PUBLIC DISCLOSURE COPY - STATE REGISTRATION NO. 58948

Department of the Treasury

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

A For the 2016 calendar year, or tax year beginning and ending Check if applicable: C Name of organization D Employer identification number Address change INSTITUTE OF HEARTMATH Name change 95-4023617 HEARTMATH INSTITUTE Doing business as Initial return Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Final return/ termin-ated P.O. BOX 1463 (831) 338-8500 3,202,679. City or town, state or province, country, and ZIP or foreign postal code **G** Gross receipts \$ Amended return 95006 BOULDER CREEK, CA H(a) Is this a group return Applica-tion pending F Name and address of principal officer: BRIAN KABAKER for subordinates? Yes X No SAME AS C ABOVE H(b) Are all subordinates included? Tax-exempt status: \mathbf{X} 501(c)(3) $\mathbf{\Box}$ 501(c) (4947(a)(1) or) **◄** (insert no.) If "No," attach a list. (see instructions) J Website: ► WWW.HEARTMATH.ORG **H(c)** Group exemption number ▶ K Form of organization: X Corporation Association Other > Year of formation: 1991 **M** State of legal domicile: CA Trust Part I Summary Briefly describe the organization's mission or most significant activities: TO HELP PEOPLE AROUND THE WORLD Activities & Governance ESTABLISH HEART-BASED LIVING AND GLOBAL COHERENCE. 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) 4 Number of independent voting members of the governing body (Part VI, line 1b) 4 Total number of individuals employed in calendar year 2016 (Part V, line 2a) 5 Total number of volunteers (estimate if necessary) 6 7 a Total unrelated business revenue from Part VIII, column (C), line 12 **b** Net unrelated business taxable income from Form 990-T, line 34 7b 0. **Prior Year Current Year** 978,083. $400,0\overline{21}$. Contributions and grants (Part VIII, line 1h) 8 Revenue 807,987. 877,172. Program service revenue (Part VIII, line 2g) 2,381. 673,142. Investment income (Part VIII, column (A), lines 3, 4, and 7d) 10 786,156. 707,925. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 11 2,574,607. 2,658,260. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 12 52,898. 32,175. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0. 0. 14 Benefits paid to or for members (Part IX, column (A), line 4) 882,806. 862,484. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 15 Expenses 16a Professional fundraising fees (Part IX, column (A), line 11e) **b** Total fundraising expenses (Part IX, column (D), line 25) 1,226,991. 1,172,401. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 2,067,060. 2,162,695. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 411,912. 591,200. Revenue less expenses. Subtract line 18 from line 12 **Beginning of Current Year** 5 **End of Year** 2,953,330. 3,163,383. Total assets (Part X, line 16) 1,567,551. 1,235,487. 21 Total liabilities (Part X, line 26) 三年 385,779. 1,927,896 22 Net assets or fund balances. Subtract line 21 from line 20 Part II | Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Signature of officer Date Sign BRIAN KABAKER, CFO Here Type or print name and title Date PTIN Print/Type preparer's name Preparer's signature LAWRENCE S. KUECHLER 11/03/17 P00233621 LAWRENCE S. KUECHLER Paid self-employed Firm's name ARMANINO LLP Firm's EIN ▶ 94-6214841 Preparer Firm's address 50 W. SAN FERNANDO ST, **STE 500** Use Only Phone no. 408-200-6400 SAN JOSE, CA 95113 X Yes May the IRS discuss this return with the preparer shown above? (see instructions) No

Part III	Sta	atement	of Prog	ram Serv	vice Ac	complis	hments

Pai	Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	X
1	Briefly describe the organization's mission:	
	IHM'S MISSION IS TO INSPIRE PEOPLE TO CONNECT WITH THE INTELLIGENCE	
	AND GUIDANCE OF THEIR OWN HEARTS TO HELP ESTABLISH PERSONAL AND GLOBAL	
	COHERENCE. THIS IS ACCOMPLISHED BY CREATING AND DELIVERING EDUCATIONAL	
	RESOURCES AND TRAINING PROGRAMS FOR: PRE-K THROUGH COLLEGE AGE	
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 services?	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 are required to report the amount of grants and allocations to others, the total expenses, and	
	if any favorable management and a	
40	1 107 150 21 424 1 115 019	8 \
4a	EDUCATION DIVISION:	<u>•</u>)
	EDUCATION DIVIDION:	
	DEVELOPS AND DISSEMINATES TOOLS AND TECHNOLOGIES TO HELP CHILDREN,	
	PARENTS, SENIORS, NON-PROFIT CONSTITUENTS, INDIVIDUALS, TEENS, FIRST	
	RESPONDERS, VETERANS, MILITARY PERSONAL AND FAMILIES LEARN HOW TO	
	SELF-REGULATE EMOTIONS, INCREASE EMOTIONAL INTELLIGENCE AND REDUCE	
	STRESS. ACTIVITIES OF THIS DIVISION INCLUDE: DISSEMINATING EDUCATIONAL	
	AND RESEARCH INFORMATION VIA E-TECHNOLOGY, SOCIAL MEDIA, PRODUCTS,	
	LECTURES AND CONFERENCES, MEMBERSHIP PROGRAM, COLLABORATION, PROGRAM	
	DEVELOPMENT, PROGRAM MATERIALS AND PRODUCT DEVELOPMENT, TRAINING AND	
	EDUCATION PROGRAMS; SOME HIGHLIGHTS OF 2016 ARE:	
4b	(Code:) (Expenses \$	8.)
	RESEARCH DIVISION	
	THE RESEARCH CENTER CONDUCTS BASIC RESEARCH INTO PSYCHOPHYSIOLOGY,	
	NEUROCARDIOLOGY AND BIOPHYSICS, AND OUTCOME STUDIES IN CLINICAL,	
	WORKPLACE, EDUCATIONAL AND MILITARY SETTINGS, FREQUENTLY IN	
	COLLABORATION WITH UNIVERSITIES, RESEARCH CENTERS AND	
	HEALTH-CARE-SYSTEM PARTNERS.	
	RESEARCH INTERESTS ALSO INCLUDE THE ELECTROPHYSIOLOGY OF INTUITION AND	
	EXPLORING HOW WE ARE ALL GLOBALLY INTERCONNECTED AT A DEEP, FUNDAMENTAL	
	LEVEL VIA ELECTROMAGNETIC FIELDS AND BIOFIELDS.	
	FOLLOWING ARE SOME OF THE ENDEAVORS AND SUCCESSES OF THE HEARTMATH	
	INSTITUTE RESEARCH CENTER AND TEAM IN 2016:	
40	(Code:) (Expenses \$ 84 , 197 • including grants of \$ 127 •) (Revenue \$ 103 , 20 expenses \$	4. \
70	GLOBAL COHERENCE INITIATIVE	
	THE GLOBAL COHERENCE INITIATIVE (GCI) IS A SCIENCE-BASED HMI PROJECT	
	DESIGNED TO HELP INDIVIDUALS AND GROUPS WORK TOGETHER SYNCHRONISTICALLY	v
	AND STRATEGICALLY TO INCREASE THE IMPACT OF THEIR INDIVIDUAL EFFORTS TO	
	CREATE POSITIVE CHANGE ON A GLOBAL LEVEL. TO DATE, SIX GLOBAL COHERENCY	
	MONITORING SYSTEM SENSOR SITES HAVE BEEN INSTALLED AROUND THE WORLD TO	
	GATHER GEO-MAGNETIC DATA AND OTHER KEY MEASURES FOR ONGOING STUDY OF	
	THE RELATIONSHIP BETWEEN HUMANITY AND THE PLANETARY MAGNETIC FIELDS AND	מ
	THE EFFECTS AND POTENTIAL INTERACTIVITY OF THAT RELATIONSHIP.	
	ACCOMPLISHMENTS IN 2016 WERE:	
4d	Other program services (Describe in Schedule O.)	
	(Expenses \$ 16,000 • including grants of \$) (Revenue \$ 130,682 •)	
4e	Total program service expenses ► 1,734,007.	
	Form 990 ((2016)

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Form 990 (2016) INSTITUTE OF HEARTMATH 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?	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_		X
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		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
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		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.			
а	y in red, complete concade 2,			
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	X	
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		37	
	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		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a		14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000	446		v
45	or more? If "Yes," complete Schedule F, Parts I and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	14b		X
15		4-		x
16	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		_^
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	16		x
17	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		<u> </u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	47		x
10	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		<u> </u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	40		x
10	1c and 8a? If "Yes," complete Schedule G, Part II	18		 ^ `
19	,	19		x
	complete Schedule G. Part III	ו ו		

Form 990 (2016) INSTITUTE OF HEARTMATH
Part IV Checklist of Required Schedules (continued)

			Yes	No
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			l
	Schedule K. If "No", go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			l
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"		37	
	complete Schedule L, Part II	26	X	
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		X
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):			v
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		<u> </u>
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,		Х	
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	Λ	Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			X
0.4	contributions? If "Yes," complete Schedule M	30		
31	Did the organization liquidate, terminate, or dissolve and cease operations?	24		x
32	If "Yes," complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes." complete	31		1
JZ		32		x
33	Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	- JZ		
33	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	00		
04	Part V, line 1	34		x
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	000		
	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?			
55	If "Yes," complete Schedule R, Part V, line 2	36		x
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			† <u></u>
٠.	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		x
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	<u> </u>		
	Note. All Form 990 filers are required to complete Schedule O	38	х	

Form 990 (2016) INSTITUTE OF HEARTMATH 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					
			_		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	28			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and re	portable gaming				
	(gambling) winnings to prize winners?	,		1c	X	
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	22			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return	ns?		2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions	s)				
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?			За		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule	O		3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a	authority over, a				
	financial account in a foreign country (such as a bank account, securities account, or other financial a	ccount)?		4a		X
b	If "Yes," enter the name of the foreign country: ▶					
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Advanced in the Financi	ccounts (FBAR).	- 1			
				5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction			5b		X
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			5с		<u> </u>
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the					
	any contributions that were not tax deductible as charitable contributions?			6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contribution	ons 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 ser	vices provided to t	he payor?	7a		X
			·····	7b		-
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	· ·		_		v
	to file Form 8282?	1 1		7с		X
	If "Yes," indicate the number of Forms 8282 filed during the year	7d	$\overline{}$	_		х
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit or		Г	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra		·····	7f	N/	
g h	If the organization received a contribution of qualified intellectual property, did the organization file Fo If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization received a contribution of cars, boats, airplanes, airp	="	· · · г	7g 7h	N/	
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained		N/A	711	14/	
0	sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained sponsoring organization have excess business holdings at any time during the year?	by trie	11/21	8		
9	Sponsoring organizations maintaining donor advised funds.		·····			
	5111		N/A	9a		
				9b		
10	Section 501(c)(7) organizations. Enter:					
	Initiation fees and capital contributions included on Part VIII, line 12 N/A	10a				
	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 N/A	11a				
	Gross income from other sources (Do not net amounts due or paid to other sources against					
	amounts due or received from them.)	11b				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form			12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A	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?		N/A	13a		
	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	13b				
	Enter the amount of reserves on hand	13c				
14a	Did the organization receive any payments for indoor tanning services during the tax year?		<u> </u>	14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No." provide an explanation in Schedule	e O		14b		<u> </u>
				Г	aan	(0040

Form 990 (2016) INSTITUTE OF HEARTMATH 95-402361 / Page Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 2 through 7b below to line 2 through 7b belo Page 6 to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

800	<u> </u>					X
Sec	tion A. Governing Body and Management					
		1.1	7		Yes	No
та	Enter the number of voting members of the governing body at the end of the tax year	1a	\dashv			
	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.		,			
	Enter the number of voting members included in line 1a, above, who are independent	1b	4			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship					77
	officer, director, trustee, or key employee?			2		_X_
3	Did the organization delegate control over management duties customarily performed by or under the	· · · · · · · · · · · · · · · · · · ·				
	of officers, directors, or trustees, or key employees to a management company or other person? \dots			3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 9			4		X
5	Did the organization become aware during the year of a significant diversion of the organization's ass	ets?		5		X
6	Did the organization have members or stockholders?			6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or approximately appr	point one or				
	more members of the governing body?			7a		Х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, s	tockholders, or				
	persons other than the governing body?			7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	ar by the following:				
а	The governing body?			8a	Х	
b	Each committee with authority to act on behalf of the governing body?		- 1	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be rea	ched 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 Re	evenue Code.)				
					Yes	No
10a	Did the organization have local chapters, branches, or affiliates?			10a		Х
b	If "Yes," did the organization have written policies and procedures governing the activities of such ch	napters, 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 bod	y before filing the form?	. [11a	X	
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	X	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise		- 1	12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "	Yes," describe				
	in Schedule O how this was done	······	[12c	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 approva	al by independent				
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?					
а	The organization's CEO, Executive Director, or top management official			15a	Х	
	Other officers or key employees of the organization			15b	X	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).					
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arranger	ment with a				
	taxable entity during the year?		[16a		Х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evalua		Ī			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ	nization's				
	exempt status with respect to such arrangements?			16b		
Sec	tion C. Disclosure					
17	List the states with which a copy of this Form 990 is required to be filed ▶CA					
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990 T	(Section 501(c)(3)s only	y) av	ailable)	
	for public inspection. Indicate how you made these available. Check all that apply.					
	Own website Another's website X Upon request Other (explain	n in Schedule O)				
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, coi		and f	inanc	ial	
	statements available to the public during the tax year.	. 37				
20	State the name, address, and telephone number of the person who possesses the organization's boo	oks and records:				
	LYNN LIPPOLD - (831) 338-8719	_				
	P.O. BOX 1463, BOULDER CREEK, CA 95006					

7 05 - - 1 - 41-1 - 1- - - - 14 - - 141

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

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

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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.										
(A)	(B)	(C)						(D)	(E)	(F)
Name and Title	Average	(do		Pos heck) than o	one	Reportable	Reportable	Estimated
	hours per	box	, unle	ss pei	rson i	s both	n an	compensation	compensation	amount of
	week	_	l a		110010	1711 43		from	from related	other
	(list any hours for	Individual trustee or director				_		the organization	organizations (W-2/1099-MISC)	compensation from the
	related	9e 0r	stee			nsate		(W-2/1099-MISC)	(** 2/ 1000 141100)	organization
	organizations	truste	al tru		yee	n be		(** =* ** = = **,		and related
	below	idual	Institutional trustee	ъ	Key employee	est co loyee	Je.			organizations
	line)	Indiv	Instit	Officer	Key	Highest compensated employee	Former			
(1) BRIAN KABAKER	28.00									
CFO & BOARD MEMBER		Х		Х				57,600.	0.	424.
(2) KATHERINE FLORIANO	22.00									
DIR. PLANNED GIFTS/CHAIRMA		Х		Х				31,104.	0.	364.
(3) SANDRA ROYALL	32.00									
SECRETARY/GRAPHIC ARTIST		Х		Х				37,901.	0.	364.
(4) TONI ROBERTS	1.00							_	_	_
BOARD MEMBER		Х						0.	0.	0.
(5) CLAIRE SHAFE	1.00									
BOARD MEMBER		Х						0.	0.	0.
(6) DONNA KOONTZ	1.00									
BOARD MEMBER		Х						0.	0.	0.
(7) JEDDAH MALI	1.00									
BOARD MEMBER	0.4.00	Х						0.	0.	0.
(8) SARA CHILDRE	24.00			l				50 505		404
PRESIDENT/CEO	20.00			Х				58,585.	0.	424.
(9) ROLLIN MCCRATY	30.00			,,				02.600		404
VICE PRESIDENT, DIR RSCH			_	Х				93,600.	0.	424.
		•								
		-								
		1								
	L						l	I.	I .	

632007 11-11-16 Form **990** (2016)

Section A. Officers, Directors, Trus	tees, Key Em	oloy	ees,	anc	<u>iH t</u>	ghes	st C	ompensated Employee	s (continued)				
(A)	(B)			(C)				(D)	(E)			(F)	
Name and title	Average	/ al a	Position (do not check more than one					Reportable	Reportable			imate	d
	hours per	box	, unle	ss per	rson i	is both	n an	compensation	compensation	.	am	ount o	of
	week	offi	cer ar	nd a d	irecto	or/trus	tee)	from	from related		c	other	
	(list any	ector						the	organizations		comp	ensat	tion
	hours for	Individual trustee or director	ao			rted		organization	(W-2/1099-MIS	2)		m the	
	related	stee (ruste			bensa		(W-2/1099-MISC)			_	ınizati	
	organizations below	al tru	onal t		loyee	le se						relate	
	line)	divid	Institutional trustee	Officer	Key employee	Highest compensated employee	Former				orgar	nizatio	วทร
		드	드	Đ	₹ e	물등	요			\dashv			
										\dashv			
		-											
										\neg			
										\dashv			
						\vdash				\dashv			
						_				\dashv			
1b Sub-total						<u> </u>		278,790.		0.		2,00	<u> </u>
c Total from continuation sheets to Part VI								0.		0.		,,,,,	0.
d Total (add lines 1b and 1c)								278,790.		0.	2	2,00	
Total number of individuals (including but not not not not not not not not not no							o re	•					
compensation from the organization						<i>'</i>		,	•				0
												Yes	No
3 Did the organization list any former officer,	•			•	•	•		•					
line 1a? If "Yes," complete Schedule J for si											3		X
4 For any individual listed on line 1a, is the su	•		•					•	•				37
and related organizations greater than \$150											4		X
5 Did any person listed on line 1a receive or a	•				•			· ·			5		Х
rendered to the organization? If "Yes." com Section B. Independent Contractors	piete Schedule	9 <i>J T</i>	or st	ıcn <u>ı</u>	oers	on .					3		
Complete this table for your five highest contains the second secon	mpensated inc	lepe	nde	nt co	ontra	acto	rs th	nat received more than \$	3100,000 of compe	 ensat	ion fro	m	
the organization. Report compensation for t	the calendar ye	ear e	endir	ng w	ith c	or wi	thin	the organization's tax y	ear.				
(A)				_				(B)		_	(C)		
Name and business	address	NC	INC	<u> </u>				Description of s	ervices		ompen	sation	<u> </u>
											_		
							\dashv						
2 Total number of independent contractors (in		ot lin	nited	d to		_	ted	above) who received mo	ore than				
\$100,000 of compensation from the organization	zation 🕨				()						190 <i>(c</i>	
											F		1040

95-4023617

Form 990 (2016) INSTITUTE OF HEARTMATH
Part VIII Statement of Revenue

		Check if Schedule O conta	ains a response	or note to any line	in this Part VIII			
		CHOOK II COHOGGIC C COHO	and a respense	or rioto to driy iiilo	(A)	(B)	(C)	(D)
					Total revenue	Related or exempt function	Unrelated business	Revenuè excluded from tax under
						revenue	revenue	sections 512 - 514
ည တ	1 a	Federated campaigns	1a					
Contributions, Gifts, Grants and Other Similar Amounts		Membership dues		70,378.				
يَ ق		Fundraising events	·····					
ifts Ir A		Related organizations						
ni,s		Government grants (contribution						
Sis		All other contributions, gifts, grant						
ber		similar amounts not included abov		329,643.				
Ę	g	Noncash contributions included in lines 1						
Sor	_	Total. Add lines 1a-1f		>	400,021.			
				Business Code				
ø	2 a	EDUCATION PROGRAMS		611600	621,445.	621,445.		
Š	b	RESEARCH SERVICES		541700	255,727.	255,727.		
Ser	С							
am eve	d							
Program Service Revenue	е							
Pr	f	All other program service rever	nue					
		Total. Add lines 2a-2f			877,172.			
	3	Investment income (including		II				
		other similar amounts)		▶ [7,242.			7,242.
	4	Income from investment of tax						
	5	Royalties		>	130,680.	130,680.		
			(i) Real	(ii) Personal				
	6 a	Gross rents	95,775.					
	b	Less: rental expenses	25,000.					
	С	Rental income or (loss)	70,775.					
	d	Net rental income or (loss)			70,775.			70,775.
	7 a	Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory		665,900.				
	b	Less: cost or other basis						
		and sales expenses		0.				
	С	Gain or (loss)		665,900.				
		Net gain or (loss)			665,900.			665,900.
Φ	8 a	Gross income from fundraising	g events (not					
Other Revenu		including \$						
eve		contributions reported on line						
프		Part IV, line 18	a					
棄		Less: direct expenses						
		Net income or (loss) from fund		>				
	9 a	Gross income from gaming ac						
		Part IV, line 19						
		Less: direct expenses						
		Net income or (loss) from gam						
	10 a	Gross sales of inventory, less i						
		and allowances						
	b	Less: cost of goods sold						
		Not income or (local from color	s of inventory		506,470.	506,470.		
	С	Net income or (loss) from sales						
		Miscellaneous Revenue		Business Code				
-	11 a	Miscellaneous Revenue		Business Code				
<u>-</u>		Miscellaneous Revenue		Business Code				
-	11 a b c	Miscellaneous Revenue						
-	11 a b c d	Miscellaneous Revenue						

Form 990 (2016) INSTITUTE OF HEARTMATH Part IX Statement of Functional Expenses

Sect	ion 501(c)(3) and 501(c)(4) organizations must comp Check if Schedule O contains a respon		•	nplete column (A).	X
Do	not include amounts reported on lines 6b,	(A)	(B) Program service	(C) Management and	(D) Fundraising
	8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21	25,811.	25,811.		
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22	1,100.	1,100.		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16	5,264.	5,264.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	276,222.	189,205.	75,459.	11,558.
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	544.005	440 540	55 100	
7	Other salaries and wages	514,087.	440,519.	66,199.	7,369.
8	Pension plan accruals and contributions (include	101	101		
	section 401(k) and 403(b) employer contributions)	101. 11,768.	101. 8,402.	2 124	020
9	Other employee benefits	11,/68.	8,402.	3,134.	232.
10	Payroll taxes	60,306.	48,080.	10,789.	1,437.
11	Fees for services (non-employees):				
a	Management	F 140		F 140	
b	Legal	5,140. 19,000.		5,140. 19,000.	
	Accounting	19,000.		19,000.	
	Lobbying				
e	Professional fundraising services. See Part IV, line 17				
1	Other. (If line 11g amount exceeds 10% of line 25,				
g	column (A) amount, list line 11g expenses on Sch 0.)	465,860.	447,522.	2,732.	15,606.
12	Advertising and promotion	11,656.	10,680.	277321	976.
13	Office expenses	138,414.	100,606.	19,984.	17,824.
14	Information technology	140,065.	128,142.	8,569.	3,354.
15	Royalties	5,927.	5,927.	,	. ,
16	Occupancy	121,470.	100,130.	20,585.	755.
17	Travel	41,204.	38,118.	226.	2,860.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	15,172.	14,547.	625.	
20	Interest	48.	45.	1.	2.
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	92,650.	82,173.	10,385.	92.
23	Insurance	12,470.	6,653.	5,620.	197.
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.)	C1 440	40 504	11 010	C07
а	MAINTENANCE	61,440.	49,524.	11,219.	697.
b	DUES AND SUBSCRIPTIONS	15,301.	12,998.	799.	1,504.
C	LICENSES, FEES AND TAXE	13,479. 5,559.	9,051.	3,939.	489.
d	OTHER	7,546.	5,559. 3,850.	3,696.	
	All other expenses Add lines 1 through 24s	2,067,060.	1,734,007.	268,101.	64,952.
25	Total functional expenses. Add lines 1 through 24e	4,001,000•	1,134,UU1•	400,101.	04,334.
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 X if following SOP 98-2 (ASC 958-720)				
	21 IT TOILOWING SOP 98-2 (ASC 958-720)		l		5 000 (2212)

Form 990 (2016)
Part X Balance Sheet

Par	LA	Balance Sheet				
		Check if Schedule O contains a response or note to any line in this Par	t X			
				(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		354,373.	1	252,145.
	2	Savings and temporary cash investments		761,423.	2	985,342.
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net		158,943.	4	91,036
	5	Loans and other receivables from current and former officers, directors				
		trustees, key employees, and highest compensated employees. Comp	lete			
		Part II of Schedule L			5	
	6	Loans and other receivables from other disqualified persons (as define				
		section 4958(f)(1)), persons described in section 4958(c)(3)(B), and con	tributing			
		employers and sponsoring organizations of section 501(c)(9) voluntary				
S.		employees' beneficiary organizations (see instr). Complete Part II of Sc	:h L [6	241,393
Assets	7	Notes and loans receivable, net	Г		7	
As	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges		45,274.	9	46,709
	10a	Land, buildings, and equipment: cost or other				
		basis. Complete Part VI of Schedule D 10a 2,686	,044.			
	b	Less: accumulated depreciation 10b 1,431	,333.	1,276,471.	10c	1,254,711
	11	Investments - publicly traded securities			11	
	12	Investments - other securities. See Part IV, line 11		294,500.	12	245,417
	13	Investments - program-related. See Part IV, line 11			13	
	14	Intangible assets		8,951.	14	
	15	Other assets. See Part IV, line 11		53,395.	15	46,630
	16	Total assets. Add lines 1 through 15 (must equal line 34)		2,953,330.	16	3,163,383
	17	Accounts payable and accrued expenses		111,101.	17	101,097
	18	Grants payable		18		
	19	Deferred revenue		339,364.	19	124,464
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D			21	
ဖွ	22	Loans and other payables to current and former officers, directors, trus	stees,			
<u>itie</u>		key employees, highest compensated employees, and disqualified per	sons.			
Liabilities		Complete Part II of Schedule L		85,000.	22	5,000. 1,004,926.
<u> </u>	23			1,032,086.	23	1,004,926
	24	Unsecured notes and loans payable to unrelated third parties			24	
	25	Other liabilities (including federal income tax, payables to related third				
		parties, and other liabilities not included on lines 17-24). Complete Par	t X of			
		Schedule D			25	
	26	Total liabilities. Add lines 17 through 25		1,567,551.	26	1,235,487
		Organizations that follow SFAS 117 (ASC 958), check here	and			
S		complete lines 27 through 29, and lines 33 and 34.				
]	27	Unrestricted net assets		845,628.	27	1,431,512. 496,384.
ala	28	Temporarily restricted net assets	540,151.	28	496,384.	
B	29	Permanently restricted net assets	<u></u> .		29	
틸		Organizations that do not follow SFAS 117 (ASC 958), check here				
ō		and complete lines 30 through 34.				
Net Assets or Fund Balances	30	Capital stock or trust principal, or current funds			30	
SSI	31	Paid-in or capital surplus, or land, building, or equipment fund			31	
et/	32	Retained earnings, endowment, accumulated income, or other funds			32	
Ž	33	Total net assets or fund balances		1,385,779.	33	1,927,896.
	34	Total liabilities and net assets/fund balances		2,953,330.	34	3,163,383.

Pai	TXI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					
1	Total revenue (must equal Part VIII, column (A), line 12)	1	2,65			
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,06			
3	Revenue less expenses. Subtract line 2 from line 1	3	59	1,2	00.	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,385,779			
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	1,92	7,8	<u>96.</u>	
Pai	t 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 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					
С	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 Sche	dule O.				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single	gle Audit				
	Act and OMB Circular A-133?		За		X	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the require					
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b			
			Form	990	(2016)	

SCHEDULE A

Department of the Treasury Internal Revenue Service

(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.

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2016
Open to Public

Inspection

Name of the organization

INSTITUTE OF HEARTMATH

 $Employer\ identification\ number \\ 95-4023617$

Pa	rt I	Reason for Public (Charity Status 🖟	All organizations must co	omplete th	is part.) Se	e instructions.	
he	organ	ization is not a private found	ation because it is: (F	or lines 1 through 12, c	heck only	one box.)		
1	$\overline{\Box}$	A church, convention of chu					I)(A)(i).	
2	Ħ	A school described in secti	•				.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
3	H						i)	
	A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name,							
4			ation operated in cor	ijunction with a nospital	described	III Sectio	n 170(b)(1)(A)(III). Enter	the nospital's name,
		city, and state:						
5		An organization operated for		lege or university owner	or operate	ed by a go	vernmental unit describe	ed in
		section 170(b)(1)(A)(iv). (C	Complete Part II.)					
6		A federal, state, or local gov	ernment or governm	nental unit described in	section 17	'0(b)(1)(A)	(v).	
7	X	An organization that normal	lly receives a substar	ntial part of its support f	om a gove	ernmental	unit or from the general p	oublic described in
		section 170(b)(1)(A)(vi). (Co	omplete Part II.)					
8		A community trust describe		1)(A)(vi). (Complete Par	t II.)			
9		An agricultural research org				ed in coniu	inction with a land-grant	college
_		or university or a non-land-g				-	-	-
		university:	irant conege or agnor	artare (500 motraotions).	Lintor tino i	iarrio, orty	, and state of the conege	, 01
40			lly receives: (1) more	than 22 1/20/ of its our	oort from o	ontributio	no momborobin foco on	d grass resoints from
10								
	activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment							
		income and unrelated busin		(less section 511 tax) fro	m busines	ses acqui	red by the organization a	after June 30, 1975.
		See section 509(a)(2). (Cor	mplete Part III.)					
11	Щ	An organization organized a	and operated exclusi	vely to test for public sa	fety.See	section 50	09(a)(4).	
12		An organization organized a	and operated exclusi	vely for the benefit of, to	perform tl	ne function	ns of, or to carry out the	purposes of one or
		more publicly supported org	ganizations describe	d in section 509(a)(1) d	r section (509(a)(2).	See section 509(a)(3). (Check the box in
		lines 12a through 12d that of	describes the type of	f supporting organization	n and com	plete lines	12e, 12f, and 12g.	
а		Type I. A supporting orga	nization operated, s	upervised, or controlled	by its supp	orted org	anization(s), typically by	giving
		the supported organization	on(s) the power to red	gularly appoint or elect a	maiority o	f the direc	tors or trustees of the su	upportina
		organization. You must c			, ,			0
h		Type II. A supporting orga	-		ion with its	s sunnorte	ed organization(s), by hav	vina
		control or management of	· ·					•
		_			arrie persor	iis iiiai coi	ntroi or manage the supp	oortea
		organization(s). You mus					16 11 11 11 1	1 20
С		Type III functionally inte					• •	ed with,
	_	its supported organization		·				
d			integrated. A supp	orting organization oper	ated in cor	nnection w	rith its supported organiz	zation(s)
		that is not functionally into	egrated. The organiz	ation generally must sat	isfy a distr	ibution rec	quirement and an attentiv	/eness
		requirement (see instructi	ons). You must con	nplete Part IV, Sections	A and D,	and Part	V.	
е		Check this box if the orga	anization received a v	written determination fro	m the IRS	that it is a	Type I, Type II, Type III	
		functionally integrated, or	Type III non-function	nally integrated supporti	ng organiz	ation.		
f	Ente	er the number of supported o	organizations					
g		vide the following information		d organization(s).				
	(i) Name of supported	(ii) EIN	(iii) Type of organization	(iv) Is the orga in your governi	inization listed na document?	(v) Amount of monetary	(vi) Amount of other
		organization		(described on lines 1-10 above (see instructions))	Yes	No	support (see instructions)	support (see instructions)
							i	I

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

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	281,669.	235,498.	563,059.	978,083.	400,021.	2458330.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	281,669.	235,498.	563,059.	978,083.	400,021.	2458330.
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)						957,731.
6	Public support. Subtract line 5 from line 4.						1500599.
Sec	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
7	Amounts from line 4	281,669.	235,498.	563,059.	978,083.	400,021.	2458330.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources	97,973.	97,292.	96,841.	271,231.	233,697.	797,034.
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 VI.)						
11	Total support. Add lines 7 through 10						3255364.
12	Gross receipts from related activities,	etc. (see instruction	ons)			12 10	<u>,458,849.</u>
13	First five years. If the Form 990 is for	the organization's	first, second, third	d, fourth, or fifth ta	x year as a section	501(c)(3)	
_	organization, check this box and stor	here	·····				>
	ction C. Computation of Publi						
14	Public support percentage for 2016 (I					14	46.10 %
15	Public support percentage from 2015					15	52.18 %
16a	33 1/3 % support test - 2016. If the o				14 is 33 1/3% or m	ore, check this box	
	stop here. The organization qualifies	. ,	· ·				
b	33 1/3% support test - 2015. If the o	organization did no	t check a box on li				
	and stop here. The organization qual						
17a	10% -facts-and-circumstances test	_					
	and if the organization meets the "fac						. \Box
	meets the "facts-and-circumstances"						
b	10% -facts-and-circumstances test	-					
	more, and if the organization meets the		•		• •		
	organization meets the "facts-and-circ			•	,		>
18	Private foundation. If the organization	n did not check a	<u>box on line 13, 16a</u>	a, 16b, 17a, or 17b	, check this box ar	nd see instructions	_

Part III | Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions,						
	merchandise sold or services per-						
	formed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
78	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
k	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						
(Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
Se	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
9	Amounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on securities loans, rents, royalties						
	and income from similar sources						
k	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
(Add lines 10a and 10b						
	Net income from unrelated business						
	activities not included in line 10b, whether or not the business is						
	regularly carried on						
12	Other income. Do not include gain						
	or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is for	r the organization's	s first, second, thir	d, fourth, or fifth ta	ax year as a sectio	n 501(c)(3) organiza	ation,
							>
Se	ction C. Computation of Publi	c Support Per	centage				
15	Public support percentage for 2016 (I	ine 8, column (f) di	vided by line 13, c	olumn (f))		15	%
	Public support percentage from 2015					16	%
	ction D. Computation of Inves						
17	Investment income percentage for 20)16 (line 10c, colur	mn (f) divided by lin	ne 13, column (f))		17	%
18	Investment income percentage from					18	%
19a	33 1/3% support tests - 2016. If the	organization did r	not check the box of	on line 14, and line	e 15 is more than 3	3 1/3%, and line 1	7 is not
	more than 33 1/3%, check this box ar	nd stop here. The	e organization qual	ifies as a publicly	supported organiza	ation	>
k	33 1/3% support tests - 2015. If the	organization did r	not check a box on	line 14 or line 19a	a, and line 16 is mo	ore than 33 1/3%, a	and
	line 18 is not more than 33 1/3%, che	ck this box and s	top here. The orga	anization qualifies	as a publicly supp	orted organization	
20	Private foundation. If the organization	on did not check a	box on line 14, 19a	a, or 19b, check th	nis box and see ins	tructions	

Part IV | Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.
- **c** Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes." provide detail in Part VI.
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

		Yes	No
	1		
	2		
	3a		
	3b		
	3с		
	4a		
	14		
	4b		
	4c		
	5a		
	5b		
	5c		
	6		
	7		
	,		
	8		
	9a		
	9b		
	9с		
	10a		
	401-		
0	10b 90 or 99	∩_E7\	2016
J	JU UI 33	·U-E41	2010

Par	t IV Supporting Organizations _(continued)			
	_		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
		11a		
h		11b		
		11c		
	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to		100	110
•	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported	1		
2	organizations and what conditions or restrictions, if any, applied to such powers during the tax year. Did the organization operate for the benefit of any supported organization other than the supported	•		
2				
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,	2		
Sact	supervised, or controlled the supporting organization. tion C. Type II Supporting Organizations	2		
366	non o. Type ii oupporting organizations	Τ	V	NI-
_	West and the file of the constant and a first order of the first of the file o		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
S001	the supported organization(s). tion D. All Type III Supporting Organizations	1		
Seci	non b. All Type III Supporting Organizations	Т	, ,	
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sect	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instruct	ions).		
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? Provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

Part	Type III Non-Functionally Integrated 509(a)(3) Support	ng Organi	zations	
1	Check here if the organization satisfied the Integral Part Test as a qualify	ing trust on N	ov. 20, 1970 (explain in F	Part VI.) See instructions. A
	other Type III non-functionally integrated supporting organizations must	complete Sec	tions A through E.	
Section	n A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3 (Other gross income (see instructions)	3		
4 /	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
(collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7 (Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section	n B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 /	Aggregate fair market value of all non-exempt-use assets (see			
i	nstructions for short tax year or assets held for part of year):			
a /	Average monthly value of securities	1a		
b /	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d ·	Total (add lines 1a, 1b, and 1c)	1d		
e l	Discount claimed for blockage or other			
1	factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d	3		
4 (Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
,	see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Section	n C - Distributable Amount			Current Year
1 /	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	ncome tax imposed in prior year	5		
	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-function	ally integrated	Type III supporting orga	nization (see

Schedule A (Form 990 or 990-EZ) 2016

instructions).

Sche Pa i	dule A (Form 990 or 990-EZ) 2016 INSTITUTE OF 1			5-4023617 Page 7
Secti	on D - Distributions	<u> </u>	<u>(ooritinada)</u>	Current Year
1	Amounts paid to supported organizations to accomplish exer	mpt purposes		
2	Amounts paid to perform activity that directly furthers exemp	t purposes of supported		
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations	3	
4	Amounts paid to acquire exempt-use assets			
_5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions			
7	Total annual distributions. Add lines 1 through 6			
8	Distributions to attentive supported organizations to which the	ne organization is responsive		
	(provide details in Part VI). See instructions			
9	Distributable amount for 2016 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2016	(iii) Distributable Amount for 2016
1	Distributable amount for 2016 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2016 (reason-			
	able cause required- explain in Part VI). See instructions			
3	Excess distributions carryover, if any, to 2016:			
a				
b				
c	From 2013			
d	From 2014			
e	From 2015			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
<u>h</u>	Applied to 2016 distributable amount			
<u>i</u> _	Carryover from 2011 not applied (see instructions)			
i_	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2016 from Section D,			
	line 7: \$			
<u>a</u>	Applied to underdistributions of prior years			
<u>b</u>	Applied to 2016 distributable amount			
<u> </u>	Remainder. Subtract lines 4a and 4b from 4			
5	Remaining underdistributions for years prior to 2016, if			
	any. Subtract lines 3g and 4a from line 2. For result greater			
	than zero, explain in Part VI. See instructions			
6	Remaining underdistributions for 2016. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions			
7	Excess distributions carryover to 2017. Add lines 3j			
	and 4c			
8	Breakdown of line 7:			
<u>a</u>				
	Excess from 2013			
	Excess from 2014			
	Excess from 2015			
e	Excess from 2016			

Schedule A (Form 990 or 990-EZ) 2016

Part VI	Supplemental Information Decide the evaluations required by Bert II line 10: Bert II line 17: or 17b; Bert III line 19:
T dire VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V,
	Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service **Schedule of Contributors**

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.
 ▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990 .

2016

OMB No. 1545-0047

Name of the organization

Employer identification number

	INSTITUTE OF HEARTMATH 95-4023617						
Organization type (che	eck one):						
Filers of:	Section:						
Form 990 or 990-EZ	\overline{X} 501(c)(3) (enter number) organization						
	4947(a)(1) nonexempt charitable trust not treated as a private foundation						
	527 political organization						
Form 990-PF	501(c)(3) exempt private foundation	501(c)(3) exempt private foundation					
	4947(a)(1) nonexempt charitable trust treated as a private foundation						
	501(c)(3) taxable private foundation						
Note: Only a section 50 General Rule For an organiz	cion is covered by the General Rule or a Special Rule . O1(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule and Rule and A Speci	\$5,000 or more (in money or					
Special Rules							
sections 509(any one contr	zation described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support ta)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, dibutor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amour 0-EZ, line 1. Complete Parts I and II.	or 16b, and that received from					
year, total cor	zation described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from a arributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or education of cruelty to children or animals. Complete Parts I, II, and III.	•					
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year		ore than \$1,000. If this box s, charitable, etc., received <i>nonexclusively</i>					

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to

certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

INSTITUTE OF HEARTMATH

95-4023617

Part I	Contributors (See instructions). Use duplicate copies of Part I if additional additional contributors.	tional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$130,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$15,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$10,000.	Person X Payroll
(a)	(b)	(c)	(d)
No. 4	Name, address, and ZIP + 4	* \$ 10,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$12,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash Complete Part II for noncash contributions.)

INSTITUTE OF HEARTMATH

95-4023617

Part II	Noncash Property (See instructions). Use duplicate copies of Part II if	additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
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(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
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(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	

STITU	TE OF HEARTMATH		95-4023617			
rt III	the year from any one contributor. Complete completing Part III, enter the total of exclusively religious	columns (a) through (e) and the followings, charitable, etc., contributions of \$1,000 or les	section 501(c)(7), (8), or (10) that total more than \$1,000 for incline entry. For organizations			
No.	Use duplicate copies of Part III if addition	lai space is needed.				
om art I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
_	Transferee's name, address, a	(e) Transfer of gift	Relationship of transferor to transferee			
- -	Transferee 3 name, address, a		Treationship of transfer of to transfer ee			
No. om ort I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
-	Transferee's name, address, a	(e) Transfer of gift	Relationship of transferor to transferee			
om rt I –	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
		(e) Transfer of gift				
 - -	Transferee's name, address, a	and ZIP + 4	Relationship of transferor to transferee			
No. om ort I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
-	(e) Transfer of gift					

SCHEDULE C

(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

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

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

OMB No. 1545-0047

2016

Open to Public

Inspection

Department of the Treasury Internal Revenue Service

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

Гах) (see separate instructions), then				
● Section 501(c)(4), (5), or (6) organizat	ions: Complete Part III.			
Name of organization			Empl	oyer identification number
INSTITU	TE OF HEARTMATH	==.//		95-4023617
Part I-A Complete if the org	anization is exempt unde	er section 501(c)	or is a section 527 or	ganization.
 Provide a description of the organiz Political campaign activity expendit Volunteer hours for political campaign 	ures		 ▶\$	
Part I-B Complete if the org	anization is exempt unde	er section 501(c)(3).	
1 Enter the amount of any excise tax	incurred by the organization und	ler section 4955	▶\$	
2 Enter the amount of any excise tax				
3 If the organization incurred a section				
4a Was a correction made?				Yes No
b If "Yes." describe in Part IV.				
Part I-C Complete if the org	anization is exempt unde	er section 501(c),	except section 501(c	<u>)(3).</u>
 2 Enter the amount of the filing organiexempt function activities 3 Total exempt function expenditures line 17b 4 Did the filing organization file Form 5 Enter the names, addresses and emmade payments. For each organization contributions received that were propolitical action committee (PAC). If a 	. Add lines 1 and 2. Enter here a	nd on Form 1120-POL N) of all section 527 pod from the filing organizaseparate political orga	, , , , , , , , , , , , ,	Yes No the filing organization amount of political
(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0

Schedule C (Form 990 or 990-EZ) 2016 INSTI	TUTE OF HEARTMATH	95-4	023617 Page 2						
Part II-A Complete if the organization section 501(h)).	n is exempt under section 501(c)(3) and file	ed Form 5768 (ele	ction under						
A Check ▶ ☐ if the filing organization belong	gs to an affiliated group (and list in Part IV each affiliated	group member's name	, address, EIN,						
expenses, and share of exces	s lobbying expenditures).								
B Check ▶ if the filing organization check	ed box A and "limited control" provisions apply.	_	-						
Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.) (a) Filing organization's totals									
1a Total lobbying expenditures to influence pub	lic opinion (grass roots lobbying)	0.							
b Total lobbying expenditures to influence a leg	gislative body (direct lobbying)	0.							
c Total lobbying expenditures (add lines 1a and	d 1b)	0.							
d Other exempt purpose expenditures		1,734,007.							
e Total exempt purpose expenditures (add line	s 1c and 1d)	1,734,007.							
f Lobbying nontaxable amount. Enter the amo	unt from the following table in both columns.	236,700.							
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:								
Not over \$500,000	20% of the amount on line 1e.								
Over \$500,000 but not over \$1,000,000									
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.								
Over \$17,000,000	\$1,000,000.								

reporting section 4911 tax for this year? 4-Year Averaging Period Under section 501(h)

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

g Grassroots nontaxable amount (enter 25% of line 1f)h Subtract line 1g from line 1a. If zero or less, enter -0-

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

	Lobbying Expen	nditures During 4-Yea	r Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) Total
2a Lobbying nontaxable amount	226,124.	226,153.	240,882.	236,700.	929,859.
b Lobbying ceiling amount (150% of line 2a, column(e))					1,394,789.
c Total lobbying expenditures					
d Grassroots nontaxable amount	56,531.	56,538.	60,221.	59,175.	232,465.
e Grassroots ceiling amount (150% of line 2d, column (e))					348,698.
f Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2016

59,175.

Yes

Schedule C (Form 990 or 990-EZ) 2016 INSTITUTE OF HEARTMATH 95-4023617 Page 3 Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description	(a	(a)		(b)	
the lobbying activity.	Yes	No	Amou	unt	
During the year, did the filing organization attempt to influence foreign, national, state or					
local legislation, including any attempt to influence public opinion on a legislative matter					
or referendum, through the use of:					
a Volunteers?					
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
c Media advertisements?					
d Mailings to members, legislators, or the public?					
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					
a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
b If "Yes," enter the amount of any tax incurred under section 4912					
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
art III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(4)	on 501(c)(5), or sec	tion		
501(c)(6).			V	_	
			Yes	1	
			I I		
Were substantially all (90% or more) dues received nondeductible by members?					
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from tart III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered	ne prior year? on 501(c)(5), or sec		3,	
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Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from to the organization agree to carry over lobbying and political campaign activity expenditures from the art III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members 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 b Carryover from last year c Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the extension does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and expenditure next year? Taxable amount of lobbying and political expenditures (see instructions) art IV Supplemental Information Divide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group tructions); and Part II-B, line 1. Also, complete this part for any additional information. CHEDULE C, PART II-A	ne prior year? on 501(c)(5 "No," OR ical cess political	2 3 3 5), or sec (b) Part 1 2a 2b 2c 3 4 5	III-A, line	3, i	
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from to the organization agree to carry over lobbying and political campaign activity expenditures from the art III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members 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 b Carryover from last year c Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the extension does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and expenditure next year? Taxable amount of lobbying and political expenditures (see instructions) art IV Supplemental Information Divide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group tructions); and Part II-B, line 1. Also, complete this part for any additional information. CHEDULE C, PART II-A	ne prior year? on 501(c)(5 "No," OR ical cess political	2 3 3 5), or sec (b) Part 1 2a 2b 2c 3 4 5	III-A, line	3, i	
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from to the organization agree to carry over lobbying and political campaign activity expenditures from the art III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members 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 b Carryover from last year c Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the extension does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and expenditure next year? Taxable amount of lobbying and political expenditures (see instructions) art IV Supplemental Information Divide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group tructions); and Part II-B, line 1. Also, complete this part for any additional information. CHEDULE C, PART II-A	ne prior year? on 501(c)(5 "No," OR ical cess political	2 3 3 5), or sec (b) Part 1 2a 2b 2c 3 4 5	III-A, line	3, i	

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

► Attach to Form 990.

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

Open to Public Inspection

OMB No. 1545-0047

Name of the organization

INSTITUTE OF HEARTMATH

Employer identification number 95-4023617

Pa			s or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, line	e 6. (a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	(a) Bottor devised failed	(b) I dilas dila stiloi desculita
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in w	vriting that the assets held in donor advis	sed funds
Ū	are the organization's property, subject to the organization's e	_	
6	Did the organization inform all grantees, donors, and donor ac		
•	for charitable purposes and not for the benefit of the donor or		
	· ·		
Pa	rt II Conservation Easements. Complete if the org	anization answered "Yes" on Form 990,	
1	Purpose(s) of conservation easements held by the organizatio		
	Preservation of land for public use (e.g., recreation or ed		storically important land area
	Protection of natural habitat	· —	rtified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualification	ed 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
а	Total number of conservation easements		2a
b			•
С	Number of conservation easements on a certified historic stru		
d	Number of conservation easements included in (c) acquired at	fter 8/17/06, and not on a historic struct	ure
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, rele		
	year ▶		
4	Number of states where property subject to conservation ease	ement is located >	
5	Does the organization have a written policy regarding the period	odic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements it	holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, h	nandling of violations, and enforcing con	servation easements during the year
	>		
7	Amount of expenses incurred in monitoring, inspecting, handle	ling of violations, and enforcing conserva	ation easements during the year
	> \$		
8	Does each conservation easement reported on line 2(d) above	*	
	and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports conservation	•	
	include, if applicable, the text of the footnote to the organizati	ion's financial statements that describes	the organization's accounting for
Da	conservation easements.	Aut Historical Transcures on O	they Cimilar Assats
Pal			ther Similar Assets.
	Complete if the organization answered "Yes" on Form		
па	If the organization elected, as permitted under SFAS 116 (ASC	-	
	historical treasures, or other similar assets held for public exhi		ance of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that describ		
р	If the organization elected, as permitted under SFAS 116 (ASC	**	
	treasures, or other similar assets held for public exhibition, ed	lucation, or research in furtherance of pu	iblic service, provide the following amounts
	relating to these items:		• •
	(i) Revenue included on Form 990, Part VIII, line 1		
•			
2	If the organization received or held works of art, historical trea		ai gain, provide
_	the following amounts required to be reported under SFAS 11	· · · · · · · · · · · · · · · · · · ·	L ¢
a	Revenue included on Form 990, Part VIII, line 1		
D	Assets included in Form 990, Part X		🔻 🔻

	t III Organizations Maintaining C	ollections of Art	, Histo	rical Tre	asures, or	Other	Simila	r Assets	S (continu	ed)
3	Using the organization's acquisition, accessi	on, and other records	, check	any of the f	following that	are a sig	nificant u	se of its o	collection it	ems
	(check all that apply):									
а	Public exhibition	d		Loan or exc	hange progra	ms				
b	Scholarly research	е								
С	Preservation for future generations									
4	Provide a description of the organization's co	ollections and explain	how the	ey further th	ne organizatio	n's exem	npt purpo	se in Part	XIII.	
5	During the year, did the organization solicit of									
	to be sold to raise funds rather than to be ma							\square	Yes	☐ No
Par	t IV Escrow and Custodial Arran								line 9, or	
	reported an amount on Form 990, Pa			· ·					,	
1a	Is the organization an agent, trustee, custodi	ian or other intermedia	ary for c	ontributions	s or other ass	ets not i	ncluded			
	on Form 990, Part X?								Yes	☐ No
b	If "Yes," explain the arrangement in Part XIII								_	
_									Amount	
С	Beginning balance						1c		,	
	Additions during the year									
e	Distributions during the year									
f										
	Ending balance								Yes	No
	If "Yes," explain the arrangement in Part XIII.								165	
Par							n			
	11 Indemneted and Complete	(a) Current year		rior year	(c) Two year			voare back	(e) Four y	nare back
10	Beginning of year balance	(a) Current year	(D) F	noi yeai	(C) Two year	5 Dack	(u) Tillee y	Cais Dack	(e) i oui y	cais back
1a						+				
b	Contributions					+				
C	Net investment earnings, gains, and losses									
d	Grants or scholarships									
е	Other expenditures for facilities									
_	and programs					-				
t	Administrative expenses					-				
g	End of year balance				L					
2	Provide the estimated percentage of the curr	rent year end balance		i, column (a))) held as:					
а	Board designated or quasi-endowment		_%							
b	Permanent endowment	%								
С	Temporarily restricted endowment	%								
	The percentages on lines 2a, 2b, and 2c sho									
3а	Are there endowment funds not in the posse	ssion of the organizat	tion that	are held ar	nd administer	ed for the	e organiza	ation	_	
	by:								Y	es No
	(i) unrelated organizations								3a(i)	\rightarrow
	(ii) related organizations								3a(ii)	
b	If "Yes" on line 3a(ii), are the related organiza	ations listed as require	ed on So	chedule R?					3b	
4	Describe in Part XIII the intended uses of the		vment fu	unds.						
Par	t VI Land, Buildings, and Equipm	ient.								
	Complete if the organization answere	d "Yes" on Form 990,	Part IV	, line 11a. S	ee Form 990,	Part X,	line 10.			
	Description of property	(a) Cost or ot		(b) Cost	or other	(c) A	ccumulate	ed	(d) Book	/alue
		basis (investm	ent)		(other)	dep	reciation			
1a	Land			19	1,645.					,645.
	Buildings			1,12	9,879.	7	767,20	08.	362	,671.
	Leasehold improvements									
d	Equipment			61	6,624.		121,9		194	,686.
_е	Other			74	7,896.	2	242,18	87.	505	,709.
	Add lines 1a through 1e (Column (d) must a		/ a a li una	n (D) line 1	00.1				1 254	711.

Schedule D (Form 990) 2016 INSTITUTE OF	HEARTMATH		95	-4023617	Page
Part VII Investments - Other Securities.					
Complete if the organization answered "Yes" o					
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of v	valuation: Cost or end	-of-year market	value
(1) Financial derivatives					
(2) Closely-held equity interests					
(3) Other	2/5 /1	7 END OF V	EVD MVDKEW	773 T TTD	
(A) DONATED INVESTMENT	245,41	7. END-OF-Y	EAR MARKET	VALUE	
(B)					
(C)					
(D)					
(E)					
(F)					
(G) (H)					
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	245,41	7			
Part VIII Investments - Program Related.	243,41	1 •			
Complete if the organization answered "Yes" o	on Form 990 Part IV	line 11c See Form 900	Part Y line 13		
(a) Description of investment	(b) Book value		raluation: Cost or end	of-vear market	value
(1)	(-,	(-,			
(1)					
(3)					
(4)					
(5)					
(6)					-
(7)					
(8)					
(9)					
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)					
Part IX Other Assets.					
Complete if the organization answered "Yes" o	on Form 990, Part IV,	line 11d. See Form 990,	Part X, line 15.		
(a) D	Description			(b) Book v	alue
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
Total. (Column (b) must equal Form 990. Part X. col. (B) line Part X Other Liabilities.	<u>15.)</u>		>		
Complete if the organization answered "Yes" o	on Form 990, Part IV,	line 11e or 11f. See Forn	n 990, Part X, line 25.		
1. (a) Description of liability		(b) Book value			
(1) Federal income taxes					
(2)					
(3)					
	l l				

(4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) \triangleright

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

	dule D (Form 990) 2016	INSTITUTE					4023617	Page '
Par		=		ed Financial Statements With R	evenue per Re	turn.		
	Complete if the organ	ization answered "Ye	s" on	Form 990, Part IV, line 12a.				
1	Total revenue, gains, and oth	er support per audite	ed fina	ancial statements		1	2,634,	,177

1	Total revenue, gains, and other support per audited financial statements		1	2,634,177	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a	-49,083.		
b	Donated services and use of facilities	2b			
С	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d			2e	-49,083.
3	Subtract line 2e from line 1			3	2,683,260.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b	-25,000.		
С	Add lines 4a and 4b			4c	-25,000
5	Total revenue Add lines 3 and 4c. (This must equal Form 900, Part I line 12)			5	2.658.260.

Part XII | Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. 2,092,060. Total expenses and losses per audited financial statements 1 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities 2a **b** Prior year adjustments 2b 2c Other losses 25,000 d Other (Describe in Part XIII.) 25,000. Add lines 2a through 2d 2e 2,067,060. Subtract line 2e from line 1 3 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 4a **b** Other (Describe in Part XIII.) 4c c Add lines 4a and 4b 2,067,060. Total expenses. Add lines 3 and 4c. (This must equal Form 990. Part I. line 18.)

Part XIII Supplemental Information.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, 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 additional information.

PART X, LINE 2:

UNCERTAINTY IN INCOME TAXES - ACCOUNTING PRINCIPLES GENERALLY ACCEPTED IN THE UNITED STATES OF AMERICA PROVIDE ACCOUNTING AND DISCLOSURE GUIDANCE ABOUT POSITIONS TAKEN BY AN ORGANIZATION IN ITS TAX RETURNS THAT MIGHT BE UNCERTAIN. MANAGEMENT HAS CONSIDERED ITS TAX POSITIONS AND BELIEVES THAT ALL OF THE POSITIONS TAKEN BY THE ORGANIZATION IN ITS FEDERAL AND STATE TAX RETURNS ARE MORE-LIKELY-THAN-NOT TO BE SUSTAINED UPON EXAMINATION.

THE ORGANIZATION FILES INFORMATION RETURNS IN THE U.S. FEDERAL JURISDICTION AND STATE OF CALIFORNIA. THE ORGANIZATION'S FEDERAL RETURNS FOR THE TAX YEARS 2013 AND BEYOND REMAIN SUBJECT TO EXAMINATION BY THE INTERNAL REVENUE SERVICE. THE ORGANIZATION'S CALIFORNIA RETURNS FOR THE Schedule D (Form 990) 2016 632054 08-29-16

SCHEDULE L

(Form 990 or 990-EZ)

Transactions With Interested Persons

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

► Attach to Form 990 or Form 990-EZ.

Department of the Treasury Internal Revenue Service

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

OMB No. 1545-0047

Inspection

2016
Open To Public

Name of the organization

Employer identification number

					' HEAR'								236	17		
Part I E	xcess Bene	fit Tra	ansacti	ons	(section 50	1(c)(3), secti	ion 501(c)(4), and	501	(c)(29) organizations	s only)					
c	omplete if the c	rganiza	ation ansv	verec	I "Yes" on F	orm 9	90, Pa	art IV, line 25a or 2	25b,	or Form 990-EZ, Pa	art V, li	ine 40	b.			
1 (a) Name	of diamunlified a	04000	(b) F		onship betv			ified	(-)	Description of tran	aaatia	_		(d)	Corre	ected?
(a) Name (of disqualified p	erson		pe	rson and or	ganiza	ation		(C)	Description of tran	sactio	n		Y	es	No
		ncurred	by the o	rgani	zation mana	agers	or disc	ualified persons o	durin	g the year under						
section 49												> \$				
3 Enter the	amount of tax,	if any, o	on line 2,	abov	e, reimburse	ed by	the org	ganization				▶ \$				
Part II L	oans to and	/or F	rom Int	eres	ted Pers	ons										
								Dort V. line 20e e	F.	orm 000 Dort IV line	. 06	:f +b		nizatio		
	eported an amo	•						, Part V, line Soa C	טו דט	orm 990, Part IV, line	e ∠6, C	וו זכ	e orga	nızatıc	וזכ	
	ame of		lationship	1	Purpose		an to or	(e) Original	Т	(f) Balance due	(a)	In	(h) Ap	proved	(i) \	Vritten
	ed person		ganization		of loan		n the zation?	principal amour	nt	(i) Balance due	defa		by bo	ard or	agre	ement?
						То	From				Yes	No	Yes	No	Yes	No
ROLLIN 1	MCCRATY	OFF:	ICER	то	HELP	Х		85,000	١.	5,000.		Х	Х		Х	
QUANTUM	INTECH	DOC	CHIL	то	FINAN		Х	268,908	3.	241,393.		Х	Х		Х	
									_							
									4							
				ļ					_							
									+							
									+							
T-1-1				ļ						246,393.						
Total Part III C	rants or As	sistar	ice Ber	efit	ina Intere	estec	d Per	<u>></u>	>	240,393.						
	omplete if the c				_											
	e of interested p				elationship			(c) Amount	of	(d) Type	of		(e) Purn	ose c	of
(a) Nam	o or interested p	7013011			rested pers			assistance		assistan			(e) Purpose of assistance			
					he organiza											

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

Schedule L (Form 990 or 990-EZ) 2016

Schedule L (Form 990 or 990-EZ) 2016 INSTITUTE OF HEARTMATH Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered (a) Name of interested person	(b) Re	elatio	onship b	etwe	en intere	sted	d (c) Amount of (d) Description of transaction			•	(e) Sharing of organization?			
											Yes	No		
QUANTUM INTECH	DOC	CF	IILD	RE,	CEO	OF	147	,719.	QUAN'	TUM INT		X		
HEARTMATH LLC	QI :	IS	THE	PA	RENT	CO				COGS-C		X		
HEARTMATH LLC	QI :	IS	THE	PA	RENT	CO	92	,585.	SOLD	SERVIC		X		
HEARTMATH LLC	QI :	IS	THE	PA	RENT	CO	138	,753.	IHM	PAID HM		Х		
QUANTUM INTECH	DOC	CF	HILD	RE,	CEO	OF	665	,900.	HMI :	SOLD IT		Х		
Part V Supplemental Information														
Provide additional information for response	nses to	o que	estions	on Sc	hedule L	_ (see i	instructions)							
SCHEDULE L, PART II, LOANS	ТО	AN	D FF	ROM	INTE	RES	TED PE	RSONS	5:					
(A) NAME OF PERSON: ROLLIN	MCC	!RA	TY											
(5) 555 355 555 555			017											
(B) RELATIONSHIP WITH ORGA	NTZA	ТΤ	ON:	OFI	TCER	<u> </u>								
(a) DIDDOGE OF LOAM. MO HELD CAGH FLOW														
(C) PURPOSE OF LOAN: TO HELP CASH FLOW														
(D) LOAN TO OR FROM ORGANIZATION? = TO														
(D) LOAN TO OR FROM ORGANI	UAII	OIV	• -	10										
(E) ORIGINAL PRINCIPAL AMO	ידענ	Ġ	85 0	000	. (1	ם (י	RALANCE	DITE	\$ 5	000.				
(L) ORIGINAL TRINCITAL THO	J111	Υ	05,0	, 00	• \ ±	<u>, -</u>	/11D111(CL	<u> </u>	γ ο,	000•				
(G) LOAN IN DEFAULT? = NO														
(*,														
(H) APPROVED BY BOARD OR CO	IMMC	ТТ	EE?	= 3	YES									
(I) WRITTEN AGREEMENT? = Y	ES													
(A) NAME OF PERSON: QUANTU	MI IN	ΙΤΕ	CH											
(-)					~ ~		_ ~_~				~			
(B) RELATIONSHIP WITH ORGA	NTZA	TT	ON:	DOC	CH1	.LDR	RE, CEC	OF C	UANTI	UM INTE	СН			
/OT AND DESTREME OF THE	ם ת ג													
(QI) AND PRESIDENT OF IHM	ARE													
(C) PURPOSE OF LOAN: TO FI	\T 7\	· -	mur	DITE	осцис	ים:	ים דאותם	T T TO C T	י דגדוי	מסים מיס מס	v			
(C) FURFUSE OF LOAN: TO FI	NAINC	. Li	1115	PUI	CHAS	be C) TINIE	ппест	UAL .	PROPERT	<u> </u>			
(D) LOAN TO OR FROM ORGANI	7. Δ ጥ T	OM	2 -	FR(ЭМ									
(D) HOAN TO OK TROM ORGANT		OIV	• -	rice	JI1									
(E) ORIGINAL PRINCIPAL AMO	יוענ	Ś	268.	908	3. (F)	BALANC	E DUF	: \$ 2	41.393.				
(L) ORIGINAL PROPERTY.	<u> </u>	Υ			<u>, </u>		DIILIII		. y <u>-</u>	11/3334				
(G) LOAN IN DEFAULT? = NO														
(H) APPROVED BY BOARD OR CO	IMMC	тт	EE?	= 3	YES									
I) WRITTEN AGREEMENT? = YES														

Part V Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule L (see instructions).

SCH L, PART IV, BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS:

- (A) NAME OF PERSON: QUANTUM INTECH
- (B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:

DOC CHILDRE, CEO OF QUANTUM INTECH (QI) AND PRESIDENT OF IHM ARE MARRIED

- (C) AMOUNT OF TRANSACTION \$ 147,719.
- (D) DESCRIPTION OF TRANSACTION: QUANTUM INTECH PAID IHM LICENSE FEES & SRVCS.
- (E) SHARING OF ORGANIZATION REVENUES? = NO
- (A) NAME OF PERSON: HEARTMATH LLC
- (B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:
- QI IS THE PARENT COMPANY OF HEARTMATH LLC
- (C) AMOUNT OF TRANSACTION \$ 503,889.
- (D) DESCRIPTION OF TRANSACTION: PAID COGS-COSTS OF GOODS SOLD -

INSTITUTE OF HEARTMATH PURCHASES PRODUCTS FROM HEARTMATH LLC FOR SALE AND

SHIPPING REIMBURSEMENTS.

- (E) SHARING OF ORGANIZATION REVENUES? = NO
- (A) NAME OF PERSON: HEARTMATH LLC
- (B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:
- QI IS THE PARENT COMPANY OF HEARTMATH LLC
- (C) AMOUNT OF TRANSACTION \$ 92,585.
- (D) DESCRIPTION OF TRANSACTION: SOLD SERVICES INSTITUTE OF HEARTMATH

PROVIDED TRAINING SERVICES TO HEARTMATH LLC

- (E) SHARING OF ORGANIZATION REVENUES? = NO
- (A) NAME OF PERSON: HEARTMATH LLC
- (B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:

Complete this part to provide additional information for responses to questions on Schedule L (see instructions).
QI IS THE PARENT COMPANY OF HEARTMATH LLC
(C) AMOUNT OF TRANSACTION \$ 138,753.
(D) DESCRIPTION OF TRANSACTION: IHM PAID HMLLC FOR TRAINING SRVCS,
TRAINING & EDUC MATERIALS
(E) SHARING OF ORGANIZATION REVENUES? = NO
(A) NAME OF PERSON: QUANTUM INTECH
(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:
DOC CHILDRE, CEO OF QUANTUM INTECH (QI) AND PRESIDENT OF IHM ARE MARRIED
(C) AMOUNT OF TRANSACTION \$ 665,900.
(D) DESCRIPTION OF TRANSACTION: HMI SOLD ITS INTELLECTUAL PROPERTY TO QI
ON SEPTEMBER 30, 2016.
(E) SHARING OF ORGANIZATION REVENUES? = NO

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

2016 Open to Public Inspection

OMB No. 1545-0047

Name of the organization

INSTITUTE OF HEARTMATH

Employer identification number 95-4023617

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: TEACHERS, ADMINISTRATORS, SCHOOL COUNSELORS, AS WELL AS STUDENTS. NONPROFIT LEADERS, STAFF AND THOSE THEY SERVE, SOCIAL AND COMMUNITY SERVICE ORGANIZATIONS, LOCAL GOVERNMENT AGENCIES, MILITARY SERVICE MEMBERS AND VETERANS AND THEIR FAMILIES. FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS: TWO NEW BOOKS 'HEART INTELLIGENCE' AND 'TRANSFORMING STRESS FOR TEENS' WERE RELEASED IN 2016. LAUNCHED THE SUNSHINE SECRET E-LEARNING PROGRAM, AN INNOVATIVE AND HIGHLY INTERACTIVE PROGRAM FOR AGES 3-7 THAT USES AN ENTERTAINING ANIMATED STORY TO TEACH CHILDREN HOW TO RECOGNIZE, SELF-REGULATE AND CONTROL THEIR EMOTIONS WITH ALONG WITH INTERACTIVE SUPPORT ACTIVITIES LIKE VIRTUAL PUZZLES, COLORING, EMOTION FACE-MATCHING AND EMOTION VOCABULARY. TRAINERS DELIVER HEARTMATH RESILIENCE TRAININGS TO NONPROFITS. GOVERNMENT SERVICE AGENCIES, EDUCATORS, COUNSELORS, TEACHERS, ADMINISTRATORS, SCHOOL STAFF, VETERANS, FIRST RESPONDERS AND OTHER SERVICE PROVIDERS TO TEACH OR INCORPORATE HEARTMATH TECHNIQUES INTO THEIR EXISTING TRAINING PROGRAMS. COACH/MENTORS PROVIDE ONE ON ONE TRAINING AND SUPPORT FOR INDIVIDUALS. HEARTMATH CERTIFIED TRAINING PROGRAMS DELIVERED IN 2016 CERTIFIED 85 TRAINERS AND 203 COACH/MENTORS. IN ADDITION, 50 CLINICIANS WERE CERTIFIED IN THE HEARTMATH

INTERVENTIONS PROGRAM.

Name of the organization

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- 4. IN 2016, NUMEROUS EDUCATIONAL, NONPROFIT AND OTHER SERVICE INSTITUTIONS AROUND THE WORLD IMPLEMENTED HEARTMATH TECHNOLOGY AND PROGRAMS INCLUDING YOUTH FOR TOMORROW, WHICH SERVES AT-RISK YOUTH IN THE WASHINGTON DC AREA; SEDNET, A FLORIDA-BASED STATE DEPARTMENT THAT SERVES STUDENTS AFFLICTED WITH EMOTIONAL BEHAVIOR ORDERS; FLORIDA ATLANTIC UNIVERSITY AND THE COLLEGE OF NURSING CONTINUED TO PROVIDE HEARTMATH SKILLSETS AND TECHNOLOGY TO THEIR NURSING STAFF AND STUDENTS AS WELL AS DEVELOPING NEW RESEARCH PROJECTS FOR THE SCHOOL AND SURROUNDING COMMUNITY IN BOCA RATON; THE TEXAS DEPARTMENT OF PUBLIC SAFETY PROVIDED A HEARTMATH CERTIFIED TRAINER TO PROVIDE RESILIENCE ADVANTAGE WORKSHOPS TO THEIR LAW ENFORCEMENT RECRUITS; BLUE COURAGE CONTINUED PROVIDING RESILIENCE AND ENERGY SELF-REGULATION TRAINING TO OVER 3,500 POLICE OFFICERS IN 2016. STATE UNIVERSITY OF NEW YORK, OSWEGO CAMPUS, INVITED HEARTMATH EDUCATION DEPARTMENT TO PARTICIPATE IN THE FIRST YEAR OF A THREE-YEAR PROJECT CALLED PROJECT BLEND 'BUILDING LEADERSHIP EXCELLENCE FOR NEEDS-BASED DISTRICTS', TO HELP PROVIDE RESILIENCY SKILLS TO 25 SUPERINTENDENTS, PRINCIPALS, VICE PRINCIPALS, GETTING THEIR DEGREES IN ADMINISTRATIVE SERVICES FOR HIGH NEEDS SCHOOL DISTRICTS.
- 5. ATTENDED AND PRESENTED AT 11 EDUCATION CONFERENCES AND EVENTS IN 2016.
- 6. NUMBER OF ACTIVE MEMBERS: 2,157
- 7. ADDED NEW FREE ONLINE AND SOCIAL MEDIA RESOURCES, WEBINARS AND
 VIDEOS, INCLUDING THE 'WHAT IS SOCIAL COHERENCE' VIDEO. THE 'IMPORTANCE

Name of the organization INSTITUTE OF HEARTMATH	Employer identification number 95-4023617				
OF RESILIENCE' VIDEO, LAUNCHED LAST YEAR, HAD 12,507 MORE	VIEWS THIS				
YEAR.					
# SERVED 1,260,759					
EDUCATION RESTRICTED FUNDS					
THE SMARTBRAINWISEHEART PROJECT CONTINUED DEVELOPING LEARN	ING PROGRAMS				
FOR MIDDLE AND HIGH SCHOOL STUDENTS, IMPLEMENTING CHANGES	FROM THE				
PILOT PROGRAMS CONDUCTED LAST YEAR. THE PROGRAM, TEACHING	CORE CONCEPTS				
AND POSITIVE BEHAVIORS, IS SCHEDULED TO LAUNCH IN 2017.					
THE HEARTSMARTS PROJECT CONTINUED DEVELOPING NEW LEARNING	PROGRAMS FOR				
PRE-K, KINDERGARTEN AND GRADE SCHOOL STUDENTS. LAUNCHED TH	E SUNSHINE				
SECRET E-LEARNING PROGRAM FOR AGES 3-7 USING AN ENTERTAINI	NG ANIMATED				
STORY AND COMPUTER TECHNOLOGY TO ENGAGE AND GENTLY CHALLEN	GE CHILDREN.				
A SERIES OF INTERACTIVE SUPPORT ACTIVITIES TEACHES THEM HO	W TO				
RECOGNIZE, SELF-REGULATE AND CONTROL THEIR EMOTIONS.					
# SERVED 888					
THE DONOR SUPPORTED HEARTMATH EDUCATION PROJECT PROVIDES H	EART-FOCUSED				
TOOLS AND PROGRAMS TO PUBLIC- AND PRIVATE-SCHOOL REGULAR C	LASSROOMS AND				
SPECIAL EDUCATION AND GIFTED PROGRAMS. IN 2016, 25 SPONSOR	SHIPS WERE				
AWARDED TO TEACHERS, PARENTS, COUNSELORS, PSYCHOLOGISTS, A	DMINISTRATORS				
AND OTHERS INVOLVED IN EDUCATING CHILDREN.					

Schedule O (Form 990 or 990-EZ) (2016) Page 2 Name of the organization **Employer identification number** INSTITUTE OF HEARTMATH 95-4023617 THE DONOR SUPPORTED HEARTMATH FOR COMMUNITIES PROJECT ASSISTS COMMUNITIES BY PROVIDING SPONSORSHIPS FOR LOCAL SERVICE AND NONPROFIT ORGANIZATIONS, SENIOR CARE FACILITIES, SOCIAL-SERVICE AGENCIES, DISASTER AND TRAUMA VICTIMS AND RESCUE, POLICE AND FIREFIGHTERS. THREE SPONSORSHIPS WERE AWARDED IN 2016. # SERVED 120 THE MILITARY SERVICE APPRECIATION FUND WAS CREATED TO GIVE BACK TO THOSE WHO'VE GIVEN SO MUCH BY AWARDING SCHOLARSHIPS FOR HEARTMATH SERVICES, PROGRAMS AND MATERIALS TO ASSIST VETERANS. PRIOR AWARDEES CONTINUED SERVING VETERANS AND MILITARY FAMILIES THROUGHOUT 2016 AND 9 MORE SPONSORSHIPS WERE AWARDED. THE INITIATIVE ALSO SENT 670 FREE H.E.A.R.T. (HEARTMATH EDUCATION AND RESILIENCE TRAINING) DVDS TO ACTIVE-DUTY PERSONNEL, VETERANS AND THEIR FAMILIES ALONG WITH CREATING AND LAUNCHING THE NEW FREE ONLINE VERSION OF THE H.E.A.R.T. DVD IN LATE FALL WITH 56 DOWNLOADS. SERVED 3,183 FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS: 1. CREATED A FREE 3 HOUR E-COURSE ON COHERENCE TITLED 'INCREASING SELF-REGULATORY CAPACITY COHERENCE: THE SCIENTIFIC BASIS OF THE COHERENCE MODEL' TO BE LAUNCHED IN 2017. LAST YEAR'S E-COURSE ON

HEART-RATE VARIABILITY CONTINUED TO BE VIEWED BY THOUSANDS.

Name of the organization **Employer identification number** INSTITUTE OF HEARTMATH 95-4023617 2. THE RESEARCH TEAM COMPLETED AND PUBLISHED VOLUME 2 OF THE 'SCIENCE OF THE HEART' BOOK AND 'THE SCIENCE OF INTERCONNECTIVITY: EXPLORING THE HUMAN-EARTH CONNECTION' E-BOOK. 3. FOR 2016 PUBLICATIONS, THE RESEARCH TEAM WAS MAINLY FOCUSED ON PUBLISHING THE AFOREMENTIONED BOOKS AND COLLABORATING WITH THE EDUCATION TEAM TO PUBLISH 'TRANSFORMING STRESS FOR TEENS', ALL LARGER WORKS. HOWEVER, NUMEROUS INDEPENDENT RESEARCH STUDIES AND PH.D. DISSERTATIONS WERE PUBLISHED BY OTHERS AROUND THE WORLD WHICH UTILIZED HEARTMATH CONTENT IN A WIDE VARIETY OF APPLICATIONS, FROM INCREASING PERFORMANCE IN PROFESSIONAL SOCCER PLAYERS, COMBINING UBUNTU AND HEARTMATH TO PROMOTE SOCIAL CONSCIOUSNESS, COHERENCE AND PHYSICAL ACTIVITY TO IMPROVING HEALTH IN POLICE OFFICERS: "INCREASING PERFORMANCE OF PROFESSIONAL SOCCER PLAYERS AND ELITE TRACK AND FIELD ATHLETES WITH PEAK PERFORMANCE TRAINING AND BIOFEEDBACK: A PILOT STUDY" PUBLISHED IN THE JOURNAL OF APPLIED PSYCHOPHYSIOLOGY AND BIOFEEDBACK; 41(4): 421430; 2016; BY NOORTJE H. RIJKEN, REMKO SOER, EWOLD DE MAAR, HILCO PRINS, WOUTER B. TEEUW, JAN PEUSCHER, AND FRITS G. J. OOSTERVELD "HEARTMATH AND UBUNTU INTEGRAL HEALING APPROACHES FOR SOCIAL COHERENCE AND PHYSICAL ACTIVITY" PUBLISHED IN THE AFRICAN JOURNAL FOR PHYSICAL HEALTH EDUCATION, RECREATION AND DANCE; 22(1:1):49-64 APRIL 2016; 1ST STEPHEN DAVID EDWARDS, UNIVERSITY OF ZULULAND "IMPROVING OFFICER RESILIENCY TO STRESS AND ASSOCIATED HEALTH OUTCOMES" PUBLISHED IN COMMUNITY POLICING DISPATCH E-NEWSLETTER; VOLUME 9, ISSUE 9, SEPTEMBER 2016; BY SANDRA RAMEY, ASSISTANT PROFESSOR, THE

UNIVERSITY OF IOWA COLLEGE OF NURSING AND PUBLIC HEALTH

Name of the organization **Employer identification number** INSTITUTE OF HEARTMATH 95-4023617 4. THE HMI RESEARCH TEAM PROVIDED 1597 HRV AUTONOMIC ASSESSMENT REPORTS (AAR); 214 10-MINUTE SHORT-TERM AUTONOMIC ASSESSMENT REPORTS; 1,499 PERSONAL AND ORGANIZATIONAL QUALITY ASSESSMENT SURVEY FORMS FOR INDIVIDUALS, ORGANIZATIONS AND INDEPENDENT RESEARCHERS (POOA-R4); ANALYZED AND PROVIDED 1,027 POQA-R PRE AND POST PSYCHOMETRIC SURVEY REPORTS AND EXTENSIVE CONSULTING, ANALYSIS AND PROJECT WORK FOR INDEPENDENT RESEARCHERS AND ORGANIZATIONS. PRESENTED AT 8 NATIONAL AND INTERNATIONAL CONFERENCES AND EVENTS IN 2016. # SERVED 351,130 RESEARCH RESTRICTED FUNDS THE INTERCONNECTIVITY RESEARCH PROJECT CONTINUED INTERCONNECTIVITY STUDIES: COMPLETING DATA COLLECTION, PRELIMINARY ANALYSIS AND IN THE PROCESS OF PUBLISHING THE RESULTS OF A STUDY CALLED 'INVESTIGATING THE DYNAMIC INTERCONNECTIVITY BETWEEN HUMANITY AND EARTH'S ENERGETIC SYSTEMS'. THE STUDY MEASURED THE DEGREE OF HEART-RHYTHM SYNCHRONIZATION AMONG GROUPS OF PEOPLE WHO WERE LOCATED IN FIVE DIFFERENT COUNTRIES, AND THE DEGREE OF SYNCHRONIZATION OF THE INDIVIDUALS HEART RHYTHMS TO THE RESONANT FREQUENCIES IN THE EARTH'S MAGNETIC FIELDS. THE RESULTS SHOWED SOME SURPRISING FINDINGS THAT INDICATE WE ARE MORE INTERCONNECTED WITH EACH OTHER AND THE EARTH THAN PREVIOUSLY IMAGINED. THE RESEARCH FUND, ESTABLISHED IN 2012 TO EXPAND, DISSEMINATE AND CARRY OUT HEARTMATH RESEARCH, SUPPORTS ONGOING RESEARCH, COLLABORATIONS WITH

Name of the organization **Employer identification number** INSTITUTE OF HEARTMATH 95-4023617 UNIVERSITIES AND OTHER RESEARCHERS AROUND THE WORLD, SCIENTIFIC STUDIES AND RESULTING PUBLICATIONS. RESEARCH STAFF PUBLISHED TWO BOOKS (2016 DISTRIBUTION WAS 2300 BOOKS) AND COLLABORATED ON ANOTHER. THEY ALSO COLLABORATED TO CREATE THE NEW "WHAT IS SOCIAL COHERENCE" VIDEO WITH 8,536 VIEWS SINCE JULY 2016. THE HEART'S INTUITIVE INTELLIGENCE: A PATH TO PERSONAL, SOCIAL AND GLOBAL COHERENCE VIDEO CONTINUES TO EDUCATE THE PUBLIC ON LEADING EDGE RESEARCH ON THE ROLE OF THE HEART IN THE HUMAN SYSTEM WITH 326,382 VIEWS IN 2016. BEGAN WORK ON THE SOCIAL COHERENCE INITIATIVE WHICH RECEIVED FUNDING AT THE END OF 2015. THIS INITIATIVE IS FOCUSED ON DEVELOPING AND SCIENTIFICALLY VALIDATING PROGRAMS AND NEW TECHNOLOGY THAT HELP TO INCREASE SOCIAL COHERENCE. AN IMPORTANT ASPECT OF THIS INITIATIVE IS THE DEVELOPMENT OF GROUP COHERENCE ASSESSMENT TECHNOLOGY THAT PROVIDES REAL-TIME FEEDBACK OF A GROUP'S COLLECTIVE COHERENCE LEVEL. THE GROUP COHERENCE ASSESSMENT PLATFORM WILL PROVIDE FEEDBACK ON BOTH AN INDIVIDUAL'S PERSONAL COHERENCE LEVEL AND A GROUP'S COMBINED COHERENCE LEVEL. DATA COLLECTED BY THE TECHNOLOGY PLATFORM WILL ENABLE US TO INVESTIGATE HOW COLLECTIVE HEART-RHYTHM COHERENCE CORRELATES WITH INCREASED SOCIAL HARMONY AS INDICATED BY THE VARIOUS OUTCOME MEASURES. ANOTHER IMPORTANT ASPECT OF THE INITIATIVE IS THE DEVELOPMENT AND VALIDATION OF NEW TECHNIQUES, AND PROCESSES FOR BUILDING AND SUSTAINING SOCIAL COHERENCE IN, FAMILIES, CLASSROOMS, TEAMS, COMMUNITIES AND ORGANIZATIONS. THESE TECHNIQUES, PROCESSES AND TOOLS WILL BUILD ON THE SELF-REGULATION TECHNIQUES CURRENTLY USED FOR ACHIEVING PERSONAL

COHERENCE.

Name of the organization **Employer identification number** INSTITUTE OF HEARTMATH 95-4023617 CREATING THE EQUIPMENT AND SOFTWARE TO SIMULTANEOUSLY MEASURE AND SEND DATA FROM MULTIPLE TREES WAS SUCCESSFULLY COMPLETED WITH COMPELLING RESULTS. WORK ON PHASE 2, DEVELOPING LOW-POWER-USE TREE POTENTIAL AMPLIFIERS, ELECTRODES AND SCALABLE COMPONENTS AND SYSTEM TO EXPAND TO SCOPE OF THE PROJECT, WILL BEGIN IN 2017. FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS: 1. CONTINUED TESTING POTENTIAL NEW SENSOR SITES IN SOUTH AMERICA. GCMS STAFF AND VOLUNTEERS ALSO MAINTAINED AND COLLECTED CONTINUOUS DATA FROM GLOBAL COHERENCE MONITORING SYSTEM SENSOR SITES IN THE UNITED STATES, SAUDI ARABIA, CANADA, NEW ZEALAND, LITHUANIA AND SOUTH AFRICA. 2. PROVIDED FREE INFORMATION INCLUDING WEBINARS, TRAINING AND RESOURCES ON WEBSITE AND SOCIAL MEDIA. 3. HOSTED THE FIFTH ANNUAL EVENT AT THE TAO RESORT AND WELLNESS CENTER IN THE RIVIERA MAYA ON THE YUCATAN PENINSULA, MEXICO FOR 82 PARTICIPANTS. THIS EVENT WAS DESIGNED TO HELP PEOPLE LEARN HOW TO INCREASE ACCESS TO THEIR HEART'S INTUITIVE INTELLIGENCE AND MORE EFFECTIVELY INCREASE PERSONAL, SOCIAL AND GLOBAL COHERENCE. AT THE EVENT, THE FIRST HUMANITARIAN HEART AWARDS WERE PRESENTED TO HONOR THE EXCEPTIONAL WORK OF SIX INDIVIDUALS, MAJD KAM ALMAZ, CHRISTINA CHOI, PECK CHO, TAMMY CUNNINGHAM, MICHAEL J. NILA AND VIRGINIA SCHOENFELD WHOSE TIRELESS CARE HAS HELPED THOUSANDS OF MEN, WOMEN AND CHILDREN. 4. HOSTED 12 GCI CARE FOCUSES IN THE GLOBAL CARE ROOM WHERE PEOPLE FROM AROUND THE GLOBE UNITE IN SYNCHRONOUS HEART COHERENCE SESSIONS. 36,897

SESSIONS IN 2016.

Name of the organization **Employer identification number** 95-4023617 INSTITUTE OF HEARTMATH 5. SPOKE AT 6 EVENTS AND CONFERENCES AROUND THE WORLD, IN ADDITION TO PRESENTING NUMEROUS FREE TELESEMINARS AND WEBINARS. # SERVED 180,937 FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES: LICENSE FEES AND ROYALTIES THE INSTITUTE OF HEARTMATH EXPANDED IT'S OUTREACH TO MANY MORE PEOPLE THROUGH LICENSING AND PUBLISHING AGREEMENTS WITH OTHER ORGANIZATIONS FOR TRAINING INDIVIDUALS AND DISSEMINATING INFORMATION ABOUT HEARTMATH. IN RETURN THE INSTITUTE RECEIVES A SMALL PERCENTAGE OF ROYALTIES AND LICENSING FEES FROM THE TRADEMARKED AND/OR COPYRIGHTED MATERIALS AND PUBLICATIONS. IN 2016, THE ORGANIZATION SOLD ITS INTELLECTUAL PROPERTY TO QUANTUM INTECH. THIS SALE WILL INCREASE THE SCOPE OF OUTREACH TO MORE PEOPLE. # SERVED 350,000 EXPENSES \$ 16,000. INCLUDING GRANTS OF \$ 0. REVENUE \$ 130,682. FORM 990, PART VI, SECTION B, LINE 11B: COPIES OF THE FINAL DRAFT ARE EMAILED TO BOARD OF DIRECTORS FOR REVIEW BEFORE THE 990 IS APPROVED AND FILED. FORM 990, PART VI, SECTION B, LINE 12C: CONFLICT OF INTEREST DISCLOSURE FORM IS SENT ANNUALLY TO OFFICERS, DIRECTORS/TRUSTEES AND KEY EMPLOYEES TO DISCLOSE POTENTIAL CONFLICTS OF

Name of the organization INSTITUTE OF HEARTMATH

Employer identification number 95-4023617

INTEREST. COMPLIANCE OFFICER SERVES ON THE BOARD AND ISSUES ARE EXAMINED

FOR POTENTIAL CONFLICT OF INTEREST. BOARD MEMBERS ARE RECUSED FROM

DISCUSSION AND VOTE ON ANY AND ALL ISSUES THAT HAVE OR MAY POTENTIALLY HAVE

A CONFLICT OF INTEREST.

FORM 990, PART VI, SECTION B, LINE 15:

COMPARABILITY DATA IS ASSEMBLED FOR BOARD BY NON-INVOLVED STAFF (MORE THAN ONE SOURCE FOR EACH POSITION - SAME SOURCES FOR ALL POSITIONS - REVIEWED FROM COPIES OF DOCUMENTS FROM SOURCES NOT COMPILED REPORTS). WHEN THE BOARD DECIDES THERE IS TO BE A CHANGE IN SALARIES/WAGES, THE BOARD REVIEWS THE COMPARABILITY DATA FOR OFFICERS, MANAGEMENT AND KEY EMPLOYEE STAFF AND DELIBERATES AND DECIDES ON THE COMPENSATION. THE BOARD ALSO ISSUES GUIDELINES TO MANAGERS FOR COMPENSATION CHANGES TO BE APPLIED UNIVERSALLY FOR NON-MANAGEMENT STAFF. MANAGEMENT STAFF THAT SERVE ON THE BOARD ARE RECUSED FROM REVIEWS, DISCUSSION AND VOTING PERTAINING TO THEMSELVES.

FORM 990, PART VI, SECTION C, LINE 19:

DOCUMENTS ARE AVAILABLE ON REQUEST. IF REQUESTER WILL NOT OR CAN NOT SUPPLY
AN EMAIL ADDRESS WHERE THE DOCUMENTS CAN BE DELIVERED, THEN ADVANCE PAYMENT
OF A COPY FEE OF \$.20 USD PER PAGE IS REQUIRED PLUS ACTUAL POSTAGE AND
VALID POSTAL ADDRESS(IF MAILING THE DOCUMENTS). INDIVIDUALS MAY VIEW THE

DOCUMENTS ONSITE DURING OFFICE HOURS BARRING UNUSUAL CIRCUMSTANCES.

REQUESTS ARE FULFILLED WITHIN 2 WEEKS OF RECEIPT OF THE REQUEST OR PAYMENT
OF REQUIRED FEES(IF APPLICABLE), AND THE INFORMATION REQUIRED TO FULFILL
THE REQUEST. ADDITIONAL CHARGES AND/OR TIME MAY BE ADDED FOR REQUESTS FOR

NON-STANDARD DOCUMENTS THAT INCUR ADDITIONAL RETRIEVAL COSTS FOR THE

ORGANIZATION.

Name of the organization INSTITUTE OF HEARTMATH	Employer identification number 95-4023617
FORM 990, PART IX, LINE 11G, OTHER FEES:	
OUTSIDE SERVICES:	
PROGRAM SERVICE EXPENSES	139,232.
MANAGEMENT AND GENERAL EXPENSES	2,386.
FUNDRAISING EXPENSES	12,937.
TOTAL EXPENSES	154,555.
CATERING:	
PROGRAM SERVICE EXPENSES	2,129.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	79.
TOTAL EXPENSES	2,208.
OUTSIDE SERVICES 1099:	
PROGRAM SERVICE EXPENSES	299,174.
MANAGEMENT AND GENERAL EXPENSES	346.
FUNDRAISING EXPENSES	2,590.
TOTAL EXPENSES	302,110.
SALES COMMISSIONS:	
PROGRAM SERVICE EXPENSES	6,987.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	6,987.
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	465,860.
FORM 990 PART IX COLUMN C	

Name of the organization INSTITUTE OF HEARTMATH	Employer identification number 95-4023617
\$218,561 OF THE \$268,103 MANAGEMENT AND GENERAL EXPENSES A	RE INDIRECT
COSTS. INDIRECT COSTS ARE EXPENSES SHARED BY THE ENTIRE OF	GANIZATION,
SUCH AS: EXPENSES FOR MANAGERIAL, FACILITIES AND CLERICAL	STAFF
POSITIONS THAT SERVE THE WHOLE ORGANIZATION, CONTRIBUTING	TO PROGRAM
ACTIVITIES	
AS WELL AS SUPPORT ACTIVITIES. SOME NONPROFITS ALLOCATE IN	DIRECT COSTS
TO PROGRAMS SO THEIR MANAGEMENT AND GENERAL EXPENSES APPEA	AR LOWER. IF
WE ALLOCATED THE \$218,561 INDIRECT COSTS, THEN \$11,601 WOU	ILD GO TO
MANAGEMENT AND GENERAL AND FUNDRAISING (SUPPORT) AND \$206,	961 WOULD GO
TO PROGRAMS, MAKING OUR TOTAL SUPPORT EXPENSE \$126,096 OR	6.1% AND
PROGRAMS \$1,940,966 OR 93.9 % OF TOTAL EXPENSES.	

2016 DEPRECIATION AND AMORTIZATION REPORT

FORM 990 PAGE 10 990

Asset No.	Description	Date Acquired	Method	Life	Conv	ine No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
	BUILDINGS														
3	BUILDINGS	VARIOUS		.000	ну1	.61,	,129,879.				1,129,879.	729,102.		38,106.	767,208.
	* 990 PAGE 10 TOTAL BUILDINGS						,129,879.				1,129,879.	729,102.		38,106.	767,208.
	FURNITURE & FIXTURES														
4	FURNITURE & FIXTURES	VARIOUS		.000	ну1	.6	50,918.				50,918.	49,388.		73.	49,461.
9	EQUIPMENT	VARIOUS		.000	HY1	.6	101,166.				101,166.	87,712.		2,791.	90,503.
	* 990 PAGE 10 TOTAL FURNITURE & FIXTURES						152,084.				152,084.	137,100.		2,864.	139,964.
	MACHINERY & EQUIPMENT														
5	EQUIPMENT	VARIOUS		.000	ну1	.6	375,079.				375,079.	188,372.		26,300.	214,672.
6	COMPUTERS	VARIOUS		.000	HY1	.6	109,130.				109,130.	67,513.		15,287.	82,800.
	* 990 PAGE 10 TOTAL MACHINERY & EQUIPMENT						484,209.				484,209.	255,885.		41,587.	297,472.
	TRANSPORTATION EQUIPMENT														
8	AUTOS	VARIOUS		.000	ну1	.6	132,415.				132,415.	122,372.		2,094.	124,466.
	* 990 PAGE 10 TOTAL TRANSPORTATION EQUIPMENT						132,415.				132,415.	122,372.		2,094.	124,466.
	LAND														
1	LAND	VARIOUS		.000	HY1	.6	191,645.				191,645.			0.	
	* 990 PAGE 10 TOTAL LAND						191,645.				191,645.	0.		0.	0.
	OTHER														

FORM 990 PAGE 10 990

Asset No.	Description	Date Acquired	Method	Life	C o n v	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
2	CONSTRUCTION IN PROCESS	VARIOUS		.000	ну16	438,715.				438,715.			0.	
7	LAND IMPROVEMENT	VARIOUS		.000	нұ16	157,097.				157,097.	94,224.		7,999.	102,223.
	* 990 PAGE 10 TOTAL OTHER					595,812.				595,812.	94,224.		7,999.	102,223.
	* GRAND TOTAL 990 PAGE 10 DEPR					2,686,044.				2,686,044.1	,338,683.		92,650.	L,431,333.