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Department of the Treasury Internal Revenue Service

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

Do not enter social security numbers on this form as it may be made public.

OMB No 1545-0047 Open to Public Inspection

intern	al Revenu	ue Service	▶ Information about Form 990 and its instruction	ns is at www.li	rs.gov/form990.	Inspection
A F	or the	2014 calend	far year, or tax year beginning a	nd ending		
<b>B</b> c	heck if pplicable	C Name o	f organization	•	D Employer identification	ation number
	Address change	COMI	ING CLEAN, INC.			
	Name change	Doing b	04-34	29794		
	Initial return	Numbe	r and street (or P 0. box if mail is not delivered to street address)	Room/suite	E Telephone number	
	Final return/	28 V	VERNON STREET	434	802-2	<u> 251-0203</u>
	termin- ated	, ,	town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	1,063,314.
	Amende	DKAI	TLEBORO, VT 05301		H(a) Is this a group ret	
L	Applica- tion pending	F Name a	and address of principal officer JUDY ROBINSON		for subordinates?	Yes X No
		SAME	AS C ABOVE		H(b) Are all subordinates inc	luded? Yes No
		_	X 501(c)(3) 501(c) ( )	(1) or 527	7	st (see instructions)
			COMINGCLEANINC ORG		H(c) Group exemption	
			X Corporation Trust Association Other ►	L Year	of formation: 1998 M	State of legal domicile: VT
Pa		Summary				
e			be the organization's mission or most significant activities DEV			ID SUPPORT
ıan	-		ONAL RESEARCH EFFORTS FOR THE PF			
ern	ĺ		if the organization discontinued its operations or dis	sposed of more	1 1	
9			ting members of the governing body (Part VI, line 1a)		3	
<b>∞</b>	-		dependent voting members of the governing body (Part VI, line 1	<b>b</b> )	4	5
ties			of individuals employed in calendar year 2014 (Part V, line 2a)		. 5	8
Ξ			of volunteers (estimate if necessary)	<del></del>	6	0.
P			d business revenue from Part VIII column (C) line 12V	l	. <u>7a</u> 7b	0.
Revenue Activities & Governance	יו פו	vet unrelated	business taxable income from Form 990-T, line 34		Prior Year	Current Year
ħ		Santributiana	and grants (Part VIII line 1b) S AUG 1 3 2015	S-080	650,795.	1,053,117.
يةر			and grants (Fait VIII, IIIIe 111)	<u>δ</u>   ⊢	0.50,793.	0.
Š		_	ice revenue (Part VIII, line 2g)	~   프	515.	772.
26			come (Part VIII, column (A), lines 3, 4, an@/元)	_;  -	18,234.	9,425.
<b>⇒</b>			e (Fart Viii, column (A), lines 3, 6d, 6d, 9d, 10d, and 11e) - add lines 8 through 11 (must equal Part VIII, column (A), line 12	2)	669,544.	1,063,314.
_			milar amounts paid (Part IX, column (A), lines 1-3)	-,	549,781.	800.
ي ا	ł		to or for members (Part IX, column (A), line 4)		0.	0.
Stuc Expenses		•	er compensation, employee benefits (Part IX, column (A), lines 5-1	10)	330,452.	424,746.
Se			fundraising fees (Part IX, column (A), line 11e)		0.	0.
per			* · · · · · · · · · · · · · · · · · · ·	306.		
Щ			es (Part IX, column (A), lines 11a-11d, 11f-24e)		793,819.	593,561.
			es. Add lines 13·17 (must equal Part IX, column (A), line 25)		1,674,052.	1,019,107.
			expenses Subtract line 18 from line 12		<1,004,508.>	
Sed				Bi	eginning of Current Year	End of Year
Net Assets or Fund Balances	20 T	Total assets (	Part X, line 16)		839,010.	881,494.
₩ W	l .		s (Part X, line 26)		45,359.	43,636.
翌	22 N	Net assets or	fund balances. Subtract line 21 from line 20		793,651.	837,858.
Pa	ırt II	Signatur	e Block			
Unde	er penali	ties of perjury,	I declare that I have examined this return, including accompanying sched	dules and staten	nents, and to the best of my	knowledge and belief, it is
true,	correct	, and complete	e. Declaration of preparer (other than officer) is based on all information o	of which prepare	r has any knowledge.	
		Su	ly flat		9/6/15 Date	<del>-</del>
Sign	<b>ւ</b>	Signatur	e of officer		Date	
Her	e		ROBINSON, EXECUTIVE DIRECTOR			
	+		print name and title		Date , Check	PTIN
D-1-4		Print/Type pre		teo_CPA	7/20/16 11	<b>-</b>
Paid	-	REED RI			<del></del>	
-			BLUM SHAPIRO & COMPANY, P.C.,	CPA'S	Firm's EIN	06-1009250
980	Only	rirm s addres	S 20 S. MAIN STREET, P.O. BOX 27	12000	Dhone == 9 5 0	561.4000
N4c:		C dicarra #	WEST HARTFORD, CT 06127-2000		1 Prione no. 8 0 C	) 561-4000 X Yes No
			is return with the preparer shown above? (see instructions)			Yes No Form <b>990</b> (2014)
4320	01 11-07	'-14 LHA	For Paperwork Reduction Act Notice, see the separate instru	ictions.		roms <b>330</b> (2014)

	990 (2014) COMING CLEAN, INC. 04-34	129794	. P	age 3
Par	t IV Checklist of Required Schedules			
	•		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for		ļ	
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in eff	rect		
	during the tax year? If "Yes," complete Schedule C, Part II	4	X	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, o	r		
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
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, Pa	rti 6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		x
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permane	ent		
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		x
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X	: [		
	as applicable.			
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	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
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		Х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
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		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	L	X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
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		X
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	1		
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	<u> </u>	Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			1
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	ļ	X
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		X_
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		X

20a

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

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

Form 990 (2014) COMING CLEAN, INC. 04-3429794 Page 4
Part IV Checklist of Required Schedules (continued)

·	Checking of Heddines Concession Continues			
	•		Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
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	ĺ		1
	Schedule J	23		X
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			1
	Schedule K If "No", go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
-	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		х
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 "Yes,"			
	complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
20	instructions for applicable filing thresholds, conditions, and exceptions).			ļ
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Х
-	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
·	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	х	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
50	contributions? If "Yes," complete Schedule M	30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
31	If "Yes," complete Schedule N, Part I	31		x
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	<u> </u>		
JŁ	Schedule N, Part II	32		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
33	sections 301 7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	"		
<b>-</b>	Part V, line 1	34		x
35a	5	35a		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	-		
U	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-chantable related organization?	-555		
JU	If "Yes," complete Schedule R, Part V, line 2	36		X
27	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	1 30		1
37	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		x
20	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	<del>- 5,</del>		1
38	Note. All Form 990 filers are required to complete Schedule O	38	x	
	140te. Air 1 of it 330 file is a required to complete political of 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,			(2014)
		. 0111		(~ U ! T)

	Check if Schedule O contains a response or note to any line in this Part V					$\Gamma$
			·		Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a	19			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and r	eporta	ble gamıng			
	(gambling) winnings to prize winners?			1c		
2a	Enter the number of employees reported on Form W·3, Transmittal of Wage and Tax Statements,					
	filed for the calendar year ending with or within the year covered by this return	2a	8	Į		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retu	ms?		_2b		X
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instruction	s)				ł
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?			За		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule	0		3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other	author	ity over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial	accou	nt)?	4a		X
b	If "Yes," enter the name of the foreign country					
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A	Accoun	ts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	action?	1	5b		X
С	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 \$100,000, and did to	he orga	anızatıon solicit			
	any contributions that were not tax deductible as charitable contributions?			6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contribu	tions o	r gifts			į
	were not tax deductible?			6b		
7	Organizations that may receive deductible contributions under section 170(c).					
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and se	rvices p	provided to the payor?	7a		X
	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		<u> </u>
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w	as req	uired			
	to file Form 8282?		ı	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of	contrac	et?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit cont			7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file F		•	7 <u>g</u>		
_	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization			7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained	by th	е			
_	sponsoring organization have excess business holdings at any time during the year?	•		8		-
9	Sponsoring organizations maintaining donor advised funds.					
a	Did the sponsoring organization make any taxable distributions under section 4966?			9a		┢
þ	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9b		-
0	Section 501(c)(7) organizations. Enter	140=				
a	Initiation fees and capital contributions included on Part VIII, line 12	10a				
ь 1	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  Section 501(c)(12) organizations. Enter.	10b	<u> </u>			
	Gross income from members or shareholders	110				1
a b	Gross income from other sources (Do not net amounts due or paid to other sources against	11a				1
U	amounts due or received from them)	11b				ŀ
2a		_	<u> </u>	12a		
za b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b		120		$t^-$
3	Section 501(c)(29) qualified nonprofit health insurance issuers.	120	·			
a	Is the organization licensed to issue qualified health plans in more than one state?			13a		$\vdash$
	Note. See the instructions for additional information the organization must report on Schedule O.			<u>a</u>		T
h	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	13b				
С		13c		1		
	Did the organization receive any payments for indoor tanning services during the tax year?			14a		X
4a						<del></del>

04-3429794 COMING CLEAN, INC. Form 990 (2014) Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. b Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other 2 officer, director, trustee, or key employee? Did the organization delegate control over management duties customanly performed by or under the direct supervision 3 of officers, directors, or trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 6 Did the organization have members or stockholders? 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or 7a more members of the governing body? b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or 7b persons other than the governing body? 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following 8a a The governing body? Х 8b b Each committee with authority to act on behalf of the governing body? Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a Х 10a Did the organization have local chapters, branches, or affiliates? b If "Yes." did the organization have written policies and procedures governing the activities of such chapters, affiliates, 10b and branches to ensure their operations are consistent with the organization's exempt purposes? Х 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 Describe in Schedule O the process, if any, used by the organization to review this Form 990. 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe 12c in Schedule O how this was done X 13 Did the organization have a written whistleblower policy? 13 14 Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official 15a 15b X Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ►MA Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply X Upon request \_\_\_\_ Another's website Other (explain in Schedule O) Own website Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records.

JANE ROBINSON - 860-916-2207

21 LEDYARD ROAD, WEST HARTFORD,

06117

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04-3429794

29794 Pag

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated

Employees, and independent Contractors

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 organiz (A)	(B)				C)			(D)	(E)	(F)
Name and Title	Average hours per week	Position (do not check more than one box, unless person is both an officer and a director/trustee)				than is bot	h an	Reportable compensation	Reportable compensation from related	Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) KEN GEISER	2.00									
CHAIRMAN/ TREASURER		X		X				0.	0.	0
(2) GARY COHEN VICE CHAIR	2.00	X		X				0.	0.	0
(3) CAROLYN FINE FRIEDMAN SECRETARY	1.00	x		x				0.	0.	0
(4) RICHARD MOORE	1.00	X		A.	-			0.		
DIRECTOR (5) THOMAS WEBSTER	1.00								0.	0
DIRECTOR	50.00	X	$\vdash$			<del> </del> -		0.	0.	C
(6) JUDITH H. ROBINSON EXECUTIVE DIRECTOR				х				100,000.	0.	С
(7) JANE M. ROBINSON CFO	25.00			x				20,000.	0.	0
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		_			_					
		1								

Par	t VII Section A. Officers, Directors, Trus	tees, Key Em	ploy	rees	, an	d Hi	ghe	st C	compensated Employe	es (continued)				
	· (A)	(B)			((	C)			(D)	(E)				
	Name and title	Average	(do			ntion more	than	one	Reportable Reportable				tımate	
		hours per week	box	, unie	ss pe	rson	s bot	h an	1 '		amount of other		of	
		(list any	Ē					Ť	from from related the organization					
		hours for	l diec	Ì			2		organization	(W-2/1099-MISC	)		om th	
		related	stee 0	rustee			pensa		(W-2/1099-MISC)			-	anızat	
		organizations below	la fi	ional		ployer	E S	_	II.		ŀ		d relat anızatı	
		line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former				orga	u IIZQLI	3113
			-	-	_		-	_			寸			
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		<u> </u>	<u> </u>			<u>.</u>	l		100 000		$\dashv$			_
	Sub-total	u Caatian A							120,000.		0.0			0. 0.
	Total from continuation sheets to Part VI Total (add lines 1b and 1c)	II, Section A							120,000.		0.			0.
2	Total number of individuals (including but n	ot limited to th	าดรค	liste	ed al	hove	e) wh	no re			<u>/•1</u>			<u> </u>
-	compensation from the organization						-,		* * * * * * * * * * * * * * * * * * * *	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				0
													Yes	No
3	Did the organization list any former officer,	director, or tru	uste	e, ke	y er	nplo	yee.	or l	highest compensated e	mployee on	ľ			
	line 1a? If "Yes," complete Schedule J for s	uch individual								•	-	3		X
4	For any individual listed on line 1a, is the su			•					•	the organization				l
_	and related organizations greater than \$15										ŀ	4		X
5	Did any person listed on line 1a receive or	•				-		elat	ed organization or indiv	idual for services		_		x
Sec	rendered to the organization? If "Yes," com tion B. Independent Contractors	ipiete Scriedai	<del>e                                    </del>	OI S	ucn	pers	SUII		•	·_		5		
1	Complete this table for your five highest co	mpensated in	depe	ende	ent c	onti	racto	ors t	that received more than	\$100,000 of comp	ensa	ation f	rom	
•	the organization Report compensation for	•	-							· ·				
	(A)								(B)			(0	<b>&gt;</b> )	
	Name and business	address	N	INC	<u> </u>				Description of s	services		ompe	nsatio	n
								-						
								- 1						
	<del></del>							$\dashv$				_	_	
										j				
					_									
2	Total number of independent contractors (	-	not li	mite	d to		_	sted	dabove) who received n	nore than				
	\$100,000 of compensation from the organi	zation 🕨					<u>0                                    </u>							

Form 990 (2014) COMING CLEAN, INC.
Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII

Table   Tabl						Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
Business Code    2 a	ts ts	1 a	Federated campaigns	1a		-		-	7-
Business Code    2 a	ran		, ,	· —					
Business Code    Part	ă,G			1c					
Business Code    2 a	iifts ar A		<u>-</u>		-				
Business Code    2 a	s, G		•			]			
Business Code    2 a	Sign								
Business Code    2 a	the	-			053,117.				
Business Code    Part	ΞÓ	a	Noncash contributions included in lines						
Business Code    2 a	a Co	_		-		1,053,117.			
Total, Add lines 22?  3 Investment income (including dividends, interest, and other similar amounts)  4 Income from investment of tax exempt bond proceeds  5 Royalties  6 a Gross rents  b Less: rental expenses  c Rental income or (loss)  d Net rental income or (loss)  f a Gross amount from sales of assets other than inventory  b Less. cost or other basis and sales expenses  c Gam or (loss)  d Net gam or (loss)  d Net gam or (loss)  f Net gam or (loss)  b Less: direct expenses  c Rental income or (loss)  f Net gam or (loss)  d Net gam or (loss)  b Less income from fundraising events (not including \$						I i			
Total, Add lines 22?  3 Investment income (including dividends, interest, and other similar amounts)  4 Income from investment of tax exempt bond proceeds  5 Royalties  6 a Gross rents  b Less: rental expenses  c Rental income or (loss)  d Net rental income or (loss)  f a Gross amount from sales of assets other than inventory  b Less. cost or other basis and sales expenses  c Gam or (loss)  d Net gam or (loss)  d Net gam or (loss)  f Net gam or (loss)  b Less: direct expenses  c Rental income or (loss)  f Net gam or (loss)  d Net gam or (loss)  b Less income from fundraising events (not including \$	ġ.	2 a	L						
Total. Add lines 2a2f  3 Investment income (including dividends, interest, and other similar amounts)  4 Income from investment of tax exempt bond proceeds  5 Royalties  6 a Gross rents  b Less: rental expenses  c Rental income or (loss)  d Net rental income or (loss)  7 a Gross amount from sales of assets other than inventory  b Less. cost or other basis and sales expenses  c Gain or (loss)  4 Net gain or (loss)  5 A Gross income from fundraising events (not including \$ of continuturions reported on line 1c) See  Part IV, line 18	Ž,	b							
Total. Add lines 2a2f  3 Investment income (including dividends, interest, and other similar amounts)  4 Income from investment of tax exempt bond proceeds  5 Royalties  6 a Gross rents  b Less: rental expenses  c Rental income or (loss)  d Net rental income or (loss)  7 a Gross amount from sales of assets other than inventory  b Less. cost or other basis and sales expenses  c Gain or (loss)  4 Net gain or (loss)  5 A Gross income from fundraising events (not including \$ of continuturions reported on line 1c) See  Part IV, line 18	Sp	С							
Total, Add lines 22?  3 Investment income (including dividends, interest, and other similar amounts)  4 Income from investment of tax exempt bond proceeds  5 Royalties  6 a Gross rents  b Less: rental expenses  c Rental income or (loss)  d Net rental income or (loss)  f a Gross amount from sales of assets other than inventory  b Less. cost or other basis and sales expenses  c Gam or (loss)  d Net gam or (loss)  d Net gam or (loss)  f Net gam or (loss)  b Less: direct expenses  c Rental income or (loss)  f Net gam or (loss)  d Net gam or (loss)  b Less income from fundraising events (not including \$	eve	d							
Total. Add lines 2a2f  3 Investment income (including dividends, interest, and other similar amounts)  4 Income from investment of tax exempt bond proceeds  5 Royalties  6 a Gross rents  b Less: rental expenses  c Rental income or (loss)  d Net rental income or (loss)  7 a Gross amount from sales of assets other than inventory  b Less. cost or other basis and sales expenses  c Gain or (loss)  4 Net gain or (loss)  5 A Gross income from fundraising events (not including \$ of continuturions reported on line 1c) See  Part IV, line 18	og.	е							
3 Investment income (including dividends, interest, and other similar amounts) 4 Income from investment of tax exempt bond proceeds 5 Royalties 6 a Gross rents b Less: rental expenses c Rental income or (loss) 7 a Gross amount from sales of assets other than inventory b Less. cost or other basis and sales expenses c Gam or (loss) 8 a Gross income from fundraising events (not including \$	ď	f	All other program service reve	nue					
other similar amounts)  4 Income from investment of tax-exempt bond proceeds  5 Royaltes  6 a Gross rents b Less: rental expenses c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of assets other than inventory b Less. cost or other basis and sales expenses c Gan or (loss) d Net gan or (loss)  8 a Gross income from fundraising events (not including \$\frac{1}{2}\$ of contibutions reported on line 1c) See Part IV, line 18 b Less: direct expenses c Net income or (loss) from fundraising events  10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from gaming activities  10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from gaming activities  11 a EXPENSE REIMBURSEMENTS b Loss instructions.  12		g	Total. Add lines 2a-2f						
4 Income from Investment of tax exempt bond proceeds 5 Royaltes  (i) Real (ii) Personal b Less: rental expenses c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of assets other than inventory b Less. cost or other basis and sales expenses c Can or (loss) d Net gain or (loss) d Net gain or (loss) d Net gain or (loss) c Net income or (loss) from fundraising events 9 a Gross income from fundraising events 9 a Gross income from gaming activities c Net income or (loss) from gaming activities c Net income or (loss) from gaming activities 0 a Gross sales of inventory less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory  Miscellaneous Revenue  11 a EXPENSE REIMBURSEMENTS  b C All other revenue e Total. Add lines 11a-11d		3	Investment income (including	dividends, intere	est, and				
Second   S			other sımılar amounts)		<b>&gt;</b>	772.			772.
6 a Gross rents b Less: rental expenses c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of assets other than inventory b Less. cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) d Net gain or (loss) d Net gain or (loss) c Net gain or (loss) b Less: direct expenses c Net income or (loss) from gaming activities. See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities. See Part IV, line 19 b Less cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue  11 a EXPENSE REIMBURSEMENTS b C d All other revenue e Total. Add lines 11a-11d		4	Income from investment of tax	x-exempt bond p	roceeds >				
6 a Gross rents b Less: rental expenses c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of assets other than inventory b Less. cost or other basis and sales expenses c Cam or (loss) 4 Net gam or (loss) 5 A Gross income from fundraising events (not including \$		5	Royalties		<u> </u>				
b Less: rental expenses c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of assets other than inventory b Less. cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) for contributions reported on line 1c) See Part IV, line 18 a b Less: direct expenses c Net income or (loss) from gaming activities. See Part IV, line 19 b Less cost of goods sold c Net income or (loss) from sales of inventory  Miscellaneous Revenue  Business Code 11 a EXPENSE REIMBURSEMENTS b d All other revenue e Total. Add lines 11a.11d b 9, 425. c 10al revenue See instructions.  1500000000000000000000000000000000000				(ı) Real	(ii) Personal				
C Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of (i) Securities (ii) Other assets other than inventory b Less. cost or other basis and sales expenses c Gam or (loss) d Net gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not including \$		6 a	Gross rents				:		
d Net rental income or (loss) 7 a Gross amount from sales of assets other than inventory b Less, cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not including \$		b	Less: rental expenses						
7 a Gross amount from sales of assets other than inventory b Less. cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not including \$		С	: Rental income or (loss)						
assets other than inventory b Less. cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not including \$		d	Net rental income or (loss)		<b></b>				
b Less. cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss)  8 a Gross income from fundraising events (not including \$		7 a	Gross amount from sales of	(i) Secunties	(ii) Other				
and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not including \$			assets other than inventory						
c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not including \$		b	Less. cost or other basis						
d Net gain or (loss)  8 a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18 b Less: direct expenses b c Net income or (loss) from fundraising events  9 a Gross income from gaming activities. See Part IV, line 19 b Less direct expenses b c Net income or (loss) from gaming activities  10 a Gross sales of inventory, less returns and allowances a b Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code  11 a EXPENSE REIMBURSEMENTS			and sales expenses						
8 a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18 a b Less: direct expenses b		С	Gain or (loss)						
including \$		d	Net gain or (loss)						<u> </u>
Part IV, line 18 a b Less: direct expenses b c Net income or (loss) from fundraising events  9 a Gross income from gaming activities. See Part IV, line 19 a b Less direct expenses b c Net income or (loss) from gaming activities  10 a Gross sales of inventory, less returns and allowances a b Less: cost of goods sold b c Net income or (loss) from sales of inventory  Miscellaneous Revenue Business Code  11 a EXPENSE REIMBURSEMENTS  b c d All other revenue e Total. Add lines 11a-11d	ē	8 a		g events (not					
Part IV, line 18 a b Less: direct expenses b c Net income or (loss) from fundraising events  9 a Gross income from gaming activities. See Part IV, line 19 a b Less direct expenses b c Net income or (loss) from gaming activities  10 a Gross sales of inventory, less returns and allowances a b Less: cost of goods sold b c Net income or (loss) from sales of inventory  Miscellaneous Revenue Business Code  11 a EXPENSE REIMBURSEMENTS  b c d All other revenue e Total. Add lines 11a-11d	Ē								
c Net income or (loss) from fundraising events  9 a Gross income from gaming activities. See Part IV, line 19  b Less direct expenses c Net income or (loss) from gaming activities  10 a Gross sales of inventory, less returns and allowances a b Less cost of goods sold c Net income or (loss) from sales of inventory  Miscellaneous Revenue  11 a EXPENSE REIMBURSEMENTS b c d All other revenue e Total. Add lines 11a-11d  12 Total revenue See instructions.  13	Re		•	1c) See					
c Net income or (loss) from fundraising events  9 a Gross income from gaming activities. See Part IV, line 19  b Less direct expenses c Net income or (loss) from gaming activities  10 a Gross sales of inventory, less returns and allowances a b Less cost of goods sold c Net income or (loss) from sales of inventory  Miscellaneous Revenue  11 a EXPENSE REIMBURSEMENTS b c d All other revenue e Total. Add lines 11a-11d  12 Total revenue See instructions.  13	ē			а					
9 a Gross income from gaming activities. See Part IV, line 19 a b Less direct expenses c Net income or (loss) from gaming activities  10 a Gross sales of inventory, less returns and allowances a b Less cost of goods sold c Net income or (loss) from sales of inventory  Miscellaneous Revenue  11 a EXPENSE REIMBURSEMENTS b c d All other revenue e Total. Add lines 11a-11d  12 Total revenue See instructions.  9 0 0 9 9 , 425.  1 1 1 2 1 Total revenue See instructions.  1 2 1 Total revenue See instructions.  1 2 1 Total revenue See instructions.	Ş	to				-			
Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities  10 a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory  Miscellaneous Revenue  11 a EXPENSE REIMBURSEMENTS b c d All other revenue e Total. Add lines 11a-11d  12 Total revenue See instructions.  13		· -			<u> </u>				
b Less direct expenses c Net income or (loss) from gaming activities  10 a Gross sales of inventory, less returns and allowances a b Less cost of goods sold c Net income or (loss) from sales of inventory  Miscellaneous Revenue  11 a EXPENSE REIMBURSEMENTS b c d All other revenue e Total. Add lines 11a-11d  Total revenue See instructions.  12 Total revenue See instructions.  132009  10 All other seenue See instructions.  10 All other seenue See instructions.  11 All other seenue See instructions.  12 Total revenue See instructions.  13 All other seenue See instructions.  14 All other seenue See instructions.  15 All other seenue See instructions.  16 All other seenue See instructions.  17 All other seenue See instructions.  18 All other seenue See instructions.  19 All other seenue See instructions.  10 All other seenue See instructions.		9 a							
c Net income or (loss) from gaming activities  10 a Gross sales of inventory, less returns and allowances a b Less: cost of goods sold b c Net income or (loss) from sales of inventory  Miscellaneous Revenue  11 a EXPENSE REIMBURSEMENTS b c d All other revenue e Total. Add lines 11a-11d 12 Total revenue See instructions.  132009  10 a Gross sales of inventory, less returns and allowances a b Less: cost of goods sold b c less: cost of goods sold b les		_	•		·	+	,		
10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory  Miscellaneous Revenue  Business Code  11 a EXPENSE REIMBURSEMENTS b c d All other revenue e Total. Add lines 11a-11d  12 Total revenue See instructions.  432009			•	•		1			ł
and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory  Miscellaneous Revenue  11 a EXPENSE REIMBURSEMENTS b c d All other revenue e Total, Add lines 11a-11d 12 Total revenue See instructions.  432009		ł			<u> </u>				
b Less cost of goods sold b C Net income or (loss) from sales of inventory  Miscellaneous Revenue Business Code  11 a EXPENSE REIMBURSEMENTS 900099 9,425. 9,425.  b C C D D D D D D D D D D D D D D D D D		10 a	•						
c Net income or (loss) from sales of inventory         Miscellaneous Revenue       Business Code         11 a EXPENSE REIMBURSEMENTS       900099         b       9,425.         c       4All other revenue         e Total. Add lines 11a·11d       ▶ 9,425.         12 Total revenue See instructions.       ▶ 1,063,314.         432009		١.		•		-			
Miscellaneous Revenue   Business Code		1				1			
11 a EXPENSE REIMBURSEMENTS 900099 9,425. 9,425.  b					Business Code				
b		44 -					· · · · · · · · · · · · · · · · · · ·		9 125
c       d All other revenue         e Total. Add lines 11a·11d       ▶ 9,425.         12 Total revenue See instructions.       ▶ 1,063,314.       0.       0.       10,197.		l	100	CIMENIO	300033	3,943.			7,423.
d All other revenue e Total. Add lines 11a-11d  ▶ 9,425.  12 Total revenue See instructions. ▶ 1,063,314.  0. 0. 10,197.			·			<del></del>	<del></del>		
e Total. Add lines 11a-11d  12 Total revenue See instructions.  ▶ 1,063,314.  0.  10,197.				<del>.</del>	<del>                                     </del>	<del> </del>			-
12 Total revenue See instructions.   1,063,314.   0.   0.   10,197.			• •			9 425			<del>                                     </del>
432009		125				1.063 314		0	10 197
	43200	19	10th 1010100 Occ manualins.	-13-1-11111111111		<u></u>			

Form 990 (2014) COMING CLEAN, INC.

Part IX Statement of Functional Expenses

Secti	on 501(c)(3) and 501(c)(4) organizations must comp Check if Schedule O contains a response			mplete column (A)	X
Do r	not include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C)	(D) Fundraising
	Bb, 9b, and 10b of Part VIII.	lotal expenses	Program service expenses	Management and general expenses	expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21	800.	800.		
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22			-	
3	Grants and other assistance to foreign			1	
	organizations, foreign governments, and foreign				
	individuals See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,			40.000	1.4.000
	trustees, and key employees	120,000.	66,000.	40,000.	14,000.
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	247,392.	133,291.	59,965.	54,136.
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				4
9	Other employee benefits	27,800.	12,288.	11,258.	4,254. 5,212.
10	Payroll taxes	29,554.	15,246.	9,096.	5,212.
11	Fees for services (non-employees)				
а	Management				
þ	Legal	756.	540.	216.	
С	Accounting	14,400.		14,400.	
d	Lobbying				
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch O.)	391,539.	391,539.		
12	Advertising and promotion	21,670.	21,670.		
13	Office expenses	54,505.	36,805.	17,434.	266.
14	Information technology	485.		485.	
15	Royalties				
16	Occupancy	10,119.		10,119.	
17	Travel	68,473.	63,811.	514.	4,148.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				<u> </u>
19	Conferences, conventions, and meetings	14,967.	14,933.	34.	
20	Interest				
21	Payments to affiliates .				
22	Depreciation, depletion, and amortization	<u>5,569.</u>		5,569.	
23	Insurance	2,183.		2,183.	
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
_	MEALS	8,895.	5,081.	1,524.	2,290.
a b	MEALIO	0,055.	5,001.		
	· · · · · · · · · · · · · · · · · · ·				
c d					
	All other expenses				
е 25	Total functional expenses Add lines 1 through 24e	1,019,107.	762,004.	172,797.	84,306
<u>25</u> 26	Joint costs. Complete this line only if the organization	<u> </u>	702,003.		02/500
20	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here If following SOP 98-2 (ASC 958-720)				
_	In following SOP 98-2 (ASC 958-720)		·	<u>.                                    </u>	Form <b>990</b> (2014)

Form 990 (2014) COMING CLEAN, INC.

Part X Balance Sheet

Par	t X	Balance Sheet					
	•	Check if Schedule O contains a response or not	te to any	ine in this Part X	···		
<u>-</u> -					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			797,368.	1	<u>582,414</u>
	2	Savings and temporary cash investments			2		
	3	Pledges and grants receivable, net	26,313.	3	267,845		
	4	Accounts receivable, net		· · · · · · · [		4	
-	5	Loans and other receivables from current and for	ormer offic	cers, directors,			
		trustees, key employees, and highest compensations					
-		Part II of Schedule L	•			5	
- 1	6	Loans and other receivables from other disquali	fied perso	ons (as defined under			
		section 4958(f)(1)), persons described in section	•				
		employers and sponsoring organizations of sections				]	
,		employees' beneficiary organizations (see instr)	•			6	
	7	Notes and loans receivable, net	оор.о.			7	
}	8	Inventories for sale or use		-		8	
	9	Prepaid expenses and deferred charges		-	3,676.	9	18,351
	_	Land, buildings, and equipment: cost or other	1 1				
	.04	basis Complete Part VI of Schedule D	10a	16,201.			
	h	Less accumulated depreciation	10b	10,430.	10,153.	10c	5,771
İ	11	Investments - publicly traded securities	. 100	10,100	10/1550	11	3,,,,
	12	Investments - other securities See Part IV, line	11	<del>-</del>		12	
	13	Investments - program-related. See Part IV, line	_		13		
- 1	14	Intangible assets		14			
	15	Other assets See Part IV, line 11	<u> </u>	1,500.	15	7,113	
	16	Total assets. Add lines 1 through 15 (must equ		839,010.	16	881,494	
7	17	Accounts payable and accrued expenses		45,359.	17	43,636	
	18	Grants payable		43,337	18	45,050	
	19	Deferred revenue		19			
	20	Tax-exempt bond liabilities			20		
	21	Escrow or custodial account liability. Complete	Dart IV of	Schodule D		21	
- 1	22	Loans and other payables to current and former		<u> </u>		21	
	22	key employees, highest compensated employee					
		Complete Part II of Schedule L	cs, and di	squaineu persons.		22	
; ;	23	Secured mortgages and notes payable to unrela	atad third	nartine		23	
	23 24	Unsecured notes and loans payable to unrelate				24	
	25	Other liabilities (including federal income tax, pa	-			24	
	25	parties, and other liabilities not included on lines	•				
		Schedule D	3 17 24). (	Somplete Fart X of		25	
	26	Total liabilities, Add lines 17 through 25		• • •	45,359.	26	43,636
┪		Organizations that follow SFAS 117 (ASC 958	R) check	here X and			10,7000
,		complete lines 27 through 29, and lines 33 an		nercy and			
ا فِا	27	Unrestricted net assets	IG 04.		707,657.	27	454,098
	28	Temporarily restricted net assets	•	·  -	85,994.	28	383,760
.	29	Permanently restricted net assets	00/2710	29	303,700		
		Organizations that do not follow SFAS 117 (A	SC 9581	check here			
וופן אפפוס סו ז מוום חמומונכם		and complete lines 30 through 34.					
	30	Capital stock or trust principal, or current funds				30	
}	31	Paid-in or capital surplus, or land, building, or ed	fund		31		
:	32	Retained earnings, endowment, accumulated in	-	_		32	
ນ	32 33	Total net assets or fund balances	icome, or		793,651.	33	837,858
Z į					( / / / / / / L e		001,000

om	1 990 (2014) COMING CLEAN, INC.	04-342	29794	Pa	ge 12
Pa	rt XI Réconciliation 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	<u>1,06</u>		
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,01		
3	Revenue less expenses Subtract line 2 from line 1	3			<u> 107.</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	<u>79</u>	<u>3,6</u>	<u>51.</u>
5	Net unrealized gains (losses) on investments	5			
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			0.
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,	1 1			
	column (B))	10	83	<u>7,8</u>	<u>58.</u>
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				Щ
				Yes	No
1	Accounting method used to prepare the Form 990. Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a			
	separate basis, consolidated basis, or both				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	X	<u> </u>
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	te basıs,			
	consolidated basis, or both.				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	ne audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X	<u> </u>
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Audıt			
	Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ııred audıt			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		<u> </u>
			Form	990	(2014)

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

Department of the Treasury

Internal Revenue Service

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047

Open to Public Inspection

**Employer identification number** 

Name of the organization COMING CLEAN, INC. 04-3429794 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.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) 2 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, 4 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) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X 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) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) 8 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.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 10 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 in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g J Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization f Enter the number of supported organizations Provide the following information about the supported organization(s). (iii) Type of organization (iv) Is the organization (i) Name of supported (ii) EIN (v) Amount of monetary (vi) Amount of listed in your (described on lines 1-9 organization support (see other support (see governing document? above or IRC section instructions) Instructions) No (see instructions))

# Schedule A (Form 990 or 990-EZ) 2014 COMING CLEAN, INC. 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)

Sec	ction A. Public Support	,				<del> </del>	-
	ndar year (or fiscal year beginning in) 🕨	(a) 2010	<b>(b)</b> 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
	include any "unusual grants ")	2,022,709.	2,493,057.	2,315,064.	650,795.	1,053,117.	8,534,742.
2	Tax revenues levied for the organ-						
	ızatıon's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge				650 805		<del></del>
4	Total. Add lines 1 through 3	2,022,709.	2,493,057,	2,315,064.	650,795.	1,053,117,	8,534,742,
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,	1		i			
_	column (f)			- 4			3,697,909.
	Public support. Subtract line 5 from line 4 ction B. Total Support				l, <u></u>	<u> </u>	4.836.833.
	ndar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
	Amounts from line 4	2,022,709	2,493,057.	2,315,064,	650,795.	1.053.117.	8,534,742,
8	Gross income from interest,	2,022,103	2,499,037.	2,313,004,	00077500	1,033,117,	0,004,742,
J	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources	809.	373.	868.	515.	772.	3,337.
9	Net income from unrelated business	0001	0.01				
J	activities, whether or not the						
	business is regularly carned on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI)						
11	Total support. Add lines 7 through 10						8,538,079,
12		, etc (see instruction	ons)			12	
13	First five years. If the Form 990 is for			d, fourth, or fifth ta	ax year as a sectio	n 501(c)(3)	
	organization, check this box and stop	p here	1				
Se	ction C. Computation of Publ	ic Support Pe	rcentage				
14	Public support percentage for 2014 (	line 6, column (f) di	ivided by line 11, c	olumn (f)) <sub>.</sub>		14	<u>56.65 %</u>
	Public support percentage from 2013				•	15	<u>65.06 %</u>
168	33 1/3% support test - 2014. If the	organization did no	ot check the box o	n line 13, and line	14 is 33 1/3% or r	nore, check this bo	
	stop here. The organization qualifies		-				<b>►</b> X
t	33 1/3% support test - 2013. If the				l line 15 is 33 1/3%	6 or more, check th	is box
	and stop here. The organization qual						
17a	10% -facts-and-circumstances tes						
	and if the organization meets the "fac			•		rt VI how the organ	ization
	meets the "facts-and-circumstances"	-	•		_		▶∟
k	10% -facts-and-circumstances tes						
	more, and if the organization meets the						
	organization meets the "facts-and-cir		=				
<u>18</u>	Private foundation. If the organization	on did not check a	box on line 13, 16	a, 16b, 17a, or 17			
					Scho	edule A (Form 990	or 990-EZ) 2014

## 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)

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🖊	(a) 2010	<b>(b)</b> 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
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			1			
	are not an unrelated trade or bus-						
4	Tax revenues levied for the organ-	-					
•	ization's benefit and either paid to						
	or expended on its behalf						
6	The value of services or facilities	<del></del>					
3	furnished by a governmental unit to						
	the organization without charge						
	Total. Add lines 1 through 5						
_	· · · · · · · · · · · · · · · · · · ·						
18	Amounts included on lines 1, 2, and 3 received from disqualified persons						
t	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		<u> </u>				+
	: Add lines 7a and 7b					+	
	Public support (Subtract line 7c from line 6) ction B. Total Support			<u> </u>	l	1.	1
		4-) 0010	(h) 0011	4-> 0010	(4) 0010	(=) 0014	/O Total
	ndar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
-	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
t	Unrelated business taxable income	-					
	(less section 511 taxes) from businesses acquired after June 30, 1975						
(	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						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
	Total support (Add lines 9, 10c, 11, and 12)		1		<u> </u>		<u></u>
14	First five years. If the Form 990 is for	the organization'	's first, second, thi	rd, fourth, or fifth t	ax year as a secti	on 501(c)(3) organi	zation,
	check this box and stop here						
<u>Se</u>	ction C. Computation of Publi	<u>c Support Pe</u>	ercentage				
15	Public support percentage for 2014 (li	ne 8, column (f) d	livided by line 13,	column (f)) .		15	%
	Public support percentage from 2013					16	%
<u>Se</u>	ction D. Computation of Inves	tment Incom	<u>ne Percentage</u>			, . <del></del>	
17	Investment income percentage for 20	<b>14</b> (line 10c, colu	mn (f) divided by li	ne 13, column (f))		17	%
18	Investment income percentage from 2	013 Schedule A,	Part III, line 17			18	%
19	a 33 1/3% support tests - 2014. If the	organization did	not check the box	on line 14, and line	e 15 is more than	33 1/3%, and line	17 is not
	more than 33 1/3%, check this box ar						▶□
ŀ	33 1/3% support tests - 2013. If the	· ·					and
	line 18 is not more than 33 1/3%, che	ck this box and s	stop here. The org	anızatıon qualıfies	as a publicly supp	oorted organization	· ▶□
20	Private foundation. If the organization	n did not check a	box on line 14, 19	a, or 19b, check t	his box and see ir	structions	<b>.</b>
			· · · · · · · · · · · · · · · · · · ·	·			

### Part IV Supporting Organizations

(Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B If you checked 11b of Part I, complete Sections A and C If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V)

Section A.	All	Supporting	Organ	izations

- Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No" describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
   Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2)
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)
  (B) purposes? If "Yes." explain in Part VI what controls the organization put in place to ensure such use
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)
- **b** Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations; or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- b Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer (b) below
  - b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
1		
2		
_		
3a		
3b		
3c		
4a		-
4b		
4c		
5a		
5b 5c		
6	-	<u> </u>
7		
8		
9a		
9b		<u> </u>
00		
9c	<del>                                     </del>	
10a_	<u> </u>	<del>                                     </del>
1		

Sche	dule A (Form 990 or 990-EZ) 2014 COMING CLEAN, INC.		(	)4-3429794 Page 6
Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting	ng Organ	izations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying	ng trust on f	Nov 20, 1970. See instr	uctions. All
	other Type III non-functionally integrated supporting organizations must co	omplete Se	ctions A through E.	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	<del></del>	
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year)			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
e	Discount claimed for blockage or other			
	factors (explain in detail in Part VI)		<u></u>	
_2_	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
	see instructions)	4	· <del>-</del>	
_5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
_6_	Multiply line 5 by .035	6		
_7_	Recovenes of prior-year distributions	7		
_8_	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4	· · · · · · · · · · · · · · · · · · ·	
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functional	lly-integrate	ed Type III supporting org	ganization (see

Schedule A (Form 990 or 990-EZ) 2014

instructions).

1	edule A (Form 990 or 990-EZ) 2014 COMING CLEAN,			)4-3429794 Page 7
	rt V   Type III Non-Functionally Integrated 509	න(a)(හි) Supporting Org	anizations (continued)	
	tion D - Distributions		<del>_</del> -	Current Year
1	Amounts paid to supported organizations to accomplish ex			-
2		pt purposes of supported		
2	organizations, in excess of income from activity	en of augmented accommand		<del>                                     </del>
3		ses of supported organization	15	
4			· · · · · · · · · · · · · · · · · · ·	<del>                                     </del>
5	Qualified set-aside amounts (prior IRS approval required) Other distributions (describe in Part VI) See instructions.	<del></del> .		<del> </del>
<u>6</u> 7	Total annual distributions. Add lines 1 through 6.		<del></del> -	<del> </del>
8	Distributions to attentive supported organizations to which	the organization is responsive	<u> </u>	
0	(provide details in Part VI) See instructions	ine organization is responsive	5	
9				
<u> </u>			<del></del>	
<del>. •</del>		(i)	(ii)	(iii)
		Excess Distributions	Underdistributions	Distributable
iect	tion E - Distribution Allocations (see instructions)		Pre-2014	Amount for 2014
1	Distributable amount for 2014 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2014			
	(reasonable cause required-see instructions)			
3	Excess distributions carryover, if any, to 2014			
а				
b				
С				
d				
е	From 2013			
f	Total of lines 3a through e			
	Applied to underdistributions of prior years			
h	Applied to 2014 distributable amount			
i	· · · · · · · · · · · · · · · · · · ·			
_i_	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			ļ
4	Distributions for 2014 from Section D,			
	line 7. \$			
	Applied to underdistributions of prior years			
	Applied to 2014 distributable amount			
_	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2014, if			
	any Subtract lines 3g and 4a from line 2 (if amount			
	greater than zero, see instructions)			
6	Remaining underdistributions for 2014. Subtract lines 3h			
	and 4b from line 1 (if amount greater than zero, see			
_	Instructions)			
7	Excess distributions carryover to 2015. Add lines 3j			
	and 4c. Breakdown of line 7.			<u> </u>
8		<del> </del>		
<u>a</u> b			-	<del> </del>
c				
	Excess from 2013			
		1	1	į

Schedule A (Form 990 or 990-EZ) 2014

e Excess from 2014

Schedule A	(Form 990 or 990-EZ) 20	14 COMING	CLEAN,	INC.		04-	-3429794 Page 8
Part VI	Supplemental info	ormation. Prov	/ide the expla	nations required l	by Part II, line 10, Part	II, line 17a or 17b, a	and Part III, line 12.
•	Also complete this part	for any additiona	ıl information.	(See instructions	3).	,	·
			· .				
		<del></del> -			·		
		<del></del>					
			<del></del>				<del></del>
							······
				_			
						-	<del></del>
							<del>-</del>
		-		22.7.4			<u></u>
				<del></del>			
					··-···································		

# Schedule A

423171 05-01-14

# Identification of Excess Contributions Included on Part II, Line 5

2014

\*\* Do Not File \*\*

\*\*\* Not Open to Public Inspection \*\*\*

	Contributor's Name	Total Contributions	Excess Contributions
		1,525,000.	1,354,238
		1,750,000.	1,579,238
		271,000.	100,238
		250,000.	79,238
		275,000.	104,238
		250,000.	79,238
		193,005.	22,243
		550,000.	379,238
=-			

#### SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

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

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

2014

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

Section 5	001(c)(4), (5), or (6) organizat	ions Complete Part III			
Name of orga	anization			Emple	oyer identification number
	COMING	CLEAN, INC.			<u>04-3429794</u>
Part I-A	Complete if the org	anization is exempt un	der section 501(c	) or is a section 527 or	rganization.
	expenditures	ation's direct and indirect politi	ical campaign activities	s in Part IV ▶\$	
Part I-B	Complete if the org	anization is exempt un	der section 501(c	)(3).	
1 Enter th		incurred by the organization un		▶\$	
	•	incurred by organization manag		<b>.</b> .	
	•	n 4955 tax, did it file Form 4720	<del>-</del>	·	Yes No
	orrection made?	•			Yes No
<b>b</b> If "Yes,"	describe in Part IV				
Part I-C	Complete if the org	anization is exempt un	der section 501(c	), except section 501(	c)(3).
1 Enter th	e amount directly expended	by the filing organization for s	ection 527 exempt fun	ction activities >\$	
2 Enter th	e amount of the filing organ	zation's funds contributed to c	ther organizations for	section 527	
exempt	function activities			. >\$	
3 Total ex	empt function expenditures	. Add lines 1 and 2. Enter here	and on Form 1120-PO	L,	
line 17b				▶\$	
4 Did the	filing organization file Form	1120-POL for this year?		•	Yes No
	•	nployer identification number (E	•	<u> </u>	
	-	tion listed, enter the amount pa			
	•	omptly and directly delivered to		-	te segregated fund or a
political		additional space is needed, pro	"1	1	1
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization.  If none, enter -0
-					
				<del> </del>	
		<u> </u>			<u> </u>

Schedule C (Form 990 or 990-EZ) 2014 C Part II-A   Complete if the orga	OMING CL	EAN, INC.	n 501(a)(3) and fil	04-3	429794 Page 2
Part II-A Complete if the organic section 501(h)).	inization is e	xempt under sectio	n sor(c)(s) and m	eu Folili 5700 (e	lection under
		afflicate of every found het in	Dest IV each officeted	are in memberle name	address FIN
	-	affiliated group (and list in	i Part IV each amiliated	group member's name	e, audiess, Eliv,
expenses, and share		ing expenditures) A and "limited control" pro	weens annly		
B Check Lifthe filing organizati	on checked box	A and limited control pro	ovisions apply.	(a) Filing	(b) Affiliated group
	on Lobbying E	•		organization's	totals
(The term "expendi	tures" means a	mounts paid or incurred.)	)	totals	
1a Total lobbying expenditures to influe	ence public opin	on (grass roots lobbying)		267.	
b Total lobbying expenditures to influe				2,324.	
c Total lobbying expenditures (add lin	_	, , , , , , , , , , , , , , , , , , , ,		2,591.	
d Other exempt purpose expenditures				1,016,516.	
e Total exempt purpose expenditures		d 1d)		1,019,107.	<del></del>
f Lobbying nontaxable amount. Enter			h columns.	176,911.	
If the amount on line 1e, column (a) or		lobbying nontaxable am			
Not over \$500,000		of the amount on line 1e.	71		
Over \$500,000 but not over \$1,000,		0,000 plus 15% of the exc			
Over \$1,000,000 but not over \$1,50		5,000 plus 10% of the exc			
Over \$1,500,000 but not over \$17,0		5,000 plus 5% of the exce			
Over \$17,000,000		000,000	· · · · · · · · · · · · · · · · · · ·	; ;	
	1	· · · · · · · · · · · · · · · · · · ·			
g Grassroots nontaxable amount (ent	er 25% of line 1f	<u> </u>	· <u> </u>	44,228.	
h Subtract line 1g from line 1a If zero				0.	
i Subtract line 1f from line 1c. If zero				0.	
j If there is an amount other than zero	on either line 1	n or line 1i, did the organiz	ation file Form 4720		
reporting section 4911 tax for this y					Yes No
		Averaging Period Under			
(Some organizations the		on 501(h) election do not		of the five columns be	elow.
		parate instructions for li			
	Lobbying E	xpenditures During 4-Yea	ar Averaging Period	<u></u>	
Calendar year	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) Total
(or fiscal year beginning in)	(a) 2011	(6) 2012	(6) 2010	(4) 2014	(6) 1014
					<del></del>
2a Lobbying nontaxable amount	260,20	8. 232,981.	233,703.	176,911.	903,803.
b Lobbying ceiling amount					
(150% of line 2a, column(e))			:		1,355,705.
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
c Total lobbying expenditures	103,94	6. 125,256.	49,801.	2,591.	281,594.
			1		
d Grassroots nontaxable amount	65,05	2. 58,245.	58,426.	44,228.	225,951.
e Grassroots ceiling amount					
(150% of line 2d, column (e))			†		338,927.
f Grassroots lobbying expenditures	54,04	1. 12,568.	32,902.	267.	99,778.

# Schedule C (Form 990 or 990-EZ) 2014 COMING CLEAN, INC. 04-3429794 Page 3 Part II-B | Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

	ch "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description lobbying activity.		(a)		(b)	
	obbying activity.	Yes	No	Amo	ount	
ט ו	uring the year, did the filing organization attempt to influence foreign, national, state or					
lo	ocal legislation, including any attempt to influence public opinion on a legislative matter					
	r referendum, through the use of					
	olunteers?					
_	aid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
	ledia advertisements?					
_	failings to members, legislators, or the public?					
	ublications, or published or broadcast statements?					
	irants to other organizations for lobbying purposes?					
	rect contact with legislators, their staffs, government officials, or a legislative body?					
-	allies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
	ther activities?					
-	otal Add lines 1c through 1i					
-	•					
	id the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
	"Yes," enter the amount of any tax incurred under section 4912					
	"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?	= 504/a)	(F) av ac	-4:		
	II-A Complete if the organization is exempt under section 501(c)(4), section	on 50 I(C)	(5), or se	ection		
	501(c)(6).					
	501(c)(6).			Yes	N	
Part I			1	Yes	N	
<b>Part I</b>	/ere substantially all (90% or more) dues received nondeductible by members?		1 2	Yes	N	
1 W 2 D 3 D	Vere substantially all (90% or more) dues received nondeductible by members?  Indict the organization make only in-house lobbying expenditures of \$2,000 or less?  Indict the organization agree to carry over lobbying and political expenditures from the prior year?  III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered		2 3 (5), or se	ection		
1 W 2 D 3 D Part I	Vere substantially all (90% or more) dues received nondeductible by members?  Indicated the organization make only in-house lobbying expenditures of \$2,000 or less?  Indicated the organization agree to carry over lobbying and political expenditures from the prior year?  III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."		2 3 (5), or se R (b) Par	ection		
1 W 2 D 3 D Part I	Vere substantially all (90% or more) dues received nondeductible by members?  Indicate organization make only in-house lobbying expenditures of \$2,000 or less?  Indicate organization agree to carry over lobbying and political expenditures from the prior year?  III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Indicate the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."	"No," O	2 3 (5), or se	ection		
1 W 2 D 3 D Part I	Vere substantially all (90% or more) dues received nondeductible by members?  Indicated the organization make only in-house lobbying expenditures of \$2,000 or less?  Indicated the organization agree to carry over lobbying and political expenditures from the prior year?  III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  The provided in the indicate in the prior year?  Indicated the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  The provided in the organization is expenditures (and the prior year?  The org	"No," O	2 3 (5), or se R (b) Par	ection		
1 W 2 D 3 D 2 art I	Vere substantially all (90% or more) dues received nondeductible by members?  Indicate the organization make only in-house lobbying expenditures of \$2,000 or less?  Indicate the organization agree to carry over lobbying and political expenditures from the prior year?  III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  III-B complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  III-B complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."	"No," O	2 3 (5), or se R (b) Par	ection		
1 W 2 D 3 D 2 art I 1 D 2 S e. a C	Vere substantially all (90% or more) dues received nondeductible by members?  Indicate organization make only in-house lobbying expenditures of \$2,000 or less?  Indicate organization agree to carry over lobbying and political expenditures from the prior year?  III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  III-B substantially all (90% or more) dues received nondeduction is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  III-B complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  III-B complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  III-B complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."	"No," O	2 3 (5), or se R (b) Par	ection		
1 W 2 D 3 D 2 art I 1 D 2 S e: a C b C	Vere substantially all (90% or more) dues received nondeductible by members?  Indicate organization make only in-house lobbying expenditures of \$2,000 or less?  Indicate organization agree to carry over lobbying and political expenditures from the prior year?  III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  III-B complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  III-B complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  III-B complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  III-B complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered answered "Yes."  III-B complete if the organization is exempt under section 501(c)(4), section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered answered "Yes."	"No," O	2 3 (5), or se R (b) Par	ection		
1 W 2 D 3 D 2 art I 1 D 2 S 6 C 6 C T	Vere substantially all (90% or more) dues received nondeductible by members?  Indicated the organization make only in-house lobbying expenditures of \$2,000 or less?  Indicated the organization agree to carry over lobbying and political expenditures from the prior year?  III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  III-B complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  III-B complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  III-B complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  III-B complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered answered "Yes."  III-B complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered answered "Yes."  III-B complete if the organization is exempt under section 501(c)(4), section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered answered "Yes."	"No," O	2 3 (5), or se R (b) Par 1 2a 2b 2c	ection	ne 3,	
1 W 2 D 3 D 2 art I 1 D 2 S a C b C c T 3 A	Vere substantially all (90% or more) dues received nondeductible by members?  Indicate organization make only in-house lobbying expenditures of \$2,000 or less?  Indicate organization agree to carry over lobbying and political expenditures from the prior year?  III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  III-B complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  III-B complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  III-B complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered answered "Yes."  III-B complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered answered "Yes."  III-B complete if the organization is exempt under section 501(c)(4), section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered answered "Yes."  III-B complete if the organization is exempt under section 501(c)(4), section 501(c)(	"No," Ol	2 3 (5), or se R (b) Par	ection		
1 W 2 D 3 D 2 art I 1 D 2 S 6 C 6 C 7 G 3 A 4 If	Vere substantially all (90% or more) dues received nondeductible by members?  Indicate organization make only in-house lobbying expenditures of \$2,000 or less?  Indicate organization agree to carry over lobbying and political expenditures from the prior year?  III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Indicate the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Indicate the organization agree to carry over lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Indicate the organization agree to carry over lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Indicate the organization agree to carry over lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Indicate the organization agree to carry over lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Indicate the organization agree to carry over lobbying and political expenditures (do not include amounts of political expenditures (do not include amounts of political expenditures (do not include amounts of political expenditures (do not include amounts of political expenditures (do not include amounts of political expenditures (do not include amounts of political expenditures (do not include amounts of political expenditures (do not include amounts of political expenditures (do not include amounts of political expenditures (do not include amounts of political expenditures (do not include amounts of political expenditures (do not include amounts of political expenditures (do not include amounts of political expenditures (do not include amounts of politic	"No," Of	2 3 (5), or se R (b) Par 1 2a 2b 2c	ection		
1 W 2 D 3 D 2 art I 1 D 2 S e. a C b C c T 3 A 4 Iff	Vere substantially all (90% or more) dues received nondeductible by members?  Indicate organization make only in-house lobbying expenditures of \$2,000 or less?  Indicate organization agree to carry over lobbying and political expenditures from the prior year?  III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Indicate the organization agree to carry over lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Indicate the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenses for mondeductible section 162(e) dues notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the except the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expensions.	"No," Of	2 3 (5), or se R (b) Par 1 2a 2b 2c 3	ection		
1 W 2 D 3 D 2 art I 1 D 2 S e. a C b C c T 3 A 4 Iff	Vere substantially all (90% or more) dues received nondeductible by members?  Indicate organization make only in-house lobbying expenditures of \$2,000 or less?  Indicate organization agree to carry over lobbying and political expenditures from the prior year?  III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Indicate the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Indicate the organization agree to carry over lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Indicate the organization agree to carry over lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Indicate the organization agree to carry over lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Indicate the organization agree to carry over lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Indicate the organization agree to carry over lobbying and political expenditures (do not include amounts of political expenditures (do not include amounts of political expenditures (do not include amounts of political expenditures (do not include amounts of political expenditures (do not include amounts of political expenditures (do not include amounts of political expenditures (do not include amounts of political expenditures (do not include amounts of political expenditures (do not include amounts of political expenditures (do not include amounts of political expenditures (do not include amounts of political expenditures (do not include amounts of political expenditures (do not include amounts of political expenditures (do not include amounts of politic	"No," Of	2 3 (5), or se R (b) Par 1 2a 2b 2c	ection		

### **SCHEDULE D**

Department of the Treasury

Internal Revenue Service

# Supplemental Financial Statements

(Form 990)

► 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.lrs.gov/form990.

Inspection

Name of the organization **Employer identification number** COMING CLEAN, INC. 04-3429794 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the Part I organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 1 Aggregate value of contributions to (during year) 2 Aggregate value of grants from (during year) 3 4 Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II | Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax 3 Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of Yes violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 6 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year > \$ 7 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) \_\_ Yes and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under 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, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenue included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items. a Revenue included in Form 990, Part VIII, line 1 Assets included in Form 990, Part X

		CLEAN, INC	•				(	<u> </u>	29794	1 Page 2
Par	rt III   Organizations Maintaining C	ollections of A	rt, Histo	<u>orical Tr</u>	easures, or	Other	Simila	r Asse	ts(contin	ued)
3	Using the organization's acquisition, accession	on, and other record	ls, check	any of the	following that a	re a sign	ificant u	se of its	collection	items
	(check all that apply)									
а	Public exhibition	d	╴╠╏	oan or exc	hange program:	S				
b	Scholarly research	e		Other						
С	Preservation for future generations									
4	Provide a description of the organization's co	ollections and explai	n how the	ey further tl	ne organization'	s exemp	t purpo	se in Parl	XIII	
5	During the year, did the organization solicit or	r receive donations	of art, his	torical trea	sures, or other s	sımılar a:	ssets	_	-	
	to be sold to raise funds rather than to be ma	•							Yes	No_
Pai	rt IV Escrow and Custodial Arran		ete if the	organızatıo	n answered "Ye	es" to Fo	m 990,	Part IV, I	ine 9, or	
	reported an amount on Form 990, Par	•						_		
1a	Is the organization an agent, trustee, custodi	an or other intermed	diary for c	ontribution	s or other asset	ts not inc	cluded		7	
	on Form 990, Part X?							L	J Yes	∟ No
þ	If "Yes," explain the arrangement in Part XIII	and complete the fo	illowing ta	able						
							$\vdash$		Amount	
С	Beginning balance						1c			
d	Additions during the year						1d			
е	Distributions during the year						1e			
f	Ending balance						1f	<del></del>	٦	
	•					-	7		Yes	∐ No
	If "Yes," explain the arrangement in Part XIII.									
Pai	rt V   Endowment Funds. Complete it						Th	bl.		
		(a) Current year	(b) Pr	or year	(c) Two years b	ack (d)	i nree y	ears back	(e) Four	years back
1a	Beginning of year balance									
ь	Contributions		<u> </u>							<del></del>
C	Net investment earnings, gains, and losses									
d	Grants or scholarships	<del></del>			-					
е	Other expenditures for facilities									
	and programs									
f	Administrative expenses					-				
g	End of year balance			<del></del>	<u> </u>			-		
2	Provide the estimated percentage of the curr	rent year end baland		j, column (a	i)) neid as:					
a	Board designated or quasi-endowment		_%							
þ	Permanent endowment	%								
С	Temporanly restricted endowment	%								
_	The percentages in lines 2a, 2b, and 2c should be a sh		-1 114			4 6 4		-4		
За	Are there endowment funds not in the posse	ssion of the organiz	ation that	are neid a	na aaministeret	i for the	organiz	ation	Г	Yes No
	by								3a(i)	Tes No
	(i) unrelated organizations		••• • • • •							
_	(ii) related organizations If "Yes" to 3a(ii), are the related organizations	· · · · · · · · · · · · · · · · · · ·	n Schod	 ulo D2				•	3a(ii) 3b	
4	Describe in Part XIII the intended uses of the	•		-	•		•		SU	
_	rt VI Land, Buildings, and Equipm		JWIIICIIL I	unus	-					
	Complete if the organization answere		) Part IV	line 11a S	ee Form 990. P	art X. lin	e 10			
	Description of property	(a) Cost or o			or other	(c) Acc		d	(d) Book	value
	besomption of property	basis (investi		. ,	(other)		ciation	<b>-</b>	(0) 500.	
19	Land				·	•				
	Buildings	<del></del>								
	Leasehold improvements				4,800.		4,10	00.		700.
d				1	1,401.		6,3			$\frac{700.}{5.071.}$
-	Other						<u> </u>			- , - , <b>- ,</b>
	I Add lines 1a through 1e (Column (d) must e	gual Form 990 Parl	X colum	n (R) line i	10c )			ightharpoonup	ı	5.771.

Part	IX	Other Assets.

(9)

Complete if the organization answered "Yes" to Form 990, Part IV, line 11d. See Form 990, Part X, line 15 (a) Description

(1)	
(2)	
(3)	
(4)	
(5)	 
(6)	
(7)	
(8)	
(9)	
Total (Column (h) must equal Form 000, Part V, and (P) line 15.)	

Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) Part X Other Liabilities.

Total (Col. (b) must equal Form 990, Part X, col. (B) line 13.)

Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f See Form 990, Part X, line 25

<u>1.                                    </u>	(a) Description of liability	(b) Book value
(1) Fede	ral income taxes	
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Colur	nn (b) must equal Form 990. Part X. col. (B) line 25.)	

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

(b) Book value

	edule D (Form 990) 2014 COMING CLEAN, INC.			3429794 Page 4
Pa	rt XI Reconciliation of Revenue per Audited Financial State	-	er Return	•
	Complete if the organization answered "Yes" to Form 990, Part IV, line 1	2a.		
1	Total revenue, gains, and other support per audited financial statements		. 1	1,063,314.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	1 1		
а	Net unrealized gains (losses) on investments	. <u>2a</u>		
Ь	Donated services and use of facilities	2b	i	
С	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d	$\dashv$ $\square$	0
e	Add lines 2a through 2d	•	2e	0. 1,063,314.
3	Subtract line 2e from line 1	• • • •	3	1,003,314.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1	1451		
a	Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII)	4a   4b		
b	Add lines 4a and 4b	40	<b>-</b>   ₄,	0.
С 5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		4c	1,063,314.
_	rt XII Reconciliation of Expenses per Audited Financial State	ements With Expenses		
	Complete if the organization answered "Yes" to Form 990, Part IV, line 1		poi mota.	•••
1	Total expenses and losses per audited financial statements	Lu	1	1,019,107.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			1,010,107.
a	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII )	2d		
e	Add lines 2a through 2d		2e	0.
3	Subtract line 2e from line 1		3	1,019,107.
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		
c	Add lines 4a and 4b		4c	0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5	1,019,107.
Pa	rt XIII Supplemental Information.			
Prov	ide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, F	Part IV, lines 1b and 2b, Part V,	line 4; Part >	K, line 2; Part XI,
lines	2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any	additional information.		
	·····	<del></del>		
		<del></del>		
			<del>-</del>	

#### **SCHEDULE L**

(Form 990 or 990-EZ)

## **Transactions With Interested Persons**

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

► Attach to Form 990 or Form 990-EZ.

Department of the Treasury Internal Revenue Service

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

OMB No 1545-0047

2014

Open To Public Inspection

Schedule L (Form 990 or 990-EZ) 2014

Name of the organization							Emp!	oyer	identi	ficati	on nu	mber
COMING CLEAN, INC.  Part I Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and 501(c)(29) organization								34	297	<del>9</del> 4_		
Part I Excess Be	nefit Transact	tions (section 5	01(c)(3	3), sect	ion 501(c)(4), and 50	01(c)(29) organization	s only)					
Complete if the	ne organization ans	wered "Yes" on	Form	990, Pa	art IV, line 25a or 25i	b, or Form 990-EZ, Pa	art V, lir	ne 40	b.			
1,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(b)	Relationship bet	ween	disqua	Irfied					(d)	Сопе	cted?
(a) Name of disqualifie	ed person	person and o	rganız	ation	(6	c) Description of tran	saction			Ye	es	No
										1		
										1		•
										1		
2 Enter the amount of t	ax incurred by the	organization mar	nagers	or disc	qualified persons du	ring the year under						
section 4958							•	<b>\$</b>				
3 Enter the amount of to	ax, if any, on line 2,	above, reimburs	sed by	the or	ganization		•	<b>\$</b>				
Part II Loans to a	and/or From In	terested Per	sons	<b>.</b>								
Complete if the	ne organization ans	wered "Yes" on	Form 9	990-EZ	, Part V, line 38a or l	Form 990, Part IV, lin	e 26, oi	r if th	e orga	nızatıd	on	
reported an a	mount on Form 99	0, Part X, line 5,				· · · ·				,		
(a) Name of	(b) Relationship			oan to or	(e) Original	(f) Balance due	(g) l	n	(h) App by boa	roved rd or	(i) W	ritten
interested person	with organization	of loan		ization?	principal amount		defau	It?	cómm	ttee?	agree	ment?
			То	From			Yes	No	Yes	No	Yes	No
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Total	Assistance Be	madiaina Indo		<u>.</u>	<u>▶ \$</u>							
		•										
	ne organization ans											
(a) Name of intereste	ed person	(b) Relationship interested per			(c) Amount of assistance	(d) Type assistan		- 1		Purp	ose of	Ì
		the organiz		iu .	assistance	assistan	ice			331316	4100	
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LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

#### **SCHEDULE O** (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on

Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

OMB No 1545-0047 Open to Public

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

Inspection

Name of the organization COMING CLEAN, INC.	Employer identification number 04-3429794
FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MIS	SION:
HUMAN AND ECOLOGICAL HEALTH.	
FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION M	ISSION:
BROADER ENVIRONMENT.	
FORM 990, PART VI, SECTION A, LINE 2:	
JUDITH ROBINSON, CEO, IS RELATED TO JANE ROBINSON, CFO.	
FORM 990, PART VI, SECTION B, LINE 11:	
A DRAFT FORM 990 WAS PROVIDED VIA EMAIL TO ALL BOARD MEMB	ERS FOR THEIR
REVIEW.	
FORM 990, PART VI, SECTION B, LINE 12C:	
ANNUAL DISCLOSURE FORMS ARE SIGNED BY BOARD MEMBERS.	
FORM 990, PART VI, SECTION B, LINE 15:	
CEO, EXECUTIVE DIRECTOR, MANAGEMENT: COMPARABILITY DATA W	HICH MUST BE
APPROVED BY THE BOARD	
OFFICERS, KEY EMPLOYEES: THE DIRECT SUPERVISOR CONDUCTS A	N ANNUAL REVIEW
AND DOCUMENTS WHY A PAY INCREASE IS WARRANTED AFTER CONSI	DERING SUCH
FACTORS AS; PERFORMANCE, RESPONSIBILITIES, PAY FOR SIMILAR	R KINDS OF WORK IN
THE APPROPRIATE AREA OF MARKET, SALARY ANALYSIS, AND AVAIL	LABILITY OF FUNDS.
THIS RECOMMENDATION IS PRESENTED FOR CONSIDERATION TO THE	NEXT LEVEL IN THE
ORGANIZATIONAL STRUCTURE'S HIERARCHY.	

PROGRAM SERVICE EXPENSES

MANAGEMENT AND	GENERAL	EXPENSES	0.

FUNDRAISING EXPENSES 0.

TOTAL EXPENSES 7,500.

#### RESEARCH:

7,500.

Schedule O (Form 990 or 990-EZ) (2014)	Page 2 Employer identification number
Name of the organization  COMING CLEAN, INC.	04-3429794
PROGRAM SERVICE EXPENSES	38,603.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	38,603.
WEB MEDIA:	
PROGRAM SERVICE EXPENSES	2,115.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	2,115.
POLLING:	
PROGRAM SERVICE EXPENSES	5,000.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	5,000.
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	391,539.
	<del></del>