## Form 990

Department of the Treasury Internal Revenue Service

## \*\* PUBLIC DISCLOSURE COPY \*\*

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

Do not enter Social Security numbers on this form as it may be made public.
Information about Form 990 and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

Open to Public

<u>A</u>	Fort	the 2013 calen	dar year, or tax year begini	ning 10/01	, 2013, an	d ending	9/30	• .	, 2014	
В	Check	if applicable:	С			•	D	Employer Ideni	tification Number	
	ΠΑ	ddress change	PUBLIC EMPLOYEES	FOR ENVIRONMEN	TAL			93-1102	740	
	$\square$	lame change	RESPONSIBILITY,	INC.			E	Telephone num		
	-	nitial return	2000 P STREET, N	.W. #240				202-265	-7337	
	-	erminated -	WASHINGTON, DC 20	0036		•	.	202 203	1 1331	
	-	mended return	-						\$ 007 100	,
			F Name and address of principal	afficar.		Tu	(a) Is this a grou	Gross receipts		
	□^	pplication pending		onicer:				•		
			SAME AS C ABOVE		·		(b) Are all subor If 'No,' attac	n a list. (see ins	ed? Yes Yes	No
<u></u>		-exempt status	X 501(c)(3) 501(c) (	) ◀ (insert no.)	4947(a)(1) or	527		_	_	
<u>J</u>			W.PEER.ORG				(c) Group exem			
K		n of organization:	X Corporation Trust	Association Other ►	L Year	of formation	: 1992	M State of	legal domicile: DC	
Pa	irt I	Summar	У				***************************************	····		
	1	Briefly descri	be the organization's mission	on or most significant a	ctivities: <u>SEE</u>	PART	III, LIN	VE 1		
ģ										
Activities & Governance										
ē										
õ	3	Number of ve	if the organization	i discontinued its opera	tions or dispose	ed of more	e than 25%	of its net as	sets.	_
ಿಶ	4	Number of in	iting members of the govern dependent voting members	of the doverning hody	1a)	· · · · · · · · · · · · · · · · · · ·		3		6
es	5	Total number	of individuals employed in	calendar year 2013 (Pa	ort V line 22)	<i>,</i> ,,,,,,,,,,,,		5		6
Ξ	6	Total number	of volunteers (estimate if r	necessary)	11 t v, 11116 Zaj		• • • • • • • • • • •	6		9
Ç	7 a	Total unrelate	ed business revenue from P	art VIII. column (C) lin	e 12			7a		<u>4</u> ).
_		Net unrelated	business taxable income f	rom Form 990-T. line 3	4			7 b		<del>).</del>
							Prior		Current Year	<del>/ • -</del>
	8	Contributions	and grants (Part VIII, line	1h)				78,343.		
Revenue	9	Program serv	ice revenue (Part VIII, line	2a)				24,980.	812,903	
Ver	10	Investment in	come (Part VIII, column (A	), lines 3, 4, and 7d)				1,167.	92,969 1,246	
æ	11	Other revenue	e (Part VIII, column (A), line	es 5 6d 8c 9c 10c a	nd 11e)			1,107.		
	12	Total revenue	- add lines 8 through 11 (	must equal Part VIII o	olumn (A) line	12\		15,134.	20,080 927,198	
	13	Grants and si	milar amounts paid (Part I)	Column (A) lines 1-3	)	11-/		24,240.	921,190	•
	14		to or for members (Part IX					4,240.		
٠	15	Salaries othe	r compensation, employee	10)	2,	72 120	004 506			
es.	162							73,132.	371,585	<u>) .</u>
ens	104		undraising fees (Part IX, co			i i				
Expenses	b		ing expenses (Part IX, colu			<u>525.</u>	地語科特点	and the second s	TO KITCH BEING	
	17		es (Part IX, column (A), line				4	76,146.	525,980	),
	18	Total expense	s. Add lines 13-17 (must e	qual Part IX, column (A	), line 25)			73,518.	897,565	
	19	Revenue less	expenses. Subtract line 18	from line 12				11,616.	29,633	
Net Assets of Fund Balances					•		Beginning of		End of Year	
Sala	20		Part X, line 16)					38,297.	616,311	
Apr	21	Total liabilities	s (Part X, line 26)					58,142.	116,523	
ΣŽ	22	Net assets or	fund balances. Subtract lin	e 21 from line 20				70,155.	499,788	
Pa	rt II	Signature					- T	10,100.1	400,100	<u> </u>
				o, including accompanying sche	dules and statement	s and to the	hest of my know	uladae and hali	in( it is true correct and	
comp	ilete. D	eclaration of prepar	clare that I have examined this return er (other than officer) is pased on al	I information of which preparer	has any knowledge.	a, and to the	beat of thy Kilo	wiedde gun oen	ist, it is true, correct, and	
			alla land		***************************************	·····	12	1611		
Sia	n	Signatur	Worker De Constitution				Date	1-4-/-/		
Sig He	re	▶ JEE	REY RUCH				PRESIDE	NTT		
		(P	print name and title.				- 1440 IVE	h1 4		
~		Print/Type pre	parer's name	Preparer's signature	11/	Date /	<del>,</del> ,	Check if	PTIN	
Pai	d	MTCHAFT	D AUKAMP, CPA	11/1/		2/4		heck if elf-employed	•	
	parer	Eirmin nome		C DUNDOO DEC		17/1			P00723879	<u></u>
Use	Only		DUNHAM, AUKAMP	& RHODES, PLC	005 000				-1972062	
Mar	/ the !		► 4437 BROOKFIELD CORE s return with the preparer sho			Y, VA 2	0151   Phone	no. 70	3-631-8940	
		· · · · · · · · · · · · · · · · · · ·			110)	<u></u>	<u> </u>	<del></del>	11 11 (12) 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	No
ror	rape	work Reducti	on Act Notice, see the separ	ate instructions.					Form <b>990</b> (20)	13)

Par	t III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	SEE SCHEDULE O
2	Did the organization undertake any significant program services during the year which were not listed on the prior
_	Form 990 or 990-EZ?
	If 'Yes,' describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No
	If 'Yes,' describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.
4 a	(Code: ) (Expenses \$ 245,279. including grants of \$ ) (Revenue \$ )
	FIELD OPERATIONS: PEER HAS RETAINED A NUMBER OF FORMER PUBLIC EMPLOYEES, LARGELY
	FORMER STATE EMPLOYEES, AS FIELD REPRESENTATIVES OPERATING OUT OF ARIZONA (COVERING
	THE SOUTHWEST), CALIFORNIA, COLORADO (COVERING THE ROCKY MOUNTAIN REGION), FLORIDA,
	MASSACHUSETTS (COVERING NEW ENGLAND), NEW JERSEY, AND TENNESSEE. THESE FIELD OFFICES
	ARE EXTENSIONS OF THE NATIONAL OPERATION AND ARE THE FOCAL POINT FOR STATE AND LOCAL
	ACTIVITY.
4 b	(Code:) (Expenses \$207,582. including grants of \$) (Revenue \$)
	RESOURCE PROTECTION: PEER WORKS WITH AND ON THE BEHALF OF PUBLIC EMPLOYEES WHO SERVE
	AS STEWARDS OF OUR NATION'S PUBLIC LANDS AND NATURAL RESOURCES. PEER ADVOCATES
	RESPONSIBLE PLANNING AND MANAGEMENT, INFORMING POLICY MAKERS AND THE PUBLIC ON NATURAL RESOURCES ISSUES.
	NATURAL RESOURCES ISSUES.
	~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~
4 c	(Code: ) (Expenses \$ 188,286. including grants of \$ ) (Revenue \$ )
	LEGAL: PEER PROVIDES LEGAL COUNCIL, ASSISTANCE, AND REPRESENTATION TO PUBLIC
	EMPLOYEES WHO MAY FACE RETALIATION FOR SPEAKING OUT FOR HIGHER STANDARDS OF
	SCIENTIFIC INTEGRITY, ENVIRONMENTAL ETHICS, AND ACCOUNTABILITY IN GOVERNMENT.
	~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~
Λ A	Other program services. (Describe in Schedule O.)  SEE SCHEDULE O
-7 U	Other program services. (Describe in Schedule O.)  SEE SCHEDULE O  (Expenses \$ 163,305. including grants of \$ ) (Revenue \$ )
4 e	Total program service expenses ► 804, 452.

Form 990 (2013) PUBLIC EMPLOYEES FOR ENVIRONMENTAL

93-1102740 Page **2** 

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II	4	Х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If 'Yes,' complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III.	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV.	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VIII, IX, or X as applicable.			
	a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	11 a	Х	
1	b Did the organization report an amount for investments — other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII.	11 b		Х
•	c Did the organization report an amount for investments – program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII	11 c		Х
(	d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX.	11 d		
•	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e	Х	
1	f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X	11 f	Х	
	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, and XII.	12a	Х	
	b Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		<u>X</u>
	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
ł	b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If 'Yes,' complete Schedule F, Parts II and IV.	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If 'Yes,' complete Schedule F, Parts III and IV	16		<u>X</u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions)	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II.	18		<u>X</u>
	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III.	19		Х
	a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20		<u>X</u>
ł	b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 b		

Form 990 (2013) PUBLIC EMPLOYEES FOR ENVIRONMENTAL

Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organizations or government on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21		Х
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III.	22		Х
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J</i>	23		Х
24	a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No,'go to line 25a	24a		Х
	<b>b</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		
25	a 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		Х
	b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part III.	27		Х
	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	28a		X
1	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		Х
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If 'Yes,' complete Schedule M</i>	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1.	34		Х
35 a	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
ı	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?  Note. All Form 990 filers are required to complete Schedule O	38	Х	
BAA		Form	990 (	2013)

Form 990 (2013) PUBLIC EMPLOYEES FOR ENVIRONMENTAL

Part V 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>
		Yes	No
1 a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable1a15			
<b>b</b> Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c	Х	
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a 9			
<b>b</b> If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2 b	X	
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3 a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3 a		Х
<b>b</b> If 'Yes' has it filed a Form 990-T for this year? <i>If 'No' to line 3b, provide an explanation in Schedule 0</i>	3 b		
4 a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4 a		Х
<b>b</b> If 'Yes,' enter the name of the foreign country: ▶			
See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a		X
<b>b</b> Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		X
c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5 c		
6 a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6 a		Х
b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6 b		
7 Organizations that may receive deductible contributions under section 170(c).			
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7 a		X
<b>b</b> If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7 b		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7с		Х
d If 'Yes,' indicate the number of Forms 8282 filed during the year			
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 e		Х
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		X
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 g		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7 h		
8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9 Sponsoring organizations maintaining donor advised funds.	-		
a Did the organization make any taxable distributions under section 4966?	9 a		
b Did the organization make a distribution to a donor, donor advisor, or related person?	9 b		
0 Section 501(c)(7) organizations. Enter:			
a Initiation fees and capital contributions included on Part VIII, line 12			
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
1 Section 501(c)(12) organizations. Enter:			
a Gross income from members or shareholders			
<b>b</b> Gross income from other sources (Do not net amounts due or paid to other sources			
against amounts due or received from them.)	12a		
b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b	120		
3 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state?	13a		
	134		
Note. See the instructions for additional information the organization must report on Schedule O.			
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
c Enter the amount of reserves on hand	14-		X
· · · · · · · · · · · · · · · · · · ·	14a		
<b>b</b> If 'Yes,' has it filed a Form 720 to report these payments? <i>If 'No,' provide an explanation in Schedule O</i>	14b		

Forr	n <b>990</b> (2013) PUBLIC EMPLOYEES FOR ENVIRONMENTAL 93-1102740		F	Page <b>6</b>
Pa	<b>rt VI Governance, Management and Disclosure</b> For each 'Yes' response to lines 2 through 7b be a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or char Schedule O. See instructions.	low, iges	and i in	for
	Check if Schedule O contains a response or note to any line in this Part VI			. X
Sec	ction A. Governing Body and Management			
			Yes	No
1 :	a Enter the number of voting members of the governing body at the end of the tax year  If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
ı	b Enter the number of voting members included in line 1a, above, who are independent 1 b			
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		Х
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5	ļ	X
6	Did the organization have members or stockholders?	6		X
7 8	a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7 a		X
ł	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or other persons other than the governing body?	7 b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
á	a The governing body?	8 a	Х	100000000000000000000000000000000000000
ì	Each committee with authority to act on behalf of the governing body?	8 b	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		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Ri	eveni	ie Co	de.)
			Yes	No
10 a	a Did the organization have local chapters, branches, or affiliates?	10 a		X
ł	o If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10 b		
	a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11 a	Х	
Ł	Describe in Schedule O the process, if any, used by the organization to review this Form 990. SEE SCHEDULE O			
	a Did the organization have a written conflict of interest policy? If 'No,' go to line 13	12a	Х	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this was done SEE SCHEDULE Q	12 c	Х	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
	The organization's CEO, Executive Director, or top management official SEE . SCHEDULEO	15 a	Х	
Ŀ	Other officers of key employees of the organization	15 b		X
	If 'Yes' to line 15a or 15b, describe the process in Schedule O. (See instructions.)			
16 a	a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16 a		X
t	olf '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 taken steps to safeguard the organization's exempt status with respect to such arrangements?	16 b		
Sec	tion C. Disclosure			
	List the states with which a copy of this Form 990 is required to be filed ► SEE SCHEDULE O		*************	
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) a inspection. Indicate how you make these available. Check all that apply.	/ailabl	e for p	oublic
4.0	D show (shown a several shown as shown			
	Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements avail the public during the tax year.  SEE SCHEDULE O	ible to		
	State the name, physical address, and telephone number of the person who possesses the books and records of the organization: JEFFREY RUCH 2000 P STREET, NW 240 WASHINGTON DC 20036 202-265-7337			

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age 7

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

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

#### Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1 a 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.

				((	<del>)</del>					
(A) Name and Title	(B) Average hours per week (list	Offic	cer ar	id a d	checl perso lirecto	k more t in is bot or/truste	e)	(D)  Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
	any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
(1) JEFFREY RUCH	40									
PRESIDENT	0	Χ		Χ				77,296.	0.	0.
(2) FRANK BUONO	2									
CHAIRMAN	0	X		Х				0.	0.	0.
BOARD MEMBER	$-\frac{2}{0}$	X						0.	0.	0.
BOARD MEMBER	20	Х						0.	0.	0.
(5) ZOE KELMAN BOARD MEMBER	20	Х						0.	0.	0.
_(6)_ JACK_GREGORY BOARD_MEMBER	$-\frac{2}{0}$	Х						0.	0.	0.
(7) LEOLA WEBB SECRETARY/TREAS	40 0			Х				41,820.	0.	0.
(8)										
(9)										
(10)										
(11)		•								
(12)										
(13)										
(14)					-		-			

The state of the control of the cont	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			<u> </u>	<u> </u>	,	uiii	a riigiiost con	iponoucu miip	toycos (continuca)
(A) Name and title	Average hours per week	Position e (do not check more the box, unless person is officer and a director/			than is bot or/trus	h an tee)	compensation from	<b>(E)</b> Reportable compensation from	<b>(F)</b> Estimated amount of other	
	(list any hours for related organiza tions below dotted line)	or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(15)		-								
(16)										
(17)										
(18)										
(19)										
(20)										
(21)										
(22)										***************************************
(23)									***************************************	
(24)			1							
(25)										
1 b Sub-total.							<b>A</b>	119,116.	0.	0.
c Total from continuation sheets to Part VII, Section d Total (add lines 1b and 1c)	Α						A A	0.	0.	0.
2 Total number of individuals (including but not limited to from the organization ► 0										
3 Did the organization list any former officer, director on line 1a? If 'Yes,' complete Schedule J for such it	r, or trus	stee,	key	em	ploy	ee, (	or h	ighest compensat	ed employee	Yes No
<b>4</b> For any individual listed on line 1a, is the sum of re the organization and related organizations greater to such individual	than \$1	50.00	00?	If 'Y	'es'	comi	olete	e Schedule J for		. 4 X
5 Did any person listed on line 1a receive or accrue of for services rendered to the organization? If 'Yes,'										The second secon
Section B. Independent Contractors		******								
1 Complete this table for your five highest compensation from the organization. Report compensation	ted inde tion for t	pend he ca	lent Ienc	cor dar y	ntrac ⁄ear	tors endir	tha ng w	t received more the vith or within the org	an \$100,000 of ganization's tax year.	
(A) Name and business addres	SS		,					(B) Description o	f services	(C) Compensation
		,								
					•					
2 Total number of independent contractors (including but \$100,000 of compensation from the organization ▶		ed to	thos	se li	sted	abov	/e) v	who received more	than	
RAA			001	111						F 000 (2012)

***	Check if Schedule O contains a response or note to any line in this Part VIII.								
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOLINTS	1 a	1 a Federated campaigns       1         b Membership dues       1         c Fundraising events       1         d Related organizations       1         e Government grants (contributions)       1		10,630.					
TRIBUTIO DOTHER!	f	All other contributions, gifts, grants, similar amounts not included above  Noncash contributions included in line	<u>1 f</u>	802,273.					
ව් දු	r	Total. Add lines 1a-1f			812,903.		100		
Œ				Business Code	012,500:				
E REVEN	2 a	COURT AWARDS		900099	92,969.	92,969.			
PROGRAM SERVICE REVENUE	C								
æ	f	All other program service rev	enue					***************************************	
Š		Total. Add lines 2a-2f			92,969.				
Δ-	3	Investment income (including other similar amounts)	g dividend	s, interest and	1,246.			1,246.	
	4	Income from investment of to		•				:	
	5	Royalties	(i) Real	(ii) Personal					
	6.8	Gross rents.	10,495		-	19			
	Į.	Less: rental expenses	10,455	<u> </u>		1000			
	1	·	10,495						
	1	Net rental income or (loss) .			10,495.			10,495.	
	Į	·	Securities	(ii) Other	10,455.			10,455.	
		assets other than inventory							
•		and sales expenses							
	ì	Net gain or (loss)							
OTHER REVENUE	8 a	Gross income from fundraisir (not including \$ of contributions reported on I	ine 1c).						
8		See Part IV, line 18							
5	ľ	Less: direct expenses  Net income or (loss) from fur		1					
		Gross income from gaming a See Part IV, line 19	ctivities.						
		Less: direct expenses Net income or (loss) from gar		)					
		Gross sales of inventory, less and allowances							
		Net income or (loss) from sal							
		Miscellaneous Revenue	CS OF HIVE	Business Code			- 1		
	11 a	MISCELLANEOUS		900099	9,585.			9,585.	
	b				<u> </u>			2,000.	
	С	THE SAME WHAT THE SAME WAS AND ASSESSMENT WHAT THE PARTY WAS	· – – – †						
		All other revenue							
		Total. Add lines 11a-11d			9,585.				
	12	Total revenue. See instruction	ns		927,198.	92,969.	0.	21,326.	

## Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

360	Check if Schedule O contains a response or note to any line in this Part IX									
	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses					
1	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21									
2	Grants and other assistance to individuals in the United States. See Part IV, line 22									
3	Grants and other assistance 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, trustees, and key employees	119,116.	103,210.	12,433.	3,473.					
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.					
7	Other salaries and wages	197,447.	171,082.	20,609.	5,756.					
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions).	151,441.	171,002.	20,009.	3,730.					
9	Other employee benefits	26,166.	22,635.	2,783.	748.					
10	Payroll taxes	28,856.	25,003.	3,012.	841.					
11	Fees for services (non-employees):									
	a Management									
	b Legal	49,721.	49,721.							
	Accounting	13,768.	13,768.							
	d Lobbying									
	e Professional fundraising services. See Part IV, line 17	180								
ğ	f Investment management fees	249,287.	232,389.	16,215.	683.					
13	Office expenses	7,359.	6,070.	1,108.	181.					
14	Information technology	5,666.	4,938.	569.	159.					
15	Royalties									
16	Occupancy	111,457.	98,965.	9,161.	3,331.					
17	Travel	16,162.	16,146.	16.						
18	Payments of travel or entertainment expenses for any federal, state, or local public officials									
19	Conferences, conventions, and meetings									
20	Interest									
21	Payments to affiliates									
22	Depreciation, depletion, and amortization	2,692.		2,692.						
23 24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10%	4,898.	1,393.	3,505.						
	of line 25, column (A) amount, list line 24e expenses on Schedule O.).									
7	SUBSCRIPTIONS. AND PUB.	21,960.	21,395.	270.	295.					
	P POSTAGE AND SHIPPING	16,871.	13,351.	-60.	3,580.					
C		9,160.	8,048.	774.	338.					
c	TELEPHONE	9,012.	8,371.	501.	140.					
	All other expenses	7,967.	7,967.							
	Total functional expenses. Add lines 1 through 24e	897,565.	804,452.	73,588.	19,525.					
26	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 ► ☐ if following SOP 98-2 (ASC 958-720)									
BAA		TEE A01101 11/	2011.0		Form 990 (2013)					

Part X Balance Sheet

<u> </u>		Check if Schedule O contains a response or note to	o any i	ine in this Part X	. , ,		
	-		araman tarima da a		(A) Beginning of year		(B) End of year
	1	Cash — non-interest-bearing			100.	1	100.
	2	Savings and temporary cash investments	243,610.	2	477,231.		
	3	Pledges and grants receivable, net				3	15,000.
	4	Accounts receivable, net	1,431.	4	8,252.		
	5	Loans and other receivables from current and former trustees, key employees, and highest compensated e Part II of Schedule L	avolam	ees. Complete		5	
	6	Loans and other receivables from other disqualified p section 4958(f)(1)), persons described in section 4958(c)(employers and sponsoring organizations of section 501(c) beneficiary organizations (see instructions). Complete		6			
A S E T S	7	Notes and loans receivable, net				7	
S E	8	Inventories for sale or use		, ,		8	
T S	9	Prepaid expenses and deferred charges			17,760.	9	17,404.
	10 a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a	21,369.			
		Less: accumulated depreciation			617.	10 c	4,361.
	11	Investments – publicly traded securities	L		V±7.	11	1,001.
	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			109,779.	15	93,963.
l	16	Total assets. Add lines 1 through 15 (must equal line			538,297.	16	616,311.
	17	Accounts payable and accrued expenses	J <del>4</del> )		45,319.	17	41,911.
	18	Grants payable			33,313.	18	71, 711.
	19	Deferred revenue			9,273.	19	63,823.
L	20	Tax-exempt bond liabilities		ļ-	3/413.	20	00/020.
- 1 - 1	21	Escrow or custodial account liability. Complete Part I		L	· · · · · · · · · · · · · · · · · · ·	21	
AB L T ES	22	Loans and other payables to current and former office key employees, highest compensated employees, and Complete Part II of Schedule L	ers, dire I disau	ectors, trustees,		22	
	23	Secured mortgages and notes payable to unrelated the		Ļ		23	
5	24	Unsecured notes and loans payable to unrelated third		<u>L</u>		24	
	25	Other liabilities (including federal income tax, payable and other liabilities not included on lines 17-24). Com	•	L. Company	13,550.	25	10,789.
		Total liabilities. Add lines 17 through 25			68,142.	26	116,523.
ZET		Organizations that follow SFAS 117 (ASC 958), check he lines 27 through 29, and lines 33 and 34.					
ş	27	Unrestricted net assets			-15,291.	27	-37,798.
<b>そののモーの</b>	28	Temporarily restricted net assets		<i>, .</i>	485,446.	28	537,586.
	29	Permanently restricted net assets				29	
Q R		Organizations that do not follow SFAS 117 (ASC 958), ch and complete lines 30 through 34.	eck he	re ►			
UZCT	30	Capital stock or trust principal, or current funds				30	
- (	31	Paid-in or capital surplus, or land, building, or equipm		L.		31	
A	32	Retained earnings, endowment, accumulated income,		L.		32	
Ā	33	Total net assets or fund balances			A70 155	33	100 700
<b>B4し420世の</b>	34	Total liabilities and net assets/fund balances			470,155.	34	499,788.
3	~~	Total nashitios and not assets/fully palatices			538,297.	J*4	616,311.

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Form **990** (2013)

Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)).   10   499, 788.	Pai	rt XI Reconciliation of Net Assets				
2 Total expenses (must equal Part IX, column (A), line 25).  3 Revenue less expenses. Subtract line 2 from line 1.  3 29,633. 4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)).  5 Net unrealized gains (losses) on investments.  6 Donated services and use of facilities.  7 Investment expenses.  8 Prior period adjustments.  9 Other changes in net assets or fund balances (explain in Schedule O).  10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)).  Part XII Financial Statements and Reporting  Check if Schedule O contains a response or note to any line in this Part XII.  1 Accounting method used to prepare the Form 990: Cash Accrual Other  If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.  2 a Were the organization's financial statements compiled or reviewed by an independent accountant?.  2 a Were the organization's financial statements compiled or reviewed by an independent accountant?.  Separate basis Consolidated basis Both consolidated and separate basis b Were the organization's financial statements audited by an independent accountant?.  1 Yes, check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:  Separate basis Consolidated basis Both consolidated and separate basis  5 Were the organization's financial statements and selaction of an independent accountant?.  2 b X  1 If 'Yes, 'check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:  Separate basis Consolidated basis Both consolidated and separate basis  c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selaction of an independent accountant?.  2 t X  If the organization changed either its oversight p		Check if Schedule O contains a response or note to any line in this Part XI.				
3 Revenue less expenses. Subtract line 2 from line 1 3 29, 633. 4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)). 4 470, 155. 5 Net unrealized gains (losses) on investments. 5 6 Donated services and use of facilities 6 7 Investment expenses. 7 8 Prior period adjustments 8 9 Other changes in net assets or fund balances (explain in Schedule O). 9 0. 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)). 10 499, 788.  Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII.  10 499, 788.  Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII.  10 499, 788.  If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O. 2 a Were the organization's financial statements compiled or reviewed by an independent accountant?  2a X If "Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:  2 Separate basis	1	Total revenue (must equal Part VIII, column (A), line 12)	1 .	g	27,1	198.
Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	2	Total expenses (must equal Part IX, column (A), line 25)	2	8	97,5	565.
5 Net unrealized gains (losses) on investments. 6 Donated services and use of facilities. 7 Investment expenses. 8 Prior period adjustments 9 Other changes in net assets or fund balances (explain in Schedule O). 9 0. 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)).  Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII.  1 Accounting method used to prepare the Form 990: Cash Accrual Other If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O. 2 a Were the organization's financial statements compiled or reviewed by an independent accountant? 2 a X If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:  Separate basis Consolidated basis Both consolidated and separate basis b Were the organization's financial statements audited by an independent accountant?  If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:  Separate basis Consolidated basis Both consolidated and separate basis c If 'Yes' to line 2 a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?  2 t X  If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.  3 a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single	3	·	3		29,6	533.
6 Donated services and use of facilities. 7 Investment expenses. 7   Response of period adjustments   Reporting   9 Other changes in net assets or fund balances (explain in Schedule O).   9   0. 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)).   10   499, 788.    Part XII   Financial Statements and Reporting	4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	4	70,1	155.
7 Investment expenses 7 8 Prior period adjustments 8 9 Other changes in net assets or fund balances (explain in Schedule O). 9 0.  10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)). 10 499, 788.  Part XII Financial Statements and Reporting  Check if Schedule O contains a response or note to any line in this Part XII.	5	Net unrealized gains (losses) on investments	5			
9 Other changes in net assets or fund balances (explain in Schedule O)	6	Donated services and use of facilities	6			
9 Other changes in net assets or fund balances (explain in Schedule O)	7	Investment expenses	7			
Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)).	8	Prior period adjustments	8			
Column (B))  Check if Schedule O contains a response or note to any line in this Part XII.  Check if Schedule O contains a response or note to any line in this Part XII.  1 Accounting method used to prepare the Form 990: Cash Accrual Other  If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.  2a Were the organization's financial statements compiled or reviewed by an independent accountant?.  2a Were the organization's financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:  Separate basis Consolidated basis Both consolidated and separate basis  b Were the organization's financial statements audited by an independent accountant?.  2b X  If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:  X Separate basis Consolidated basis Both consolidated and separate basis  c If 'Yes,' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?.  2c X  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	9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
Check if Schedule O contains a response or note to any line in this Part XII.  Yes No  1 Accounting method used to prepare the Form 990: Cash X Accrual Other  If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.  2a Were the organization's financial statements compiled or reviewed by an independent accountant?.  2a X  If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:  Separate basis Consolidated basis Both consolidated and separate basis  b Were the organization's financial statements audited by an independent accountant?.  2b X  If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:  X Separate basis Consolidated basis Both consolidated and separate basis  c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?.  2b X  If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	10		10	4	99,7	788.
1 Accounting method used to prepare the Form 990: Cash X Accrual Other  If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.  2a Were the organization's financial statements compiled or reviewed by an independent accountant? 2a X  If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:  Separate basis Consolidated basis Both consolidated and separate basis  b Were the organization's financial statements audited by an independent accountant? 2b X  If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:  X Separate basis Consolidated basis Both consolidated and separate basis  c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? 2c X  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	Pai	rt XII Financial Statements and Reporting	,			
1 Accounting method used to prepare the Form 990: Cash X Accrual Other  If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.  2a Were the organization's financial statements compiled or reviewed by an independent accountant? 2a X  If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:  Separate basis Consolidated basis Both consolidated and separate basis  b Were the organization's financial statements audited by an independent accountant? 2b X  If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:  X Separate basis Consolidated basis Both consolidated and separate basis  c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? 2c X  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		Check if Schedule O contains a response or note to any line in this Part XII		. <i>.</i>		. П
If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.  2 a Were the organization's financial statements compiled or reviewed by an independent accountant?					<del></del>	<del></del>
in Schedule O.  2 a Were the organization's financial statements compiled or reviewed by an independent accountant?	1	Accounting method used to prepare the Form 990: Cash X Accrual Other		-		
If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:  Separate basis  Consolidated basis  Both consolidated and separate basis  b Were the organization's financial statements audited by an independent accountant?		If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.				
separate basis, consolidated basis, or both:  Separate basis  Consolidated basis  Both consolidated and separate basis  b Were the organization's financial statements audited by an independent accountant?  If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:  X Separate basis  Consolidated basis  Both consolidated and separate basis  c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?  If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.  3 a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single	2 8			. 2a		X
b Were the organization's financial statements audited by an independent accountant?.  If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:  X Separate basis Consolidated basis Both consolidated and separate basis  c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?.  2b X  Separate basis Consolidated basis Both consolidated and separate basis  c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?.  2c X  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		If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewe separate basis, consolidated basis, or both:	ed on a			
If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:  X Separate basis Consolidated basis Both consolidated and separate basis  c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?		Separate basis Consolidated basis Both consolidated and separate basis		34:025655655	360/00/94/00/60	\$ 0800 NO POR PCHE
basis, consolidated basis, or both:  X Separate basis Consolidated basis Both consolidated and separate basis  c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?  If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.  3 a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single	ı	b Were the organization's financial statements audited by an independent accountant?		. 2b	X	
c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?		If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separa basis, consolidated basis, or both:	ite			
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.  3 a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single		Land Land				
in Schedule O.  3 a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single	(	c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?		. 2c	Х	
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single		in Schedule O.				
Addit Act and Oldin Circulal A-199:	3 8	a 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?		. За		Х
<b>b</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	ł			3 h		
BAA Form 990 (2013	BAA					(2013)

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

Department of the Treasury Internal Revenue Service

Name of the organization

**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.

PUBLIC EMPLOYEES FOR ENVIRONMENTAL

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

	RESPO	NSIBILITY, INC	J					93-1	10274	0		
Part	I Reason for Pub	lic Charity Status	(All organizations	must (	comple	ete this	part.)	See i	nstruct	ions.		
The o	rganization is not a priva											
1	A church, convention	n of churches or asso	ciation of churches des	cribed in	sectio	n 170(b)	(1)(A)(i)	).				
2	A school described i	n section 170(b)(1)(A	(ii). (Attach Schedule E	Ξ.)								
3	j		ce organization describe		ction 17	0(b)(1)(	A)(iii).					
4		,	in conjunction with a h					0/hV1V/	Wiii) F	nter the ho	snital's	:
7	name, city, and state	•	in conjunction with a r	iospitai	40301100	,a 111 <b>30</b> 1		V(D)(1)(	·)(···)· -	1101 110 110	pitais	•
5		ated for the benefit of a	college or university own	ned or op	erated b	y a gove	rnmenta	I unit des	scribed in	section		
6			overnmental unit descri	ihed in s	ection '	170/hV/1	γΔγω					
7			stantial part of its suppor					n the ger	neral nub	lic describe	4	
8	in section 170(b)(1)(	A)(vi). (Complete Par	rt II.) <b>70(b)(1)(A)(vi).</b> (Comple			iornai an		a.o go.	101 G. PGD	.,,,,	•	
-			, , , , , , , , , , , , , , , , , , , ,		-	21 11						
9	from activities related investment income a	to its exempt functions	nore than 33-1/3% of its s — subject to certain exc s taxable income (less mplete Part III.)	eptions,	and (2) r	no more	than 33.	1/3% of	its suppo	ort from gros	S	ıfter
10	An organization orga	anized and operated e	exclusively to test for pu	ublic saf	ety. See	section	n 509(a)	(4).				
11	more publicly suppo	rted organizations des	usively for the benefit of, scribed in section 509(a tion and complete lines	a)(1) or s	section !	509(a)(2	of, or ca ?). See :	rry out th section !	ne purpos 5 <b>09(a)(3</b> )	ses of one o ). Check the	r e box t	that
	a Type I b	Type II c	Type III - Function	nally inte	egrated		d 🗍	Type III	– Non-f	unctionally	integr	ated
е	By checking this box other than foundation section 509(a)(2).	x, I certify that the org	anization is not control an one or more publicly s	led dired supported	ctly or ind d organiz	ndirectly zations d	by one escribed	or more I in section	disqual on 509(a)	ified persor )(1) or	าร	
f	If the organization rec	eived a written determi	nation from the IRS that i	is a Type	I, Type	II or Typ	e III sup	porting c	organizat	ion,		П
g			on accepted any gift o	r contrib	ution fr	om anv	of the f	ollowina	nersons	 ₹7		
9	011007109000177,20	oo, nao ino organizan	on accepted any gift o		, across	o, a,		e	p 0.00		Yes	No
	(i) A person who below, the gov	directly or indirectly of erning body of the su	ontrols, either alone or pported organization?.	togethe	r with po	ersons o	describe	d in (ii)	and (iii)	11 g (i)	103	140
	(ii) A family memb	er of a person descri	bed in (i) above?	,						11 g (ii)		
	(iii) A 35% controll	ed entity of a person	described in (i) or (ii) a	bove?						11 g (iii)		
h			e supported organization							119(11)	<b></b>	<u> </u>
	(i) Name of supported	(ii) EIN	(iii) Type of organization	<del></del>	s the	(v) Did y	ou notify	(vi) i	s the	(vii) Amoun	t of mon	etarv
	organization	(1) = 11	(described on lines 1-9	organiz	ation in	the organ	ization in	organiz	ation in		port	
			above or IRC section (see instructions))	your go	i) listed in overning	supi	(i) of your port?	organize	nn (i) ed in the S.?			
			,	Yes	nent?	Yes	No	Yes	No			
				165	NO	165	140	165	NO			
(A)												
										•		
(B)												
(C)												
				1			<u> </u>				***************************************	
(D)												
<del>-1</del>				<b>†</b>		<b>†</b>			7			
(E)					<u> </u>							
<u> </u>	······································											
Total							1					

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.)

<u>Se</u>	ction A. Public Support	-								
Cal- beg	endar year (or fiscal year inning in) ►	(a) 2009	<b>(b)</b> 2010	<b>(c)</b> 2011	<b>(d)</b> 2012	<b>(e)</b> 2013	(f) Total			
1	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.)	823,791.	931,464.	700,194.	878,343.	812,903.	4,146,695.			
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf				# * * * * * * * * * * * * * * * * * * *	a 1	0.			
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0.			
4	Total. Add lines 1 through 3	823,791.	931,464.	700,194.	878,343.	812,903.	4,146,695.			
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						1,408,833.			
	Public support. Subtract line 5 from line 4						2,737,862.			
	ction B. Total Support	T T			· · · · · · · · · · · · · · · · · · ·					
Cale beg	endar year (or fiscal year inning in) ►	(a) 2009	<b>(b)</b> 2010	<b>(c)</b> 2011	<b>(d)</b> 2012	<b>(e)</b> 2013	(f) Total			
7	Amounts from line 4	823,791.	931,464.	700,194.	878,343.	812,903.	4,146,695.			
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	8,683.	3,420.	2,770.	9,593.	11,741.	36,207.			
9	Net income from unrelated business activities, whether or not the business is regularly carried on	·					0.			
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.). SEE PART IV	24,017.	23,770.	23,090.	2,218.	9,585.	82,680.			
11	Total support. Add lines 7 through 10						4,265,582.			
12	Gross receipts from related activ	ities, etc (see inst	ructions)				0.			
	First five years. If the Form 990 is organization, check this box and	stop here		rd, fourth, or fifth to	ax year as a sectio	n 501(c)(3)	▶ □			
	tion C. Computation of Pul									
	Public support percentage for 20						64.18%			
	Public support percentage from 2					· -	56.35 %			
16 a	a 33-1/3% support test — 2013. If and stop here. The organization	the organization d qualifies as a pub	id not check the blicly supported or	oox on line 13, ar ganization	nd the line 14 is 3	3-1/3% or more, o	check this box			
ł	o 33-1/3% support test — 2012. If t and stop here. The organization	he organization di qualifies as a pub	d not check a box licly supported or	on line 13 or 16 ganization	a, and line 15 is 3	3-1/3% or more,	check this box			
17 a	7a 10%-facts-and-circumstances test — 2013. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization									
	o 10%-facts-and-circumstances te or more, and if the organization organization meets the 'facts-and	meets the 'facts-ard-circumstances' to	nd-circumstances' est. The organizat	' test, check this l tion qualifies as a	box and <b>stop her</b> publicly supporte	e. Explain in Part ed organization	IV how the▶			
	Private foundation. If the organiz	zation did not ched	k a box on line 1	3, 16a, 16b, 17a,	or 17b, check this	s box and see ins	tructions			
3AA					Soh	odulo A (Form 00	0 or 990-F7) 2013			

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.)

Sec	tion A. Public Support					*	
Calen	dar year (or fiscal yr beginning in) 🕨	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	<b>(e)</b> 2013	(f) Total
1	Gifts, grants, contributions and membership fees received. (Do not include any 'unusual grants.')						
2	Gross receipts from admis-						
	sions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513.						
	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf				>		
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year.						
С	Add lines 7a and 7b						
	Public support (Subtract line 7c from line 6.)			30 July 1			
Sec	tion B. Total Support						
			······	<del></del>	<del>,</del>	····	
	dar year (or fiscal yr beginning in) 🕨	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	<b>(e)</b> 2013	<b>(f)</b> Total
Calen	dar year (or fiscal yr beginning in)  Amounts from line 6	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	<b>(e)</b> 2013	(f) Total
Calen 9 10 a		(a) 2009	<b>(b)</b> 2010	(c) 2011	( <b>d)</b> 2012	<b>(e)</b> 2013	(f) Total
Calenda 9 10 a	Amounts from line 6	(a) 2009	<b>(b)</b> 2010	(c) 2011	( <b>d)</b> 2012	<b>(e)</b> 2013	(f) Total
Calenda 9 10 a b	Amounts from line 6	(a) 2009	<b>(b)</b> 2010	(c) 2011	( <b>d)</b> 2012	<b>(e)</b> 2013	(f) Total
Calend 9 10 a b	Amounts from line 6	(a) 2009	<b>(b)</b> 2010	(c) 2011	( <b>d)</b> 2012	<b>(e)</b> 2013	(f) Total
Calend 9 10 a b c 11	Amounts from line 6						
Calend 9 10 a b c 11	Amounts from line 6						
Caleni 9 10 a b c 11 12	Amounts from line 6	is for the organiz	ation's first, seco				
Calenia 9 10 a b c 11 12 13 14 Sec	Amounts from line 6	is for the organizstop here	ation's first, seco	nd, third, fourth, o	r fifth tax year as	a section 501(c)(3	
Calent 9 10 a b c c 11 12 13 14 Sec 15	Amounts from line 6	is for the organize stop hereblic Support P	ation's first, secon	nd, third, fourth, o	r fifth tax year as	a section 501(c)(3	i)
Calent 9 10 a b c 11 12 13 14 Sec 15 16	Amounts from line 6	is for the organizstop hereblic Support P	ation's first, second at the s	nd, third, fourth, o	r fifth tax year as	a section 501(c)(3	§)
Calent 9 10 a b c 11 12 13 14 Sec 15 16 Sec	Amounts from line 6	is for the organize stop hereblic Support P 013 (line 8, column 2012 Schedule A, restment Incor	ation's first, second for the second	nd, third, fourth, o	r fifth tax year as	a section 501(c)(3	§)
Calent 9 10 a b c 11 12 13 14 Sec 15 16 Sec 17	Amounts from line 6	is for the organizstop hereblic Support Pola (line 8, colum 2012 Schedule A, restment Incoror 2013 (line 10c,	ation's first, second of the s	nd, third, fourth, o	r fifth tax year as	a section 501(c)(3	\$)
Calent 9 10 a b c 11 12 13 14 Sec 17 18 19 a	Amounts from line 6	is for the organizes top here blic Support Pola (line 8, column 2012 Schedule A, restment Incorror 2013 (line 10c, rom 2012 Schedule f the organization to this box and sto	ation's first, second of the s	nd, third, fourth, one 13, column (f))  ee  d by line 13, column (f)  box on line 14, and a lization qualifies a	r fifth tax year as mn (f)) and line 15 is mores a publicly supp	a section 501(c)(3  15 16  17 18 e than 33-1/3%, arorted organization	8)
Calent 9 10 a b c 11 12 13 14 Sec 17 18 19 a	Amounts from line 6	is for the organizes top here blic Support Pola (line 8, column 2012 Schedule A, restment Incorror 2013 (line 10c, rom 2012 Schedule f the organization to this box and sto	ation's first, second of the s	nd, third, fourth, one 13, column (f))  ee  d by line 13, column (f)  box on line 14, and a lization qualifies a	r fifth tax year as mn (f)) and line 15 is mores a publicly supp	a section 501(c)(3  15 16  17 18 e than 33-1/3%, arorted organization	8)

Sc	hedule i	A (Form	990 or	990-EZ)	2013	PU	JBLIC	EMP1	LOYEES	FOR	ENVI	RONMEN	ITAL		93-11	<u>.0274</u>	0	Page 4
P	art IV	or 1 (See	7b; ar e instr	nd Par uction	t III, li s).	ne 12	2. Also	o comp	olete th	iis parl	t for ar	uired by ny addit	ional i	nformat	ion.			
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2013

# SCHEDULE A, PART IV - SUPPLEMENTAL INFORMATION PAGE 5 PUBLIC EMPLOYEES FOR ENVIRONMENTAL RESPONSIBILITY, INC. 93-1102740

PART II.	LINE	10 - 0	THER	INCOME
----------	------	--------	------	--------

NATURE AND SOURCE	2013	2012	2011	2010	2009
тотал	\$ 9,585.	\$ 2,218.	\$ 23,090.	\$ 23,770.	\$ 24,017.
	\$ 9,585.	\$ 2,218.	\$ 23,090.	\$ 23,770.	\$ 24,017.

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

#### **Political Campaign and Lobbying Activities**

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

OMB No. 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service ► 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 <a href="https://www.irs.gov/form990">www.irs.gov/form990</a>.

Open to Public Inspection

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

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

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

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

If the organization answered 'Yes,' to Form 990, Part IV, line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35c (Proxy Tax), then • Section 501(c)(4), (5), or (6) organizations: Complete Part III.

		S			
Name	of organization			Employer identific	ation number
PUI	BLIC EMPLOYEES FOR	ENVIRONMENTAL		93-110274	
		rganization is exempt under section			zation.
1	Provide a description of the	organization's direct and indirect political of	campaign activities in	Part IV.	
2					
3	Volunteer hours			,	
		rganization is exempt under section			
1	Enter the amount of any exc	cise tax incurred by the organization under	section 4955	<b>&gt;</b> \$	0.
2	Enter the amount of any exc	cise tax incurred by organization managers	under section 4955.	▶\$	0.
3	If the organization incurred a	a section 4955 tax, did it file Form 4720 for	this year?		Yes No
4 :	Was a correction made?				Tyes No
	If 'Yes,' describe in Part IV.		, , , , , , , , , , , , , , , , , , , ,		
		rganization is exempt under section	on 501(c) . excep	t section 501(c)(3).	
1		pended by the filing organization for section			
2	•	organization's funds contributed to other organ	•	,	
2	function activities				
3	Total exempt function expen	nditures. Add lines 1 and 2. Enter here and	on Form 1120-POL.		. '
Ī	line 17b				
4	Did the filing organization file	e Form 1120-POL for this year?			Yes No
5	Enter the names, addresses	and employer identification number (EIN) s. For each organization listed, enter the ar	of all section 527 pol	itical organizations to w	hich the filing
	organization made payments	s. For each organization listed, enter the ar is received that were promptly and directly del	mount paid from the f	iling organization's fund	ds. Also enter the
	segregated fund or a political	al action committee (PAC). If additional spa	ace is needed, provide	e information in Part IV	as a separate
·					
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If	(e) Amount of political contributions received and
				none, enter-0	promptly and directly delivered to a separate
					political organization. If none, enter -0
					***************************************
(1)	*				
<i>(</i> 2)			***************************************		
(2)					
(3)					
(3)					
(4)					
`~				***************************************	
(5)				·	
/E\	•				

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule C (Form 990 or 990-EZ) 2013

A Check   if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).  B Check   if the filing organization checked box A and "limited control" provisions apply.  Cinte term 'expenditures' means amounts paid or incurred.)  1 a Total lobbying expenditures to influence public opinion (grass roots lobbying).  b Total lobbying expenditures to influence a legislative body (direct lobbying).  c Total lobbying expenditures to influence a legislative body (direct lobbying).  c Total lobbying expenditures (add lines 1a and 1b).  d Other exempt purpose expenditures.  e Total exempt purpose expenditures (add lines 1c and 1d).  g 397, 565.  e Total exempt purpose expenditures.  f Lobbying nontaxable amount. Enter the amount from the following table in both columns.  159, 635.  If the amount on line le, following (a) or (b) is:  The lobbying nontaxable amount is:  Now as \$10,00,000 but not own \$1,00,000  Over \$1,00,000 but not own \$1,00,000  Filing but to low \$1,0	Part II-A Complete if section 501	the organization (h)).	n is exempt under se	ction 501(c)(3) and	filed Form 5768 (ele	ection under
B Check In the filing organization checked box A and "limited control" provisions apply.  Limits on Lobbying Expenditures (and insense amounts paid or incurred.)  1 a Total lobbying expenditures to influence public opinion (grass roots lobbying).  b Total lobbying expenditures to influence a legislative body (direct lobbying).  c Total lobbying expenditures (add lines 1a and 1b).  0 . 0.  d Other exempl purpose expenditures.  1 a Total purpose expenditures (add lines 1c and 1d).  1 a Total lobbying expenditures (add lines 1c and 1d).  2 a Lobbying nontaxable amount. Enter the amount from the following table in both columns.  1 b Total lobbying expenditures (add lines 1c and 1d).  2 a Lobbying nontaxable amount (and 2 and 2 by of the amount on line 1e.  2 a Lobbying that from line 1c. If zero or less, enter -0.  3 a y y y y y y y y y y y y y y y y y y	A Check ► if the filing	ng organization belong			ted group member's name	1
Cities   C			• -	•		
Ta Total lobbying expenditures to influence public opinion (grass roots lobbying).		Limits on Lobby	ing Expenditures		(a) Filing organization's totals	
b Total lobbying expenditures to influence a legislative body (direct lobbying). c Total lobbying expenditures (add lines 1a and 1b). d Other exempt purpose expenditures. e Total exempt purpose expenditures. e Total exempt purpose expenditures (add lines 1c and 1d). 897,565. 0. f Lobbying nontexable amount. Enter the amount from the following table in both columns.  If the amount on line le, column (a) or (b) is: The lobbying nontexable amount is: Not over \$500,000   200,		•	•			
d Other exempt purpose expenditures. e Total exempt purpose expenditures (add lines to and td). f Lobbying pontaxable amount. Enter the amount from the following table in both columns.  If the amount on line te, column (a) or (b) is:  If the amount on line te, column (a) or (b) is:  If the amount on line te, column (a) or (b) is:  If the amount on line te, column (a) or (b) is:  If the amount on line te, column (a) or (b) is:  If the amount on line te, column (a) or (b) is:  If the amount on line te, column (a) or (b) is:  If the amount on line te, column (a) or (b) is:  Over \$10,000,000 but not over \$1,000,000  Over \$1,000,000 but not over \$1,000,000  Over \$1,000,000 but not over \$1,000,000  O		•		• •		
e Total exempt purpose expenditures (add lines 1c and 1d)	·		•		0.	0.
F   Lobbying nontaxable amount. Enter the amount from the following table in both columns.   159,635.		The state of the s				
159, 635.	e lotal exempt purpose e	expenditures (add lir		897,565.	0.	
If the amount on line 1e, column (a) or (b) is:	f Lobbying nontaxable ar both columns	mount. Enter the am	ount from the following tab	ole in	159 635	
Over \$300,000 but not over \$1,000,000   \$100,000 plus 15% of the excess over \$500,000.				<del></del>	100,000.	
Over \$1,000,000 but not over \$1,500,000   \$175,000 plus 10% 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.	<u></u>					
Over \$17,000,000   \$1,000,000			<u> </u>			
g Grassroots nontaxable amount (enter 25% of line 1f).  h Subtract line 1g from line 1a. If zero or less, enter -0.  i Subtract line 1g from line 1c. If zero or less, enter -0.  j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?  4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f.)  Lobbying Expenditures During 4-Year Averaging Period  Calendar year (or fiscal year beginning in)  2a Lobbying non-taxable amount.  2a Lobbying non-taxable amount (150% of line 2a, column (e)).  c Total lobbying ealing amount (150% of line 2a, column (e)).  c Total lobbying ealing amount (150% of line 2a, column (e)).  d Grassroots nontaxable amount (150% of line 2d, column (e)).  e Grassroots ceiling amount (150% of line 2d, column (e)).  f Grassroots lobbying expenditures  0 .  0 .  274,592.  f Grassroots lobbying expenditures  0 .  0 .  0 .  0 .  0 .  0 .  0 .  0				over \$1,500,000.		
h Subtract line 1g from line 1a. If zero or less, enter -0.  i Subtract line 1f from line 1c. If zero or less, enter -0.  j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?  A-Year Averaging Period Under Section 501(h)  (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f.)  Lobbying Expenditures During 4-Year Averaging Period  Calendar year (or fiscal year beginning in)  (a) 2010  (b) 2011  (c) 2012  (d) 2013  (e) Total  2a Lobbying ceiling amount (150% of line 2a, column (e))  c Total lobbying expenditures  c Total lobbying expenditures  57,316.  46,829.  39,007.  39,909.  183,061.  e Grassroots ceiling amount (150% of line 2d, column (e))  2 (fassroots lobbying expenditures  0.					20 000	
i Subtract line 1f from line 1c. If zero or less, enter -0.  j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?  4-Year Averaging Period Under Section 501(h)  (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f.)  Lobbying Expenditures During 4-Year Averaging Period  Calendar year (or fiscal year beginning in)  (a) 2010  (b) 2011  (c) 2012  (d) 2013  (e) Total  2a Lobbying non-taxable amount (150% of line 2a, column (e))  b Lobbying ceiling amount (150% of line 2a, column (e))  c Total lobbying expenditures  d Grassroots nontaxable amount  57, 316.  46, 829.  39, 007.  39, 909.  183, 061.  e Grassroots ceiling amount (150% of line 2d, column (e))  f Grassroots lobbying expenditures  0.	_	•	•		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	
J if there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?  4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f.)  Lobbying Expenditures During 4-Year Averaging Period  Calendar year (or fiscal year beginning in)  2 a Lobbying non-taxable amount.  2 a Lobbying non-taxable amount (150% of line 2a, column (e))  5 Lobbying ceiling amount (150% of line 2a, column (e))  6 Grassroots nontaxable amount.  5 7, 316. 46, 829. 39,007. 39,909. 183,061.  6 Grassroots ceiling amount (150% of line 2d, column (e))  6 Grassroots ceiling amount (150% of line 2d, column (e))  7 Grassroots lobbying expenditures.  8 Column (e)  9 Column (e)  10 Column (e)  11 Column (e)  274,592.					······································	······
4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f.)  Lobbying Expenditures During 4-Year Averaging Period  Calendar year (or fiscal year beginning in)  (a) 2010  (b) 2011  (c) 2012  (d) 2013  (e) Total  2a Lobbying non-taxable amount (150% of line 2a, column (e))  b Lobbying ceiling amount (150% of line 2a, column (e))  c Total lobbying expenditures  d Grassroots nontaxable amount (150% of line 2d, column (e))  e Grassroots ceiling amount (150% of line 2d, column (e))  f Grassroots lobbying expenditures  0.	j If there is an amount othe section 4911 tax for this	er than zero on either s year?	line 1h or line 1i, did the org	anization file Form 4720	reporting	
Calendar year (or fiscal year beginning in)   (a) 2010   (b) 2011   (c) 2012   (d) 2013   (e) Total			4-Year Averaging Period L	Inder Section 501(h)		
Calendar year (or fiscal year beginning in)       (a) 2010       (b) 2011       (c) 2012       (d) 2013       (e) Total         2a Lobbying non-taxable amount       229, 263       187, 316       156,028       159,635       732,242         b Lobbying ceiling amount (150% of line 2a, column (e))       1,098,363         c Total lobbying expenditures       0         d Grassroots nontaxable amount       57,316       46,829       39,007       39,909       183,061         e Grassroots ceiling amount (150% of line 2d, column (e))       274,592       274,592         f Grassroots lobbying expenditures       0       0	(Som					
2a Lobbying non-taxable amount       229,263       187,316       156,028       159,635       732,242         b Lobbying ceiling amount (150% of line 2a, column (e))       1,098,363         c Total lobbying expenditures       0         d Grassroots nontaxable amount       57,316       46,829       39,007       39,909       183,061         e Grassroots ceiling amount (150% of line 2d, column (e))       274,592       6       274,592       6         f Grassroots lobbying expenditures       0		Lobb	ying Expenditures During	4-Year Averaging Perio	od	
amount       229,263       187,316       156,028       159,635       732,242         b Lobbying ceiling amount (150% of line 2a, column (e))       1,098,363         c Total lobbying expenditures       0         d Grassroots nontaxable amount       57,316       46,829       39,007       39,909       183,061         e Grassroots ceiling amount (150% of line 2d, column (e))       274,592         f Grassroots lobbying expenditures       0	Calendar year (or fiscal year beginning in)	<b>(a)</b> 2010	<b>(b)</b> 2011	<b>(c)</b> 2012	(d) 2013	(e) Total
amount (150% of line 2a, column (e))  c Total lobbying expenditures		229, 26	3. 187,316.	156,028.	159,635.	732,242.
c Total lobbying expenditures	amount (150% of line					1,098,363.
amount						
amount (150% of line 2d, column (e))  f Grassroots lobbying expenditures		57,31	46,829.	39,007.	39,909.	183,061.
expenditures 0.	amount (150% of line					274,592.
	expenditures					

Schedule C (Form 990 or 990-EZ) 2013 PUBLIC				93-1102740
Part II-B Complete if the organ	zation is exe	mpt	under section 501(c	c)(3) and has NOT filed Form 5768
(election under section	n 501(h)).		***************************************	

	(a	a)		(b)	
For each 'Yes' response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.	Yes	No	An	nount	
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:			School Sc		
a Volunteers?					
<b>b</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?					
f Grants to other organizations for lobbying purposes?					
g Direct contact with legislators, their staffs, government officials, or a legislative body?					
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i Other activities?					
j Total. Add lines 1c through 1i					
2 a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		STANGARD STA			1000
<b>b</b> If 'Yes,' enter the amount of any tax incurred under section 4912	L				
c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912			<u> </u>		
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		20000000			
Part III-A Complete if the organization is exempt under section 501(c)(4), section 501	1				
section 501(c)(6).	COCO	, 01	•		
				Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?			1		
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?				1	
3 Did the organization agree to carry over lobbying and political expenditures from the prior year?				1	<b>†</b>
Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No' OR (b) Fanswered 'Yes.'	(c)(5) Part II	, or s I-A, I	ection 5 ine 3, is	<b>0</b> 1(c)	
1 Dues, assessments and similar amounts from members	]	1		***************************************	
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).					
a Current year		2 a			
<b>b</b> Carryover from last year	[	2 b			
c Total		2 c			
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	[	3			
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?		4			
5 Taxable amount of lobbying and political expenditures (see instructions)	[	5		***************************************	
Part IV Supplemental Information				***************************************	
Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated grou Part II-B, line 1. Also, complete this part for any additional information.		Part I	I-A, line 2	; and	
				****	

# SCHEDULE D (Form 990)

Supplemental Financial Statements

Complete if the organization answered 'Yes,' to Form 990,
Part IV, lines 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 2013

Department of the Treasury Internal Revenue Service Name of the organization

Open to Public Inspection

Nan	e of the organization			Employer identification number
	BLIC EMPLOYEES FOR ENVIRONMENT SPONSIBILITY, INC.	AL		93-1102740
	rt   Organizations Maintaining Dong	r Advised Funds or Other	Similar Funds or A	
Гс	Complete if the organization answers	wered 'Yes' to Form 990. F	Part IV. line 6.	
	Complete if the organization and	(a) Donor advised ful		Funds and other accounts
1	Total number at end of year	(a) Donor advised rui	103 (6)	r and and other accounts
2	Aggregate contributions to (during year)	Miles to the second of the sec		
3	Aggregate grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and dor	nor advisors in writing that the as	ssets held in donor advise	ed funds
6	are the organization's property, subject to the Did the organization inform all grantees, dono	5		
	for charitable purposes and not for the benefit impermissible private benefit?	of the donor or donor advisor, or	or for any other purpose of	onferring
Pa	rt II Conservation Easements. Complete if the organization answers	wered 'Yes' to Form 990 F	Part IV line 7	
1	Purpose(s) of conservation easements held by			
•	Preservation of land for public use (e.g., r			ically important land area
	Protection of natural habitat	_	Preservation of a certifie	<del>-</del>
	Preservation of open space	L	] , , , , , , , , , , , , , , , , , , ,	
2	Complete lines 2a through 2d if the organization hast day of the tax year.	neld a qualified conservation contril	oution in the form of a cons	ervation easement on the
	rast day of the tax year.			Held at the End of the Tax Year
	a Total number of conservation easements		2a	
	<b>b</b> Total acreage restricted by conservation easer			
	c Number of conservation easements on a certif			
	d Number of conservation easements included in	c) acquired after 8/17/06, and	not on a historic	
	structure listed in the National Register		2d	-
3	Number of conservation easements modified, tran tax year ►	sferred, released, extinguished, or	terminated by the organiza	tion during the
4	Number of states where property subject to conse	rvation easement is located >		
5	Does the organization have a written policy reand enforcement of the conservation easemer	garding the periodic monitoring,		
6	Staff and volunteer hours devoted to monitoring, i			
7	Amount of expenses incurred in monitoring, inspe	cting, and enforcing conservation e	easements during the year	
. 8	Does each conservation easement reported or and section 170(h)(4)(B)(ii)?	line 2(d) above satisfy the requ	irements of section 170(h	)(4)(B)(i) Yes No
9	In Part XIII, describe how the organization reports include, if applicable, the text of the footnote to conservation easements.	conservation easements in its revo the organization's financial sta	enue and expense statemer Itements that describes th	nt, and balance sheet, and ne organization's accounting for
Pа	rt III Organizations Maintaining Colle	ctions of Art, Historical Tr	easures, or Other S	milar Assets.
	Complete if the organization answ	vered 'Yes' to Form 990, F	Part IV, line 8.	
1	a If the organization elected, as permitted under art, historical treasures, or other similar assets he in Part XIII, the text of the footnote to its finan	ld for public exhibition, education.	or research in furtherance of	ent and balance sheet works of of public service, provide,
	b If the organization elected, as permitted under historical treasures, or other similar assets held for following amounts relating to these items:	r public exhibition, education, or re	esearch in furtherance of pu	blic service, provide the
	(i) Revenues included in Form 990, Part VIII,			
	(ii) Assets included in Form 990, Part X			
2	If the organization received or held works of art, h amounts required to be reported under SFAS	istorical treasures, or other similar I 16 (ASC 958) relating to these	assets for financial gain, pritems:	rovide the following
	a Revenues included in Form 990, Part VIII, line	1		▶\$
	h Assets included in Form 990 Part X			►Ś

Part III Organizations mainta	ming cone	CHOIIS OF A	it, instorn	cai freasures, o	Other Jillian As.	3013 (0	OHILITO	100)
3 Using the organization's acquisition items (check all that apply):	n, accession, a	nd other record	s, check any	of the following that a	re a significant use of its	collectio	'n	
a Public exhibition		d	Loan or e	exchange programs				
<b>b</b> Scholarly research		е	Other					
c Preservation for future gener	rations	'						
4 Provide a description of the organiz Part XIII.	zation's collecti	ons and explain	n how they fu	rther the organization	's exempt purpose in	(a)		
5 During the year, did the organiza to be sold to raise funds rather the	han to be mai	ntained as par	rt of the orga	anization's collection	. <del>?</del>	Yes	<u> </u>	No
Part IV Escrow and Custodia line 9, or reported an	I Arrangen amount on	nents. Comp Form 990,	olete if the Part X, lin	organization an e 21.	swered 'Yes' to Fo	rm 990	), Parl	t IV,
1 a Is the organization an agent, trus	stee, custodia	n, or other inte	ermediary fo	r contributions or otl	ner assets not included		Г	
on Form 990, Part X?b If 'Yes,' explain the arrangement						Yes	L	No
						Amoun	t	
<b>c</b> Beginning balance			, . ,		1c			
<b>d</b> Additions during the year	. ,				1d			
e Distributions during the year					1e			
f Ending balance					the same of the sa			
2 a Did the organization include an a	amount on Fo	rm 990, Part X	., line 21?			Yes		No
<b>b</b> If 'Yes,' explain the arrangement	in Part XIII. (	Check here if t	he explantio	n has been provided	d in Part XIII		····· [	]
Part V   Endowment Funds. C	omplete if							
	(a) Current	year (I	b) Prior year	(c) Two years bac	k (d) Three years back	(e)	Four year	s back
1 a Beginning of year balance								
<b>b</b> Contributions	***************************************							
c Net investment earnings, gains, and losses								
<b>d</b> Grants or scholarships								
e Other expenditures for facilities and programs								
f Administrative expenses								
<b>g</b> End of year balance								
2 Provide the estimated percentage	e of the curre	nt year end ba	lance (line 1	g, column (a)) held	as:			
a Board designated or quasi-endowm	ent >	ş	ő					
<b>b</b> Permanent endowment	8							
c Temporarily restricted endowmer	nt 🟲	%						
The percentages in lines 2a, 2b,	and 2c should	d equal 100%.						
3 a Are there endowment funds not in ti	ho noccoccion	of the organiza	tion that are	hald and administered	t for the			
organization by:	ne hossession	or the organiza	nion mai are	rieid arid administeret	I for the		Yes	No
(i) unrelated organizations						. 3a(i)	,	
(ii) related organizations	<i></i>					3a(ii)	***************************************	
b If 'Yes' to 3a(ii), are the related of	organizations	listed as requi	red on Sche	dule R?		. 3b		
4 Describe in Part XIII the intended						L		J
Part VI Land, Buildings, and								**************************************
Complete if the organi			to Form 9	90, Part IV, line	11a. See Form 99	0, Part	X, lin	ne 10.
Description of property		(a) Cost or oth (investme	er basis ent)	(b) Cost or other basis (other)	<b>(c)</b> Accumulated depreciation	(d) Book value		
<b>1 a</b> Land								
<b>b</b> Buildings								
c Leasehold improvements								
<b>d</b> Equipment				19,510.	15,149.		4	,361.
e Other				1,859.	1,859.			0.
Total. Add lines 1a through 1e. (Column	ın (d) must eq	ual Form 990,	Part X, colu				4	,361.
BAA	· · · · · · · · · · · · · · · · · · ·					lule <b>D</b> (Fo		

TEEA3302L 10/02/13

Part VII Investments – Other Securities.	IV14- E 000	N/A	Dort V line 10
Complete if the organization answered			
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-ye	ar market value
(1) Financial derivatives			·
(2) Closely-held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H) ·			
(1)			
Total. (Column (b) must equal Form 990, Part X, column (B) line 12.) ▶			
Part VIII Investments - Program Related.	Wast to Form 000	N/A	Dort V line 12
Complete if the organization answered  (a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-	
	(b) DOOK Value	(c) Wethou of Valuation. Cost of end-of-	-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)	~~~~		
(7)			
(8)			
(9)			
(10)			
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets.			
Complete if the organization answered	'Yes' to Form 990	). Part IV. line 11d. See Form 990.	Part X, line 15.
	cription		(b) Book value
(1) BENEFICIAL INTEREST IN DONOR RESTR	CICTED		86,823.
(2) DEPOSIT			7,140.
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(10)	***************************************		
Total. (Column (b) must equal Form 990, Part X, column (B	2) line 15 )	. >	02.062
Part X Other Liabilities.	i), iiiie 15.)		93,963.
Complete if the organization answered 'Yes' to Fo	rm 990 Part IV line 1	le or 11f See Form 990 Part X line 25	
(a) Description of liability	(b) Book value		
(1) Federal income taxes			
(2) DEFERRED RENT ABATEMENT	10,78	39.	
(3)			
(4)			
(5)			
(6)			
(8)			
(9)			
(10)			
(11)	► 10,78		
Total. (Column (b) must equal Form 990, Part X, column (B) line 25.)	- 1 7 7 C	11)	

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

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Re	eturn.	
Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.	<del></del>	
1 Total revenue, gains, and other support per audited financial statements	1	927,198.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a Net unrealized gains on investments	_	
b Donated services and use of facilities	1	
c Recoveries of prior year grants	-	
d Other (Describe in Part XIII.)	1	
e Add lines 2a through 2d	2 e	927,198.
Subtract line 2e from line 1	3	921,190.
a Investment expenses not included on Form 990, Part VIII, line 7b		
b Other (Describe in Part XIII.) 4b	-	
c Add lines 4a and 4b.	4 c	
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.).	5	927,198.
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per		321,130.
Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.		
1 Total expenses and losses per audited financial statements	1	897,565.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a Donated services and use of facilities		
b Prior year adjustments		
c Other losses		
d Other (Describe in Part XIII.)		
e Add lines 2a through 2d	2 e	
3 Subtract line 2e from line 1	3	897,565.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a Investment expenses not included on Form 990, Part VIII, line 7b		
b Other (Describe in Part XIII.)		
c Add lines 4a and 4b	4 c	897,565.
Part XIII Supplemental Information.	T-2-T-	091,303.
Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Par line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any	t V, , additional	information.
PART X - FIN 48 FOOTNOTE		
AS OF SEPTEMBER 30, 2014 PEER HAS NO UNCERTAIN TAX POSITIONS THAT QUA	ALIFY FO	OR EITHER
RECOGNITION OR DISCLOSURE IN THE FINANCIAL STATEMENTS. THE TAX YEARS	S_SUBJE	CT_TO
EXAMINATION BY THE TAXING AUTHORITIES ARE THE YEARS ENDED SEPTEMBER	30, 201	1 THROUGH
2013		
	e.	
	Cobodula D	(Farm 000) 2012

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

Department of the Treasury Internal Revenue Service

#### Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047 2013

Open to Public Inspection

Employer identification number

Name of the organization PUBLIC EMPLOYEES FOR ENVIRONMENTAL 93-1102740 RESPONSIBILITY, INC FORM 990, PART III, LINE 1 - ORGANIZATION MISSION TO EDUCATE THE PUBLIC AND EMPLOYEES OF GOVERNMENT RESOURCE MANAGEMENT AND ENVIRONMENTAL PROTECTION AGENCIES NATIONWIDE ABOUT ENVIRONMENTAL ETHICS; TO ASSIST THOSE WHO SPEAK OUT ON BEHALF OF ENVIRONMENTAL ETHICS; AND TO PROTECT THE INTEGRITY OF INDIVIDUAL EMPLOYEES AND SCIENTISTS WITHIN THE GOVERNMENT WHO DISSENT FOR ETHICAL REASONS. FORM 990, PART III, LINE 4D - OTHER PROGRAM SERVICES DESCRIPTION MEMBERSHIP AND OUTREACH: HELPS PEER EMPLOYEE MEMBERS EXPOSE AND REEDY ENVIRONMENTAL PROBLEMS WITHIN THEIR PUBLIC AGENCIES. PEER'S SCIENTIST PROTECTION/EDUCATION PROGRAM PROVIDES INFORMATION AND RESOURCES TO SCIENTISTS WORKING IN PUBLIC AGENCIES. THESE EMBATTLED EMPLOYEES AND THEIR FINDINGS ARE FREQUENTLY PUT UNDER PRESSURE OR ATTACK WHEN THE CONTENT OF THEIR WORK MAY HAVE ECONOMIC OR POLITICAL SIGNIFICANCE. IN ADDITION TO PROVIDING DIRECT GUIDANCE TO PUBLIC AGENCY AND UNIVERSITY SCIENTISTS WHO CONTACT PEER LOOKING FOR HELP, WE HAVE CREATED A WEB-CENTER TO CONNECT SCIENTISTS TO INFORMATION ABOUT LEGAL ISSUES, SCIENTISTS' RIGHTS AND OPTIONS, LEGAL RESOURCES, AND OTHER INFORMATION. FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS THE FORM 990 WAS PREPARED BY THE OUTSIDE ACCOUNTANTS AND REVIEWED BY THE OFFICERS OF PEER. THE ENTIRE BOARD RECEIVED A COPY OF THE 990 PRIOR TO FILING THE RETURN. FORM 990, PART VI, LINE 12C - EXPLANATION OF MONITORING AND ENFORCEMENT OF CONFLICTS A BOARD MEMBER OR OFFICER WHO AT ANY TIME BELIEVES THAT HE OR SHE HAS, OR MAY HAVE, A CONFLICT OF INTEREST IMMEDIATELY DISCLOSES THE EXISTENCE AND NATURE OF SUCH CONFLICT TO THE BOARD OF DIRECTORS AND TO THE MEMBERS OF CONSIDERING A PROPOSED TRANSACTION OR ISSUE.

Employer identification number 93-1102740
FORCEMENT OF CONFLICTS (CONTINUED)
NTEREST, THE BOARD MEMBER
IS DISCUSSED AND VOTED UPON.
REST EXISTS.
TS, OR MAY EXIST, THE
IN ANY FASHION, TO THE
OF ANY PROCEEDINGS AT WHICH
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CLOSURE, ABSTENTION AND
PROCESS - CEO, TOP MANAGEMENT
CREASES, AND BONUSES (IF
THE DETERMINATION PROCESS.
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## **SCHEDULE O - SUPPLEMENTAL INFORMATION**

PAGE 1

PUBLIC EMPLOYEES FOR ENVIRONMENTAL RESPONSIBILITY, INC.

93-1102740

#### FORM 990, PART IX, LINE 11G OTHER FEES FOR SERVICES

	(A)	(B) PROGRAM	(C) MANAGEMENT	(D) FUND-
	TOTAL	SERVICES	& GENERAL	RAISING
COMPUTER CONTRACTOR FIELD CONTRACTS OTHER PAYROLL SERVICE T	26,442. 140,172. 79,316. 3,357. OTAL \$ 249,287.	24,650. 130,670. 73,940. 3,129. \$ 232,389.	1,720. 9,118. 5,159. 218. \$ 16,215.	72. 384. 217. 10. \$ 683.