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Form **990-EZ**

**Short Form**

**Return of Organization Exempt From Income Tax**

OMB No 1545-1150

**2013**

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

**Open to Public Inspection**

▶ Do not enter Social Security numbers on this form as it may be made public.

▶ Information about Form 990-EZ and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

Department of the Treasury  
Internal Revenue Service

**A** For the 2013 calendar year, or tax year beginning **OCTOBER 01**, 2013, and ending **SEPTEMBER 30**, 20 **14**

**B** Check if applicable

- Address change
- Name change
- Initial return
- Terminated
- Amended return
- Application pending

**C** Name of organization  
**THE THEOSOPHICAL SOCIETY**

Number and street (or P.O. box, if mail is not delivered to street address) Room/suite  
**P.O. BOX C**

City or town, state or province, country, and ZIP or foreign postal code  
**PASADENA, CA 91109-7107**

**D** Employer identification number  
**23-721174 074**

**E** Telephone number  
**(626) 797-7817**

**F** Group Exemption Number  **Number ▶**

**G** Accounting Method:  Cash  Accrual Other (specify) ▶ \_\_\_\_\_

**H** Check  if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF)

**I** Website: ▶ **www.theosociety.org**

**J** Tax-exempt status (check only one) -  501(c)(3)  501(c)( ) ◀ (insert no.)  4947(a)(1) or  527

**K** Form of organization.  Corporation  Trust  Association  Other **Religious Organization**

**L** Add lines 5b, 6c, and 7b, to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ \$ **0 00**

**Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I)**

Check if the organization used Schedule O to respond to any question in this Part I

		1	2	3	4	5a	5b	5c	6a	6b	6c	6d	7a	7b	7c	8	9	10	11	12	13	14	15	16	17	18	19	20	21											
Revenue	1	Contributions, gifts, grants, and similar amounts received																												00										
	2	Program service revenue including government fees and contracts																												00										
	3	Membership dues and assessments																													00									
	4	Investment income																													00									
	5a	Gross amount from sale of assets other than inventory					00																																	
	b	Less: cost or other basis and sales expenses					00																																	
	c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)																														00								
	6	Gaming and fundraising events																																						
	a	Gross income from gaming (attach Schedule G if greater than \$15,000)					00																																	
	b	Gross income from fundraising events (not including \$ 00 of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000)					00																																	
c	Less: direct expenses from gaming and fundraising events					00																																		
d	Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)																															00								
7a	Gross sales of inventory, less returns and allowances					00																																		
b	Less: cost of goods sold					00																																		
c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)																																							
8	Other revenue (describe in Schedule O)																																							
9	<b>Total revenue.</b> Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8																																							
10	Grants and similar amounts paid (list in Schedule O)																																							
11	Benefits paid to or for members																																							
12	Salaries, other compensation, and employee benefits																																							
13	Professional fees and other payments to independent contractors																																							
14	Occupancy, rent, utilities, and maintenance																																							
15	Printing, publications, postage, and shipping																																							
16	Other expenses (describe in Schedule O)																																							
17	<b>Total expenses.</b> Add lines 10 through 16																																							
18	Excess or (deficit) for the year (Subtract line 17 from line 9)																																							
19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)																																							
20	Other changes in net assets or fund balances (explain in Schedule O)																																							
21	Net assets or fund balances at end of year. Combine lines 18 through 20																																							

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No 106421

Form **990-EZ** (2013)

SCANNED FEB 26 2015

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Part V Other Information (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V) Check if the organization used Schedule O to respond to any question in this Part V

		Yes	No
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O . . . . .		✓
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions) . . . . .		✓
35a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)? . . . . .		✓
b	If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O . . . . .		✓
35b			
c	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III . . . . .		✓
35c			
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N . . . . .		✓
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ <b>37a</b> 00		
b	Did the organization file Form 1120-POL for this year? . . . . .		✓
37b			
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return? . . . . .		✓
b	If "Yes," complete Schedule L, Part II and enter the total amount involved . . . . . <b>38b</b>		
39	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on line 9 . . . . . <b>39a</b> 00		
b	Gross receipts, included on line 9, for public use of club facilities . . . . . <b>39b</b> 00		
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ 00 ; section 4912 ▶ 00 ; section 4955 ▶ 00		
b	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes" complete Schedule L, Part I . . . . .		✓
40b			
c	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 . . . . . ▶ 00		
d	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization . . . . . ▶ 00		
e	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T . . . . .		
40e			
41	List the states with which a copy of this return is filed ▶ CALIFORNIA		
42a	The organization's books are in care of ▶ _____ Telephone no. ▶ _____ Located at ▶ _____ ZIP + 4 ▶ _____		
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country: ▶ _____ See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.	Yes	No
42b			✓
c	At any time during the calendar year, did the organization maintain an office outside the U.S.? . . . . . If "Yes," enter the name of the foreign country: ▶ _____		✓
42c			
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here . . . . . ▶ <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year . . . . . ▶ <b>43</b>		
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ . . . . .		✓
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ . . . . .		✓
44b			
c	Did the organization receive any payments for indoor tanning services during the year? . . . . .		✓
44c			
d	If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O . . . . .		✓
44d			
45a	Did the organization have a controlled entity within the meaning of section 512(b)(13)? . . . . .		✓
45b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions) . . . . .		✓
45b			

46	Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I . . . . .	Yes	No
		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

**Part VI Section 501(c)(3) organizations only**

All section 501(c)(3) organizations must answer questions 47-49b and 52, and complete the tables for lines 50 and 51.

Check if the organization used Schedule O to respond to any question in this Part VI . . . . .

47	Did the organization engage in lobbying activities or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II . . . . .	Yes	No
		<input type="checkbox"/>	<input checked="" type="checkbox"/>
48	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E . . . . .	<input type="checkbox"/>	<input checked="" type="checkbox"/>
49a	Did the organization make any transfers to an exempt non-charitable related organization? . . . . .	<input type="checkbox"/>	<input checked="" type="checkbox"/>
b	If "Yes," was the related organization a section 527 organization? . . . . .	<input type="checkbox"/>	<input checked="" type="checkbox"/>

50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
NONE				

f Total number of other employees paid over \$100,000 . . . . . ▶ \_\_\_\_\_


51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and business address of each independent contractor	(b) Type of service	(c) Compensation
NONE		

d Total number of other independent contractors each receiving over \$100,000 . . . . . ▶ \_\_\_\_\_

52 Did the organization complete Schedule A? **Note.** All section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A . . . . .  Yes  No

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

<b>Sign Here</b>	Signature of officer 	Date 01/14/2015
	B. DAVIDSON, ASSISTANT TREASURER Type or print name and title	

<b>Paid Preparer Use Only</b>	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	Firm's name ▶	Firm's EIN ▶			
	Firm's address ▶	Phone no			

May the IRS discuss this return with the preparer shown above? See instructions . . . . .  Yes  No

**SCHEDULE A**  
**(Form 990 or 990-EZ)**

**Public Charity Status and Public Support**

OMB No 1545-0047

**2013**

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

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](http://www.irs.gov/form990).**

**Open to Public Inspection**

Name of the organization **THE THEOSOPHICAL SOCIETY** Employer identification number **23-721174**

**Part I Reason for Public Charity Status** (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

- 1  A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2  A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E.)
- 3  A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4  A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: \_\_\_\_\_
- 5  An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6  A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7  An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8  A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9  An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 10  An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 11  An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h.
  - a  Type I    b  Type II    c  Type III—Functionally integrated    d  Type III—Non-functionally integrated
  - e  By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
  - f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
  - g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
 

	Yes	No
(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? . . . . .	<input type="checkbox"/>	<input checked="" type="checkbox"/>
(ii) A family member of a person described in (i) above? . . . . .	<input type="checkbox"/>	<input checked="" type="checkbox"/>
(iii) A 35% controlled entity of a person described in (i) or (ii) above? . . . . .	<input type="checkbox"/>	<input checked="" type="checkbox"/>
  - h Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U.S.?		(vii) Amount of monetary support
			Yes	No	Yes	No	Yes	No	
(A)									
(B)									
(C)									
(D)									
(E)									
<b>Total</b>									

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

Table with 7 columns: (a) 2009, (b) 2010, (c) 2011, (d) 2012, (e) 2013, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Tax revenues levied for the organization's benefit; 3 The value of services or facilities furnished by a governmental unit; 4 Total. Add lines 1 through 3; 5 The portion of total contributions by each person; 6 Public support. Subtract line 5 from line 4.

Section B. Total Support

Table with 7 columns: (a) 2009, (b) 2010, (c) 2011, (d) 2012, (e) 2013, (f) Total. Rows include: 7 Amounts from line 4; 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources; 9 Net income from unrelated business activities; 10 Other income; 11 Total support; 12 Gross receipts from related activities; 13 First five years.

Section C. Computation of Public Support Percentage

Table with 2 columns: Line number, Percentage. Rows include: 14 Public support percentage for 2013; 15 Public support percentage from 2012 Schedule A; 16a 33 1/3% support test-2013; 16b 33 1/3% support test-2012; 17a 10%-facts-and-circumstances test-2013; 17b 10%-facts-and-circumstances test-2012; 18 Private foundation.

**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 A. Public Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
<b>2</b> 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 . . . .						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . . .						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge . . . .						
<b>6 Total.</b> Add lines 1 through 5 . . . .						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons . . . .						
<b>b</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						
<b>c</b> Add lines 7a and 7b . . . .						
<b>8 Public support</b> (Subtract line 7c from line 6.) . . . .						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
<b>9</b> Amounts from line 6 . . . .						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources . . . .						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 . . . .						
<b>c</b> Add lines 10a and 10b . . . .						
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) . . . .						
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.) . . . .						
<b>14 First five years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> . . . . ▶ <input type="checkbox"/>						

**Section C. Computation of Public Support Percentage**

<b>15</b> Public support percentage for 2013 (line 8, column (f) divided by line 13, column (f)) . . . .	<b>15</b>	%
<b>16</b> Public support percentage from 2012 Schedule A, Part III, line 15 . . . .	<b>16</b>	%

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for 2013 (line 10c, column (f) divided by line 13, column (f)) . . . .	<b>17</b>	%
<b>18</b> Investment income percentage from 2012 Schedule A, Part III, line 17 . . . .	<b>18</b>	%
<b>19a 33 1/3% support tests—2013.</b> If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and <b>stop here</b> . The organization qualifies as a publicly supported organization . . . . ▶ <input type="checkbox"/>		
<b>b 33 1/3% support tests—2012.</b> If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and <b>stop here</b> . The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
<b>20 Private foundation.</b> If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶ <input type="checkbox"/>		



**THEOSOPHICAL SOCIETY**

October 1, 2013 - September 30, 2014

FORM 990-EZ, 2013

Employer Identification No.: 23-721174

Schedule Page: 01 of 03

The income and expenditure of the Theosophical Society is handled by the Theosophical Endowment Corporation, a non-profit, tax-exempt Corporation formed in 1942 by the Theosophical Society to handle its business affairs. A Form 990 "Return of Organization Exempt From Income Tax" is filed annually by the Theosophical Endowment Corporation. The Articles of Incorporation of Theosophical Endowment Corporation state:

"That we, the undersigned present Cabinet Officers of an unincorporated religious, scientific, philosophical, humanitarian, and literary society, namely, The Theosophical Society, all being residents of the State of California and the majority of citizens of the United States of America, under and by virtue of the laws of the State of California, have this day voluntarily associated ourselves together for the purpose of forming a non-profit corporation.

We hereby certify that:

**I**

The name of the corporation hereby organized shall be:

**THEOSOPHICAL ENDOWMENT CORPORATION**

**II**

This corporation is formed for the purpose of receiving, taking, holding, and managing all property which may now be held, or which may hereafter be received through purchase, gift, grant, devise or bequest, by the International Headquarters of the said The Theosophical Society or by any of its Officers or Fellows for the use of the said International Headquarters in pursuance of its work in furtherance of the objects of the said The Theosophical Society as stated in its Constitution, to wit:

- (a) To diffuse among men a knowledge of the laws inherent in the Universe;
- (b) To promulgate the knowledge of the essential unity of all that is, and to demonstrate that this unity is fundamental in Nature;
- (c) To form an active brotherhood among men;
- (d) To study ancient and modern religion, science, and philosophy;
- (e) To investigate the powers innate in man;

**THEOSOPHICAL SOCIETY**

October 1, 2013 - September 30, 2014

FORM 990-EZ, 2013

Employer Identification No.: 23-721174

Schedule Page: 02 of 03

**Part IV LIST OF CABINET OFFICERS**

Belderis, James T., Officer 643 East Mariposa Street Altadena, CA 91001	unsalaried
Davidson, Brunhilde S., Assistant Treasurer 643 East Mariposa Street Altadena, CA 91001	unsalaried
Donant, Alan E., Assistant Secretary 643 East Mariposa Street Altadena, CA 91001	unsalaried
Dougherty, Sarah B., Officer 6125 125th Avenue SE Bellevue, WA 98006	unsalaried
Dougherty, William A., Chairman 6125 125th Avenue SE Bellevue, WA 98006	unsalaried
Thackara, Regina, Secretary 1859 La Paz Road Altadena, CA 91001	unsalaried
Thackara, William T.S., Treasurer-General 1859 La Paz Road Altadena, CA 91001	unsalaried
Wietersen, David J., Officer 512 Long Street Nevada City, CA 95959	unsalaried
Wolfe, Wynn C., Officer 530 Cortez Road Arcadia, CA 91006	unsalaried
Lundhberg-Kuhmonen, Linda, Officer Smedjevagen 5, 5 TR S-191 49 Sollentuna Sweden	unsalaried
Rijken van Olst, Bas T. Narcislaan 339 2555 LS The Hague The Netherlands	unsalaried
Zebrowski, Armin Bohmreute 9 71735 Eberdingen Germany	unsalaried

**THEOSOPHICAL SOCIETY**

October 1, 2013 - September 30, 2014

FORM 990-EZ, 2013

Employer Identification No.: 23-721174

Schedule Page: 03 of 03

**RELATED OFFICERS AND DIRECTORS**

Married couples in the Cabinet are:

- 1) William A. Dougherty, Chairman, and Sarah B. Dougherty, Director;
- 2) William T.S. Thackara, Director, and Regina Thackara, Secretary.

**Note:** No former Cabinet Officers have ever received compensation from The Theosophical Society or The Theosophical Endowment Corporation on retirement.

**RELATED TAX EXEMPT ORGANIZATION:** THEOSOPHICAL ENDOWMENT CORPORATION

See. ARTICLES OF INCORPORATION, namely

ARTICLE II

"This corporation is formed for the purpose of receiving, taking, holding, and managing all property which may now be held, or which may hereafter be received through purchase, gift, grant, devise or bequest, by the International Headquarters of the said The Theosophical Society or by any of its Officers or Fellows for the use of the said International Headquarters in pursuance of its work in furtherance of the objects of the said The Theosophical Society as stated in its Constitution, to wit:

- (a) To diffuse among men a knowledge of the laws inherent in the Universe;
- (b) To promulgate the knowledge of the essential unity of all that is, and to demonstrate that this unity is fundamental in Nature;
- (c) To form an active brotherhood among men;
- (d) To study ancient and modern religion, science, and philosophy;
- (e) To investigate the powers innate in man;

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**END SCHEDULE**

October 1, 2013 - September 30, 2014

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