(c) Meth	od of valuation of-year market value
(1) Financial	derivatives		- /-		
(2) Closely-h	neld equity interests	[
(3) Other		[
(A)					
(B)					
(C)					
(D)					
(E)			·		
(F)					
(G)					
(H)					
	b) must equal Form 990, Part X, col. (B) line 12.) ►				
Part VIII	Investments – Program Related. Complete if the organization answered "Y	es" to Forr	n 990, Part IV, lin	e 11c. See Form !	990, Part X, line 13.
	(a) Description of investment		(b) Book value	1 1-7	nod of valuation of-year market value
(1)					<u>, </u>
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)				h was all the dock?	
	b) must equal Form 990, Part X, col. (B) line 13) ▶				
Part IX	Other Assets.	/" +- -	000 David IV U.	. 44 - 0 5	000 Bady Page 45
	Complete if the organization answered "\ (a) Description		n 990, Part IV, lin	e 11a. See Form	(b) Book value
(4)	(a) Description				(b) Book value
(1)		 			
(2)					
(4)					
(5)					, _,,_
(6)					
(7)					
(8)				***	
(9)		•			
	mn (b) must equal Form 990, Part X, col. (B) line	9 15.)			,,,,,,,,,,,
Part X	Other Liabilities.				· ·
	Complete if the organization answered "Y	Yes" to Forr	n 990, Part IV, lin	e 11e or 11f. See	Form 990, Part X,
	line 25.				
1.) Book value	, ,		
(1) Federal ıı	ncome taxes				
(2)					
(3)			• • • • • • • • • • • • • • • • • • • •	的是大學的學問	
(4)					, , , , , , , , , , , , , , , , , , , ,
(5)			,	* * * * * * * * * * * * * * * * * * * *	*
(6)		·		` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` `	
(7)					3
(8)					I
(9)				and the same of th	· ·
	(b) must equal Form 990, Part X, col. (B) line 25.) ▶		•		
2. Liability fo	r uncertain tax positions. In Part XIII, provide the tex	ct of the footn	ote to the organization	n's financial stateme	nts that reports the
organization	's liability for uncertain tax positions under FIN 48 (A	NSC 740). Che	ck here if the text of	tne footnote has bee	n provided in Part XIII

Part	•		=	Return.	
	Complete if the organization answered "Yes" to Form 990,		2a		
1	Total revenue, gains, and other support per audited financial statements	s		1	7137899
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	1 - 1		23	
a	Net unrealized gains on investments		3930		
b	Donated services and use of facilities	<u> </u>			
С	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)				
е	Add lines 2a through 2d			2e	3930
3	Subtract line 2e from line 1			3	7133969
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b				
b	Other (Describe in Part XIII.)				
	Add lines 4a and 4b			4c	0
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, lin			5	7133969
Part				er Return.	
	Complete if the organization answered "Yes" to Form 990,				
1	Total expenses and losses per audited financial statements			1	7347310
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 - 1			
а	Donated services and use of facilities				
b	Prior year adjustments				
С	Other losses				
d	Other (Describe in Part XIII.)			<u> </u>	
е	Add lines 2a through 2d			2e	0
3	Subtract line 2e from line 1			3	7347310
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	. 4b		نَدُنْدُ	
	Add lines 4a and 4b			4c	0
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, I XIII Supplemental Information.	line 18.)	· · · · ·	5	7347310
	le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a at XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this pa				

Schedule D (Fo		Page \$
Part XIII	Supplemental Information (continued)	
	······	
••••		
		·
	······································	
•••••		
· • • • • • • • • • • • • • • • • • • •		

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

OMB No 1545-0047 2013

► Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16. ► Attach to Form 990. ► See separate instructions.

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

Name of the organization **Employer identification number** Sustainable Markets Foundation 13-3188834 General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Part I Form 990, Part IV, line 14b. For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States. Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.) 3 (b) Number of (c) Number of (a) Region (d) Activities conducted in (e) If activity listed in (d) is (f) Total employees, agents, and region (by type) (e.g., fundraising, program services, a prográm service, describe specific type of expenditures for and investments offices in the region ındependent investments, service(s) in region in region grants to recipients contractors in region located in the region) (1) North America 0 0 Grant

Schedule F (Form 990) 2013

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed. Part II

North America Climate change 95,000 Wire transfer 0 M/A MI/A		(if applicable)	1	grant	cash grant	cash disbursement	non-cash assistance	(h) Description of non-cash assistance	valuation (book, FMV, appraisal, other)
			North America	Climate change	V 000,26	Wire transfer	0	N/A	N/A
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Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed. Schedule F (Form 990) 2013

Part III Grants ar

(a) Type of grant or assistance	of grant or assistance (b) Region (c) Number of recipients	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash	(f) Amount of non-cash	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV,
				dispursement	assistance		appraisai, other)
(E)							
(2)							
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						Sche	Schedule F (Form 990) 2013

Part	V Foreign Forms		
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	gn	☑ No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts at Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With U.S. Owner (see Instructions for Forms 3520 and 3520-A)	nd n a	✓ No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect Certain Foreign Corporations. (see Instructions for Form 5471)	To	√ No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 862 Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	?1, ng	☑ No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes the organization may be required to file Form 8865, Return of U.S. Persons With Respect To Certa Foreign Partnerships. (see Instructions for Form 8865)	ain	√ No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instruction for Form 5713)		☑ No

Schedule F (Form 990) 2013

Part V	Provide the information Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).
Part I, line	2:
Explanatio	n: The Organization must submit a report detailing the program accomplishments and financial expenditures at the end of the
grant perio	d.
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SCHEDULE (Form 990)

Department of the Treasury Internal Revenue Service Vame of the organization

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

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

► Attach to Form 990.

OMB No 1545-0047

Open to Public Inspection 2013

Employer identification number

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

% □ ✓ Yes 13-4188834 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and . Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. the selection criteria used to award the grants or assistance? Sustainable Markets Foundation

Part | General Information on Grants and Assistance Part I

Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. Part II

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) Better Future Project, Inc. 30 Bow St., Cambridge, MA 02138	47-1015198	501(c)(3)	237,500				Environmental Preservation
(2) Center for Media & Democracy 520 University Ave #260, Madison, WI	39-1777402	501(c)(3)	23,333				Environmental Preservation
(3) Center for Justice & Democracy 185 West Broadway, NY, NY 10013		501(c)(3)	130,625				Consumer protection
(4) Container Recycling Institute 4361 Keystone Ave, Culver City, CA	52-1720329	501(c)(3)	30,000				Environmental Preservation
(5) Essential Information 1530 P St NW, Washington, DC 20005	52-1299631	501(c)(3)	64,500				Environmental Preservation
(6) Food & Water Watch 1616 P St NW, #300, Washington, DC	32-0160439	501(c)(3)	37,500				Environmental Preservation
(7) Frack Action Fund, Inc.	45-2989965	501(c)(3)	265,000				Environmental Preservation
(8) Greenpeace Fund, Inc. 702 H St NW, # 300, Washington, DC	95-3313195	501(c)(3)	167,500				Environmental Preservation
(9) Kitchen Table Campaigns 1050 30th St NW, Washington, DC	46-1802969	501(c)(3)	1,070,613				Environmental Preservation
(10) Mothers Out Front, Inc. 30 Bow St., Cambridge, MA 02138	46-5758600	501(c)(3)	301,848				Environmental Preservation
(11) NC Enviro. Justice Network PO Box 68, Rocky Mount, NC 27802	20-5966295	501(c)(3)	11,875				Environmental Preservation
(12) Reinvent Albany 148 Lafayette St., 12th Fir, NY, NY	27-1624621	501(c)(3)	80,000				Good government
 Enter total number of section 501(c)(3) and government organiz Enter total number of other organizations listed in the line 1 tab 	1501(c)(3) and gov rganizations listed	vernment organizat	ations listed in the line 1 table	ine 1 table			15
For Paperwork Reduction Act Notice, see the Instructions for Form 990.	see the Instruction	e for Form 990		5	Cat No SOUSSE		Schodule (Form 000) (2013)

SCHEDULE 1 (Form 990)

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

2013

OMB No 1545-0047

Open to Public Inspection

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Department of the Treasury Internal Revenue Service Name of the organization the selection criteria used to award the grants or assistance?

Employer identification number 13-4188834 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. ▶ Attach to Form 990. Part I General Information on Grants and Assistance Sustainable Markets Foundation

2 D	Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	ization's procedur	es for monitoring	the use of grant fur	nds in the United	States.		 - <u>-</u>
Part II	Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.	ssistance to Go	vernments and received more the	Organizations i	in the United St	ates. Complete it	f the organization answ space is needed.	and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, ore than \$5,000. Part II can be duplicated if additional space is needed.
1 (a) ½	1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) Verm 141 Maın	(1) Vermont PIREF 141 Main St , Ste 6, Montpelier, VT 05602	51-0163801	501(c)(3)	20,000				Environmental Preservation
(2) Wate	(2) Water Defense, Inc 11 Park PI , Ste 701, NY, NY 10007	45-4608780	501(c)(3)	0'820				Environmental Preservation
(3) Wildl 209 Missis	(3) Wildlife Conservation Network, Inc 209 Mississippi St, San Francisco, CA	30-0108469	501(c)(3)	11,063				Habitat Preservation
(4)								
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0 W	Enter total number of section 501(c)(3) and government organizat Enter total number of other organizations listed in the line 1 table	501(c)(3) and gov rganizations listed	vernment organization of the line 1 table	nizations listed in the line 1 table able	ine 1 table			

Schedule I (Form 990) (2013)

Cat No 50055P

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

Schedule I (Fo	Schedule I (Form 990) (2013)					Page 2
Part III	Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22, Part III can be duplicated if additional space is needed.	ividuals in the U	nited States. Con	nplete if the organiz	ation answered "Yes" to	Form 990, Part IV, line 22,
	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
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Part IV	Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.	he information re	quired in Part I, lin	e 2, Part III, columr	(b), and any other additi	onal information.
SCHEDULE	SCHEDULE I, PART I, LINE 2: EACH 501(C)(3) ORGANIZATION RECEIVING A GRANT	TION RECEIVING A	GRANT			
FROM SUS	FROM SUSTAINABLE MARKETS FOUNDATION MUST SIGN A GRANT AGREEMENT AFFIRMING	SN A GRANT AGREE	EMENT AFFIRMING			
THAT ALL	THAT ALL FUNDS WILL BE EXPENDED FOR THE DESCRIBED PROGRA	IBED PROGRAM AN	M AND FOR			
CHARITAB	CHARITABLE PURPOSES ONLY. THE GRANTEE IS ALSO REQUIRED TO PROVIDE SMF WITH	REQUIRED TO PRO	OVIDE SMF WITH			
A FINAL N	A FINAL NARRATIVE AND FINANCIAL REPORT ON HOW THE GRANT FUNDS WERE EXPENDED.	THE GRANT FUNDS	WERE EXPENDED.			
1 1 1 1 1 1 1 1 1 1 1 1						
						Schedule I (Form 990) (2013)

SCHEDULE J (Form 990)

Department of the Treasury

Internal Revenue Service

Compensation Information

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

Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

► Attach to Form 990. ► See separate instructions. ► Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2013

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Name of the organization Employer identification number Sustainable Markets Foundation 13-4188834 Part I Questions Regarding Compensation Yes No 1a Check the appropriate 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 indemnification 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 on 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 1b Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 2 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 ☐ Compensation survey or study ☐ Independent compensation consultant Form 990 of other organizations Approval by the board or compensation committee 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: 4a **b** Participate in, or receive payment from, a supplemental nonqualified retirement plan? 4b Participate in, or receive payment from, an equity-based compensation arrangement? 4c If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9. 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: 5a If "Yes" to line 5a or 5b, describe in Part III. 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: The organization? 6a 6b If "Yes" to line 6a or 6b, describe in Part III. 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 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe 8 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in

Regulations section 53.4958-6(c)?

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)(i)—(iii) 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. Part II

NOTE: THE SUM OF COUNTRY (D)(1) - (III) FOR EACH INSTITUTION OF THE COUNTRY OF TH	Tage Cage) listed individual file	ist equal tine total alli	Dulit of 1 Ulfil 330, r a	וו אווי ספטוסנו עי וווופ	ימ, משטויכמטוכ כטומוווו	(a) and (b) and (c)	de diameter
		(b) Breakdown o	T W-2 and/or 1099-IMIS	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(c) Company
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable	other deferred compensation	benefits	(B)(I)-(D)	reported as deferred in prior Form 990
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Schedule J (Form 990) 2013

Schedule J (Form 990) 2013

Part III

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

90-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

0MB No 1545-0047 2013

Department of the Treasury Internal Revenue Service

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

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Name of the organization	Employer identification number		
Sustainable Markets Foundation	13-4188834		
Form 990 Part III Line 4D Other Program Services			
Form 990, Part III, Line 4D, Other Program Services:			
Other Program Services · Consumer Health and Safety, Resource Conservation, Recycling,			
Form 990, Part VI, Section B, Line 11b, Explanation:			
The Board master to review Form 000 in datail. The Board them takes a water to approve the 000 miles to			
The Board meets to review Form 990 in detail. The Board then takes a vote to approve the 990 prior to	submission.		
Farm 200 Part M. Cartina P. Lina 40 . Farmana			
Form 990, Part VI, Section B, Line 12c, Explanation:			
The Board regularly monitors and enforces its conflict of interest policy. Board Members, Officers and	key personnel are required to		
disclose all passible conflicts in an distally in anything to the board. The Board various much matters are			
disclose all possible conflicts immediately in writing to the board. The Board reviews such matters an	id acts in accordance with our policy.		
Form 000 Part VI Section B. Lune 15 Evalenation			
Form 990, Part VI, Section B, Line 15, Explanation:			
To determine compensation for any CEO, Executive Director or top management official, the Board meets in executive session to review			
compensation. As part of such review, the Board considers comparative data from similar organizations. Sources for this data include, but			
are not limited to, Guidestar.org, job announcements of similar organizations and direct inquiry.			
Form 990, Part VI, Section C, Line 19, Explanation:			
Form 990 is available upon request or through Guidestar. In addition, the organization's audits and state and federal annual returns can be			
Form 990 is available upon request or through Guidestar. In addition, the organization's audits and state and federal annual returns can be			
found online at the NYS Charities Bureau website. Additionally, the organization's incorporation documents are available for review at the			
NYS Secretary of State's office.			
NYS Secretary of State's office.			

Name of the organization Employer identification number Sustainable Markets Foundation 13-4188834 Form 990, Part X, Line 24E, All Other Functional Expenses: **DESCRIPTION** TOTAL EXPENSES PROGRAM EXPENSES MANAGEMENT EXPENSES FUNDRAISING EXPENSE Postage 1886.00 1886.00 0.00 0.00 Printing & Copying 8730.00 8020.00 710.00 0.00 Supplies 7002.00 6781.00 221.00 0.00 3316.00 Credit Card Processing Fees 4218.00 902.00 0.00 DVD Production 3658.00 3658.00 0.00 0.00 17778.00 Equipment 17778.00 0.00 0.00 38087.00 Event Expenses 38087.00 0.00 0.00 Media Expenses 7301.00 7301.00 0.00 0.00 **Charitable Donations** 150.00 150.00 0.00 0.00 397493.00 Media Development 397493.00 0.00 0.00 Meeting Faciliation 40986.00 40986.00 0.00 0.00 Graphic Design 28229.00 28229.00 0.00 0.00 Grants Administraton 145934.00 95934.00 50000.00 0.00 Translation & Interpretation 916.00 916.00 0.00 0.00 Web Campaign Development 312463.00 312463.00 0.00 0.00 39402.00 Photography & Videography 39402.00 0.00 0.00 980022.00 **Program Management** 980022.00 0.00 0.00 Research and Writing 557159.00 0.00 557159.00 0.00 **Outreach Development** 63950.00 63950.00 0.00 0.00 Strategic Planning 368459.00 368459.00 0.00 0.00 Project Coordination 924711.00 924711.00 0.00 0.00 Project Management 414740.00 414740.00 0.00 0.00 TOTAL PART X, Line 24E 4363274.00 4311441.00 51833.00