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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

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

Open to Public Inspection

A	For t	he 2013 calendar year, or tax year beginning and	ending		
В	Check			D Employer identi	fication number
	Add	ress SUSTAINABLE CONSERVATION			
	Nan cha	Doing Business As		94-	3232437
	Initia	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone numb	
L	Terr	JO DAILERI SIREET	302		5)977-0380
F	App	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	6,788,628.
_	tion pen	fing		H(a) Is this a group	
		F Name and address of principal officer: ASHLEY BOREN SAME AS C ABOVE		for subordinate	
_	Tay-e	1 77	507	H(b) Are all subordinates	
		xempt status:	or 527		a list. (see instructions)
		of organization: X Corporation Trust Association Other	I Vear	H(c) Group exemption 1995	on number State of legal domicile: CA
		Summary	IL (Cal	briormation. 1999	M State of legal domicile: CA
0	1	Briefly describe the organization's mission or most significant activities: SUST.	AINABL	E CONSERVAT	TON
Activities & Governance	1	PARTNERS WITH BUSINESS TO FIND ENVIRONME	NTAL S	OLUTIONS TH	IAT MAKE
ern	2	Check this box if the organization discontinued its operations or dispositions.	sed of more	than 25% of its net a	ssets.
30	3	Number of voting members of the governing body (Part VI, line 1a)		3	
જ	4	Number of independent voting members of the governing body (Part VI, line 1b)		4	12
ties	5	Total number of individuals employed in calendar year 2013 (Part V, line 2a)		5	30
χį	6	Total number of volunteers (estimate if necessary)		6	47
A	/a	Total unrelated business revenue from Part VIII, column (C), line 12		7a	0.
	1 -	Net unrelated business taxable income from Form 990-T, line 34			0.
d)	8	Contributions and grants (Part VIII, line 1h)	-	Prior Year 3,618,097.	Current Year 6,491,122.
'n	9	Program service revenue (Part VIII, line 2g)		34,679.	61,301.
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		24,592.	69,894.
Re	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		3,200.	3,450.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		3,680,568.	6,625,767.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
ses	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		2,126,357.	2,532,473.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		60,625.	18,694.
Exp		Total fundraising expenses (Part IX, column (D), line 25) 625,04			
		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		950,543.	
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		3,137,525.	3,619,650.
ces	13	Revenue less expenses. Subtract line 18 from line 12		543,043.	3,006,117.
Net Assets Fund Balanc	20	Total assets (Part X, line 16)	вед	inning of Current Year 3,676,250.	End of Year
ASS d Ba	21	Total liabilities (Part X, line 26)		322,448.	6,782,344.
캺	22	Net assets or fund balances. Subtract line 21 from line 20		3,353,802.	6,472,859.
	ırt II	Signature Block		0,000,002	0,112,000.
Unde	er pena	Ities of perjury, I declare that I have examined this return, including accompanying schedules	and statemer	nts, and to the best of my	knowledge and belief, it is
true,	correc	t, and complete. Peclaration of preparer (other than officer) is based on all information of whi	ich preparer h	as any knowledge.	,
		John Dren			0
Sigr		Signature of officer		Date	
Here	е	Type or print name and title		10/3)14	
-			I Da		
Paid		Print/Type preparer's name HYDEH GHAFFARI Pregarer's signature	-r 9	Unicon 1	X PTIN ,
	arer	Firm's name DZH PHILLIPS LLP	17	, John official	
	Only	Firm's address 1330 BROADWAY, SUITE 630		Firm's EIN	26-4677183
	•	OAKLAND, CA 94612		Phone 55 51	0-834-6542
Иау	the IF	S discuss this return with the preparer shown above? (see instructions)		Prione no. 3 1	X Yes No
-	The same of the same of	[5. 5 pm. 5. 5. 5. 5. 6. 6. 6. 6. 6. 6. 6. 6. 6. 6. 6. 6. 6.			LOS TOR I NO

Part IV Checklist of Required Schedules

	A 44		Ye	s 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		v	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	1	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	. 2	_ A	+-
	public office? If "Yes," complete Schedule C, Part I			\ v
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effection	3	+	X
	during the tax year? If "Yes," complete Schedule C, Part II	1	\ v	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	4	X	+
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	_		
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	5	+-	X
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I			- v
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	6	+	X
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	-		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	7	-	_ A
	Schedule D, Part III			x
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for	8	-	A
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			1
	If "Yes," complete Schedule D, Part IV			x
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent	9	+	A
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	x	1
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X	10		1000
	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	x	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	114		_
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		х
С	bid the organization report an amount for investments - program related in Part X. line 13 that is 5% or more of its total	1	_	
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		х
d	bid the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in	1.0		
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
e	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		Х
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	
D	Was the organization included in consolidated, independent audited financial statements for the tax year?			
13	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
h-	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
U	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 Land IV.			
15	or more? If "Yes," complete Schedule F, Parts I and IV Did the organization report on Part IV, column (A), line 2, more than \$5,000. (14b		_X_
	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes " complete Schedule F. Parts II and III.		1	-22
16	foreign organization? If "Yes," complete Schedule F, Parts II and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	15		<u>X</u>
	or for foreign individuals? If "Yes " complete Schedule F. Parts III and IV		1	
7	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	16		<u>X</u>
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I			
8	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	17	X	
	1c and 8a? If "Yes," complete Schedule G. Part II			37
9	1c and 8a? If "Yes," complete Schedule G, Part II Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	18		<u>X</u>
	complete Schedule G. Part III	.		7.7
0a	complete Schedule G, Part III Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	19	\dashv	X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a	\rightarrow	X
-	, and a series a sepy of its addited infancial statements to this return?	20b	200	
		Form 9	19U (?	(113)

Form 990 (2013) SUSTAINABLE CONSERVATION 94-3232437 Part IV | Checklist of Required Schedules (continued) Yes No Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II X 21 Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, 22 column (A), line 2? If "Yes," complete Schedule I, Parts I and III X 22 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current 23 and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete 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 Schedule K. If "No", go to line 25a X 24a b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 24c d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d 25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I 25a X 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 X 25b 26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II X 26 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 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions): a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV X 28a **b** A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV X 28b c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV X 28c Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 X 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 30 X 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I X 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete 32 Schedule N, Part II X 32 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I X 33 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and 34 X 34 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

X Form 990 (2013)

35a

35b

36

37

X

X

X

37

b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2

Did the organization conduct more than 5% of its activities through an entity that is not a related organization

and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?

If "Yes," complete Schedule R, Part V, line 2

Note. All Form 990 filers are required to complete Schedule O

Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?

Form 990 (2013) | Part V | Sta Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response or note to any line in this Part V	<u></u>				
1.	Enter the number was add in D. C. (5)				Yes	N
ŀ	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	3	0		
	The roll of the ro	. 1b		0		
	and the same of the same of the same payments to vendors an	d reportab	le gaming	13.5		
2-	(gambling) winnings to prize winners?			1c	X	
	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	3	0		
	If at least one is reported on line 2a, did the organization file all required federal employment tax re	turns?		2b	X	_
3a	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instruction Did the organization have unrelated business gross income of \$1,000 or more during the year?					
b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedu			3a		X
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other	ile O		3b	-	<u> </u>
	financial account in a foreign country (such as a bank account, securities account, or other financial	er authority	y over, a			١
b	If "Yes," enter the name of the foreign country:	al account)?	4a	ļ	X
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financia					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year	al Accounts	S.			
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter trans	·		5a	-	X
С	It "Voc " to line Fe or Fh did the			5b	-	Х
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did			5c		<u> </u>
	any contributions that were not toy declarated at the second of the seco					v
b	If "Yes," did the organization include with every solicitation an express statement that such contributions?			6a	-	X
	were not tax deductible?			۵.		
7	Organizations that may receive deductible contributions under section 170(c).			6b	79.704	
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and s	ervices prov	wided to the navor?	10000		v
b	If "Ves " did the organization notify the depart of the state of the			$\overline{}$		X
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it	was requir	ed	7b		
	to file Form 8282?	was requir	eu	7c		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	***************************************	10		
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit	contract?		7e	22-112	X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit con	tract?	***************************************	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file	Form 8899	as required?	7g	N/	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organi	zation file a	Form 1098-C2	7h	N/	
8	sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.	Did the supp	orting N/A		MAN	
	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings a	t any time d	uring the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			51.72		
а	Did the organization make any taxable distributions under section 4966?		N/A	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?		N/A	9b		
10	Section 501(c)(7) organizations. Enter:					
a	Initiation fees and capital contributions included on Part VIII, line 12 N/A	10a				
b 11	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			379	
	Section 501(c)(12) organizations. Enter:	1 1				
a b	Gross income from members or shareholders N/A	11a				
	Gross income from other sources (Do not net amounts due or paid to other sources against					
122	amounts due or received from them.)	11b				
b	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1 1		12a		
13	If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A Section 501(c)(29) qualified nonprofit health insurance issuers.	12b				
а	s the organization licensed to issue qualified health plane in more than an about 0		37/3			
-	s the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.		N/A	13a		
	Enter the amount of reserves the organization is required to maintain by the states in which the					
b				5.00		
b	Organization is licensed to issue qualified health plans	1401	1			
b	organization is licensed to issue qualified health plans	13b				
С	organization is licensed to issue qualified health plans Enter the amount of reserves on hand Did the organization receive any payments for indeer tanking and in the organization receive any payments for indeer tanking and in the organization receives any payments for indeer tanking and in the organization receives any payments for indeer tanking and in the organization receives any payments for indeer tanking and in the organization receives any payments for indeer tanking and in the organization receives any payments for indeer tanking and in the organization receives any payments for indeer tanking and in the organization receives any payments for indeer tanking and in the organization receives any payments for indeer tanking and in the organization receives any payments for indeer tanking and in the organization receives any payments for indeer tanking and in the organization receives any payments for indeer tanking and in the organization receives any payments for indeer tanking and in the organization receives any payments for indeer tanking and indeer tanking and in the organization receives any payments for indeer tanking and in the organization receives any payments for indeer tanking and indeer tanki	13c				v
c 4a	organization is licensed to issue qualified health plans Enter the amount of reserves on hand Did the organization receive any payments for indeer tanking and in the organization receive any payments for indeer tanking and in the organization receives any payments for indeer tanking and in the organization receives any payments for indeer tanking and in the organization receives any payments for indeer tanking and in the organization receives any payments for indeer tanking and in the organization receives any payments for indeer tanking and in the organization receives any payments for indeer tanking and in the organization receives any payments for indeer tanking and in the organization receives any payments for indeer tanking and in the organization receives any payments for indeer tanking and in the organization receives any payments for indeer tanking and in the organization receives any payments for indeer tanking and in the organization receives any payments for indeer tanking and in the organization receives any payments for indeer tanking and indeer tanking and in the organization receives any payments for indeer tanking and in the organization receives any payments for indeer tanking and indeer tanki	13c		14a 14b		X

Form 990 (2013) SUSTAINABLE CONSERVATION 94-3232431 Page
Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response or changes in Schedule O. See instructions. to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

<u>~</u>	Check if Schedule O contains a response or note to any line in this Part VI				X
<u>se</u>	ction A. Governing Body and Management				
			-	Yes	No
18	Enter the number of voting members of the governing body at the end of the tax year	12			
	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.	- 1			
t	1 1b	12			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other				
	officer, director, trustee, or key employee?		2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision				
	of officers, directors, or trustees, or key employees to a management company or other person?	- 1	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	ſ	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		5		Х
6	Did the organization have members or stockholders?		6		Х
7a	bid the organization have members, stockholders, or other persons who had the power to elect or appoint one or				
	more members of the governing body?		7a		Х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or	·			
	persons other than the governing body?	- 1	7b		Х
8	bid the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		938		
а	The governing body?		8a	Х	
b	each committee with authority to act on behalf of the governing body?		8b		Х
9	is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the				
_	organization's mailing address? If "Yes," provide the names and addresses in Schedule O		9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)				
			$\neg \neg$	Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	Г	10a		X
b	if "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates			$\neg \uparrow$	
	and branches to ensure their operations are consistent with the organization's exempt purposes?	1	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	-	11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			17.0	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	1	12a	X	
b	were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	1	12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	· F			
	in Schedule O how this was done	1	2c	х	
13	Did the organization have a written whistleblower policy?		13	X	
14	bid the organization have a written document retention and destruction policy?	· -	14	X	
15	bid the process for determining compensation of the following persons include a review and approval by independent			ARREST.	100
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?				
	The organization's CEO, Executive Director, or top management official	1	5a	X	
b	Other officers or key employees of the organization		5b		X
	The stolline 15a of 15b, describe the process in Schedule O (see instructions).			889	A COLUMN
6a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a				
	taxable entity during the year?	1	6a		X
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?	16	6b		
	ion C. Disclosure				
7	List the states with which a copy of this Form 990 is required to be filed ►CA				
8	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)	ava	ilable		_
	for public inspection. Indicate how you made these available. Check all that apply.				
	X Own website X Another's website X Upon request Other (explain in Schedule O)				
9	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy a	nd fi	nanc	ial	
	statements available to the public during the tax year.			0.655	
0	State the name, physical address, and telephone number of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person of	ation	:		
	00 DAMMEDY GERRE GERRE 200				_
	98 BATTERY STREET, SUITE 302, SAN FRANCISCO, CA 94111				_
2006	10-29-13	Fo	ırm 9	90 (20	113)

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

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

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

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

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons. Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A)	(B)	(C)						(D)	(E)	(E)
Name and Title	Average	1,		Pos	sition	n		Demonstrate	Reportable	(F)
	hours per	box	not o	ess pe	erson	is bo	th an	compensation	compensation	Estimated amount of
	week	-	icer a	nd a d	direct	or/tru:	stee)	from	from related	other
	(list any	rector						the	organizations	compensation
	hours for related	ordi	99			ated		organization	(W-2/1099-MISC)	from the
	organizations	rustee	trust		99	ubeus		(W-2/1099-MISC)		organization
	below	Individual trustee or director	Institutional trustee		nploy	st con	_			and related
	line)	Indivi	Institu	Offlicer	Key employee	Highest compensated employee	Former			organizations
(1) RUSSELL SIEGELMAN	3.00									
CHAIR		X		Х				0.	0.	0.
(2) CHRIS BUCHBINDER	1.00					\vdash	\vdash			<u> </u>
TREASURER		X		Х				0.	0.	0.
(3) CHIP KOCH	1.10									0.
SECRETARY		Х		Х				0.	0.	0.
(4) TINA QUINN	1.30								0.	
CO-FOUNDER		X						0.	0.	0.
(5) CHUCK AHLEM	0.50								- 0.	0.
BOARD MEMBER		Х						0.	0.	0.
(6) KIM DELFINO	1.00									0.
BOARD MEMBER		X						0.	0.	0.
(7) DAN DOOLEY	1.20									0.
BOARD MEMBER		X						0.	0.	0.
(8) STEVE GROSS	0.60									<u> </u>
BOARD MEMBER		X						0.	0.	0.
(9) CYNTHIA HUNTER LANG	1.10									
BOARD MEMBER		X						0.	0.	0.
(10) STEVE MCCORMICK	1.10									
BOARD MEMBER		X	- 1					0.	0.	0.
(11) RICHARD MORRISON	1.10			\neg						
BOARD MEMBER		X						0.	0.	0.
(12) MARK VALENTINE	1.00			П			\neg			
BOARD MEMBER		X						0.	0.	0.
(13) ASHLEY BOREN	40.00			T						
EXECUTIVE DIRECTOR				X				139,468.	0.	20,464.
(14) KATHEY VIATELLA	40.00	T		\Box		\neg				
MANAGING DIRECTOR OF PROGR						X		120,213.	0.	11,700.
(15) SUSAN CORLETT	40.00			\neg	T	\neg				
DIRECTOR OF DEVELOPMENT & COMMUNICAT						X		115,435.	0.	18,803.
(16) PROGRAM DIRECTORDANIEL MOUNTJOY	40.00									
PROGRAM DIRECTOR						X		103,241.	0.	19,291.
			T	T		T	T			·
		\perp				\perp				
332007 10-29-13					n.Vicus					orm 990 (2013)

Form 990 (2013)

	Gection A. Officers, Directors, Tru	stees, Key Em	pio	yees	s, an	d H	ighe	est (Compensated Employe	es (continued)				
	(A) Name and title	(B) Average hours per week	box	Position (do not check more than one box, unless person is both a officer and a director/trustee					(D) Reportable compensation from	(E) Reportable compensation from related			(F) Estima Imour	ated nt of
		(list any hours for related organizations below	Individual trustee or director	Institutional trustee		Key employee	Highest compensated employee		the	organizations (W-2/1099-MIS	3	or ar	from t ganiz nd rel	sation the ation ated
-	46	line)	Individ	Institu	Officer	Кеу еп	Highes	Forme				org	anıza	ations
											\neg			
			\vdash	-			-	_			\dashv			
											\neg			
											_			
											\dashv			
											\dashv			
											\neg			
			\dashv	-	-			\dashv			\dashv			
	Sub-total								478,357.		0.	7	0,2	258.
c	Total from continuation sheets to Part VI	I, Section A					ļ	>	0.		0.			0.
2	Total (add lines 1b and 1c) Total number of individuals (including but no	at limited to the	000	lieto	d ab		J	0.10	478,357.		0.	7	0,2	58.
	compensation from the organization		J30 1	113161	u ab	ove	, , ,	o ie	ceived more than \$100,	ooo or reportable				4
_		bely											Yes	No
3	Did the organization list any former officer, line 1a? <i>If</i> "Yes," <i>complete Schedule J for st</i>	director, or trus								5				
4	For any individual listed on line 1a, is the su		e co	mpe	nsat	ion	and	oth	er compensation from the	ne organization	·· -	3		X
	and related organizations greater than \$150	,000? If "Yes,"	con	nple	te S	che	dule	J fo	r such individual			4	X	
5	Did any person listed on line 1a receive or a	ccrue compen	satio	on fr	om a	any	unre	late	d organization or individ	ual for services				
Sect	rendered to the organization? If "Yes," comp tion B. Independent Contractors	olete Schedule	J fo	r su	ch p	erso	on					5		X
1	Complete this table for your five highest cor	npensated inde	eper	nder	nt co	ntra	actor	s th	at received more than \$	100 000 of comp		tion f		
	the organization. Report compensation for t	he calendar ye	ar e	ndin	g wi	ith o	r wit	hin	the organization's tax ye	ear.	nisai		OIII	
	(A) Name and business a	address							(B)			(C		
STI	LLWATER SCIENCES, 2855		AP	н				+	Description of se	rvices	Cor	mper	satio	n
AVE	NUE, SUITE 400, BERKEL	EY, CA	94	70	5			Т	ECHNICAL SER	VICES		106	5.9	86.
								T						
						-		+						
			-					T						
								_						
2	Total number of independent contractors (in	cluding but not	t lim	ited	to th	nose	e list	ed a	above) who received mo	re than			- 27 19	
	\$100,000 of compensation from the organization	ation 🕨				1				- Gran				
32008 0-29-1	3										Fo	orm 9	90 (2	2013)

Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (B) (C) (**D**) Revenue excluded from tax under Related or Total revenue Unrelated exempt function business sections 512 - 514 revenue revenue Gifts, Grants 1 a Federated campaigns 1a **b** Membership dues 1b c Fundraising events 1c d Related organizations 1d Contributions, and Other Simi 189,502. e Government grants (contributions) 1e f All other contributions, gifts, grants, and similar amounts not included above 1f 6,301,620 33,722. g Noncash contributions included in lines 1a-1f: \$ h Total. Add lines 1a-1f 6,491,122 **Business Code** 2 a CLIENT SERVICES Program Service Revenue 541900 61,301 61,301. f All other program service revenue g Total. Add lines 2a-2f 61,301. Investment income (including dividends, interest, and other similar amounts) 34,603. 34,603. Income from investment of tax-exempt bond proceeds Royalties (i) Real (ii) Personal 6 a Gross rents b Less: rental expenses c Rental income or (loss) d Net rental income or (loss) (i) Securities 7 a Gross amount from sales of (ii) Other assets other than inventory 198,152. b Less: cost or other basis and sales expenses 162,861. c Gain or (loss) d Net gain or (loss) 35,291 35,291. 8 a Gross income from fundraising events (not Other Revenue including \$ contributions reported on line 1c). See 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 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 **Business Code** 11 a MISCELLANEOUS REVENUE 900099 3,450 3,450. b d All other revenue e Total. Add lines 11a-11d 3,450. Total revenue. See instructions. 6,625,767. 61,301. 73,344. Form 990 (2013)

Part IX Statement of Functional Expe	nses			
Section 501(c)(3) and 501(c)(4) organizations must c	omplete all columns. All ot	ther organizations must o	complete column (A)	
Check if Schedule O contains a resp	onse or note to any line in	n this Part IX	The continue of the continue o	X
Do not include amounts reported on lines 6b,	(A)	(B)	(C)	(D)

	Check if Schedule O contains a resp	onse or note to any line in	this Part IX	omplete column (A).	X
7£	o not include amounts reported on lines 6b, o, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	and the differ addictance to governments and				охроноез
	organizations in the United States. See Part IV, line 21				
2	and and action addictation to individuals in				
_	the United States. See Part IV, line 22				
3	and a series addictance to governments,				
	organizations, and individuals outside the				
	United States. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	150 000			
_	trustees, and key employees	159,932.	97,425.	29,454.	33,053.
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
7	persons described in section 4958(c)(3)(B)	1 076 051	1 000 100		
8	Other salaries and wages Pension plan accruals and contributions (include	1,876,051.	1,283,120.	239,279.	353,652.
0		60 225	45 500		7344 M W 1653 55
9	Section 401(k) and 403(b) employer contributions)	68,335.	45,620.	9,222.	13,493. 53,093.
10	Other employee benefits Payroll taxes		181,106.	36,919.	53,093.
11	Payroll taxes Fees for services (non-employees):	157,037.	104,117.	21,800.	31,120.
b	Management	451.	451		
C		23,920.	451.	00.000	
d	J	23,320.		23,920.	
e		18,694.			
f		10,094.			18,694.
g					
9	column (A) amount, list line 11g expenses on Sch O.)	567,120.	549,205.	10 041	
12	Advertising and promotion	307,120.	349,205.	12,841.	5,074.
13	Office expenses	78,895.	24,479.	30 200	16.110
14	Information technology	82,148.	23,913.	38,268.	16,148.
15	Royalties	02,140.	23,913.	56,676.	1,559.
16	Occupancy	158,014.	13,200.	144,814.	
17	Travel	62,224.	54,285.	1,029.	6 010
18	Payments of travel or entertainment expenses	02/221	34,203.	1,029.	6,910.
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	55,920.	37,994.	4,789.	12 127
20	Interest	55,75200	31,334.	4,703.	13,137.
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	1,893.		1,893.	
23	Insurance	10,050.		10,050.	
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)			20,000	
	amount, list line 24e expenses on Schedule 0.)				
	DUES AND SUBSCRIPTIONS	13,092.	6,244.	651.	6,197.
	RECRUITMENT & STAFF DEV	7,956.	3,873.	1,068.	3,015.
C	BANK CHARGES	6,200.	9.	3,869.	2,322.
d	LICENSES, FEES & MISCEL	600.	600.	0.	0.
	All other expenses	2 642	203,973.	-271,546.	67,573.
	Total functional expenses. Add lines 1 through 24e	3,619,650.	2,629,614.	364,996.	625,040.
	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation. Check here X if following SOR 98-3 (ASC 958-730)	22 674		42	
	Check here	22,671.	0.	19,044.	3,627.
UEU 1U	10-43-10				Form 990 (2012)

332010 10-29-13

Form **990** (2013)

Form 990 (2013)
Part X | Balance Sheet

10.00	art A	Check if Schedule O contains a response or no	ote to any	line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			257,135.	1	205,045
	2	Savings and temporary cash investments			1,433,103.		2,188,064
	3	Pledges and grants receivable, net			881,121.	3	3,099,095
	4	Accounts receivable, net				4	7,329
	5	Loans and other receivables from current and	ormer offic	cers, directors,			
	1	trustees, key employees, and highest compens	ated empl	loyees. Complete			
		Part II of Schedule L				5	
	6	Loans and other receivables from other disqua					
		section 4958(f)(1)), persons described in section					
80.00		employers and sponsoring organizations of sec					
Assets		employees' beneficiary organizations (see instr	e Part II of Sch L		6		
Ass	7	Notes and loans receivable, net				7	
	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges			45,703.	9	47,791.
	10a	Land, buildings, and equipment: cost or other				400	
		basis. Complete Part VI of Schedule D		30,198.			
		Less: accumulated depreciation	10b	24,522.	7,569.	10c	5,676.
	11	Investments - publicly traded securities			1,032,538.	11	5,676. 1,215,650.
	12	Investments - other securities. See Part IV, line	11			12	
	13	Investments - program-related. See Part IV, line	11			13	
	14	Intangible assets			14		
	15	Other assets. See Part IV, line 11			19,081.	15	13,694.
	16	Total assets. Add lines 1 through 15 (must equ	al line 34)		3,676,250.	16	6,782,344.
	17	Accounts payable and accrued expenses			180,739.	17	169,376.
	18	Grants payable		S 185	18		
	19	Deferred revenue			141,709.	19	140,109.
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete	Part IV of S	Schedule D		21	
ies	22	Loans and other payables to current and former					
Ħ.		key employees, highest compensated employee					
Liabilities		Complete Part II of Schedule L				22	
_	23	Secured mortgages and notes payable to unrela	ted third p	parties		23	
	24	Unsecured notes and loans payable to unrelated	third part	ties		24	
	25	Other liabilities (including federal income tax, pa	yables to r	elated third			
		parties, and other liabilities not included on lines	17-24). Co	omplete Part X of			
		Schedule D				25	
	26	Total liabilities. Add lines 17 through 25			322,448.	26	309,485.
		Organizations that follow SFAS 117 (ASC 958		ere ▶ X and			
Ses		complete lines 27 through 29, and lines 33 an					
au	27	Unrestricted net assets			1,275,754.	27	1,773,229.
Ba	28	Temporarily restricted net assets			1,361,466.	28	3,979,848.
밀					716,582.	29	719,782.
표		Organizations that do not follow SFAS 117 (AS	SC 958), c	heck here			
SO		and complete lines 30 through 34.					
set	30	Capital stock or trust principal, or current funds				30	
As	31	Paid-in or capital surplus, or land, building, or eq	uipment fu	ınd		31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated inc	come, or of	ther funds		32	
-	33	Total net assets or fund balances			3,353,802.	33	6,472,859.
	34	Total liabilities and++ // 11 1			3,676,250.	34	6,782,344.

Form **990** (2013)

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If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.

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

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

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

Form 990 (2013)

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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

Part Reason for Public Charity Status (Au granustoins must complete this part). See instructions. 94 - 3 2 3 2 4 3 7	Name of	the organiza					ou douono	is at www.			er identifica	tion num	be
The organization is not a private foundation because it is: (For lines 1 through 11, check only one box) 1	TB		SUSTAI	NABLE CONSER	VATIO	N					94-323	2437	
A church, convention of churches, or association of churches described in section 170(b)(1)(A)(ii). 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, city, and state: 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 lederal, state, or local government or governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A community trust 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.) A community trust 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.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part III.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part III.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part III.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part III.) A organization regarized and operated exclusively to test for public safety. See section 509(a)(4). (Complete Part III.) A 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)(2). See section 509(a)(3). Check the box that describes the type of supporting organizations advantaged in section 509(a)(2) for section 509(a)(3). Check the box that describes the type of supporting organizations advantaged in section 509(a)(2). For partial supporting organizations and complete lines 11 through 1		Reason	for Public Cha	arity Status (All organ	nizations m	nust comple	ete this pa	art.) See in	structions				_
A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 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 rorganization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(v). 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)(v). An organization operated and operated section 170(b)(1)(A)(v). 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)(v). An organization that normally receives a substantial part of its support from goss receipts from activities related to its exempt functions -subject to certain exceptions, and (2) no more than 33 1/3% of its support from goss receipts from activities related to its exempt functions -subject to certain exceptions, and (2) no more than 33 1/3% of its support from goss investment income and unrelated business taxable income (ses 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)(3). Check the box that describes the type of supporting organization accomplete lines 11e through 11h. 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)(2). Check the box that describes the special organization and complete lines 11e through 11h. An organization organizati													
A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: 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). A reganization normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(v). A community fund described in section 170(b)(1)(A)(v). (Complete Part II.) 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 gorss investment income and unrelated business taxable income (sees section 511 tax) from businesses sacquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization 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)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11 th. a		A church, c	onvention of church	nes, or association of chu	urches des	scribed in s	ection 17	'0(b)(1)(A)	(i).				
A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, cicly, and state; 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)(iii). (Complete Part II.) A norganization 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)(iii). (Complete Part II.) A community fursid described in section 170(b)(1)(A)(iii). (Complete Part II.) A community fursid described in section 170(b)(1)(A)(iii). (Complete Part II.) 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 investmer 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)(3). Check the box that describes the type of supporting organization accomplete lines 11 to through 11th. An organization organization accomplete lines 11 to through 11th. a													
city, and state: 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)(v). Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). A norganization 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)(v). (Complete Part II.) 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 evernpt functions: subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investmen income and unrelated business taxable income (less section 511 tag) 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)(2). (Complete Part III.) 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 organization adescribed in section 509(a)(1). See section 509(a)(3). Check the box that describes the type of supporting organization adescribed in section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization accomplete lines 11 through 11h. a		A modical w	r a cooperative hos	pital service organization	n describe	d in sectio	n 170(b)(I)(A)(iii).					
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)(w). (Complete Part III.) A conganization 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)(w). (Complete Part III.) A community inust described in section 170(b)(1)(A)(w). (Complete Part III.) 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 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)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. a	4 📖	city and ste	esearch organization	n operated in conjunction	n with a ho	ospital des	cribed in s	ection 17	O(b)(1)(A)(iii). Ente	r the hospita	ıl's name,	
section 170(b)(1)(A)(iv). (Complete Part II.) 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)(v). (Complete Part II.) 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 investmen 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). 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 and complete lines 11e through 11th. a	5			a hanafit of a callage are									_
A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 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)(v). (Complete Part II.) A community trust described in section 170(b)(1)(A)(v). (Complete Part II.) A community trust described in section 170(b)(1)(A)(v). (Complete Part II.) A community trust described in section 170(b)(1)(A)(v). (Complete Part II.) A community trust described in section 170(b)(1)(A)(v). (Complete Part II.) A community trust described in section 170(b)(1)(A)(v). (Complete Part II.) An organization and unrelated business taxable income (less section 501(a) 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). An organization organized and operated exclusively to test for public safety. See section 509(a)(3). Check the box that describes the type of supporting organizations and complete lines 11e through 11h. a	•				university	ownea or c	perated t	y a goven	nmental ur	nit descri	ibed in		
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section 170(b)(1)(A)(v). (Complete Part II.) A community trust described in section 170(b)(1)(A)(v). (Complete Part III.) A community trust described in section 170(b)(1)(A)(v). (Complete Part III.) Graphics of the 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 investmer income and unrelated business traxbel income (less section 511 tay) 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). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. a Type I b Type II c Type III Type III or Type III Type I		An organiza	tion that normally re	eceives a substantial par	t of ite eur	port from	on ivotor	(I)(A)(V).	au fuama bla				
A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 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). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11th. a		section 170	(b)(1)(A)(vi). (Comp	lete Part II.)	t or its sup	port nom	a governin	ientai unit	or from th	e genera	ii public desi	cribed in	
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 investmer income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 10	8 🔲				. (Complet	e Part II.)							
activities related to its exempt functions: subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investmer 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 for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organization and complete lines 11e through 11th. a	9						from cont	ributions	membersh	in fees	and arose re	ceinte fro	m
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An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11 e through 11h. a		See section	509(a)(2). (Comple	te Part III.)								,	
more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. a		An organizat	ion organized and o	operated exclusively to te	est for pub	olic safety.	See secti	on 509(a)(4).				
describes the type of supporting organization and complete lines 11e through 11h. a	11	An organizat	ion organized and o	operated exclusively for t	the benefit	t of, to perf	orm the fu	ınctions o	f, or to car	ry out the	e purposes	of one or	
a Type I b Type II c Type III - Functionally integrated d Type III - Non-functionally integrated By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? (ii) A family member of a person described in (i) above? (iii) A 35% controlled entity of a person described organization (see instructions)) (i) Name of supported organization about the supported organization in col. (i) Islated in your governing document? (ii) Stef in your support? (iv) Is the organization in col. (i) organized in the Justice in your governing document? (iii) Islated in your support? (iv) Is the organization in col. (i) organization in col. (i) organized in the Justice in your governing document? (iv) Is the organization in col. (i) organized in the Justice in your governing document? (iv) Is the organization in col. (i) organized in the Justice in your governing document? (iv) Is the organization in col. (i) organized in the Justice in your governing document? (iv) Is the organization in col. (i) organized in the Justice in your governing document? (iv) Is the organization in col. (i) organized in the Justice in your governing document? (iv) Is the organization in col. (i) organized in the Justice in your governing document? (iv) Is the organization in col. (i) organized in the Justice in your governing document?		more publicl	y supported organiz	zations described in sect	tion 509(a)	(1) or secti	on 509(a)	(2). See se	ction 509	(a)(3). Ch	neck the box	that	
By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? (iii) A family member of a person described in (i) above? (iii) A 35% controlled entity of a person described in (i) above? (ii) A 35% controlled entity of a person described organization (described on lines 1-9 above or IRC section (see instructions)) (iv) Is the organization in col. (vi) Is the organization in col. (vi) organization the U.S.? Yes No Yes No Yes No Yes No Total													
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f the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? (ii) A family member of a person described in (i) above? (iii) A 35% controlled entity of a person described in (i) or (ii) above? (ii) Name of supported organization about the supported organization (described on lines 1-9 above or IRC sections) (iii) Name of supported organization (see instructions)) (iiii) Type of organization (see instructions)) (iv) Is the organization or (v) Did you notify the organization in col. (i) organization in the U.S.? Yes No Yes No Yes No Total	6	foundation n	this box, i certify th	then one or more public	t controlle	d directly o	or indirectl	y by one c	r more dis	qualified	persons oth	ner than	
supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? (ii) A family member of a person described in (i) above? (iii) A 35% controlled entity of a person described in (i) or (ii) above? (i) Name of supported organization (ii) EIN (iii) Type of organization (described in ines 1-9 above or IRC section (see instructions)) (iv) Is the organization in col. (i) organization in col. (i) organization in col. (i) organization in col. (i) organization in the usupported organization in col. (i) organized in the usupported organization (see instructions)) (ivi) Is the organization in col. (i) organization in col. (i) organization in col. (i) organized in the usupported organization (see instructions)) (ivi) Is the organization in col. (i) organization in col. (i) organization in col. (i) organized in the usupported organization in col. (ii) organized in the usupported organized in col. (iii) organized in the usupported organized in col. (iii) organized in the usupported organized in col. (ii) organized in the usupported organized in col. (iii) org	f	If the organiz	ration received a wr	itten determination from	the IDC th	ed organiza	ations des	scribed in s	section 50	9(a)(1) or	r section 509	ð(a)(2).	
Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? (ii) A family member of a person described in (i) above? (iii) A 35% controlled entity of a person described in (i) or (ii) above? (i) Name of supported organization (ii) EIN (iii) Type of organization (described on lines 1-9 above or IRC section (see instructions)) (iv) Is the organization in col. (i) organization in col. (ii) organization in col. (ii) organization in col. (ii) organization in col. (ii) organization in col. (iii) organizati	18.												_
(ii) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? (iii) A family member of a person described in (i) above? (iiii) A 35% controlled entity of a person described in (i) or (ii) above? (ii) Name of supported organization about the supported organization (described on lines 1-9 above or IRC section (see instructions)) (iii) Type of organization (described in (i) or (ii) isted in your organization in col. (i) of your support? (iv) Is the organization in col. (i) of your support? (vi) Is the organization in col. (i) of your support? (vii) Amount of monetary governing document? (viii) Amount of monetary support. (vi	q				ny gift or c	contribution	from on	of the fell	loudes s			L	-
the governing body of the supported organization? (ii) A family member of a person described in (i) above? (iii) A 35% controlled entity of a person described in (i) or (ii) above? Provide the following information about the supported organization(s). (i) Name of supported organization (iii) EIN (iii) Type of organization (described on lines 1-9 above or IRC section (see instructions)) Yes No Yes No Yes No Yes No Total	•										,	V N	
(ii) A family member of a person described in (i) above? (iii) A 35% controlled entity of a person described in (i) or (ii) above? h Provide the following information about the supported organization (so.) (i) Name of supported organization (described on lines 1-9 above or IRC section (see instructions)) Yes No Yes No Yes No Total		the gov	erning body of the s	supported organization?								res N	<u> </u>
(ii) A 35% controlled entity of a person described in (i) or (ii) above? Provide the following information about the supported organization (v) Did you notify the organization in col. (i) listed in your governing document? (iii) RIN (iii) EIN (iii) Type of organization (described on lines 1-9 above or IRC section (see instructions)) (iv) Is the organization in col. (i) organization in col. (ii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iv) organization i						***************************************					11g(i)		
h Provide the following information about the supported organization (s): (ii) Name of supported organization organization (described on lines 1-9 above or IRC sections) (see instructions)) (iii) Type of organization (v) Did you notify the organization in col. (i) listed in your governing document? Yes No Yes No Yes No Total		(iii) A 35%	controlled entity of a	a person described in (i)	or (ii) abov	/e?				***********	11g(iii)		_
organization (described on lines 1-9 above or IRC section (see instructions)) Ves No Yes No Yes No	h	Provide the f	ollowing information	about the supported or	rganization	n(s).							
organization (déscribed on lines 1-9 above or IRC section (see instructions)) Total						535							
organization (described on lines 1-9 above or IRC section (see instructions)) Total	(i) Name	of supported	(ii) EIN	(iii) Type of organization				u notify the	(vi) Is	the	(vii) Amount	of monetar	v
(see instructions)) Yes No Yes No Total	orga	nization							(i) organiz	ed in the	TARREST TO THE PROPERTY OF THE PARTY OF THE		J
Yes No Yes No Yes No Total							. , ,		U.S	.?			
HA For Penanyork Padveting Ad-Nation and Ad-Nation					Yes	No	Yes	No	Yes	No			
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	HA For Pa	aperwork Re	duction Act Notice	, see the Instructions for	or				Schedule	A (Forr	n 990 or 900)-F7\ 201	3

Form 990 or 990-EZ.

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.)

Se	ction A. Public Support						
Cal	endar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
	Gifts, grants, contributions, and		(-)	(6) 2011	(u) 2012	(6) 2013	(i) Iotai
	membership fees received. (Do not						
	include any "unusual grants.")	1,998,221.	2,601,847.	2,774,520.	3,618,097.	6,491,122.	17,483,807
2	Tax revenues levied for the organ-						,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to			Į.			
	the organization without charge					1	
4	Total. Add lines 1 through 3	1,998,221.	2,601,847.	2,774,520.	3,618,097.	6,491,122.	17,483,807.
5	The portion of total contributions					RECEIVED IN	<u> </u>
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						7,385,690.
6	Public support. Subtract line 5 from line 4.						10,098,117.
	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7	Amounts from line 4	1,998,221.	2,601,847.	2,774,520.	3,618,097.	6,491,122.	17,483,807.
8	Gross income from interest,						
	dividends, payments received on		4.				
	securities loans, rents, royalties						
	and income from similar sources	21,432.	28,287.	25,012.	30,232.	34,603.	139,566.
9	Net income from unrelated business						, , , , , , ,
	activities, whether or not the		ĺ				
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV.)	5,646.	5,563.	3,032.	3,200.	3,450.	20,891.
11	Total support. Add lines 7 through 10						17,644,264.
12	Gross receipts from related activities,	etc. (see instruction	ns)			12	264,726.
13	First five years. If the Form 990 is for	the organization's	first, second, third,	fourth, or fifth tax	year as a section	n 501(c)(3)	
	organization, check this box and stop	here		*************************			
	tion C. Computation of Publi						
14	Public support percentage for 2013 (li	ne 6, column (f) div	ided by line 11, co	lumn (f))		14	57.23 %
15	Public support percentage from 2012	Schedule A, Part II	, line 14			15	66.97 %
16a	33 1/3% support test - 2013. If the o	rganization did not	check the box on	line 13, and line 14	is 33 1/3% or m	ore, check this box	k and
	stop here. The organization qualifies a	as a publicly suppor	rted organization	.,			$\triangleright X$
b	33 1/3% support test - 2012. If the or	rganization did not	check a box on lin	e 13 or 16a, and lir	ne 15 is 33 1/3%	or more, check thi	s box
	and stop here. The organization qualit	ies as a publicly su	pported organizati	ion	***********************		
17a	10% -facts-and-circumstances test	 2013. If the organ 	nization did not ch	eck a box on line 1	3, 16a, or 16b, a	nd line 14 is 10% o	or more,
	and if the organization meets the "fact	s-and-circumstance	es" test, check this	box and stop her	e. Explain in Parl	IV how the organi	zation
	meets the "facts-and-circumstances" t	est. The organization	on qualifies as a pu	ublicly supported o	organization		
b	10% -facts-and-circumstances test	- 2012. If the organ	nization did not che	eck a box on line 1	3, 16a, 16b, or 1	7a, and line 15 is 1	0% or
	more, and if the organization meets the	e "facts-and-circum	stances" test, che	ck this box and st	op here. Explain	in Part IV how the	
	organization meets the "facts-and-circ	umstances" test. Th	ne organization qu	alifies as a publicly	supported organ	nization	
18	Private foundation. If the organization	did not check a bo	ox on line 13, 16a,	16b, 17a, or 17b, o	check this box ar	nd see instructions	
						dule A (Form 990 d	THE RESERVE THE PERSON NAMED IN COLUMN 2 IS NOT THE OWNER.

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	endar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and		, , , , , , , , , , , , , , , , , , , ,		(0, -0.1-	(0) 2010	(i) rotar
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus- iness under section 513						
4	Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and 3 received from disqualified persons 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						
С	Add lines 7a and 7b						
	Public support (Subtract line 7c from line 6.)						
	ndar year (or fiscal year beginning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
11	Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	25.4.8					
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (Add lines 9, 10c, 11, and 12.)						
	First five years. If the Form 990 is for	the organization!	first soond Him	d fourth as fifth 1		F01(-\/0\	
							ation,
Sec	check this box and stop heretion C. Computation of Publi	c Support Per	centage	• • • • • • • • • • • • • • • • • • • •			
	Public support percentage for 2013 (li			olumn (fl)		15	
	Public support percentage from 2012					16	<u>%</u> %
	tion D. Computation of Inves					10	70
	Investment income percentage for 20			e 13 column (f)		17	%
18	Investment income percentage from 2	2012 Schedule A. F	Part III. line 17	ic 10, colamin (i))		18	
19a	33 1/3% support tests - 2013. If the	organization did no	ot check the box	on line 14 and line	15 is more than 3		
	more than 33 1/3%, check this box ar						
	33 1/3% support tests - 2012. If the						
	line 18 is not more than 33 1/3%, che						
	Private foundation. If the organization						
	3 09-25-13					edule A (Form 990	
				15			,,

Also complete this part for any additional information. [See Instructions].	Part IV	Form 990 or 990-EZ) 2013 SUSTAINABLE CONSERVATION Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17	94-3232437 Pa
		Also complete this part for any additional information. (See instructions)	a or 176; and Part III, line 12.
		and complete this part for any additional information. (See instructions).	
			0.00

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Political Campaign and Lobbying Activities

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

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

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

OMB No. 1545-0047

Open to Public Inspection

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

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

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

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

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

• Section 501(c)(4), (5), or (6) organiza	ations: Complete Part III.		•	
Name of organization			Emp	loyer identification number
Part I-A Complete if the or	ABLE CONSERVATION	N		94-3232437
Part I-A Complete if the or	ganization is exempt und	er section 501(c) or is a section 527 (organization.
 Provide a description of the organical Political expenditures Volunteer hours 			> 9	S
Part I-B Complete if the or	ganization is exempt und	ler section 501(d	c)(3).	
1 Enter the amount of any excise tax				
2 Enter the amount of any excise tax	incurred by organization manag	ers under section 49	55▶ \$	3
3 If the organization incurred a section	on 4955 tax, did it file Form 4720	for this year?		Yes No
4a Was a correction made?				Yes No
b If "Yes," describe in Part IV. Part I-C Complete if the organization	ganization is exempt und	lor spotion E01/a	a avant partice FO4	(-\/o\
1 Enter the amount directly expende				
2 Enter the amount of the filing organ		9		
exempt function activities 3 Total exempt function expenditures				
line 17b		_		
4 Did the filing organization file Form	1120-POI for this year?			Yes No
5 Enter the names, addresses and en	polover identification number (FI	NI) of all section 527	political organizations to which	Yes No
made payments. For each organiza	tion listed, enter the amount paid	d from the filing organ	nization's funds. Also enter th	ne amount of political
contributions received that were pr	omptly and directly delivered to	a separate political or	rganization, such as a separa	ite segregated fund or a
political action committee (PAC). If	additional space is needed, prov	ide information in Pa	rt IV.	are sognogatod rand of a
(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
				_
For Paperwork Reduction Act Notice, LHA	see the Instructions for Form 9	90 or 990-EZ.	Schedule C	(Form 990 or 990-EZ) 2013

Schedule C (Form 990 or 990-EZ) 2013 SUSTA	INABLE CONS	ERVATION	94-	3232437 Page 2
Part II-A Complete if the organizati (election under section 50	on is exempt und	er section 501(c)(3) and f	iled Form 5768	
A Check If the filing organization below	ngs to an affiliated grou	p (and list in Part IV each affiliate	d group member's na	me, address, EIN,
B Check ► if the filing organization checi				
	bying Expenditures		(a) Filing organization's totals	(b) Affiliated group totals
12 Total lobbying expanditures to influence and	E		totals	
1a Total lobbying expenditures to influence putb Total lobbying expenditures to influence a le	gislative body (direct le	(s lobbying)		
c Total lobbying expenditures (add lines 1a an	d 1h)	subying)		
				
e Total exempt purpose expenditures (add line	es 1c and 1d)			<u> </u>
f Lobbying nontaxable amount. Enter the amo	ount from the following	table in both columns		
If the amount on line 1e, column (a) or (b) is:	The lobbying nont			
Not over \$500,000	20% of the amount			
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15%	of the excess over \$500,000.		
Over \$1,000,000 but not over \$1,500,000		of the excess over \$1,000,000.		
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5%	of the excess over \$1,500,000.		
Over \$17,000,000	\$1,000,000.			
g Grassroots nontaxable amount (enter 25% o	*************			
h Subtract line 1g from line 1a. If zero or less, e				
i Subtract line 1f from line 1c. If zero or less, ej If there is an amount other than zero on either	nter -U-			L
			Γ	¬ ¬
	4-Year Averaging Per	iod Under Section 501(h)	L	Yes No
(Some organizations that	t made a section 501	(h) election do not have to compons for lines 2a through 2f on pa	plete all of the five age 4.)	
Lobb	ying Expenditures Du	ring 4-Year Averaging Period		
Calendar year (or fiscal year beginning in)	2010 (b) 20	011 (c) 2012	(d) 2013	(e) Total
2a Lobbying nontaxable amount				
b Lobbying ceiling amount (150% of line 2a, column(e))				
c Total lobbying expenditures				
d Grassroots nontaxable amount				
e Grassroots ceiling amount (150% of line 2d, column (e))				
f Grassroots lobbying expenditures				

Schedule C (Form 990 or 990-EZ) 2013

Schedule C (Form 990 or 990 EZ) 2013 SUSTAINABLE CONSERVATION 94-323243 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)).

1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements?	X X	Am	ount
local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements?	Х		
or referendum, through the use of: a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? X Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements?	X		
a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? C Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements?	X		
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements?	Х		
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements?			
d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements?			
d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements?	Х	A	
e Publications, or published or broadcast statements?	X		
f Grants to other ergenizations for labbuilt =	X		
f Grants to other organizations for lobbying purposes?	X		
g Direct contact with legislators, their staffs, government officials, or a legislative body?			1,310
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	X		
i Other activities?	X		
j Total. Add lines 1c through 1i		1	1,310
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?	X		
b If "Yes," enter the amount of any tax incurred under section 4912			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Part III-A Complete if the organization is exempt under section 501(c)(4), section 501	(1/2)		
Part III-A Complete if the organization is exempt under section 501(c)(4), section 501 501(c)(6).	(c)(5), or sec	tion	
301(0)(0).			
1 Were substantially all (90% or more) dues received pendeductible by members?		Yes	No
and the state of t	1		
The second state of the second secon	2		
3 Did the organization agree to carry over lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), section 501	3		
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No,"	OP (b) Part I	II A Iim	
answered "Yes."	On (b) Part I	II-A, III	ie 3, is
Dues, assessments and similar amounts from members			
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political	1		
expenses for which the section 527(f) tax was paid).			
a Current year	20		
b Carryover from last year	2a 2b		
c Total	2c		
Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3		
If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess			
does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political	13.96		
expenditure next year?			
Taxable amount of lobbying and political expenditures (see instructions)	5		
art IV Supplemental Information	5		
ovide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Par	+ II A line Or and	Dad II D	E. d
so, complete this part for any additional information.	t II-A, III le 2, and	Part II-B,	, line 1.
ART II-B, LINE 1, LOBBYING ACTIVITIES:			
XPLANATION: SUSTAINABLE CONSERVATION TOOK PART IN SEVERAI	PRELIMIT	MARV	
	, INDUINI	IVAILT	
EETINGS WITH THE DEPARTMENT OF FISH AND WILDLIFE TO DISCU	ISS AND C	יד ביד או	N
	, DD THE C	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	CECCTON		
JPPORT FOR PROPOSED LEGISLATION FOR THE 2014 LEGISLATIVE	CHICAGO I LINE		
UPPORT FOR PROPOSED LEGISLATION FOR THE 2014 LEGISLATIVE	OFFORTON.		
JPPORT FOR PROPOSED LEGISLATION FOR THE 2014 LEGISLATIVE	PERSTON.		
JPPORT FOR PROPOSED LEGISLATION FOR THE 2014 LEGISLATIVE	SESSION.		

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

▶ Attach to Form 990.

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

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

Employer identification number

-	SUSTAINABLE CONSERVATION		94-3232437
Pa	art I Organizations Maintaining Donor Advised Funds or Other Simila	r Funds or .	Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line 6.		
	(a) Donor advised funds		(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		.,
4	A		
5	Did the organization inform all donors and donor advisors in writing that the assets held in do	1: 12	
J			
6	are the organization's property, subject to the organization's exclusive legal control?		Yes L No
0	Did the organization inform all grantees, donors, and donor advisors in writing that grant fund	s can be used	only
	for charitable purposes and not for the benefit of the donor or donor advisor, or for any other		
Do	impermissible private benefit?		Yes No
	art II Conservation Easements. Complete if the organization answered "Yes" to Follow	m 990, Part IV	, line 7.
1	Purpose(s) of conservation easements held by the organization (check all that apply).		
	Preservation of land for public use (e.g., recreation or education)	of an historica	Illy important land area
			nistoric structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in	the form of a c	onservation easement on the last
	day of the tax year.		onder ration dascribent on the last
	8000 € 2000,0000 (3.50 € 40000 m)		Held at the End of the Tax Year
а	Total number of conservation easements		
b	Total acreage restricted by conservation essements		2a
c			2b
	the state of the continued in decide of the continued in (a)		2c
u	Number of conservation easements included in (c) acquired after 8/17/06, and not on a histor		1 1
_	listed in the National Register		2d
3	Number of conservation easements modified, transferred, released, extinguished, or terminate	ed by the organ	nization during the tax
1000	year -		
4	Number of states where property subject to conservation easement is located		
5	Does the organization have a written policy regarding the periodic monitoring, inspection, han	dling of	
	violations, and enforcement of the conservation easements it holds?		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation ease	ments during t	the year
7	Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easement		
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of sec		
	and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports conservation easements in its revenue and	evnense state	mont and belonce sheet and
	include, if applicable, the text of the footnote to the organization's financial statements that de-	caribas the ar	anient, and balance sneet, and
	conservation easements.	scribes the ord	ganization's accounting for
Par	rt III Organizations Maintaining Collections of Art, Historical Treasures	or Othor	Similar Assets
	Complete if the organization answered "Yes" to Form 990, Part IV, line 8.	s, or other	Sillilar Assets.
-10			
Id	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue	e statement ar	nd 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	o to port in its revenue st	atement and b	alance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, education, or research in furtherand	ce of public ser	rvice, provide the following amounts
	relating to these items:		-
	(i) Revenues included in Form 990, Part VIII, line 1		> \$
	(ii) Assets included in Form 990, Part X		\$
2	If the organization received or held works of art, historical treasures, or other similar assets for	financial gain	provide
	the following amounts required to be reported under SFAS 116 (ASC 958) relating to these iter		provide
а	Revenues included in Form 990, Part VIII, line 1		•
b	Assets included in Form 990, Part X		3
		*****************	D
IHV	For Paparauark Paduation Act Notice and the leaders of F		
332051	For Paperwork Reduction Act Notice, see the Instructions for Form 990.		Schedule D (Form 990) 2013
09-25-	is a second of the second of t		

Schedule D (Form 990) 2013

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

332053 09-25-13 Schedule D (Form 990) 2013

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

OMB No. 1545-0047

Open To Public

Department of the Treasury Internal Revenue Service

Attach to Form 990 or Form 990-EZ.

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

Employer identification number

Name of the organization	asset seriedate a from 350 or 350-L2	-j and it	3 11134	uctions is at www.irs	Employer id	entification number
	NABLE CONSERVATION				94-323	2437
					line 17. Form 990-E	Z filers are not
 Indicate whether the organization rate X Mail solicitations Internet and email solicitation Phone solicitations In-person solicitations Did the organization have a written key employees listed in Form 990, If "Yes," list the ten highest paid incompensated at least \$5,000 by the 	e X Solicit. f X Solicit. g Special or oral agreement with any individual Part VII) or entity in connection with dividuals or entities (fundraisers) pur	ation of ation of al fundra al (inclu- profess	non-g gove aising ding d	government grants rnment grants events officers, directors, tru fundraising services	stees or	s No be
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) fundr have c or con contrib	itrol of	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
KAY SPRINKEL GRACE - P.O. BOX 475578, SAN FRANCISCO, CA	FUNDRAISER CONSULTANT	Yes	No			
insolo, six ridicipes, ca	FUNDRAISER CONSULTANT	+-	Х	0.	16,250.	0.
			•		16,250.	
3 List all states in which the organization or licensing.	n is registered or licensed to solicit	contribu	utions	or has been notified	it is exempt from re	gistration
CA						
			-	,		
I HA For Panerwork Reduction Act Noti						

work Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. SEE PART IV FOR CONTINUATIONS

Schedule G (Form 990 or 990-EZ) 2013

332081 09-12-13

Schedule G (Form 990 or 990-EZ) 2013 SUSTAINABLE CONSERVATION

94-3232437 Page 2

	edule G (Form 990 or 990-EZ) 2013 SUSTAINABLE CONSERVATION 94	4-3232	2437	7 Page 3
11	Does the organization operate gaming activities with nonmembers?		Yes	□ No
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed			
	to administer charitable gaming?		Yes	☐ No
13	Indicate the percentage of gaming activity operated in:	····		L NO
	The organization's facility	13a	1	0
b	An outside facility	100	+	9
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:	13b		9
	Name			
	Address >			
	Does the organization have a contract with a third party from whom the organization receives gaming revenue?		Yes	No
b	If "Yes," enter the amount of gaming revenue received by the organization > \$ and the amount			
	of gaming revenue retained by the third party > \$			
С	If "Yes," enter name and address of the third party:			
	Name			
	Address			
	Gaming manager information:			
	Name			
	Gaming manager compensation > \$			
	Description of services provided			
	Director/officer Employee Independent contractor			
17	Mandatory distributions:			
	s the organization required under state law to make charitable distributions from the gaming proceeds to			
_	retain the state gaming license?			—
b	retain the state gaming license?	\ \	res (∟ No
	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year > \$	Э		
Par				
	and Part II	II, lines 9, 9	9b, 10l	o, 15b,
	15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).			
2083	09-12-13 Schedule G (Fo	rm 990 or	990-F	Z) 2013
	40			_, 10

Schedule G (Form 990 or 990-EZ) SUSTAINABLE CONSERVATION	94-3232437 Page 4
Part IV Supplemental Information (continued)	
2084	Schedule G (Form 990 or 990-EZ)

SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees
Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

➤ Attach to Form 990. ➤ See separate instructions. ▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990. OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Department of the Treasury

SUSTAINABLE CONSERVATION

Questions Regarding Compensation

Employer identification number 94-3232437

			Yes	No
1a	provided any of the following to drive a person listed in Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence	е		
	Tax indemnification and gross-up payments Health or social club dues or initiation fees	1333		
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,		THE STREET	15793
	trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2		
		820	1899	No.
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's		199	
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	Compensation committee Written employment contract			
	Independent compensation consultant Compensation survey or study			
	X Form 990 of other organizations X Approval by the board or compensation committee	ee		
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing			
1105	organization or a related organization:			
а	Pagaiya a payaranga naymant ay ahanna af antad	4		v
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4a 4b	_	$\frac{x}{x}$
С	Participate in, or receive payment from, an equity-based compensation arrangement?	46 4c		$\frac{x}{x}$
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.	40	2 455	<u> </u>
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			
а	The organization?	5a		X
b	Any related organization?	5b		X
	If "Yes" to line 5a or 5b, describe in Part III.	600		
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			
	The organization?	6a		X
b	Any related organization?	6b		X
	If "Yes" to line 6a or 6b, describe in Part III.			
	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments			
	not described in lines 5 and 6? If "Yes," describe in Part III	7		X
	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the	1417/11		
_	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		X
	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		
LHA	For Paperwork Reduction Act Notice, see the Instructions for Form 990.	hedule J (Form	990) 2	2013

94-3232437

SUSTAINABLE CONSERVATION

Schedule J (Form 990) 2013

Page 2

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

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

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

		(B) Breakdown of	(B) Breakdown of W-2 and/or 1099-MISC compensation	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	37.00	(B)(i)·(D)	
(1) ASHLEY BOREN	ε	139,468.	0.	0	7,081.	13,383.	159.932.	O
EXECUTIVE DIRECTOR	€	0	0.	0	0	0		
	Ξ							
	Ξ							
	Ξ							
	Œ	211220						
	Θ							
	€							
	Ξ							
	(ii)							
	Θ							
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	(i)							
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	€							
	Ξ							
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	Ξ							
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	(ii)							

Schedule J (Form 990) 2013

Schedule J. (Form gall) 2012
Frovide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

SCHEDULE M (Form 990)

Department of the Treasury

Internal Revenue Service

Noncash Contributions

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Form 990.

Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990. Inspection Employer identification number

OMB No. 1545-0047

Open to Public

Name of the organization

SUSTAINABLE CONSERVATION

94-3232437

D	art I Types of Property	COLUDE	VIII I OIV		94-	-323	443	1
Г	art I Types of Property	T 7.3						
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	Method of noncash contr			nts
1	Art - Works of art		items contributed	Tomi 990, Part VIII, line 1g				
2	Art - Historical treasures							
3	Art - Fractional interests					-		
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities - Publicly traded	Х	2	33,722.	FMV			
10	Securities - Closely held stock			3377221				
11	Securities - Partnership, LLC, or trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation contribution - Historic structures							
14	Qualified conservation contribution - Other	<u> </u>						
15	Real estate - Residential							_
16	Real estate - Commercial							
17	Real estate - Other	-				- 8 - 8		
18	Collectibles							
19	Food inventory	******						
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens		· · · · · · · · · · · · · · · · · · ·				_	
24	Archeological artifacts							
25	Other ()							
26	Other (
27	Other (
28	Other (
29	Number of Forms 8283 received by the organiz	ation during	the tax year for co	ntributions				
	for which the organization completed Form 828	3. Part IV. D	onee Acknowledge	ement 29				
		-,	- Total Common Congress	20			V	A1-
30a	During the year, did the organization receive by	contribution	any property reno	orted in Part I lines 1 . 28 th	at it must hold for	15.55	Yes	No
	at least three years from the date of the initial co	ontribution	and which is not re	quired to be used for exem	at it must now for			
	M			quired to be used for exemp		20-	4575	X
b	If "Yes," describe the arrangement in Part II.	****************	*********************			30a		Λ
	Does the organization have a gift acceptance p	olicy that red	uires the review of	f any non-standard contribut	tions?	0.1	х	NEWS CO.
2a	Does the organization hire or use third parties o	r related org	anizations to solici	nrocess or sell papaceh		31	Λ	
	contributions?					32a		Х
b	If "Yes," describe in Part II.				*************************	UZa	335	
	If the organization did not report an amount in c	column (c) for	a type of property	for which column (a) is che	cked.			
	describe in Part II.		,, , , , , , , , , , ,	(4) 10 0110	J., J.			
НА	For Paperwork Reduction Act Notice, see to	he Instructi	ons for Form 990.		Schedule M	(Form	000) (2012)

Schedule M	(Form 990) (2013)	SUSTAINABLE CONSERVATION	94-3232437	Page 2
Part II	Supplemental is reporting in Part	Information. Provide the information required by Part I, lines 30b, 32b, and I, column (b), the number of contributions, the number of items received, or a conditional information.	33, and whether the organize ombination of both. Also com	ation oplete
1				
(II)				
-				
				
32142 09-03-13			Schedule M (Form 990	0) (2012)
			Schedule W (Form 990) (ZU 13)

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on

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

Attach to Form 990 or 990-EZ.

OMB No. 1545-0047 Open to Public

Department of the Treasury Internal Revenue Service

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

Inspection

Name of the organization Employer identification number SUSTAINABLE CONSERVATION 94-3232437

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

ECONOMIC SENSE. THE ORGANIZATION'S CLIMATE, AIR, WATER, AND

BIODIVERSITY INITIATIVES PROMOTE PRACTICAL SOLUTIONS THAT PRODUCE

TANGIBLE, LASTING BENEFITS TO CALIFORNIA.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

PLANTRIGHT

EXPENSES \$ 475,684. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

AGRICULTURE WATER MANAGEMENT

EXPENSES \$ 201,034. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

FORM 990, PART VI, SECTION A, LINE 8B:

EXPLANATION: THE ORGANIZATION DID NOT HAVE A COMMITTEE WITH AUTHORITY TO ACT ON BEHALF OF THE GOVERNING BODY.

FORM 990, PART VI, SECTION B, LINE 11:

EXPLANATION: A DRAFT OF FORM 990 IS REVIEWED BY MANAGEMENT AND THE AUDIT COMMITTEE OF THE BOARD OF DIRECTORS PRIOR TO FILING. THE COMMITTEE MEETS WITH MANAGEMENT AND THE TAX PREPARER AS NECESSARY TO REVIEW THE FORM 990, RELATED SCHEDULES AND SUPPORTING DOCUMENTATION. IF CHANGES TO THE FORM ARE REQUESTED, A REVISED COPY IS REVIEWED BY MANAGEMENT AND SENT TO THE COMMITTEE. THE COMMITTEE APPROVES THE FILING AND MAKES A RECOMMENDATION TO THE FULL BOARD TO ADOPT THE FILING AT THE NEXT BOARD MEETING.

FORM 990, PART VI, SECTION B, LINE 12C:

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 332211 09-04-13

Schedule O (Form 990 or 990-EZ) (2013)

Schedule O (Form 990 or 990-EZ) (2013) Name of the organization Employer identification number SUSTAINABLE CONSERVATION 94-3232437 EXPLANATION: THE ORGANIZATION REQUESTS ALL BOARD MEMBERS TO SIGN A CONFLICT OF INTEREST STATEMENT ONCE A YEAR. FORM 990, PART VI, SECTION B, LINE 15A: EXPLANATION: THE GOVERNANCE COMMITTEE IS COMPOSED ENTIRELY OF PEOPLE THAT HAVE NO CONFLICT OF INTEREST WITH SUSTAINABLE CONSERVATION, ITS OFFICERS/KEY EMPLOYEES OR ITS COMPENSATION ARRANGEMENTS. IT IS RESPONSIBLE FOR CONDUCTING THE PERFORMANCE AND COMPENSATION REVIEW OF THE EXECUTIVE DIRECTOR AND OTHER OFFICERS/KEY EMPLOYEES. THE PERFORMANCE REVIEW PROCESS INCLUDES A SELF REVIEW BY THE EXECUTIVE DIRECTOR/KEY EMPLOYEES, DISCUSSION WITH THE COMMITTEE AND THE OFFICERS/KEY EMPLOYEES AND A DISCUSSION AMONGST THE COMMITTEE THEN BY THE BOARD. A WRITTEN PERFORMANCE REVIEW IS INCLUDED IN THE PERSONNEL FILE OF THE EXECUTIVE DIRECTOR/KEY EMPLOYEES. THE COMMITTEE ALSO REVIEWS COMPENSATION INFORMATION OF COMPARABLE POSITIONS AT ENVIRONMENTAL ORGANIZATION OF SIMILAR SIZES IN THE BAY AREA AND MAKES A COMPENSATION RECOMMENDATION TO THE FULL BOARD. THE FULL BOARD THEN DISCUSSES THE RECOMMENDATION AND DECIDES ON THE COMPENSATION ANNUALLY AND A RECORD IS PUT IN THE EXECUTIVE DIRECTOR'S/KEY EMPLOYEE'S PERSONNEL FILE. CHIEF EXECUTIVE OFFICER LAST COMPENSATION REVIEW WAS IN 2013. FORM 990, PART VI, SECTION C, LINE 19: EXPLANATION: THE ORGANIZATION'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS ARE AVAILABLE TO THE PUBLIC UPON REQUEST. FORM 990, PART IX, LINE 11G, OTHER FEES: HONORARIUM: PROGRAM SERVICE EXPENSES 300.

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Schedule O (Form 990 or 990-EZ) (2013)

332212 09-04-13

MANAGEMENT AND GENERAL EXPENSES

Name of the organization SUSTAINABLE CONSERVATION	Employer identification numb
FUNDRAISING EXPENSES	(
TOTAL EXPENSES	300
RECRUITMENT:	
PROGRAM SERVICE EXPENSES	33,345
MANAGEMENT AND GENERAL EXPENSES	
FUNDRAISING EXPENSES	0
TOTAL EXPENSES	33,345
COMMUNICATIONS:	
PROGRAM SERVICE EXPENSES	4,516
MANAGEMENT AND GENERAL EXPENSES	0
FUNDRAISING EXPENSES	372
COTAL EXPENSES	4,888
GRAPHIC/PROMOTIONAL MAT DESIGN:	
PROGRAM SERVICE EXPENSES	9,815
IANAGEMENT AND GENERAL EXPENSES	8,447
UNDRAISING EXPENSES	4,702
COTAL EXPENSES	22,964
ENERAL PROGRAM SERVICES:	
ROGRAM SERVICE EXPENSES	15,000
ANAGEMENT AND GENERAL EXPENSES	0
UNDRAISING EXPENSES	0
OTAL EXPENSES	15,000
ECHNICAL/RESEARCH CONSULTING:	