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Form 990

Return of Organization Exempt From Income Tax

20**13**

Open to Public Inspection

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.

Department of the Treasury Internal Revenue Service Information about Form 990 and its instructions is at www.irs.gov/form990.

For the 2013 calendar year, or tax year beginning 2013, and ending C Name of organization International Society for Ecology and Culture D Employer identification number Check if applicable Address change Doing Business As ISEC 94-3128274 \Box Number and street (or P O. box if mail is not delivered to street address) Room/suite E Telephone number Name chance П Initial return 2017 Mission Street 2nd floor 415-670-9054 City or town, state or province, country, and ZiP or foreign postal code Terminated Amended return San Francisco, CA 94110 G Gross receipts \$ 312,094 F Name and address of principal officer Application pending Steven Gorelick H(a) is this a group return for subordinates? Thes Mo PO Box 36, East Hardwick, VT 05836 H(b) Are all subordinates included? Tyes No 501(c) (501(c)(3)) ◀ (insert no.) ☐ 4947(a)(1) or If "No," attach a list. (see instructions) Tax-exempt status www.localfutures.org Website: ▶ H(c) Group exemption number ▶ L Year of formation M State of legal domicile: Briefly describe the organization's mission or most significant activities: ISEC's mission is to protect and renew ecological and social well-being by strengthening local economies and communities worldwide. Our work involves "education for Governance activism" -- Illuminating the common root causes of our social, ecological, and economic crises, and systemic solutions. 2 Check this box ▶☐ if the organization discontinued its operations or disposed of more than 25% of its net assets. 3 Number of voting members of the governing body (Part VI, line 1a) Activities & 4 Number of independent voting members of the governing body (Part VI, line 1b) Total number of individuals employed in calendar year 2013 (Part V, line 2a) 5 10 Total number of volunteers (estimate if necessary) 6 12 Total unrelated business revenue from Part VIII, column (C), line 12 7a 7a Net unrelated business taxable income from Form 990-T, line 34 7b **Prior Year Current Year** Contributions and grants (Part VIII, line 1h) . 161,548 160,790 Q Program service revenue (Part VIII, line 2g) 172,297 149,060 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . 10 6,776 2,244 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) . . . Total revenue -- add lines 8 through 11 (must equal Part VIII, column (A), line 12) 12 340,721 312,094 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 8,517 10,530 14 Benefits paid to or for members (Part IX, column (A), line 4) Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 15 186,739 175,445 16a Professional fundraising fees (Part IX, column (A), line 11e) Total fundraising expenses (Part IX, column (D), line 25) ▶ 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 101,849 95.116 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 18 297,105 281,141 Revenue less expenses. Subtract line 18 from line 1 19 43,616 30,953 **Beginning of Current Year** End of Year 20 Total assets (Part X, line 16) 743,838 749,038 ·Ō Total liabilities (Part X, line 26) 21 Total liabilities (Part X, line 26) . MAY 1 9 2014 . O Net assets or fund balances! Subtract line 21 from line 20 1 95,235 82,963 22 648,603 666,075 Part II Signature Block his return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is than officer) is based on all information of which preparer has any knowledge. Under penalties of penury_hdeclar& that I have true, correct, and comple Sign MANAGING/PROGRAMS TEVEN GOREL Here IREC Type or print name and title Print/Type preparer's name Preparer's signature Paid Check I if self-employed Preparer Firm's name Firm's EIN ▶ **Use Only**

Canned Jun 1 3 2014

Firm's address ▶

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

For Paperwork Reduction Act Notice, see the separate instructions.

Phone no.

Form 99	0 (2013)	age 2
Part	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:	
	ISEC's mission is to protect and renew ecological and social well-being by strengthening local economics and communities	
	worldwide. Our focus is on education - informing people of the common root causes of the many ecological, social and	
	economic crises we face, and promoting systemic solutions.	
2	Did the organization undertake any significant program services during the year which were not listed on the	_
	prior Form 990 or 990-EZ?	No
_	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	١.
		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 measure expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to of the total expenses, and revenue, if any, for each program service reported.	
4a	(Code:) (Expenses \$ 91,657 including grants of \$) (Revenue \$ 48,376)	
	Economic of Happiness conferences. In 2013 we ran our second Economics of Happiness conference, held in Byron Bay,	
	Australia, and began planning a third, to be held in Bangalore, India. Among the speakers at the Byron Bay conference were	
	leading localization thinkers from Oceania, Asia, North and South America, Africa, and Europe. More than 400 people attended	
	the three-day conference, the majority from Australia. The conference included plenary talks, workshops, documentary films,	
	a 'planet cafe', music, and experiential excercises.	

4b	(Code:) (Expenses \$ 84,728 including grants of \$ 10,530) (Revenue \$ 58,134)	
	Educational Outreach. Through books, videos, lectures, reports, conferences, classes, interviews and web-based materials, we	
	inform the public of the many costs of globalization, and the systemic benefits of economic localization. Community screenings	
	of our documentary film, The Economics of Happiness, provided opportunities for ISEC staff to speak in person or via Skype to	
	audiences across North America, Europe, Australia, and New Zealand. ISEC Director Helena Norberg-Hodge also had extensive	
	speaking engagements in China, South Korea, Japan, Austria, Italy, Germany, Austrialia, the UK, and USA. We also continued	
	with our Roots of Change study group program, which gives people the opportunity to join with others in their community to	
	follow a guided curriculum that outlines the root causes of our many crises, and systemic solutions.	

4c	(Code:) (Expenses \$ 24,035 including grants of \$) (Revenue \$ 61,222)	
	The Economics of Happiness film. This documentary film continued to provide an important vehicle for disseminating our global-	
	to-local message. The film was translated into a number of additional languages, including Russian, Portuguese, Slovenian, and	
	Hindi, and a public screening was held in St. Petersburg, Russia. Using skype, ISEC staff were able to respond to questions	
	following screenings in several locales worldwide, which helps the film function as a 'mini-conference' that brings the voices of	
	respected thinkers and activists to small towns, rural areas, and cities alike.	

4d	Other program services (Describe in Schedule O.)	
	(Expenses \$ 21,375 including grants of \$) (Revenue \$ 600)	
4e	Total program service expenses ▶ 221,795	

Part	IV Checklist of Required Schedules			Page 3
	to the assessment on deposit and in position 501/a\/2\ or 4047/a\/1\ /ather than a private foundation\2 # "Voc."	_	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	1	
2 3	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	2	✓	
•	candidates for public office? If "Yes," complete Schedule C, Part I	3		1
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		1
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		1
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		1
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		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		1
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		1
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	1	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		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	11b		1
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	11c		1
đ	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		1
e f	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 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.	11e		1
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		1
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		1
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		1
_	Did the organization maintain an office, employees, or agents outside of the United States?	14a	✓_	<u> </u>
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	1	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		1
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16		1
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		1
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II.	18		1
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		1
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		1
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .	20b		

Part	Checklist of Required Schedules (continued)			
04	Did the second state and the AF 000 of seconds as other assistance to any descentic amonimation as	_	Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		1
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		1
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		√
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		1
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b 24c		
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	24d 25a		1
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		1
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II	26		1
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		1
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b	✓	1
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		1
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	29 30		1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		1
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		1
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		√
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		1
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		1
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		1
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		1
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	27		1
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	37 38	√	
		Econ	. 000	(2013)

Part				_
	Check if Schedule O contains a response or note to any line in this Part V	<u></u>		
4			Yes	No
1a	The state of the s			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and		_	
•	reportable gaming (gambling) winnings to prize winners?	1c	✓	
2 a	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			
Þ	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	✓	
•	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		✓
ь	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	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)?	4a	✓	
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.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		✓
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		\
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		✓
þ	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
_	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	_		
_		7a		√
b C	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
C	required to file Form 8282?	_		,
		7c		✓
d e	If "Yes," indicate the number of Forms 8282 filed during the year			,
f	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		√
-	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7f		✓
g h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7g		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting	7h		
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring	ı		
	organization, have excess business holdings at any time during the year?	ا ہا		
9	Sponsoring organizations maintaining donor advised funds.	8		
a	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:	30		
а	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		-	
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources		ł	
	against amounts due or received from them.)	ļ	- 1	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	J	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	, [
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.		\dashv	
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	.	ł	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b		
			990	(2013)

Part '	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S	See ins	struct	ions.
<u> </u>	Check if Schedule O contains a response or note to any line in this Part VI	• •	•	. ⊻
Secu	on A. Governing Body and Management		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
ь 2	Enter the number of voting members included in line 1a, above, who are independent . Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		1
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? .	3		1
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		1
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		1
6	Did the organization have members or stockholders?	6		1
7a	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?	7a		1
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	✓_	
b	Each committee with authority to act on behalf of the governing body?	8b	1	L
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		1
Section	on B. Policies (This Section B requests information about policies not required by the Internal Rever	ue C	ode.))
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		1
b	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?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	\	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		✓
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c		
13	Did the organization have a written whistleblower policy?	13		1
14 15	Did the organization have a written document retention and destruction policy?	14		1
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			ļ
а	The organization's CEO, Executive Director, or top management official	15a	1	L
b	Other officers or key employees of the organization	15b		1
16a	, , , , , , , , , , , , , , , , , , , ,			
	with a taxable entity during the year?	16a		1
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Section	on C. Disclosure			
17 18	List the states with which a copy of this Form 990 is required to be filed California Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section available for public inspection. Indicate how you made these available. Check all that apply.	n 501(c)(3)s	only)
19	☐ Own website ☑ Another's website ☑ Upon request ☐ Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of int financial statements available to the public during the tax year.			y, and
20	State the name, physical address, and telephone number of the person who possesses the books and records organization: ► Steven Gorelick, 327 Cedar Street, East Hardwick, VT 05836, 802-472-3505	of the	•	

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Page	•

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

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

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

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

Li Check this box if neither the organization no	r any relate	d orga	aniz	atio	n c	ompe	nsa	ited any curren	it officer, director	r, or trustee.
				((C)					
(A)	(B)			Position				(D)	(E)	(F)
Name and Title	Average		do not check more ti					Reportable	Reportable	Estimated
	hours per	box, unless person is both an officer and a director/trustee)						compensation	compensation from	
	week (list any hours for	82	5	Q	×	욕포	Ī	from	related	other
	related	충	쭕	Officer	🐇	<u>₫</u>	Former	the organization	organizations (W-2/1099-MISC)	compensation from the
	organizations	ố루	큥 :	*	Key employee	¥ 5	18	(W-2/1099-MISC)	(,	organization
	below dotted	3 2	₹		Ş	l "š				and related
	line)	Individual trustee or director	Institutional truste	•	1 8	3				organizations
		•	100			Highest compensated employee		:		
(1) Helena Norberg-Hodge	45			l		,	1		_	
Executive Director	1	✓	_	<u> </u>	Ļ.,	/	ļ	50,000	-0-	-0
(2) Paula Pace	2	ا ر								
Treasurer		✓		✓	L.	<u> </u>	<u> </u>	-0-	-0-	-0
(3) Barbara Mahony Kent	22			١.						
Secretary	ļ	/		1	_	<u> </u>	L.	-0-	-0-	-0
(4) Ann Roberts		i '								
Director		/		L.,	L.,	L	<u> </u>	-0-	-0-	-0
(5) Steven Gorelick				ļ .						
Managing/Programs Director	40		L	L	✓		L	40,000	-0-	-0
_(6)										
7					-					
(8)			-	 			-			
(9)										
(10)					-					
(11)	 			\vdash	-		├			
				_						
(12)									;	
(13)						 	†			
(14)	<u> </u>		-	-	-		├			
<u> </u>	T	'	Ì	1	Ì			İ		

Part	Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated I (C) (A) (B) (I) (C) Position (do not check more than one box, unless person is both an Reportable							mployees (c (E) Reportable	ole n from		(F) Estimated			
		hours per week (list any hours for related organizations below dotted line)	office or directo	er eane			Highest compensated employee		compensation from the organization (W-2/1099-MISC)	compensation related organization (W-2/1099-M	rs	m amount of other compensation		•
(15)												•		
(16)							•							
(17)														
(18)								-						
(19)					-				<u> </u>		\dashv			
(20)					_			-			\dashv			
(21)								-			\dashv			
(22)					_			_						.
(23)								-			+			
(24)						_					+			
(25)					_			-			\perp			
1b	Sub-total		<u> </u>	<u> </u>	L.				00.000	·	_			
c	Total from continuation sheets to Part	VII, Sectio						•	90,000		-0-			-0-
d 2	Total (add lines 1b and 1c)	not limited	d to th					▶ 9) w	ho received m	ore than \$10	<u>-0- </u> 10,000	of		-0-
	reportable compensation from the organ		*						<u> </u>				Yes	No
3	Did the organization list any former of employee on line 1a? If "Yes," complete:	ficer, direc S <i>chedule J</i>	tor, c	r tr uch	uste <i>indi</i>	əə, ividi	key e ual	emp	oloyee, or high	est comper	nsated 	3		√
4	For any individual listed on line 1a, is the organization and related organizations	sum of re	portal	ble (con	npei	nsatio	n a	nd other comp	ensation fro	m the			
5	individual											4		✓
	for services rendered to the organization											5		1
1	on B. Independent Contractors Complete this table for your five highest compensation from the organization. Repyear.													ax
	(A) Name and business add	ress							(B) Description of s	ervices	((C) Compens		
	·····								······					
								-						···
2	2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶								ove) who		·····			

Par	t VIII						
		Check if Schedule O contains a res	ponse or note to	any line in this (A) Total revenue	Part VIII (B) Related or exempt	(C) Unrelated business	(D) Revenue
					function revenue	revenue	excluded from tax under sections 512-514
Contributions, Giffs, Grants and Other Similar Amounts	1a	Federated campaigns 1a					
	Ь	Membership dues 1b					
	С	Fundraising events 1c					
를 를	d	Related organizations 1d					
S, E	0	Government grants (contributions) 1e					
e f	f	All other contributions, gifts, grants,					
퉏통		and similar amounts not included above 11	160,790				
혈	9	Noncash contributions included in lines 1a-1f \$					
	h	Total. Add lines 1a-1f		160,790			ļ
Ž			Business Code				
Jeve	2a	lecture/writing fees and royalti	611710	49,154			
8	b	sale of publications, DVDs film screening, streaming fees	611710	31,616	·		
Ž	d	conference, workshop fees	611710 611710	18,823			
ري ح	e	administrative support fees	561000	49,296 171			
Program Service Revenue	f	All other program service revenue .	361000	149,060			
£	9	Total. Add lines 2a-2f		309,850		L	<u> </u>
	3	Investment income (including divid		003,000			T .
		and other similar amounts)	🕨	2,244			
	4	Income from investment of tax-exempt be	ond proceeds ▶				
	5	Royalties	▶				
		(i) Real	(ii) Personal				
	6a	Gross rents]			
	b	Less: rental expenses		i		}	
	С	Rental income or (loss)	l				
	_d	Net rental income or (loss)	<u>, , , , , , , , , , , , , , , , , , , </u>				
	7a	Gross amount from sales of (i) Securities	(ii) Other				
		assets other than inventory					
	b	Less: cost or other basis and sales expenses .					
		Gain or (loss)					
	d		▶				·
	"	110t gain or (1033)					
9	8a	Gross income from fundraising					
Revenue		events (not including \$					
Æ		of contributions reported on line 1c).					
9		See Part IV, line 18 a					
Other	ь	Less: direct expenses b					l
		Net income or (loss) from fundraising	events . 🕨				L
	9a	Gross income from gaming activities.					
		See Part IV, line 19 a		İ			Ì
	b	Less: direct expenses b		}			<u> </u>
	0	Net income or (loss) from gaming acti	ivities				·
	iva	Gross sales of inventory, less returns and allowances a		-			
	١.						
	b	Less: cost of goods sold b Net income or (loss) from sales of inventors.	L	•			-
	-	Miscellaneous Revenue	Business Code				
	11a						1
	b						
	c						
	d	All other revenue		· · · · · · · · · · · · · · · · · · ·			
	е	Total. Add lines 11a-11d			· · · · · · · · · · · · · · · · · · ·		
	12	Total revenue. See instructions	🕨	312,094			

Part IX Statement of Functional Expenses

00000	on 501(c)(3) and 501(c)(4) organizations must con Check if Schedule O contains a respon				
	t include amounts reported on lines 6b, 7b, , and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
•	organizations in the United States. See Part IV, line 21 Grants and other assistance to individuals in	10,530	10,530		
2	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	90,000	64,709	15,019	10,272
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	72,015	51,301	13,221	7,493
8	Pension plan accruals and contributions (include				
_	section 401(k) and 403(b) employer contributions)		-		
9 10	Other employee benefits	1,800	810	720	270
11	Fees for services (non-employees):	11,630	8,102	2,200	1,328
'' a	Management	}	ŀ		
b	Legal		• • • • • • • • • • • • • • • • • • • •		
C	Accounting				·
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				-
g	Other. (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule O.)	21,141	21,141	0	0
12	Advertising and promotion	914	914	0	<u>C</u>
13 14	Office expenses	7,933	6,073	1,262	598
15	Royalties	4,458	2,583	1,550	325
16	Occupancy	13,863	10,639	2,055	1,169
17	Travel	30.529	29,804	475	250
18	Payments of travel or entertainment expenses	00,020			200
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings .				
20	Interest				
21	Payments to affiliates				·
22	Depreciation, depletion, and amortization .				
23	Insurance	570	445	75	50
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)				
а	bank fees	1,089	939	150	
b	food, lodging	6,159	6,159	0	0
C	printing	5,152	4,838	113	201
d	miscellaneous	3,359	2,808	400	150
9	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	281,141	221,795	37,240	22,106
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)				

Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X (A) **(B)** Beginning of year End of year Cash-non-interest-bearing 1 13,114 20,839 2 2 Savings and temporary cash investments 696,978 691,579 3 3 Pledges and grants receivable, net 4 4 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary Assets 7 8 7.988 11,620 9 Prepaid expenses and deferred charges . . . 9 10a Land, buildings, and equipment; cost or other basis. Complete Part VI of Schedule D 10a 10b Less: accumulated depreciation 10c 11 Investments—publicly traded securities 11 12 Investments-other securities, See Part IV, line 11. 25.759 12 25,000 13 Investments—program-related. See Part IV, line 11... 13 14 14 15 15 Other assets. See Part IV, line 11 Total assets. Add lines 1 through 15 (must equal line 34) . . . 16 16 743.838 749,038 17 Accounts payable and accrued expenses 17 14,025 27,963 18 18 19 81,211 19 55,000 20 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D . 21 Loans and other payables to current and former officers, directors, 22 trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L Secured mortgages and notes payable to unrelated third parties . . . 23 23 Unsecured notes and loans payable to unrelated third parties . . . 24 24 Other liabilities (including federal income tax, payables to related third 25 parties, and other liabilities not included on lines 17-24). Complete Part X 25 Total liabilities. Add lines 17 through 25 26 95,235 82,963 Organizations that follow SFAS 117 (ASC 958), check here ▶ Net Assets or Fund Balances complete lines 27 through 29, and lines 33 and 34. 27 27 28 28 29 Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☑ and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 120,323 30 137.795 31 Paid-in or capital surplus, or land, building, or equipment fund . . . 515,160 31 515,160 32 Retained earnings, endowment, accumulated income, or other funds. 32 13,120 13,120 33 33 648,603 666,075 Total liabilities and net assets/fund balances . . . 743,838 749,038

-orm 9	90 (2013)			PE	ige 12		
Par	XI Reconciliation of Net Assets						
	Check if Schedule O contains a response or note to any line in this Part XI				7		
1	Total revenue (must equal Part VIII, column (A), line 12)	1		3	12,094		
2	Total expenses (must equal Part IX, column (A), line 25)						
3	Revenue less expenses. Subtract line 2 from line 1	3		;	30,953		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		64	18,603		
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		(1	3,481)		
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line						
	33, column (B))	10		66	6,075		
Part	XII Financial Statements and Reporting			-			
	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 ☑ Accrual ☐ Other						
	If the organization changed its method of accounting from a prior year or checked "Other," ex	plain in					
	Schedule O.						
2a	The same and an armonia and armonia and armonia and armonia and armonia and armonia and armonia and armonia and armonia and armonia and armonia and armonia and armonia armoni		2a		✓_		
	If "Yes," check a box below to indicate whether the financial statements for the year were com	oiled or					
	reviewed on a separate basis, consolidated basis, or both:						
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis						
Ь	The same of the sa		2b		1		
	If "Yes," check a box below to indicate whether the financial statements for the year were audit	ed 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 o						
	of the audit, review, or compilation of its financial statements and selection of an independent account	ntant?	2c				
	If the organization changed either its oversight process or selection process during the tax year, ex	plain in					
	Schedule O.						
3a		forth in					
	the Single Audit Act and OMB Circular A-133?		3a		1		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not under						
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a	udits.	3b				
			For	n 99 0	(2013)		

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

20**13**

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

Open to Public Inspection

Name	of the organization						[1	Employer to	lentificatio	n number		
Interr	national Society for	Ecology and Cul	ture						94-31	28274		
Par	t i Reason t	or Public Cha	rity Status (All orga	ınization	s must c	omplete	e this pa	rt.) See i	nstruction	ons.		
The c	organization is not	a private founda	ation because it is: (Fo	or lines 1	through 1	1, check	only one	box.)				
1	A church, con	vention of churc	hes, or association of	churche	s describe	ed in se d	tion 170	(b)(1)(A)(ī).			
2	A school desc	ribed in section	170(b)(1)(A)(ii). (Attac	ch Sched	ule E.)							
3	A hospital or a	a cooperative ho	spital service organiza	ation des	cribed in	section	170(b)(1)	(A)(iii).				
4		_	on operated in conjun	ction with	n a hospit	al descri	bed in se	ction 170)(b)(1)(A)	(iii). Ente	er the	
		ne, city, and stat										
5		on operated for o)(1)(A)(iv). (Com	the benefit of a colle- plete Part II.)	ge or uni	iversity o	wned or	operated	by a go	vernmen	tal unit o	lescrib	ed in
6 7	An organization	on that normally	nment or government receives a substantia (A)(vi). (Complete Pa	al part of					it or from	n the ge	neral p	oublic
8	☐ A community	trust described i	n section 170(b)(1)(A)(vi). (Co	nplete Pa	urt II.)						
9	_		receives: (1) more that		•	•	om contr	ibutions	member	ship fees	and:	aross
	receipts from support from	activities related gross investme	d to its exempt funct ent income and unre lifter June 30, 1975. So	tions—su lated bu	bject to d siness ta	certain e xable in	xceptions come (les	s, and (2) ss section	no mor	e than 3	31/3%	of its
10	☐ An organizatio	on organized and	operated exclusively	to test fo	or public s	safety. S	ee sectio	n 509(a)(4).			
11		_	nd operated exclusive		-	-			-	or to ca	arry or	ıt the
	purposes of o	one or more pub	olicly supported organ describes the type of	nizations	describe	d in sect	ion 509(a	a)(1) or se	ection 50	19(a)(2). S		
	a ☐ Type I							Type III–Non-functionally integrated			ted	
е		_ ,,	- · · · · · · · · · · · · · · · · · · ·		-	-		directly by one or more disqualified pers				
_								panizations described in section 509(
	or section 509	9(a)(2).		trial one of more publicly supported organizations described in section								
f	If the organiz	ation received a	a written determination	on from	the IRS t	that it is	а Туре	I, Type I	l, or Typ	oe III su	pportir	ng
	organization,	check this box .										
9	Since August	17, 2006, has t	he organization acce	pted any	gift or co	ontributio	on from a	ny of the)			
	following pers	ions?										
			ndirectly controls, ent					described	d in (ii) a	nd	Yes	No
	(iii) below,	the governing be	ody of the supported	organizat	tion?					11g(i)	
	(ii) A family m	ember of a perse	on described in (i) abo	ove?						11g(i)	
		•	a person described in							11g(ii)	l
<u>h</u>	Provide the fo	llowing informati	on about the support	ed organ	ization(s).							
(1)	Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	in col. (i) li	organization sted in your document?	the orga col. (i)	you notify nization in of your port?	in organization in col. support			onetary	
				Yes	No	Yes	No	Yes	No	1		
(A)	· · · · · · · · · · · · · · · · · · ·											
(B)				†			1			 		
(C)				 				-				 ,
(D)				 								
	<u> </u>		 		-		 			 		
(E)							ļ	ļ		-		
			i e									

Total

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.)

30 Cu	on A. Public Support						
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	193,081	128,703	155,250	161,548	160,790	799,372
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	193,081	128,703	155,250	161,548	160,790	799,372
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)						100.010
6	Public support. Subtract line 5 from line 4.						160,919 638,453
	on B. Total Support						030,433
	dar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7	Amounts from line 4	193,081	128,703	155,250	161,548	160,790	799,372
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	3,148	697	3,430	6,776	2,244	16,295
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	33,755	37,944	333,521	172,397	149,060	726,677
11	Total support. Add lines 7 through 10						1,542,344
12	Gross receipts from related activities, etc.					12	726,677
13	First five years. If the Form 990 is for the		i's first, secon	d, third, fourth	, or fifth tax ye	ear as a section	n 501(c)(3)
	organization, check this box and stop her		<u> </u>		· · · · ·		▶ □
Secti	on C. Computation of Public Suppor						
14	Public support percentage for 2013 (line 6		-	1, column (f))		14	41.395 %
15	Public support percentage from 2012 Sch					15	49.009 %
16a	331/s% support test—2013. If the organization						
_	box and stop here. The organization qual						
D	331/a% support test—2012. If the organic check this box and stop here. The organic	zation did no zation qualifie	s as a publicly	supported org	anization .	15 IS 33'/3%	
17a	10%-facts-and-circumstances test—20 10% or more, and if the organization mee Part IV how the organization meets the "fa	ets the "facts-a	and-circumsta	nces" test, che	ck this box an	d stop here. E	xplain in
	organization						``. ► □
b	10%-facts-and-circumstances test—20 15 is 10% or more, and if the organization members of the organization members of the organization members of the organization.	ion meets the eets the "facts	"facts-and-ci s-and-circumst	rcumstances" tances" test. Ti	test, check the	is box and sto	and line op here.
18	supported organization	d not check a l	box on line 13,	16a, 16b, 17a	, or 17b, chec	k this box and	. ► [] see ► □

SCHEDULE D (Form 990)

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
▶ Attach to Form 990. OMB No. 1545-0047 2013

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

International Society for Ecology and Culture 94-3128274 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Part I Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 1 Total number at end of year 2 Aggregate contributions to (during year) . 3 Aggregate grants from (during year) . . Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). ☐ Preservation of land for public use (e.g., recreation or education) ☐ Preservation of an historically important land area Preservation of a certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) . . . 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ Number of states where property subject to conservation easement is located ▶ 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶\$ 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B) In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" to Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenues included in Form 990, Part VIII, line 1 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenues included in Form 990, Part VIII, line 1 Assets included in Form 990, Part X

Part		anizations Maintaining						
3	_	organization's acquisition, tems (check all that apply):		ner records, chec	k any of the follo	wing that are a sig	nificant us	e of its
а	☐ Public e	exhibition		d 🗌 Loan	or exchange prog	rams		
b	☐ Scholar	ty research		e 🗌 Other	,			
C	☐ Preserve	ation for future generations	3					
4	Provide a d	lescription of the organiza	tion's collections a	nd explain how t	hey further the or	ganization's exem	pt purpose	in Part
5		year, did the organization e sold to raise funds rather						□ No
Part		row and Custodial Arra	•					
	990,	plete if the organization Part X, line 21.				•		ım
1a		nization an agent, trustee					:	□ No
b	If "Yes," ex	plain the arrangement in P	art XIII and comple	te the following ta	able:			
	,		, .			Am	ount	
C	Beginning to	palance			10	5		
d	Additions d	uring the year			10	1		
e	Distribution	s during the year			10	•		
f	Ending bala	ance			🚹	F		
2a	Did the orga	anization include an amou	nt on Form 990, Pa	rt X, line 21? .	.		Yes	☐ No
b	If "Yes," ex	plain the arrangement in P	art XIII. Check here	if the explanation	n has been provid	ed in Part XIII .		
Part	V End	owment Funds.						
	Con	plete if the organization		to Form 990, P				
			(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four yea	ırs back
1a	Beginning of	of year balance	13,120	13,120	13,120	13,120		13,120
b	Contribution	ns	-0-	•	-0-	φ		4
С		nent earnings, gains, and	-0	-0-	-0.	-0-		-0-
d	Grants or se	cholarships	-0-	-0-				-0-
e		nditures for facilities and		<u>_</u>				
			-0-	-0-	-0-	-0-		-0-
f	Administrat	ive expenses	-0-	-0-	-			-0-
g	End of year	•	13,120	13,120		 		13,120
2	•	estimated percentage of t						.0,.20
а		gnated or quasi-endowmer	~	-	,,			
b		endowment ►	%					
c		restricted endowment ▶	·· %					
		tages in lines 2a, 2b, and 2		0%.				
3a	-	ndowment funds not in the	-		at are held and ac	Iministered for the		
	organization		•	J			Ye	s No
	(i) unrelate	ed organizations					3a(i)	1
	(ii) related	organizations					3a(ii)	1
b		Ba(ii), are the related organi					3b	
4		Part XIII the intended uses						
Part		d, Buildings, and Equip						
	Com	plete if the organization	answered "Yes"	to Form 990, P	art IV, line 11a.	See Form 990, P	art X, line	10.
		Description of property	(a) Cost or oth	er basis (b) Cost o	or other basis (c)	Accumulated epreciation	(d) Book va	
1a	Land		. 1					
b								
c	•	mprovements		<u> </u>				
d								
e	• •							
Total.		through 1e. (Column (d) n	nust equal Form 99	0, Part X. column	(B), line 10(c).)		 	

				11b. See Form 990, Part X, line 1
	(a) Description of security or ca (including name of security)		(b) Book vatue	(c) Method of valuation: Cost or end-of-year market value
Financial	derivatives			
	neld equity interests			
Other				
	shares PAX Scientific, Inc.		25,000	ost
(B)				
(C)				
(D)				
E)				
(F)				
(G)				
(H)				
	b) must equal Form 990, Part X, col. (B) line 1.			
art VIII	Investments—Program Re		Form 000 Port IV line	11a Cas Farm 000 Dark V line 1
				11c. See Form 990, Part X, line 1
	(a) Description of investme	ent	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
)				· · · · · · · · · · · · · · · · · · ·
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			1	
tal. (Column (b) must equal Form 990, Part X, col. (B) line 1	3.) ▶		
	Other Assets.			
	Other Assets.	answered "Yes" to	Form 990, Part IV, line	11d. See Form 990, Part X, line 1
	Other Assets.		Form 990, Part IV, line	11d. See Form 990, Part X, line 1
art IX	Other Assets.	answered "Yes" to	Form 990, Part IV, line	
Part IX	Other Assets.	answered "Yes" to	Form 990, Part IV, line	
Part IX	Other Assets.	answered "Yes" to	Form 990, Part IV, line	
Part IX	Other Assets.	answered "Yes" to	Form 990, Part IV, line	
)))))	Other Assets.	answered "Yes" to	Form 990, Part IV, line	
Part IX	Other Assets.	answered "Yes" to	Form 990, Part IV, line	
art IX	Other Assets.	answered "Yes" to	Form 990, Part IV, line	
))))))))))	Other Assets.	answered "Yes" to	Form 990, Part IV, line	
Part IX)))))))))))))	Other Assets. Complete if the organization	answered "Yes" to		
Part IX)))))))))))))))))))	Other Assets. Complete if the organization	answered "Yes" to		(b) Book value
art IX)))))))) tal. (Column	Other Assets. Complete if the organization mn (b) must equal Form 990, Part Other Liabilities.	answered "Yes" to (a) Description		(b) Book value
art IX	Other Assets. Complete if the organization mn (b) must equal Form 990, Part Other Liabilities. Complete if the organization	answered "Yes" to (a) Description		(b) Book value
art IX	Other Assets. Complete if the organization mn (b) must equal Form 990, Part Other Liabilities.	answered "Yes" to (a) Description	Form 990, Part IV, line	(b) Book value
art IX	Other Assets. Complete if the organization mn (b) must equal Form 990, Part Other Liabilities. Complete if the organization line 25.	answered "Yes" to (a) Description (a) Description (b) X, col. (B) line 15.) answered "Yes" to (a)	Form 990, Part IV, line	(b) Book value
art IX	mn (b) must equal Form 990, Part Other Liabilities. Complete if the organization line 25. (a) Description of liability	answered "Yes" to (a) Description (a) Description (b) X, col. (B) line 15.) answered "Yes" to (a)	Form 990, Part IV, line	(b) Book value
art IX	mn (b) must equal Form 990, Part Other Liabilities. Complete if the organization line 25. (a) Description of liability	answered "Yes" to (a) Description (a) Description (b) X, col. (B) line 15.) answered "Yes" to (a)	Form 990, Part IV, line	(b) Book value
art IX	mn (b) must equal Form 990, Part Other Liabilities. Complete if the organization line 25. (a) Description of liability	answered "Yes" to (a) Description (a) Description (b) X, col. (B) line 15.) answered "Yes" to (a)	Form 990, Part IV, line	(b) Book value
art IX))))) tal. (Colu art X) Federal ir))	mn (b) must equal Form 990, Part Other Liabilities. Complete if the organization line 25. (a) Description of liability	answered "Yes" to (a) Description (a) Description (b) X, col. (B) line 15.) answered "Yes" to (a)	Form 990, Part IV, line	(b) Book value
art IX)))))) tal. (Column Part X) Federal in)))	mn (b) must equal Form 990, Part Other Liabilities. Complete if the organization line 25. (a) Description of liability	answered "Yes" to (a) Description (a) Description (b) X, col. (B) line 15.) answered "Yes" to (a)	Form 990, Part IV, line	(b) Book value
Part IX)))))) tal. (Columbia Columbia Col	mn (b) must equal Form 990, Part Other Liabilities. Complete if the organization line 25. (a) Description of liability	answered "Yes" to (a) Description (a) Description (b) X, col. (B) line 15.) answered "Yes" to (a)	Form 990, Part IV, line	(b) Book value
Part IX))))))) ptal. (Column Part X) Federal in))))))	mn (b) must equal Form 990, Part Other Liabilities. Complete if the organization line 25. (a) Description of liability	answered "Yes" to (a) Description (a) Description (b) X, col. (B) line 15.) answered "Yes" to (a)	Form 990, Part IV, line	(b) Book value
art IX	mn (b) must equal Form 990, Part Other Liabilities. Complete if the organization line 25. (a) Description of liability	answered "Yes" to (a) Description 2 X, col. (B) line 15.) answered "Yes" to (b) Book val	Form 990, Part IV, line	(b) Book value

Part	Reconciliation of Revenue per Audited Financial Statements With Revenue per Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.	oer Return.
1	Total revenue, gains, and other support per audited financial statements	. 1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	
a	Net unrealized gains on investments	
ь	Donated services and use of facilities	
c	Recoveries of prior year grants	
ď	Other (Describe in Part XIII.)	
_	Add lines 2a through 2d	
θ.		. 3
3	Subtract line 2e from line 1	· -3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	
	Investment expenses not included on Form 990, Part VIII, line 7b 4a	<u> </u>
	Other (Describe in Part XIII.)	
C	Add lines 4a and 4b	. <u>4c</u>
_5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	
Part	XII Reconciliation of Expenses per Audited Financial Statements With Expense	s per Return.
	Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.	
1	Total expenses and losses per audited financial statements	. 1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	
а	Donated services and use of facilities	1
b	Prior year adjustments	
c	Other losses	
d	Other (Describe in Part XIII.)	
	•	- a ₂
	Add lines 2a through 2d	· 2e
3	Subtract line 2e from line 1	. 3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a	
b	Other (Describe in Part XIII.)	
C	Add lines 4a and 4b	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	. 5
Part :	XIII Supplemental Information.	
Provid	e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b an	d 2b; Part V, line 4; Part X, line
2; Part	t XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any addition	al information.
Part V.	line 4: Intended use of endowment funds	
In 2000), ISEC ran a campaign to mark 25 years' work in Ladakh. We hoped that the campaign would raise suf	ficient funds to provide a flow
111 2000	, to Lo Tair a campaign to mark 25 years work in Laddrin. We hoped that the campaign would raise su	ilicient fantas to provide a now
of into	rest income to support our ongoing programs. However, the campaign was not as successful as we he	and and the belonce select
OI IIILEI	lest income to support our originity programs. However, the campaign was not as succession as we in	ppeu, and the balance raised
	NO. 1. b. 1. b. 1. d	- 45 - 4
(\$13,12	20) is being held until the Board determines that the funds should be devoted to some other purpose, o	r that we should mount
anothe	r fundraising campaign to increase the endowment's size. In the meantime, interest on these funds ar	e being used to support ISEC's
ongoin	g programs.	

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## SCHEDULE F (Form 990)

## **Statement of Activities Outside the United States**

OMB No. 1545-0047

Inspection

Department of the Treasury Internal Revenue Service Name of the organization ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16. ▶ Attach to Form 990. ▶ See separate instructions.

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

Employer identification number

<u>intem</u>	ational Society for Ecology and	Culture				-31282/4
Par	General Information Form 990, Part IV, line		es Outside	the United States. Com	plete if the organization answ	vered "Yes" on
1	For grantmakers. Does the	organization	maintain reco	ords to substantiate the am	ount of its grants and other	
	assistance, the grantees' eli	gibility for the	e grants or as	sistance, and the selection	r criteria used to award the	
	grants or assistance?					☐Yes ☐No
2	For grantmakers. Describe	in Port V 1	tha amanizati	on's procedures for monit	toring the use of its grapt	and other
_	assistance outside the Unite		ule Organizau	on's procedures for mone	toling the use of its grains	s and other
3	Activities per Region. (The fo	ollowing Part	I, line 3 table o	can be duplicated if addition	nal space is needed.)	
	(a) Region	(b) Number of	(c) Number of	(d) Activities conducted in	(e) If activity listed in (d) is	(f) Total
		offices in the region	employees, agents, and	region (by type) (e.g., fundraising, program services,	a program service, describe specific type of	expenditures for and investments
		103001	independent	investments,	service(s) in region	in region
			contractors in region	grants to recipients located in the region)		
(1)	East Asia and the Pacific	1	4	program services	lectures, writing, conference	132,369
(2)	Europe	1	1	program services	publication sales, etc.	19,743
(3)	South Asia	0	3	program services	educational	21,375
(4)						
(5)			, <u>, , , , , , , , , , , , , , , , , , </u>			
(6)						
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(16)						
(17)						
3a	Sub-total		<u> </u>			173,487
b	Total from continuation					
	sheets to Part I					
C	Totals (add lines 3a and 3b)					173,487

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed. Schedule F (Form 990) 2013
Part | Grants a

			,						
-	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
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5									
£									
(12)									
<u>(13</u>									
(14)									
(15)									
(16)									
8	Enter total nui	mber of recipie	ant organizations list	Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt	ognized as charitie	s by the foreign coul	ntry, recognized as t	ax-exempt	

by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

Enter total number of other organizations or entities ဇ

Schedule F (Form 990) 2013

Schedule F (Form 980) 2013

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.

Part III can be duplicated if additional space is needed.

To The second second second	A) Boolean	(e) Number of		(e) Manner of	(f) Amount of	Colombian (14)	(h) Method of
(a) 1)po of grant or assistant		recipients	cash grant	cash disbursement	non-cash assistance	of non-cash assistance	(book, FMV, appraisat, other)
(5)							
(2)							
(6)							
(4)							
(5)							
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(8)							
(6)							
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(16)							
(17)							
(18)						,	
						SCh.	Schedule F (Form 990) 2013

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Page	Δ

Part	IV Foreign Forms		
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	☐ Yes	<b>☑</b> No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)		₩ No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations. (see Instructions for Form 5471)	☐ Yes	₽ No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)		☑ No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect To Certain Foreign Partnerships. (see Instructions for Form 8865)		☑ No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713)		<b>☑</b> No
		0 - b - d - d - E - E	000 0044

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

### **Transactions With Interested Persons**

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a,

28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b. ▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions. OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

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

Employer identification number International Society for Ecology and Culture 94-3128274 Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only). Part I Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b. (d) Corrected? (b) Relationship between disqualified person and 1 (a) Name of disqualified person (c) Description of transaction organization Yes No (1)(2)(3) (4) (5) (6)Enter the amount of tax incurred by the organization managers or disqualified persons during the year 2 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization . Part II Loans to and/or From Interested Persons. Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22. (a) Name of interested person (b) Relationship (c) Purpose of (d) Loan to or (e) Onginal (f) Balance due (g) in default? (h) Approved (i) Written with organization from the principal amount by board or loan agreement? organization? No Yes Yes Yes From No (1) (2) (3)(4)(5)(6)(7)(8) (9) (10)Total  $\triangleright$ Grants or Assistance Benefiting Interested Persons. Part III Complete if the organization answered "Yes" on Form 990, Part IV, line 27. (a) Name of interested person (b) Relationship between interested (c) Amount of assistance (d) Type of assistance (e) Purpose of assistance person and the organization (1)(2)(3) (4) (5) (6) (7) (8) (9) (10)

	(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	rever	aring of zation's nues?
- (4)					Yes	_
	Steven Gorelick	Key employee	4,787.48	rent for office suite		~
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(3) (4)			<del></del>		-	┢
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(6)	<del></del>					$\vdash$
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(10)	<u></u>					<u> </u>
Par	V Supplemental Information		O-b	:		
	Provide additional informatio	on for responses to questions	on Schedule L (see	instructions).		
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	***************************************	*******************************				
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#### ŞCHEDULE O (Form 990 or 990-EZ)

## Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization ➤ 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.

Open to Public Inspection

International Society for Ecology and Culture	94-3128274
Part III, line 4d: Other program services	
Ladakh Project (Expenses \$21,375 including \$0 grants) (Revenues \$600)	
During 2013, we continued our efforts over more than three decades to counter unsustainable develop	pment in this Himalayan region. We
ran a modified version of our Learning from Ladakh program, which enables western participants to live	ve with a Ladakhi family during a
portion of the agricultural season, and to join ISEC-led workshops that put the experience into a globa	I context. We also ran our Tourist
Education program, which informs travelers to the region about their impact on Ladakh, and how to m	ake it a positive one for both the
culture and the environment. This program also included nightly screenings of our films, Ancient Futu	ures: Learning from Ladakh, and The
Economics of Happiness, followed by discussion led by iSEC staff and volunteers. During the summe	r we also filmed interviews with some
leading Ladakhis about the changes that have occurred since the release of Ancient Futures 20 years	ago. This is currently being edited into
a short film that will serve as a postscript to Ancient Futures.	
Part VI, line 11b: The process used to review Form 990	
Drafts of Form 990 are sent to the Director before it is finalized. Copies of the final draft are sent to ear	ch member of the Board of Directors
for approval before filing with the IRS.	
Part Vi, line 15a: Process for determining the compensation for Executive Director	
The salary of the Executive Director is determined by the Board of Directors. Compensation levels at	comparable organizations are
considered when determining the Director's salary. Historically, ISEC's Director receives compensation	on that is well below that of other
comparable organizations. Her salary has not been increased since 2006.	
Part VI, line 19: Document disclosure	
ISEC does not have a formal conflict of interest policy. Its governing documents (Articles of Incorpora	ation and Bylaws) are available for
public inspection at our US office: 2017 Mission St., second floor, San Francisco, CA 94110 Our annua	al Form 990 information return to the
IRS is also available for public inspection at that location, as well as online at www.guidestar.org.	

Schedule O (Form 990 or 990-EZ) (2013)	Page .
Name of the organization	Employer identification number
International Society for Ecology and Culture	94-3128274
Part XI, line 9: Other changes in net assets	
The UK£ rose in value against the US\$ from \$1.615 at the start of the year to \$1.649 at t	he end of the year. However, the Australian \$ lost
value against the US\$, going from US\$`1.037/AU\$ at the start of the year, to US\$0.887/AU\$ at the end of the year. Combined, these two	
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