PUBLIC DISCLOSURE COPY - STATE REGISTRATION NO. 58948

Department of the Treasury Internal Revenue Service

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

▶ 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.

AF	or the	2013 Calendar year, or tax year beginning and	enaing	_	
B c	heck if pplicable	C Name of organization		D Employer identific	cation number
	Addres	INSTITUTE OF HEARTMATH			
	Name change	Doing Business As		95-4	023617
F	Initial return	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone number	
_	Termin- ated Amend			(831	
	Jreturn ☐Applica	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	2,235,054.
L	tion pending	BOODDER CREEK, CA 33000		H(a) Is this a group re	
		F Name and address of principal officer: DRIAN KADAKER	for subordinates		
	-	SAME AS C ABOVE		H(b) Are all subordinates in	
		mpt status: X 501(c)(3)	or 527	1	list. (see instructions)
		e: ► WWW. HEARTMATH. ORG		H(c) Group exemptio	
K F		organization: X Corporation	L Year	of formation: 1991 N	1 State of legal domicile: CA
		Summary	דר סדי	ODIE ADOLIND	MAE MODID
ခ်		Briefly describe the organization's mission or most significant activities: $\overline{ ext{TO}}$ $\overline{ ext{H}}$ ESTABLISH HEART-BASED LIVING AND GLOBAL			THE WORLD
nan	-				
ver		Check this box (if the organization discontinued its operations or disponded its operations.)		1 1	ssets.
ဗ္ဗ	i	Number of voting members of the governing body (Part VI, line 1a)		3	4
ಶ	1	rotal number of individuals employed in calendar year 2013 (Part V, line 2a)			25
itie	1	Total number of individuals employed in calendar year 2013 (Fart V, line 2a)			20
Activities & Governance		Fotal unrelated business revenue from Part VIII, column (C), line 12			0.
ĕ		Net unrelated business taxable income from Form 990-T, line 34			0.
		ver unrelated business taxable meeting from 1 offi 350 1, line 04		Prior Year	Current Year
a)	8 (Contributions and grants (Part VIII, line 1h)		281,669.	235,498.
ž	1	Program service revenue (Part VIII, line 2g)		758,606.	641,250.
Revenue		nvestment income (Part VIII, column (A), lines 3, 4, and 7d)		1,448.	1,517.
Œ	1	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		869,479.	812,158.
	1	Fotal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		1,911,202.	1,690,423.
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		66,217.	76,859.
	1	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
Ş	Į.	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		714,899.	788,961.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
ed)	b.	Total fundraising expenses (Part IX, column (D), line 25) 120, 3	93.		
ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		1,042,833.	1,027,476.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		1,823,949.	1,893,296.
	19	Revenue less expenses. Subtract line 18 from line 12		87,253.	-202,873.
Net Assets or Fund Balances			Ве	ginning of Current Year	End of Year
sets	20	Total assets (Part X, line 16)		2,216,139.	2,127,141.
A PE	21	Total liabilities (Part X, line 26)		1,306,910.	1,420,785.
ž	22	Net assets or fund balances. Subtract line 21 from line 20		909,229.	706,356.
	art II	Signature Block		<u> </u>	
		ties of perjury. I declare that I have examined this return, including accompanying schedule			y knowledge and belief, it is
true	, correc	t, and complete. Decemation of preparer (other than officer) is based on all information of w	hich prepare	r has any knowledge.	
		Signature of officer		Dota	
Sig		•		Date	
Her	'e	BRIAN KABAKER, CFO Type or print name and title			
			Т	Date Check	DTIN
Dale	,	Print/Type preparer's name LAWRENCE S. KUECHLER LAWRENCE S. KUE		.; L	PTIN
Paid			СПТЕК		P00233621 94-2763139
	parer Only	Firm's name BERGER LEWIS ACCOUNTANCY CORP. Firm's address 55 ALMADEN BLVD., STE 600		Firm's EIN ▶	J4-2/03139
096	Only	SAN JOSE, CA 95113		Duana / /	08) 494-1200
1/10	u tha IF	RS discuss this return with the preparer shown above? (see instructions)		Phone no. (4	X Yes No

Form	990 (2013) INSTITUTE OF HEARTMATH	95-4023617	Page 2
Par	t III 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	1 1
	AND GUIDANCE OF THEIR OWN HEARTS TO HELP ESTABLISH PERS	SONAL AND GLC	BAL
	COHERENCE. THIS IS ACCOMPLISHED BY CREATING AND DELIVER	ING EDUCATION	NAL
	RESOURCES AND TRAINING PROGRAMS FOR: PRE-K THROUGH COLL	LEGE 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?	Yes	X 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'	2 Vac	X No
·	If "Yes," describe these changes on Schedule O.	·163	140
4	Describe the organization's program service accomplishments for each of its three largest program services, a	o magazirad by avpanca	•
7	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other		
		iers, the total expenses,	anu
4-	revenue, if any, for each program service reported. (Code:) (Expenses \$969,136 . including grants of \$76,385 .) (Reve	916	815.)
4a	(Code:) (Expenses \$ 969,136 · including grants of \$ 76,385 ·) (Reve EDUCATION DIVISION— TOOLS AND TECHNOLOGIES HELP CHILDRE	inue \$ 040 r	(013.
	SENIORS, NON-PROFIT CONSTITUENTS, INDIVIDUALS, TEENS, V		
	MILITARY PERSONAL AND FAMILIES LEARN HOW TO SELF-REGULA		
	INCREASE EMOTIONAL INTELLIGENCE AND REDUCE STRESS. ACTI		
	DIVISION INCLUDE: DISSEMINATING EDUCATIONAL AND RESEARCH FOR THE CONTROL OF THE C		
	VIA E-TECHNOLOGY, SOCIAL MEDIA, PRODUCTS, LECTURES AND		<u> </u>
	MEMBERSHIP PROGRAM; COLLABORATION; PROGRAM, MATERIALS A		
	DEVELOPMENT; TRAINING AND EDUCATION PROGRAMS; SOME HIGH	ILIGHTS OF 20)13
	ARE:		
	1 777 1 0 777 1 1 1 1 1 1 1 1 1 1 1 1 1		
	1. THE U.S. HEALTH AND HUMAN SERVICES' NATIONAL REGISTS		
		ED THREE IHM	
4b	(Code:) (Expenses \$ 324,133 • including grants of \$ 175 •) (Reverse)		<u>,865.</u>)
	THE RESEARCH CENTER CONDUCTS BASIC RESEARCH INTO PSYCHO		
	NEUROCARDIOLOGY AND BIOPHYSICS, AND OUTCOME STUDIES IN		
	WORKPLACE, EDUCATIONAL AND MILITARY SETTINGS, FREQUENTI	<u>Y IN</u>	
	COLLABORATION WITH UNIVERSITIES, RESEARCH CENTERS AND	·	
	HEALTH-CARE-SYSTEM PARTNERS.		
	RESEARCH INTERESTS ALSO INCLUDE THE ELECTROPHYSIOLOGY OF		
	EXPLORING HOW WE ARE ALL GLOBALLY INTERCONNECTED AT A I	DEEP, FUNDAMI	ENTAL
	LEVEL VIA ELECTROMAGNETIC FIELDS AND BIOFIELDS.		
	1 NEW DEGLED ON GENERAL		
	1. NEW RESEARCH STUDIES		
	A) HEADE DAGE WARTANT THE DISCHED DAGE TWEETER DIRECT	TO17110 1110	
	A) HEART RATE VARIABILITY BIOFEEDBACK, EXECUTIVE FUNCTION		414
4c		enue \$112	
	THE GLOBAL COHERENCE INITIATIVE (GCI) IS A SCIENCE-BASE		
	DESIGNED TO HELP INDIVIDUALS AND GROUPS WORK TOGETHER S		
	AND STRATEGICALLY TO INCREASE THE IMPACT OF THEIR INDIV	VIDUAL EFFOR!	rs to
	CREATE POSITIVE CHANGE ON A GLOBAL LEVEL.		
	1. TESTED POTENTIAL GLOBAL COHERENCE MONITORING SYSTEM	SITES IN NEV	N
	ZEALAND AND NEW PLACE TO MOVE THE UNITED KINGDOM.		•
	O MATAMATATA GLODAL GOVERNMENT VOLUME		
	2. MAINTAINED GLOBAL COHERENCE MONITORING SYSTEM SENSOR	R SITES IN T	HE
	UNITED STATES, SAUDI ARABIA AND CANADA.		
	2 CAMHEDED ANALYZED AND DEDODED COMO DATA TO THE TOTAL	T-1-1-1	ame.
	3. GATHERED, ANALYZED AND REPORTED GCMS DATA TO DETERM	INE THE EFFE	CTS
4d	Other program services (Describe in Schedule O.)	316,767.)	
	(Expenses \$ 8,222 • including grants of \$) (Revenue \$ Total program service expenses ► 1,522,478 •	310,101.)	
<u>4e</u>	Total program service expenses ► 1,322, ±10.		

20000000000	Oncomist of Required Concadios		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		162	110
•	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
•	public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect		_	
	during the tax year? If "Yes," complete Schedule C, Part II	4	Х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,		***********	
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	X	
C	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		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
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	<u> </u>
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	X	ļ
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			v
4-	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			.
40	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			v
47	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			v
40	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	40		X
19	1c and 8a? If "Yes," complete Schedule G, Part II	18		<u> </u>
18	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	40		Х
200	complete Schedule G, Part III Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	19 20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		+ **
	1. 100 to into 200, and this organization attach a copy of its addition intaligial statements to this fotum?	1 200	1	

			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	<u></u>
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Х	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			į
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25a	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		
2 5a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	05-		х
h	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	25a		
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so,			
	complete Schedule L, Part II	26	Х	
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			1
	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):			
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b		28b		Х
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,		.,	
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	X	- V
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	00		X
31	contributions? If "Yes," complete Schedule M	30		
0.	If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	51		
	Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		Х
35a		35a		Х
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?		v	
	Note. All Form 990 filers are required to complete Schedule O		X	(0015)
		Form	1 33U	(2013)

Form	990 (2013) INSTITUTE OF HEARTMATH 95-4023	617	P:	age 5
Pai	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			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		
2 a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 25			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		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 authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country: ▶			
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	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		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	_		
е	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	L	X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	N/	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	N/	Α

a Did the organization make any taxable distributions under section 4966? N/A Did the organization make a distribution to a donor, donor advisor, or related person? N/A Section 501(c)(7) organizations. Enter: 10 a Initiation fees and capital contributions included on Part VIII, line 12 N/A 10a Section 501(c)(12) organizations. Enter:

Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting N/Aorganization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?

a Gross income from members or shareholders N/A 11a b Gross income from other sources (Do not net amounts due or paid to other sources against

amounts due or received from them.)

Sponsoring organizations maintaining donor advised funds.

12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?

Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.

b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand ______

14a Did the organization receive any payments for indoor tanning services during the tax year? b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.

Х 14a

12a

11b

13b

8

9a

Form 990 (2013)

9

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response

	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.			
	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec ¹	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2	,,,,,,,,,,	X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	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 appoint one or			
	more members of the governing body?	7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form?	11a	Х	
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	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this was done	12c	Х	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Х	
b	Other officers or key employees of the organization	15b	Χ	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	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)	availab	le	
	for public inspection. Indicate how you made these available. Check all that apply.			
	Own website Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, as	nd finan	cial	
	statements available to the public during the tax year.			
~~	State the name, physical address, and telephone number of the person who possesses the books and records of the organiz-	atian.		
20		ation.		
20	LYNN LIPPOLD - (831) 338-8719 P.O. BOX 1463, BOULDER CREEK, CA 95006	ation: P		

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.

(A)	(B)	(C)						(D)	(E)	(F)
Name and Title	Average	(40	Position (do not check more to box, unless person is officer and a director.)				one	Reportable	Reportable	Estimated
	hours per	box				n is both an		compensation	compensation	amount of
	week		cer an	id a d	recto	or/trus	itee)	from	from related	other
	(list any	trustee or director						the	organizations	compensation
	hours for related	e or d	ge			sated		organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the
	organizations	ruste	l trus		92	преп		(***2/1099*!*(150)		organization and related
	below	dual	nstitutional trustee	_	oldr	stcol	m			organizations
	line)	Individual	Institu	Officer	Key employee	Highest compensated employee	Por Mic			
(1) BRIAN KABAKER	15.00									
CFO & BOARD MEMBER		X		Х				30,720.	0.	388
(2) KATHERINE FLORIANO	18.00							**		
EXE. DIR/ CHAIRMAN		X		Х				18,374.	0.	4,098
(3) SANDRA ROYALL	17.50									
SECRETARY/GRAPHIC ARTIST		X		X				18,182.	0.	6,884
(4) HOBART JOHNSON - TO JUNE 2013	1.00								_	_
BOARD MEMBER	1 00	X	ļ					0.	0.	0
(5) TONI ROBERTS	1.00							_		•
BOARD MEMBER	1 00	X	ļ	-	-	-		0.	0.	0
(6) CLAIRE SHAFE	1.00	- J								0
BOARD MEMBER (7) DONNA KOONTZ	1.00	X	-	ļ		\vdash		0.	0.	0
(7) DONNA KOONTZ BOARD MEMBER	1.00	X						0.	0.	0
(8) JEDDAH MALI - FROM AUG 2013	1.00	21					┢	V •	.	
BOARD MEMBER	1100	X			l			0.	0.	0
(9) SARA CHILDRE	20.00									
PRESIDENT/CEO				Х				28,800.	0.	6,813
(10) ROLLIN MCCRATY	20.00									
VICE PRESIDENT, DIR RESEAR				Х				56,160.	0.	5,396
		<u> </u>	ļ .			_				
						-	ļ			
				,						
		-	-	_			ļ			
		-								
		\vdash	\vdash	 	 	-	_			
		-								
•		1	\vdash	 	 	+				
		1								
				t		1	\vdash			
		1					1			

Form 990 (2013)

Fall VIII Section A. Officers, Directors, Trus	T	ploy	ees,			ghes	st C	ompensated Employee	es (continued)	
(A)	(B)			(C)			(D)	(E)	(F)
Name and title	Average	Position (do not check more than one						Reportable	Reportable	Estimated
·	hours per	pox	, unle	ss pe	rson i	is bot	n an	compensation	compensation	amount of
	week	offic				r/trus		from	from related	other
	(list any	sctor						the	organizations	compensation
	hours for	Individual trustee or director				pat		organization	(W-2/1099-MISC)) from the
	related	e c	nstee			eusa		(W-2/1099-MISC)		organization
	organizations	II trus	Institutional trustee		Кеу етрІоуее	dmo:				and related
	pelow	vidu	불	賣	ldma	nest (Former			organizations
	line)	Pu	lust	Officer	ķe	Highest compensated employee	쥰		4	
		1								
		1								
										
		1								
		_				-				
		-								
					ļ					
		1								
		1			1					
						 				
		1								
		-	+			-	-			
		-								
	-		_		ļ					
1b Sub-total			<i>.</i> .				ightharpoons	152,236.	(0. 23,579.
c Total from continuation sheets to Part V								0.		0.
d Total (add lines 1b and 1c)								152,236.		0. 23,579.
2 Total number of individuals (including but i								·	000 of reportable	
compensation from the organization	iot iii iii iitod to ti	,000	, 1100	Juu	V	C) W	10 1	cocived more than wrote	,,000 of reportable	0
compensation from the organization										Yes No
O Distance and the list of the second		4 .								103 110
3 Did the organization list any former officer				-	-	-		-		- 37
line 1a? If "Yes," complete Schedule J for										3 Х
4 For any individual listed on line 1a, is the s										
and related organizations greater than \$15	0,000? If "Yes	," cc	mpl	ete .	Sch	edul	e J	for such individual		4 X
5 Did any person listed on line 1a receive or	accrue compe	nsat	tion :	from	an	y uni	relat	ted organization or indiv	idual for services	
rendered to the organization? If "Yes," con	nplete Schedu	le J	for s	uch	per	son	<i></i>			5 X
Section B. Independent Contractors										
Complete this table for your five highest co	omnensated in	den	enda	ant o	conf	ract	ore f	that received more than	\$100 000 of comp	ensation from
the organization. Report compensation for	•									Chadion for
	trie caleridar y	/ear	ena	ing v	with	Or W	/IUNI		year.	
(A) Name and busines:	addroos	'n.T.	ΛNT1					(B)	ondoo	(C)
	address	IN	ON:	┖				Description of s	services	Compensation
								·		

2 Total number of independent contractors	(including but I	not l	imite	ed to	the	se li	ste	d above) who received r	nore than	
\$100,000 of compensation from the organ	ization 🕨					0				
	·		_	_						

4 Income from investment of taxexempt bond proceeds	F.G	I C V	111	123		sponse (or note to any lin	ne in this Part VIII			
Second S	(0.10					11	s note to any in	(A)	(B) Related or exempt function	(C) Unrelated business	(D) Revenue excluded from tax under
Second S	ants			, •			61 042				
Second S	S S			-			61,942.				
Second S	ifts,					-					
Second S	s, G			-							
Second S	ion										
Second S	but					1f	173,556.				
Second S	doi						800.				
2 a EDUCATION PROGRAMS	<u>ම රි</u>		h	Total. Add lines 1a-1f			>	235,498.			
Section Sect					776				466 001		
Total Add lines 11a-11d Total Add lines	йсе									1	
Total Add lines 11a-11d Total Add lines	žer iue			RESEARCH SERVIC	ES		341700	1/4,349.	1/4,349.		
Total Add lines 11a-11d Total Add lines	m S										
Total Add lines 11a-11d Total Add lines	Pera		u a								· · · · · · · · · · · · · · · · · · ·
3 Investment income (including dividends, interest, and other similar amounts)	Pr		f	All other program service reve	nue						
3 Investment income (including dividends, interest, and other similar amounts) 1,517 1,517 1,517 1,517 1,517 1 1 1 1 1 1 1 1 1								641,250.			
1		3		Investment income (including	dividen	ds, intere	est, and				
Second Company Compa				other similar amounts)			>	1,517.			1,517.
10 10 10 10 10 10 10 10		4				•		016 565	016 565		
6 a Gross rents b Less: rental expenses c Rental income or (loss) 7 a Gross amount from sales of assets other than inventory b Less: cost or other basis and sales expenses c Gain or (loss) 8 a Gross income from fundralsing events (not including \$ of contributions reported on line 1c). See Part IV, line 18 a b Less: direct expenses c Net income or (loss) from fundralsing events 9 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances c Net income or (loss) from sales of inventory b Less: cost of goods sold c Net income or (loss) from sales of inventory b Less: cost of goods sold c Net income or (loss) from sales of inventory b Less: cost of goods sold c Net income or (loss) from sales of inventory b Less: cost of goods sold c Net income or (loss) from sales of inventory b Less: cost of goods sold c Net income or (loss) from sales of inventory c Miscellaneous Revenue 11 a b c c d All other revenue c Total. Add lines 11a-11d 12 Total revenue. See instructions. 1 1, 690, 423, 1,383,861. 0 . 71,064		5		Royalties				316,/6/.	316,767.		
Description Company		_		0	A F			-			
C Rental income or (loss)		ı			0.6			-			
d Net rental income or (loss) 7 a Gross amount from sales of assets other than inventory b Less: cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not including \$		1		·							
7 a Gross amount from sales of assets other than inventory b Less: cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not including \$		1						69,547.			69,547.
assets other than inventory b Less: cost or other basis and sales expenses				` '				,			
and sales expenses c Gain or (loss) d Net gain or (loss) d Sa Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18 b Less: direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 b Less: direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 11 a b C d All other revenue e Total. Add lines 11a-11d 12 Total revenue. See instructions. 1 1,690,423,1,383,861. 0 71,064											
C Gain or (loss)			b	Less: cost or other basis							
d Net gain or (loss) 8 a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18 a b Less: direct expenses b c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 a b Less: direct expenses b c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances a b Less: cost of goods sold b 138,403. c Net income or (loss) from sales of inventory A25,844. Miscellaneous Revenue Business Code 11 a d All other revenue e Total. Add lines 11a-11d b 1,690,423.1,383,861. 12 Total revenue. See instructions h 1,690,423.1,383,861. 0. 71,064											
8 a Gross income from fundraising events (not including \$ _ of contributions reported on line 1c). See Part IV, line 18 _ a b Less: direct expenses							<u> </u>				
including \$ of contributions reported on line 1c). See Part IV, line 18 a b Less: direct expenses b c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 a b Less: direct expenses b c Net income or (loss) from gaming activities b Less: cost of goods sold b Less: cost of goods sold b Less: cost of goods sold b S18,403. c Net income or (loss) from sales of inventory 425,844. 425,8							>				
c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 b Less: direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 11 a b c d All other revenue e Total. Add lines 11a-11d 12 Total revenue. See instructions.	ne	8	а		5	- (
c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 b Less: direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 11 a b c d All other revenue e Total. Add lines 11a-11d 12 Total revenue. See instructions.	ver										
c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 b Less: direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 11 a b c d All other revenue e Total. Add lines 11a-11d 12 Total revenue. See instructions.	Ä										
c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 b Less: direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 11 a b c d All other revenue e Total. Add lines 11a-11d 12 Total revenue. See instructions.	the		b					1			
9 a Gross income from gaming activities. See Part IV, line 19 b Less: direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 11 a b c d All other revenue e Total. Add lines 11a-11d 12 Total revenue. See instructions P A 4 7 2 4 7	0			•							
b Less: direct expenses b C Net income or (loss) from gaming activities D 10 a Gross sales of inventory, less returns and allowances D 15 18, 403. b Less: cost of goods sold D 15 18, 403. c Net income or (loss) from sales of inventory D 12 1, 690, 423. 1, 383, 861. b Less: cost of goods sold D 12 1, 690, 423. 1, 383, 861. c Net income or (loss) from sales of inventory D 1, 690, 423. 1, 383, 861. b C C C C C C C C C C C C C C C C C C		9	a	Gross income from gaming ac	ctivities.	See					
c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 11 a b c d All other revenue e Total. Add lines 11a-11d Total revenue. See instructions.								_			
10 a Gross sales of inventory, less returns and allowances								-			
and allowances a 944,247. b Less: cost of goods sold b 518,403. c Net income or (loss) from sales of inventory ▶ 425,844. Miscellaneous Revenue Business Code 11 a					_		·····				
b Less: cost of goods sold b 518,403. c Net income or (loss) from sales of inventory		10	а				944 247				
c Net income or (loss) from sales of inventory ▶ 425,844. 425,844. Miscellaneous Revenue Business Code 11 a □ b □ c □ d All other revenue □ e Total. Add lines 11a-11d ▶ 12 Total revenue. See instructions ▶ 1,690,423.1,383,861. 0. 71,064			h	Less: cost of goods sold		a h	518,403				
Miscellaneous Revenue Business Code 11 a b c d All other revenue e Total. Add lines 11a-11d 12 Total revenue. See instructions. b 0. 71,064								425,844.	425,844.		
11 a			_	10 17 10 10 10 10 10 10 10 10 10 10 10 10 10				200000000000000000000000000000000000000			
c d All other revenue e Total. Add lines 11a-11d 12 Total revenue. See instructions. 1,690,423.1,383,861. 0. 71,064.		11	а								
d All other revenue e Total. Add lines 11a-11d 12 Total revenue. See instructions. ▶ 1,690,423.1,383,861. 0. 71,064			b								
e Total. Add lines 11a-11d			С								
12 Total revenue. See instructions. ► 1,690,423.1,383,861. 0. 71,064											
112 IUIAI FEVENUE. See INSTRUCTIONS. PL, 090, 423. L, 383, 801. U. /1, 064.								1 600 422	1 202 061		71 064
	3320			TUTAL FEVERILE, SEE INSTRUCTIONS.	**********			11,030,423	11,303,001		Form 990 (2013)

Form 990 (2013) INSTITUTE OF Part IX Statement of Functional Expenses

	Check if Schedule O contains a response include amounts reported on lines 6b, 3b, 9b, and 10b of Part VIII.	se or note to any line in t (A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
			expenses	general expenses	expenses
1	Grants and other assistance to governments and	65,637.	65,637.		
^	organizations in the United States. See Part IV, line 21	03,037.	03,037.		
	Grants and other assistance to individuals in	11,222.	11,222.		
	the United States. See Part IV, line 22	11,222.	11,222.		
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	175,816.	124,514.	42,822.	8,480
	trustees, and key employees	173,010.	124,314.	42,022.	0,400
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and		,		
_	persons described in section 4958(c)(3)(B)	491,424.	379,743.	80,775.	30,906
7	Other salaries and wages	491,424.	3/3,/43.	00,113.	30,900
8	Pension plan accruals and contributions (include	2 157	2 157		
	section 401(k) and 403(b) employer contributions)	3,157. 69,323.	3,157. 52,627.	14,062.	2 624
9	Other employee benefits	40 241	32,021.		2,634 2,891
10	Payroll taxes	49,241.	37,466.	8,884.	2,891
11	Fees for services (non-employees):				
а	Management	0.450		2 200	
b	Legal	8,450.	5,222.	3,228.	
	Accounting	12,000.		12,000.	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch O.)	404,573.	375,985.	1,599.	26,989 6,525
12	Advertising and promotion	14,260.	7,735.		6,525
13	Office expenses	139,415.	85 , 517.	23,527.	30 , 371
14	Information technology	71,616.	59,039.	9,789.	2 , 788
15	Royalties	71.	71.		·
16	Occupancy	135,508.	111,660.	23,002.	846
17	Travel	59,070.	53,063.	3,856.	2,151
18	Payments of travel or entertainment expenses	·			
	for any federal, state, or local public officials			·	
19	Conferences, conventions, and meetings	19,331.	19,331.		
20	Interest	93.	81.	5.	. 7
21	Payments to affiliates	,			
22	Depreciation, depletion, and amortization	87,357.	75,952.	10,788.	617
23	Insurance	12,697.	6,876.	5,227.	594
24	Other expenses, Itemize expenses not covered		· · · · · · · · · · · · · · · · · · ·	·	
	above. (List miscellaneous expenses in line 24e. If line				
	24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а	MAINTENANCE	36,662.	25,781.	9,122.	1,759
b	DUES AND SUBSCRIPTIONS	16,364.	13,811.	698.	1,855
c	LICENSES, FEES AND TAXE	5,458.	3,452.	1,041.	965
d	MISCELLANEOUS EXP	3,802.	3,802.	1,011.	
-	All other expenses	749.	734.		15
	Total functional expenses. Add lines 1 through 24e	1,893,296.	1,522,478.	250,425.	120,393
25 26		1,000,200.	1,322,410.	230,423.	120,393
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.	10 010	E 400	0.	A E20
	Check here X if following SOP 98-2 (ASC 958-720)	10,012.	5,492.	U .	4,520 Form 990 (201

Form 990 (2013)
Part X Balance Sheet

	Check if Schedule O contains a response or note to any line in this Part X				
			(A) Beginning of year		(B) End of year
1	Cash - non-interest-bearing		59 , 746.	1	40,611
2	Savings and temporary cash investments		414,444.	2	394,072
3	Pledges and grants receivable, net			3	
4	Accounts receivable, net		56,608.	4	56 , 739
5	Loans and other receivables from current and former officers, directors,				
	trustees, key employees, and highest compensated employees. Complete	,			
	Part II of Schedule L			5	
6	Loans and other receivables from other disqualified persons (as defined u	nder			
	section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contrib				
	employers and sponsoring organizations of section 501(c)(9) voluntary				
	employees' beneficiary organizations (see instr). Complete Part II of Sch L	. [6	
7		F	448.	7	
7	Notes and loans receivable, net				
8	Inventories for sale or use		11 1/5	8	19,090
9	Prepaid expenses and deferred charges		11,145.	9	19,090
10a	Land, buildings, and equipment: cost or other	1 1			
	basis. Complete Part VI of Schedule D	0.7	1 340 547		1 011 405
b		-	1,349,547.	10c	1,311,407
11	Investments - publicly traded securities			11	
12	Investments - other securities. See Part IV, line 11		244,500.	12	244,500
13	Investments - program-related. See Part IV, line 11			13	
14	Intangible assets		54,701.	14	35,722
15	Other assets. See Part IV, line 11		25,000.		25,000
16	Total assets. Add lines 1 through 15 (must equal line 34)		2,216,139.	16	2,127,141
17	Accounts payable and accrued expenses		144,646.		105,230
18	Grants payable	ı		18	
19	Deferred revenue			19	12,500
20	Tax-exempt bond liabilities			20	
21	Escrow or custodial account liability. Complete Part IV of Schedule D			21	
22	Loans and other payables to current and former officers, directors, truste				
	key employees, highest compensated employees, and disqualified person				
	Complete Part II of Schedule L		85,000.	22	85,000
02			1,077,264.		1,058,355
23	Secured mortgages and notes payable to unrelated third parties		1,011,204	1	1,030,333
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 Part X	oī	_		150 700
	Schedule D		0.	-	159,700
26	Total liabilities. Add lines 17 through 25		1,306,910.	26	1,420,785
	Organizations that follow SFAS 117 (ASC 958), check here ▶ X	and			
	complete lines 27 through 29, and lines 33 and 34.				
27	Unrestricted net assets		841,971.		642,048
28	Temporarily restricted net assets		67,258.	28	64,308
29	Permanently restricted net assets	<u></u>		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here				
	and complete lines 30 through 34.				
30	Capital stock or trust principal, or current funds			30	
31	Paid-in or capital surplus, or land, building, or equipment fund			31	
32	Retained earnings, endowment, accumulated income, or other funds			32	1
33	Total net assets or fund balances		909,229.		706,356
34	Total liabilities and net assets/fund balances		2,216,139		2,127,14
,	TO THE HOUSE AND THE TOTAL ACCORDING TO THE T				Form 990 (20

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit

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

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

Act and OMB Circular A-133?

X

За

Form 990 (2013)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Employer identification number

			INSTITU	TE OF	HEARTM	A'I'H					95	-40	<u> 236</u>	<u>, 1 /</u>	
Pai	tΙ	Reason f	or Public Char	ty Statu	S (All organiza	ations mus	t complete	this part.	.) See insti	ructions.					
The c	organ	ization is not a	private foundation	pecause it i	is: (For lines 1	through 1	1, check c	nly one bo	ox.)						
1		A church, con	vention of churches	s, or associ	ation of churc	hes descr	ibed in se c	ction 170(b)(1)(A)(i).	ı					
2		A school desc	cribed in section 17	0(b)(1)(A)(ii	i). (Attach Sch	nedule E.)									
3			a cooperative hospi			•	n section	170(b)(1)(A)(iii).						
4		• •	earch organization		-					(b)(1)(A)(iii). Enter t	he hosi	oital's	nam	e,
-		city, and state	-		•										•
5		•	on operated for the	benefit of a	college or un	iversity ow	ned or op	erated by	a governn	nental unit	describe	ed in			
•		-	(b)(1)(A)(iv). (Comple					,	3						
6			te, or local governm	•	rnmental unit	described	in section	n 170(b)(1)(Δ)(ω).						
	X		on that normally rec	-						r from the	general r	oublic d	leecri	hed ir	n
•		=	b)(1)(A)(vi). (Comple		Startial part	or its supp	or nom a	governino	iitai uiiit o	1 110111 1110	gonoran		03011	DCG II	•
8		•	trust described in s	•	(b)/d)/A)/vi) (Complete	Part (I)								
9	一		on that normally rec					om oontril	autiono m	omborobir	a food or	ad aroo	o roo	ointo f	from
3			-							-		-			
			ted to its exempt fu Inrelated business t			-									
			509(a)(2). (Complete		1110 (1000 000)	ion o i i ta	ny morni bus	311103503 8	oquii eu D	y iii o oiyai	inzativit i	ait e i uu	, I C 30	, ISI	J.
10			on organized and o	•	ducivaly to to	et for publi	c safety S	ee sectio	n 500/a\/4	ı x					
11	一	ŭ	on organized and op on organized and op		•	•	•			•	out the	nurnee	es of	one (or
	L	-	supported organiz		-		-			-					JI
			type of supporting				-		.,. Occ 3cc		2)(0). O(10	JON THE	DOX (.iiat	
		a Type I	· · · · · · · · · · · · · · · · · · ·	/pe II		/pe III - Fur			d	Туре	e III - Nor	n-functio	onally	/ inter	rated
е			this box, I certify tha	•	•	•	•	~		• •			•	_	-
C	<u></u>		anagers and other t				-	-	-						
f			ation received a wri								(a)(1) OI	36011011	303(م)رد).	
٠			rganization, check t												
~			t 17, 2006, has the							wing pers	one?				
9		-	n who directly or inc	-	•			•					Γ	Yes	No
		-	erning body of the s	-									g(i)	163	140
			member of a perso										g(ii)		
		•	controlled entity of a		• • •							1			
'n			ollowing information	•								[113	g(iii)		
"		Provide the i	ollowing information	about the	supported or	yanızanom	(S).								
				T		(iv) to the o	raanization	(u) Did you	, notify the	(vi) ls	the				
(i)		of supported	(ii) EIN			(iv) is the o			ion in col.	lorganizatio	on in col. I	(vii) Am			netary
	org	anization			1RC section		document?		r support?	(i) organiz U.S	ed in the		supp	ort	
				(see ins	structions))	Yes	No	Yes	No	Yes	No				
						1.03	1,10	.00	140	1.03	.,,,				
									1						
	-					 	1								
									-						
Tota	-1														
1010	41		percentages processes (1000000000000000000000000000000000000	440.00000000000000000000000000000000000	************************	440000000000000000000000000000000000000	# 1000000000000000000000000000000000000	140000000000000000000000000000000000000	40.00000000000000000000000000000000000	400000000000000000000000000000000000000	(ps:000000000000000000000000000000000000				

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

Schedule A (Form 990 or 990-EZ) 2013

332021 09-25-13

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) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	464,409.	488,217.	444,832.	281,669.	235,498.	1914625.
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	464,409.	488,217.	444,832.	281,669.	235,498.	1914625.
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)						413,202.
	Public support. Subtract line 5 from line 4.						1501423.
	ction B. Total Support		#1.0040				
	ndar year (or fiscal year beginning in)	(a) 2009 464,409.	(b) 2010 488,217.	(c) 2011 444,832.	(d) 2012 281,669.	(e) 2013 235,498.	(f) Total 1914625.
	Amounts from line 4	404,409.	400,217.	444,032.	201,009.	233,490.	1914025.
8	Gross income from interest,						
	dividends, payments received on		-				
	securities loans, rents, royalties	3,264.	3,274.	97,894.	97,973.	97,292.	299,697.
^	and income from similar sources	3,204.	3,214.	91,094.	91,913.	31,232.	233,037.
9	Net income from unrelated business						
	activities, whether or not the						
10	business is regularly carried on Other income. Do not include gain						
10	or loss from the sale of capital						
	assets (Explain in Part IV.)						
11	Total support. Add lines 7 through 10						2214322.
12		etc (see instructi	one)			12 9	,522,457.
	First five years. If the Form 990 is fo						732271371
	organization, check this box and stop	•			•	, ,, ,	ightharpoonup
Se	ction C. Computation of Publ	ic Support Pe	rcentage				
14	Public support percentage for 2013 (line 6, column (f) d	ivided by line 11, o	column (f))		14	67.81 %
15	Public support percentage from 2012					15	69.46 %
16a	a 33 1/3% support test - 2013. If the					nore, check this bo	
	stop here. The organization qualifies	as a publicly supp	orted organization	١	•••••		▶ X
ŀ	33 1/3% support test - 2012. If the	organization did no	ot check a box on	line 13 or 16a, and	l line 15 is 33 1/3%	% or more, check th	nis box
	and stop here. The organization qua	lifies as a publicly	supported organiz	ation			▶□
178	a 10% -facts-and-circumstances tes	t - 2013. If the org	anization did not	check a box on lin-	e 13, 16a, or 16b,	and line 14 is 10%	or more,
	and if the organization meets the "fac	cts-and-circumstar	ices" test, check t	his box and stop I	nere. Explain in Pa	rt IV how the organ	nization
	meets the "facts-and-circumstances"	test. The organiza	ation qualifies as a	publicly supporte	d organization		>
ı	o 10% -facts-and-circumstances tes						
	more, and if the organization meets t	he "facts-and-circu	ımstances" test, c	heck this box and	stop here. Explain	n in Part IV how the	·
	organization meets the "facts-and-cir			•			>
18	Private foundation. If the organization	on did not check a	box on line 13, 16	a, 16b, 17a, or 17			
					0 - 1-	edule A (Earm 990	000 F7) 0040

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
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	1					
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						
1	Tax revenues levied for the organ-						
7	ization's benefit and either paid to					·	
	· · · · · · · · · · · · · · · · · · ·						
-							
9	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge				_		
	Total. Add lines 1 through 5				,		
7a	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
Ľ	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						
C	Add lines 7a and 7b					·	
	Public support (Subtract line 7c from line 6.)						
<u>Se</u>	ction B. Total Support		-				
Cale	ndar year (or fiscal year beginning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
	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						
13	assets (Explain in Part IV.)						
	Total support. (Add lines 9, 10c, 11, and 12.) First five years. If the Form 990 is for		a finat accord this		<u> </u>		
14		_			•	.,.,	
Sa	check this box and stop here ction C. Computation of Pub			***************************************	***************************************		
	Public support percentage for 2013			acluma (fl)		15	0/
	Public support percentage from 201					16	<u>%</u>
	ction D. Computation of Inve					110	%
						147	
	Investment income percentage for 2						
	Investment income percentage from					·····	<u>%</u>
198	a 33 1/3% support tests - 2013. If the						
	more than 33 1/3%, check this box a						
i	o 33 1/3% support tests - 2012. If the						
	line 18 is not more than 33 1/3%, ch						
20	Private foundation. If the organization	on did not check a	box on line 14, 19	a, or 19b, check	this box and see in	structions	▶∟

	Provide the explanations required ditional information. (See instruction)	d by Part II, line 10; Part II	line 17a or 17b; and Part III, line 1	
SCHEDULE A, PART II, SEG	CTION B, LINES 8:			
EXPLANATION: IN 2013, L	INE 8 WAS RESTATED	FOR THE YEAR	RS 2011-2013 TO	
INCLUDE GROSS RENTS THAT	T WERE PREVIOUSLY	INCLUDED IN	TOTAL SUPPORT AS	
STATED IN LINE 11 OF SEC	CTION B.			
<u></u>	-	***************************************		
				•
		,		
	-			
			· · · · · · · · · · · · · · · · · · ·	

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

OMB No. 1545-0047

Name of the organization

Employer identification number

I	NSTITUTE OF HEARTMATH	95-4023617				
Organization type (check	one):					
Filers of:	Section:					
Form 990 or 990-EZ	\boxed{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					
	4947(a)(1) nonexempt charitable trust treated as a private foundation					
	501(c)(3) taxable private foundation					
• •	is covered by the General Rule or a Special Rule. c)(7), (8), or (10) organization can check boxes for both the General Rule and a Spe	ocial Rule. See instructions.				
General Rule						
	ion filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or mor	e (in money or property) from any one				
Special Rules						
509(a)(1) and 170	1(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of 0(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.					
total contribution	For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.					
contributions for If this box is che purpose. Do not	1(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one use exclusively for religious, charitable, etc., purposes, but these contributions did cked, enter here the total contributions that were received during the year for an excomplete any of the parts unless the General Rule applies to this organization beckle, etc., contributions of \$5,000 or more during the year	I not total to more than \$1,000. xclusively religious, charitable, etc., cause it received <i>nonexclusively</i>				
but it must answer "No" o	a that is not covered by the General Rule and/or the Special Rules does not file Sch on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or c set the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).					

Name of organization

Employer identification number

INSTITUTE OF HEARTMATH

95-4023617

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

Name of organization

Employer identification number

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
		- - - - \$	
(a) No. from Part l	(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

Schedule B (Form 990, 990-EZ, or 990-PF) (2013) Page 4 Name of organization Employer identification number 95-4023617 INSTITUTE OF HEARTMATH Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations that total more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once.) Part III Use duplicate copies of Part III if additional space is needed. (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

SCHEDULE C

(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ. ► See separate instructions. ► Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

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

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

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

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

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

Section 5	601(c)(4), (5), or (6) organizat	ions: Complete Part III.			
Name of orga				Empl	oyer identification number
		TE OF HEARTMATH			95-4023617
Part I-A	Complete if the org	anization is exempt unde	r section 501(c)	or is a section 527 o	rganization.
2 Political	expenditures	ation's direct and indirect political		> \$	
Part I-B	Complete if the org	anization is exempt unde	r section 501(c)(3).	
D33.555.51		incurred by the organization unde			
2 Enter th	e amount of any excise tax	incurred by organization manager	s under section 4955	▶\$	
		n 4955 tax, did it file Form 4720 fo			
	describe in Part IV.				
Part I-C	Complete if the org	anization is exempt unde	r section 501(c),	except section 501(c)(3).
1 Enter th	e amount directly expended	I by the filing organization for sect	ion 527 exempt funct	ion activities > \$	
2 Enter th	e amount of the filing organ	ization's funds contributed to othe	er organizations for se	ection 527	•
		. Add lines 1 and 2. Enter here an			
		1120-POL for this year?			
made p contribu	ayments. For each organiza itions received that were pro	nployer identification number (EIN tion listed, enter the amount paid omptly and directly delivered to a additional space is needed, provic	from the filing organiz separate political orga	zation's funds. Also enter th anization, such as a separa	ne 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
MALL ROLL STORY OF THE STORY OF	<u> </u>				
			`		

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

Schedule C (Form 990 or 990-EZ) 2013

LHA

Total lobbying expenditures to influence public opinion (grass roots lobbying) b Total lobbying expenditures to influence a legislative body (direct lobbying) c Total lobbying expenditures (add lines 1a and 1b) d Other exempt purpose expenditures e Total exempt purpose expenditures (add lines 1c and 1d) c Total exempt purpose expenditures (add lines 1c and 1d) c Total exempt purpose expenditures (add lines 1c and 1d) c Total exempt purpose expenditures (add lines 1c and 1d)	Schedule C (Form 990 or 990-EZ) 2013				95-4	023617 Page 2
A Check if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures). B Check if the filing organization checked box A and "limited control" provisions apply. Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.) 1 a Total lobbying expenditures to influence public opinion (grass roots lobbying) b Total lobbying expenditures to influence a legislative body (direct lobbying) c Total lobbying expenditures (add lines 1a and 1b) d Other exempt purpose expenditures e Total exempt purpose expenditures (add lines 1c and 1d) 1 1,522,478.	han a san a sa		mpt under sectio	n 501(c)(3) and fil	ed Form 5768	
expenses, and share of excess lobbying expenditures). B Check Check Check Check Check Checked box A and "limited control" provisions apply. Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.) 1 a Total lobbying expenditures to influence public opinion (grass roots lobbying) b Total lobbying expenditures to influence a legislative body (direct lobbying) c Total lobbying expenditures (add lines 1a and 1b) d Other exempt purpose expenditures e Total exempt purpose expenditures (add lines 1c and 1d) 1,522,478.						
B Check If the filing organization checked box A and "limited control" provisions apply. Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.) 1 a Total lobbying expenditures to influence public opinion (grass roots lobbying) b Total lobbying expenditures to influence a legislative body (direct lobbying) c Total lobbying expenditures (add lines 1a and 1b) d Other exempt purpose expenditures e Total exempt purpose expenditures (add lines 1c and 1d) (b) Affiliated grou organization's totals (b) Affiliated grou organization's totals 1 totals 1 522,478.				Part IV each affiliated	group member's name	e, address, EIN,
Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.) 1 a Total lobbying expenditures to influence public opinion (grass roots lobbying) b Total lobbying expenditures to influence a legislative body (direct lobbying) c Total lobbying expenditures (add lines 1a and 1b) d Other exempt purpose expenditures e Total exempt purpose expenditures (add lines 1c and 1d) (b) Affiliated grount totals (totals)			• •			
Total lobbying expenditures to influence public opinion (grass roots lobbying) b Total lobbying expenditures to influence a legislative body (direct lobbying) c Total lobbying expenditures (add lines 1a and 1b) d Other exempt purpose expenditures e Total exempt purpose expenditures (add lines 1c and 1d) c Total exempt purpose expenditures (add lines 1c and 1d) c Total exempt purpose expenditures (add lines 1c and 1d) c Total exempt purpose expenditures (add lines 1c and 1d)	B Check if the filing organizat	tion checked box A a	nd "limited control" pro	visions apply.	I	<u></u>
b Total lobbying expenditures to influence a legislative body (direct lobbying) c Total lobbying expenditures (add lines 1a and 1b) d Other exempt purpose expenditures e Total exempt purpose expenditures (add lines 1c and 1d) 1,522,478.		organization's	(b) Affiliated group totals			
c Total lobbying expenditures (add lines 1a and 1b) d Other exempt purpose expenditures e Total exempt purpose expenditures (add lines 1c and 1d) 1,522,478.	1 a Total lobbying expenditures to influ	uence public opinion	(grass roots lobbying)			
d Other exempt purpose expenditures e Total exempt purpose expenditures (add lines 1c and 1d) 1,522,478.	b Total lobbying expenditures to influ					
d Other exempt purpose expenditures e Total exempt purpose expenditures (add lines 1c and 1d) 1,522,478.	c Total lobbying expenditures (add li	nes 1a and 1b)				
e Total exempt purpose expenditures (add lines 1c and 1d)					1,522,478.	
	e Total exempt purpose expenditure	s (add lines 1c and 1	d)		1,522,478.	
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.	f Lobbying nontaxable amount. Ente	er the amount from th	e following table in bot	h columns.	226,124.	
If the amount on line 1e, column (a) or (b) is: The lobbying nontaxable amount is:	If the amount on line 1e, column (a) o	r (b) is: The lo	bying nontaxable am	ount is:		
Not over \$500,000 20% of the amount on line 1e.	Not over \$500,000	20% o	the amount on line 1e.			
Over \$500,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000.	Over \$500,000 but not over \$1,000	0,000 \$100,0	00 plus 15% of the exc	ess over \$500,000.		
Over \$1,000,000 but not over \$1,500,000 \$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,000,000 but not over \$1,5	00,000 \$175,0	00 plus 10% of the exc	ess over \$1,000,000.		
Over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000.						
Over \$17,000,000 \$1,000,000.						
g Grassroots nontaxable amount (enter 25% of line 1f) 56,531.	g Grassroots nontaxable amount (en	ter 25% of line 1f)			56,531.	
h Subtract line 1g from line 1a. If zero or less, enter ·0·	h Subtract line 1g from line 1a. If zer	o or less, enter -0-			0.	
i Subtract line 1f from line 1c. If zero or less, enter ·0·	i Subtract line 1f from line 1c. If zero	o or less, enter -0	***************************************		0.	
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720	j If there is an amount other than ze	ro on either line 1h o	r line 1i, did the organiza	ation file Form 4720		
reporting section 4911 tax for this year?	reporting section 4911 tax for this	year?		·		Yes No
4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)	· · · · · · · · · · · · · · · · · · ·	ations that made a lumns below. See t	section 501(h) election he instructions for line	n do not have to com es 2a through 2f on pa	•	
Lobbying Expenditures During 4-Year Averaging Period		Lobbying Expe	enditures During 4-Yea	ar Averaging Period		
Calendar year (or fiscal year beginning in) (a) 2010 (b) 2011 (c) 2012 (d) 2013 (e) Total	• 1	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) Total
2a Lobbying nontaxable amount 210,828. 211,997. 221,767. 226,124. 870,71	2a Lobbying nontaxable amount	210,828	211,997.	221,767.	226,124.	870,716.
b Lobbying ceiling amount (150% of line 2a, column(e)) 1,306,07						1,306,074.
c Total lobbying expenditures	c Total lobbying expenditures					
		52,707	52,999.	55,442.	56,531.	217,679.
e Grassroots ceiling amount (150% of line 2d, column (e)) 326,51						326,519.

Schedule C (Form 990 or 990-EZ) 2013

Schedule C (Form 990 or 990-EZ) 2013 INSTITUTE OF HEARTMATH 95-402362 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)).

of tha	For each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description			(b)	
or ure i	obbying activity.	Yes	No	Amo	ount
	During the year, did the filling organization attempt to influence foreign, national, state or				
	ocal legislation, including any attempt to influence public opinion on a legislative matter				
	or referendum, through the use of:				
	/olunteers?				
	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
	Media advertisements?				
	Mailings to members, legislators, or the public?				
	Publications, or published or broadcast statements?				
	Grants to other organizations for lobbying purposes? Direct contact with legislators, their staffs, government officials, or a legislative body?				
	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
	Other activities?				
	Fotal. Add lines 1c through 1i				
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?	***************************************			
	f "Yes," enter the amount of any tax incurred under section 4912				
	f "Yes," enter the amount of any tax incurred by organization managers under section 4912				
	f the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
	III-A Complete if the organization is exempt under section 501(c)(4), secti	on 501(c)	(5), or se	ction	
	501(c)(6).	•	,		
				Yes	No
1 \	Were substantially all (90% or more) dues received nondeductible by members?		1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	•••••	2		
	Did the organization agree to carry over lobbying and political expenditures from the prior year?				
<u> </u>	III-B Complete if the organization is exempt under section 501(c)(4), secti 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered				
	answered "Yes."	······································		t III-A, lii	ne 3, is
	answered "Yes." Dues, assessments and similar amounts from members			t III-A, lii	ne 3, is
2 :	answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures)			t III-A, lii	ne 3, is
2 :	answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politexpenses for which the section 527(f) tax was paid).	ical	1	t III-A, liı	ne 3, is
2 : a :	answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of polit expenses for which the section 527(f) tax was paid). Current year	ical	1 2a	t III-A, lii	ne 3, is
2 3 a 6	answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of polit expenses for which the section 527(f) tax was paid). Current year Carryover from last year	ical	1 2a 2b	t III-A, lii	ne 3, is
2 a b c	answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politication	ical	2a 2b 2c	t III-A, lii	ne 3, is
2 3 a b c 3	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). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	ical	2a 2b 2c	t III-A, lii	ne 3, is
2 3 6 6 6 7 3 7 4	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). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues of notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the expenses in the section of the section of the expenses in the section of the section of the expenses in the section of the s	cess	2a 2b 2c 3	t III-A, lii	ne 3, is
2 3 a b c 3 4	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). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues of notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the expenses the organization agree to carryover to the reasonable estimate of nondeductible lobbying and	ical cess political	2a 2b 2c 3	t III-A, lii	ne 3, is
2 3 b c 5 3 4	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). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues of notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the expenses in the section of the section of the expenses in the section of the section of the expenses in the section of the s	ical	2a 2b 2c 3	t III-A, lii	ne 3, is
2 3 b c 5 3 4	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). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues of lances were sent and the amount on line 2c exceeds the amount on line 3, what portion of the expenditure next year? Taxable amount of lobbying and political expenditures (see instructions)	ical	2a 2b 2c 3	t III-A, lii	ne 3, is
2 3 6 6 7 7 8 7 8 7 8 7 8 7 8 7 8 7 8 7 8 7	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). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues of a notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the expenditure next year? Taxable amount of lobbying and political expenditures (see instructions)	ical	2a 2b 2c 3 4 5		
2	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). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues of notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the expenditure next year? Taxable amount of lobbying and political expenditures (see instructions) Supplemental Information	ical	2a 2b 2c 3 4 5		
2 3 6 6 7 8 7 8 7 8 7 8 7 8 7 8 7 8 7 8 7 8	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). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues of notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the expenditure next year? Taxable amount of lobbying and political expenditures (see instructions) Supplemental Information le the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated ground)	ical	2a 2b 2c 3 4 5		
2 3 6 6 7 8 7 8 7 8 7 8 7 8 7 8 7 8 7 8 7 8	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). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues of notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the expenditure next year? Taxable amount of lobbying and political expenditures (see instructions) Supplemental Information le the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated ground)	ical	2a 2b 2c 3 4 5		
2 3 6 6 7 8 7 8 7 8 7 8 7 8 7 8 7 8 7 8 7 8	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). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues of notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the expenditure next year? Taxable amount of lobbying and political expenditures (see instructions) Supplemental Information le the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated ground)	ical	2a 2b 2c 3 4 5		
2 3 6 6 7 8 7 8 7 8 7 8 7 8 7 8 7 8 7 8 7 8	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). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues of notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the expenditure next year? Taxable amount of lobbying and political expenditures (see instructions) Supplemental Information le the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated ground)	ical	2a 2b 2c 3 4 5		
2 3 6 6 7 8 7 8 7 8 7 8 7 8 7 8 7 8 7 8 7 8	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). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues of notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the expenditure next year? Taxable amount of lobbying and political expenditures (see instructions) Supplemental Information le the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated ground)	ical	2a 2b 2c 3 4 5		
2	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). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues of notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the expenditure next year? Taxable amount of lobbying and political expenditures (see instructions) Supplemental Information le the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated ground)	ical	2a 2b 2c 3 4 5		
2	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). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues of notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the expenditure next year? Taxable amount of lobbying and political expenditures (see instructions) Supplemental Information le the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated ground)	ical	2a 2b 2c 3 4 5		
2	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). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues of notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the expenditure next year? Taxable amount of lobbying and political expenditures (see instructions) Supplemental Information le the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated ground)	ical	2a 2b 2c 3 4 5		

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

Attach to Form 990.

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

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

INSTITUTE OF HEARTMATH

Employer identification number 95-4023617

Par			s or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, li		AN Francisco de Albanda de Alband
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		·
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in		
	are the organization's property, subject to the organization		
6	Did the organization inform all grantees, donors, and donor		-
	for charitable purposes and not for the benefit of the donor		
B	impermissible private benefit?		
Par	TII Conservation Easements. Complete if the c		Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization		
	Preservation of land for public use (e.g., recreation of	·	istorically important land area
	Protection of natural habitat	Preservation of a cer	rtified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qua	alified conservation contribution in the form	n of a conservation easement on the last
	day of the tax year.		88888888
			Held at the End of the Tax Year
а	Total number of conservation easements		
b	Total acreage restricted by conservation easements		
C	Number of conservation easements on a certified historic s		
d	(-)		
_	listed in the National Register		
3	Number of conservation easements modified, transferred,	released, extinguished, or terminated by the	ne organization during the tax
	year		
4	Number of states where property subject to conservation		
5	Does the organization have a written policy regarding the p	- · · · · · · · · · · · · · · · · · · ·	
	violations, and enforcement of the conservation easement		
6	Staff and volunteer hours devoted to monitoring, inspecting		
7	Amount of expenses incurred in monitoring, inspecting, an		· · · · · · · · · · · · · · · · · · ·
8	Does each conservation easement reported on line 2(d) ab	•	
	and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports conserv	•	
	include, if applicable, the text of the footnote to the organi	zation's financial statements that describe	s the organization's accounting for
	conservation easements.	of Art Historical Transverse or 4	Other Cimilar Assets
	Organizations Maintaining Collections		Jiner Similar Assets.
	Complete if the organization answered "Yes" to For		
1a	If the organization elected, as permitted under SFAS 116 (
	historical treasures, or other similar assets held for public		ance of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that des		
D	If the organization elected, as permitted under SFAS 116 (
	treasures, or other similar assets held for public exhibition,	, education, or research in furtherance of p	ublic service, provide the following amounts
	relating to these items:		. .
	(i) Revenues included in Form 990, Part VIII, line 1		
^			
2	If the organization received or held works of art, historical		lal gain, provide
	the following amounts required to be reported under SFAS		. .
a	***************************************		
b	Assets included in Form 990, Part X		> \$

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 332051 09-25-13

Schedule D (Form 990) 2013

Schedule D (Form 990) 2013

109,977.

565,071.

1,311,407.

337,228.

218,593.

d Equipment

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)

447,205.

783,664.

Schedule D (Form 990) 2013 INSTITUTE O	F HEARTMATH		95-	-4023617 Page
Part VII Investments - Other Securities.				
Complete if the organization answered "Yes"	to Form 990, Part IV, line	11b. See Form 990, F	Part X, line 12.	
(a) Description of security or category (including name of security)	(b) Book value			-of-year market value
(1) Financial derivatives			· · · · · · · · · · · · · · · · · · ·	· · ·
(2) Closely-held equity interests				
(3) Other				
(A) DONATED INVESTMENT	244,500	. 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.)	244,500			
Part VIII Investments - Program Related.				
Complete if the organization answered "Yes"	to Form 990. Part IV. line	11c. See Form 990. i	Part X. line 13.	
(a) Description of investment	(b) Book value			l-of-year market value
(1)				·
(2)				
(3)				
· (4)				
(5)				
(6)				
(7)				-
(8)				
(9)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)				
Part IX Other Assets.		100000000000000000000000000000000000000		
Complete if the organization answered "Yes"	to Form 990. Part IV. line	e 11d. See Form 990.	Part X. line 15.	
	Description	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		(b) Book value
(1)				
(2)				
(3)				
(4)				
(5)		•		
(6)				
(7)				
(8)				
(9)				
Total. (Column (b) must equal Form 990, Part X, col. (B) lin	ne 15)			
Part X Other Liabilities.				
Complete if the organization answered "Yes"	to Form 990 Part IV line	a 11e or 11f See Form	1 990 Part X line 25	
1. (a) Description of liability	12.0111.000,1 0.017,1110	(b) Book value	. 555, 1 4.17, 1110 20	
//> = i !:		.,	1	

1.	(a) Description of liability	(b) Book value	
(1)	Federal income taxes		
(2)	RELATED PARTY PAYABLE	40,000.	
(3)	FISCAL AGENCY FUND	119,700.	
(4)			
(5)			
(6)			
(7)			
(8)			
(9)	•		
Total.	(Column (b) must equal Form 990, Part X, col. (B) line 25.)	159,700.	

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

Schedule D (Form 990) 2013

Par	t XI Reconciliation of Revenue per Audited Financial Stateme	nts With	Revenue per Retur	n.
	Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.			
1	Total revenue, gains, and other support per audited financial statements		1	1,716,651.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
а	Net unrealized gains on investments	2a		
þ	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	0.
3	Subtract line 2e from line 1		3	1,716,651.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b	-26,228.	
c	Add lines 4a and 4b			-26,228. 1,690,423.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			
Pa	TXII Reconciliation of Expenses per Audited Financial Stateme	ents Witl	n Expenses per Ret	urn.
	Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.			
1	Total expenses and losses per audited financial statements		1	1,919,524.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 1		
а	Donated services and use of facilities	2a		
b	Prior year adjustments			
С	Other losses	2c		
d	Other (Describe in Part XIII.)	2d	26,228.	
е	Add lines 2a through 2d			26,228.
3	Subtract line 2e from line 1		3	1,893,296.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
	Add lines 4a and 4b			0.
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5	1,893,296.
Pa	R XIII Supplemental Information.		****	
Prov	ide 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; Par	t X, line 2; Part XI,
lines	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any add	itional infor	mation.	
PA	RT X, LINE 2:			
EX.	PLANATION: UNCERTAINTY IN INCOME TAXES - A	CCOUNT	ING PRINCIPLE	ES GENERALLY
AC (CEPTED IN THE UNITED STATES OF AMERICA PRO	VIDE F	ACCOUNTING AND	D DISCLOSURE
GU	IDANCE ABOUT POSITIONS TAKEN BY AN ORGANIZ	ATION	IN ITS TAX RI	ETURNS THAT
MI	GHT BE UNCERTAIN. MANAGEMENT HAS CONSIDERE	D ITS	TAX POSITIONS	S AND
BE	LIEVES THAT ALL OF THE POSITIONS TAKEN BY	THE OF	RGANIZATION IN	N ITS
FE.	DERAL AND STATE TAX RETURNS ARE MORE-LIKEL	Y-THA1	N-NOT TO BE SU	JSTAINED
UP	ON EXAMINATION.			
TH	E ORGANIZATION FILES INFORMATION RETURNS I	N THE	U.S. FEDERAL	
_		_		
JU	RISDICTION AND STATE OF CALIFORNIA. THE OR	GANIZ <i>I</i>	ATION'S FEDERA	AL RETURNS
	R THE TAX YEARS 2010 AND BEYOND REMAIN SUB	JECT 1	O EXAMINATIO	N BY THE
3320 09-25	-13		Sch	edule D (Form 990) 2013

SCHEDULE I (Form 990) Department of the Treasury Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

OMB No. 1545-0047	2013	000000000000000000000000000000000000000

Open to Public
Inspection
Employer identification number

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

Schedule I (Form 990) (2013) ž TO TEACH HEARTMATH COPING 95-4023617 FOR US SOLIDERS BASED IN [TALY: TO TRAIN TRAINERS SKILLS TO APPROX. 2,000 (h) Purpose of grant or assistance X Yes Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection (g) Description of non-cash assistance ႘ FRAININGS, MATERIALS FRAINING PRODUCTS (f) Method of valuation (book, FMV, appraisal, other) 6 426 APPROX. COST (e) Amount of assistance non-cash Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (d) Amount of cash grant ö Enter total number of section 501(c)(3) and government organizations listed in the line 1 table (c) IRC section if applicable LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. INSTITUTE OF HEARTMATH Enter total number of other organizations listed in the line 1 table General Information on Grants and Assistance (p) EIN criteria used to award the grants or assistance? 1 (a) Name and address of organization ARMY COMMUNITY SERVICE - 266TH FL EDERLE BLDG 28 - VICENZA, VICENZA, US ARMY - VICENZA HEALTH CENTER & CTR ADV FIN MAGT CTR CASERMA or government Name of the organization Part

332101 10-29-13

INSTITUTE OF HEARTMATH

Page 2

95-4023617

Schedule I (Form 990) (2013)

PartIII

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed. (f) Description of non-cash assistance CHALLENGED INDIVIDUALS SERVING TRAININGS FREE OF CHARGE ALONG TRAINERS SERVING UNDERSERVED HEARTMATH TRAIN-THE-TRAINER EDUCATION MATERIALS GIVEN OF CHARGE TO FINANCIALLY POPULATIONS WERE GIVEN HEARTMATH PRODUCTS AND (e) Method of valuation (book, FMV, appraisal, other) PERSONS, VETERANS AND INDIVIDUALS OR ORGANIZATIONS WHO PROVIDE SERVICES TO Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information. TO ORGANIZATIONS AND INDIVIDUALS IN THE ENLISTED PERSONS AND VETERANS, FREE OF CHARGE. THE INSTITUTE ALSO AWARDS HEARTMATH FOR COMMUNITIES SPONSORSHIPS TO PROVIDE TRAININGS AND TRAINING SPONSORSHIPS TO PROVIDE TRAININGS AND/OR HEARTMATH PRODUCTS TO ENLISTED THE INSTITUTE AWARDS MILITARY SERVICE INSTITUTE AWARDS EDUCATION SPONSORSHIPS TO PROVIDE COST COST 8 132. (d) Amount of non-cash assistance 3,090. 。 ö (c) Amount of cash grant 2263 (b) Number of recipients GAVE TRAININGS & TRAINING MATERIALS FREE OF CHARGE TRAININGS AND TRAINING MATERIALS EDUCATION FIELD FREE OF CHARGE. GAVE PRODUCTS FREE OF CHARGE TO INDIVIDUALS (a) Type of grant or assistance $_{
m THE}$ LINE EXPLANATION: TO INDIVIDUALS **–** PART

332102 10-29-13

MATERIALS

SEE PART IV FOR COLUMN (F) DESCRIPTIONS

TO INDIVIDUALS OR ORGANIZATIONS WHO PROVIDE SERVICES TO

Schedule I (Form 990) (2013)

Part IV Supplemental Information

UNDERSERVED POPULATIONS, FREE OF CHARGE. RECIPIENTS OF SPONSORSHIPS FILL

OUT APPLICATION FORMS WHICH ARE EVALUATED ACCORDING TO CRITERIA. IF

AWARDED, RECIPIENTS SIGN A LETTER OF AGREEMENT THAT INCLUDES SUBMITTING

PROGRESS REPORTS ON THEIR USE OF THE TRAINING, MATERIALS OR PRODUCTS AND

THEIR RESULTS TO THE INSTITUTE. THE INSTITUTE ALSO PROVIDES HEARTMATH

PRODUCTS FOR FREE TO INDIVIDUALS AND ORGANIZATIONS WHO SERVE THE

UNDERSERVED AND ARE FINANCIALLY CHALLENGED ON A PER CASE BASIS AS THE

INSTITUTE CAN AFFORD TO DO THIS. THESE CASES ARE REVIEWED AND APPROVED BY

MANAGEMENT AND REPORTS BACK ARE REQUESTED BUT NOT REQUIRED.

PART II, LINE 1, COLUMN (H):

NAME OF ORGANIZATION OR GOVERNMENT:

- US ARMY VICENZA HEALTH CENTER & ARMY COMMUNITY SERVICE
- (H) PURPOSE OF GRANT OR ASSISTANCE: FOR US SOLIDERS BASED IN ITALY: TO

 TRAIN TRAINERS TO TEACH HEARTMATH COPING SKILLS TO APPROX. 2,000 MILITARY

 SERVICE PERSONS AND THEIR FAMILIES.
- (F) DESCRIPTION OF NON-CASH ASSISTANCE: HEARTMATH PRODUCTS AND EDUCATION

 MATERIALS GIVEN FREE OF CHARGE TO FINANCIALLY CHALLENGED INDIVIDUALS

 SERVING UNDERSERVED POPULATIONS.
- (F) DESCRIPTION OF NON-CASH ASSISTANCE: TRAINERS SERVING UNDERSERVED

 POPULATIONS WERE GIVEN HEARTMATH TRAIN-THE-TRAINER TRAININGS FREE OF

 CHARGE ALONG WITH TRAINING MATERIALS TO TRAIN PEOPLE THEY SERVE.

SCHEDULE L

(Form 990 or 990-EZ)

Transactions With Interested Persons

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

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Open To Public

OMB No. 1545-0047

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.

Inspection

Name of the organization										Employer identification number						
		95	<u>-40</u>	236	17											
						section 501(c)(4) orga										
	the organizatio					art IV, line 25a or 25b	, or Form 990-EZ, P	art V, I	ine 40)b.						
(a) Name of disqualified person		(b) Relationship between disqualified person and organization				lified (c	Description of tran	sactio	n				cted?			
			person and or	garnze							Ye	es	No			
											+					
		·									+					
					-											
2 Enter the amount of	tax incurred by	y the c	organization mar	agers	or disc	qualified persons dur	ing the year under			•						
section 4958									> \$							
3 Enter the amount of	tax, if any, on	line 2,	above, reimburs	sed by	the or	ganization			▶ \$							
Part II Loans to	and/or Fro	m Int	erested Per	sons												
[10000000000000000]					_	, Part V, line 38a or F	orm 000 Part IV lin	o 26.	or if th	o oran	nizati	on				
), Part X, line 5, (., r art v, iii e ooa or r	om 550, rait iv, iii	le 20, 1	01 11 11	ie orga	IIIZati	OH				
(a) Name of	(b) Relation	ionship (c) Purpose (d) Loan to or			an to or	(e) Original	(f) Balance due	(g)	(h) Apr	Approved (i) Written						
interested person	with organ	nization	of loan	from the organization?		principal amount		default?		by boa	ittee?	agree	reement?			
				То	From			Yes	No	Yes	No	Yes	No			
ROLLIN MCCRAT	ry OFFIC	ER	TO HELP	X		85,000.	85,000.		X	X		X				
				ļ						1						
					ļ											
					-					-						
					 							-				
												-				
										-						
													1			
Total		····				> \$	85,000.									
[CONTROL CONTROL CONTR			nefiting Inte													
			wered "Yes" on				(A) T						•			
(a) Name of interested person		(b) Relationship between interested person and				(c) Amount of assistance	(d) Type assistan			Purpose of assistance						
			the organization							assistance						
				-					-		-					
																
					-											
							-									

SEE PART V FOR CONTINUATIONS

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

Schedule L (Form 990 or 990-EZ) 2013

Schedule L (Form 990 or 990-EZ) 2013 INSTITUTE OF HEARTMATH Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered (a) Name of interested person	"Yes" on Form 990 (b) Relationship b person and th	etween interest		b, or 28c. (c) Amount of transaction	(d) Description of transaction	organiza	(e) Sharing of organization's revenues?		
						Yes	No		
QUANTUM INTECH	DOC CHILDI		OF		RCVD LICENS		_X		
HEARTMATH LLC			CO		PAID COGS-C		X		
HEARTMATH LLC	QI IS THE	PARENT	CO	50,000.	SOLD SERVIC		Х		
Part V Supplemental Information Provide additional information for response	onses to questions	on Schedule I	(see ir	nstructions).					
SCHEDULE L, PART II, LOANS					is:				
(A) NAME OF PERSON: ROLLIN	I MCCRATY					-			
(B) RELATIONSHIP WITH ORGA	NIZATION:	OFFICER							
(C) PURPOSE OF LOAN: TO HE	LP CASH F	LOW				•			
(D) LOAN TO OR FROM ORGANI	ZATION? =	то			· · · · · · · · · · · · · · · · · · ·				
(E) ORIGINAL PRINCIPAL AMO	OUNT \$ 85,	000. (F	') I	BALANCE DUE	E \$ 85,000.	······································			
(G) LOAN IN DEFAULT? = NO									
(H) APPROVED BY BOARD OR C	COMMITTEE?	= YES							
(I) WRITTEN AGREEMENT? = Y	YES .								
SCH L, PART IV, BUSINESS T	TRANSACTIO	NS INVOI	IIV	NG INTEREST	TED PERSONS:				
(A) NAME OF PERSON: QUANTU	JM INTECH								
(B) RELATIONSHIP BETWEEN I	INTERESTED	PERSON	ANI	ORGANIZAT	rion:				
DOC CHILDRE, CEO OF QUANTU	JM INTECH	(QI) ANI	PI	RESIDENT OF	F IHM ARE MA	ARRIE	D		
(C) AMOUNT OF TRANSACTION	\$ 293,564	•		· 					
(D) DESCRIPTION OF TRANSAC	CTION: RCV	D LICENS	SE 1	FEES - INST	TITUTE OF				
HEARTMATH (IHM) HAS GRANTI	ED A WORLD	WIDE EXC	LU	SIVE LICENS	SE FOR THE				
HEARTMATH SYSTEM TO QI, WI	HICH IN TU	RN SUBL	CEI	NSES IT TO	PARTNERS AF	ROUND)		
THE WORLD, INCLUDING HMLLO	C. IN RETU	RN, THE	IN	STITUTE REC	CEIVES A				
PERCENTAGE OF ROYALTIES AN	ND LICENSI	NG FEES	FR		DEMARKED ANI Schedule L (Form 990				

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

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

2013
Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury
Internal Revenue Service

Name of the organization

Employer identification number 95-4023617

INSTITUTE OF HEARTMATH FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: STUDENTS, TEACHERS, ADMINISTRATORS, SCHOOL COUNSELORS, AS WELL AS 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: STUDIES. FIELD TESTED AND REVISED TWO NEW TRAINING PROGRAMS, THE QUALIFIED PERSONAL RESILIENCE MENTOR TRAINING(R) AND THE HEARTMATH CERTIFIED TRAINING PROGRAM. 3. DELIVERED CERTIFIED TRAINER TRAINING PROGRAMS TO 88 CANDIDATES. THERE ARE TWO TYPES OF HEARTMATH CERTIFIED TRAINER PROGRAMS OFFERING LICENSES FOR EITHER ORGANIZATIONS OR INDEPENDENT TRAINERS. TRAINERS CAN DELIVER HEARTMATH RESILIENCE TRAININGS TO NONPROFITS, GOVERNMENT SERVICE AGENCIES, EDUCATORS, COUNSELORS, TEACHERS, ADMINISTRATORS, SCHOOL STAFF, THE GENERAL PUBLIC, EMERGENCY SERVICE PROVIDERS, HEALTH-CARE PROVIDERS AND SERVICES OR INCORPORATE HEARTMATH TECHNIQUES INTO THEIR EXISTING TRAINING PROGRAMS. 4. PRESENTED AT AND PARTICIPATED IN FIVE NATIONAL EDUCATION CONFERENCES IN 2013.

5. HOSTED EIGHT FREE PUBLIC IHM WEBINARS. MORE THAN 28,000 PEOPLE

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

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

- 1. ASSISTED 8,437 STUDENTS AND HUNDREDS OF EDUCATORS.
- 2. AWARDED 15 SPONSORSHIPS FOR A TOTAL OF \$11,941.

THE MILITARY SERVICE APPRECIATION FUND IS FUNDED BY DONORS AND MEMBERS WHO WANT TO SUPPORT MILITARY SERVICE MEN, WOMEN AND FAMILIES IN THE USE

OF THE HEARTMATH MATERIALS. IHM'S MILITARY SERVICE APPRECIATION FUND

INSTITUTE OF HEARTMATH

Employer identification number 95-4023617

PROVIDES FREE PROGRAMS, SERVICES AND RESOURCES TO VETERANS AND MILITARY

FAMILIES TO HELP LESSEN MENTAL, EMOTIONAL AND PHYSICAL SUFFERING AND

REINTEGRATION CHALLENGES, PTSD, ANGER MANAGEMENT AND MORE. IN ADDITION,

SCHOLARSHIPS ARE AWARDED TO MILITARY HEALTHCARE PROVIDERS, THERAPISTS

AND COUNSELORS WORKING WITH VETERANS, DEPLOYED, DEPLOYING AND RETURNING

MILITARY PERSONNEL.

- 1. DISTRIBUTED 2,238 HEARTMATH EDUCATION AND RESILIENCE TRAINING

 (H.E.A.R.T.) PROGRAM DVDS TO SERVICE MEMBERS, VETERANS, VA CENTERS AND

 COLLEGES IN 2013, FOR A TOTAL OF 4,588 SINCE IT WAS RELEASED IN LATE

 2011.
- 2. PROVIDED 32 SPONSORSHIPS OF MATERIALS AND TRAININGS TO INDIVIDUALS

 AND ORGANIZATIONS PROVIDING SERVICES TO PROVIDE HEARTMATH TOOLS AND

 TECHNIQUES TO VETERANS, SERVICE PERSONS AND THEIR FAMILIES.

THE DONOR SUPPORTED HEARTMATH FOR COMMUNITIES FUND WAS ESTABLISHED TO

PROVIDE SCHOLARSHIPS FOR INDIVIDUALS AND NONPROFIT REPRESENTATIVES TO

BE TRAINED AND LICENSED TO BECOME HEARTMATH DESTRESS WORKSHOP QUALIFIED

INSTRUCTORS. ONCE TRAINED, THESE COMMUNITY ADVOCATES AND NONPROFIT

REPRESENTATIVES OFFER FREE WORKSHOPS TO PEOPLE IN THEIR COMMUNITY.

- 1. THE FUND AWARDED 4 SCHOLARSHIPS THIS YEAR
- 2. AWARDEES TRAINED OVER 4,365 PEOPLE IN THEIR COMMUNITIES.
- 3. ALSO \$750 WAS RAISED FOR A SPECIAL PROJECT WITH THE BOYS & GIRLS CLUB

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:

CHRONIC BRAIN INJURY, SONYA KIM, VANCE ZEMON, MARIE M. CAVALLO, JOSEPH

09-04-13

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

Schedule O (Form 990 or 990-EZ) (2013) Page 2 Name of the organization **Employer identification number** INSTITUTE OF HEARTMATH 95-4023617 F. RATH, ROLLIN MCCRATY, FREDERICK W. FOLEY, BRAIN INJURY, FEBRUARY 2013; 27(2): 209-222. B) HEART COHERENCE INCREASES ORDER OF CRYSTALLIZATION PATTERNS IN DRIED SALIVA STUDY, ANNETTE DEYHLE PH.D.; JACKIE WATERMAN HEARTMATH RESEARCH CENTER, INSTITUTE OF HEARTMATH, BOULDER CREEK, CA, 2013. 2. INDEPENDENT RESEARCH STUDIES A) HEART RATE VARIABILITY BIOFEEDBACK IN ADOLESCENT SUBSTANCE ABUSE TREATMENT. CASE REPORT, CHRIS THURSTONE, M.D., TRAVIS LAJOIE, DO; GLOBAL ADVANCES HEALTH MED. 2013; 2(1);22-23. B) UTILIZING HEARTBEAT EVOKED POTENTIALS TO IDENTIFY CARDIAC REGULATION OF VAGAL AFFERENTS DURING EMOTION AND RESONANT BREATHING, STARR MACKINNON, RICHARD GEVIRTZ, ROLLIN MCCRATY, MILTON BROWN, APPLIED PSYCHOPHYSIOLOGY AND BIOFEEDBACK, DECEMBER 2013, VOLUME 38, ISSUE 4, PP 241-255 C) THE INVESTIGATION OF VISUAL ATTENTION AND WORKLOAD BY EXPERTS AND NOVICES IN THE COCKPIT , WEN-CHIN LI, FA-CHUNG CHIU, YING-SHINKUO, KA-JAY WU, ENGINEERING PSYCHOLOGY AND COGNITIVE ERGONOMICS. APPLICATIONS AND SERVICES, LECTURE NOTES IN COMPUTER SCIENCE VOLUME 8020, 2013, PP 167-176 D) THE EFFECTIVENESS OF HEART RATE VARIABILITY BIOFEEDBACK TREATMENT FOR CLIENTS WITH ANXIETY DISORDERS AT A COMMUNITY MENTAL HEALTH CENTER, RYAN L. COLE, PSY.D., ALLISON B. SHAPIRO, PH.D., ASPENPOINTE

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

6. THE RESEARCH TEAM ALSO PROVIDED: 1,200 AUTONOMIC ASSESSMENT REPORTS,

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

6. SOCIAL NETWORKING: GCI FACEBOOK: 74,434 FANS; GCI TWITTER: 20, 930

Schedule O (Form 990 or 990-EZ) (2013) Page 2 Name of the organization **Employer identification number** INSTITUTE OF HEARTMATH 95-4023617 FOLLOWERS, GCI YOUTUBE: 1,273 SUBSCRIBERS. 7. HOSTED THE SECOND EVENT AT THE TAO RESORT AND WELLNESS CENTER IN THE RIVIERA MAYA ON THE YUCATAN PENINSULA, MEXICO FOR 53 ATTENDEES. THIS EVENT WAS DESIGNED TO HELP PEOPLE LEARN HOW TO INCREASE ACCESS TO THEIR HEARTS INTUITIVE INTELLIGENCE. 8. HOSTED 12 GCI CARE FOCUSES IN THE GOAL CARE ROOM. 9. SPOKE AT 12 EVENTS AND CONFERENCES AROUND THE WORLD IN ADDITION TO NUMEROUS FREE TELESEMINARS AND WEBINARS. 10. LAUNCHED A GCI FACEBOOK NEWS CHANNEL AND A GLOBAL CARE ROOM APP. IN SEPTEMBER RELEASED NEW VIDEO: THE SUN, MOON & PEOPLE: ITS ALL CONNECTED, 5,677 VIEWS. FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES: 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. EXPENSES \$ 8,222. INCLUDING GRANTS OF \$ 0. REVENUE \$ 316,767. FORM 990, PART VI, SECTION B, LINE 11: EXPLANATION: COPIES OF THE FINAL DRAFT ARE EMAILED TO BOARD OF DIRECTORS

05024581

332212 09-04-13

FOR REVIEW BEFORE THE 990 IS APPROVED AND FILED.

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

EXPLANATION: CONFLICT OF INTEREST DISCLOSURE FORM IS SENT ANNUALLY TO

OFFICERS, DIRECTORS/TRUSTEES AND KEY EMPLOYEES TO DISCLOSE POTENTIAL

CONFLICTS OF 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:

EXPLANATION: 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. PROCESS IS RECORDED IN BOARD MINUTES.

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

EXPLANATION: 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

Schedule O (Form 990 or 990-EZ) (2013)	Page 2
Name of the organization INSTITUTE OF HEARTMATH	Employer identification number 95-4023617
REQUEST OR PAYMENT OF REQUIRED FEES(IF APPLICABLE), AND T	HE INFORMATION
REQUIRED TO FULFILL THE REQUEST. ADDITIONAL CHARGES AND/C	OR TIME MAY BE
ADDED FOR REQUESTS FOR NON-STANDARD DOCUMENTS THAT INCUR	ADDITIONAL
RETRIEVAL COSTS FOR THE ORGANIZATION.	
FORM 990, PART IX, LINE 11G, OTHER FEES:	
OUTSIDE SERVICES:	
PROGRAM SERVICE EXPENSES	374,368.
MANAGEMENT AND GENERAL EXPENSES	1,599.
FUNDRAISING EXPENSES	26,989.
TOTAL EXPENSES	402,956.
· · · · · · · · · · · · · · · · · · ·	
COMMISSIONS:	
PROGRAM SERVICE EXPENSES	1,617.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	1,617.
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	404,573.
FORM 990 PART IX COLUMN C	
EXPLANATION: \$197,060 OF THE \$250,424 MANAGEMENT AND GENI	ERAL EXPENSES
ARE INDIRECT COSTS. INDIRECT COSTS ARE EXPENSES SHARED BY	Y THE ENTIRE
ORGANIZATION, SUCH AS: EXPENSES FOR MANAGERIAL, FACILITIE	ES AND CLERICAL
STAFF POSITIONS THAT SERVE THE WHOLE ORGANIZATION, CONTR.	IBUTING TO
PROGRAM ACTIVITIES AS WELL AS SUPPORT ACTIVITIES. MANY NO	ONPROFITS
ALLOCATE INDIRECT COSTS TO PROGRAMS SO THEIR MANAGEMENT A	AND GENERAL
EXPENSES APPEAR LOWER. IF WE ALLOCATED THE \$197,060 INDI	RECT COSTS,
THEN \$22,662 WOULD GO TO MANAGEMENT AND GENERAL AND FUND	RAISING AND
332212 09-04-13 Sche	edule O (Form 990 or 990-EZ) (2013)

2013 DEPRECIATION AND AMORTIZATION REPORT FORM 990 PAGE 10

066

Current Year Deduction	36.371.	36,371.	1,017.	4,362.	12,697.	19,011.	2,780.	0.0
Current Sec 179		0		0.		0	•0	0
Accumulated Depreciation	611 915		53,840.	80,127. 133,967.	137,490.	196,898.	118,539.	• 0
Basis For Depreciation	1003000	1093000.	76,515.	93,695. 170,210.	247,824.	322,165.	125,040.	191,645.
* Reduction In Basis		0.		• 0		0.	0	0.
Bus % Excl								
Unadjusted Cost Or Basis	1003000	1093000.	76,515.	93,695, 170,210.	247,824.	322,165.	125,040.	191,645.
No.	<u>,</u>	2	16	<u>Ф</u>	16 16		16	16
Life	UUU	2 2 5	000.	000.	0000*		000.	000
Method								
Date Acquired	7474 2747 2747 2747 2747 2747 2747 2747	2 2 4 4 4 4 7	VARIES	VARIES	VARIES VARIES		VARIES	VARIES
Description	BUILDINGS	* 990 PAGE 10 TOTAL BUILDINGS FURNITURE &	FIXTURES FURNITURE & 4FIXTURES	9EQUIPMENT * 990 PAGE 10 TOTAL FURNITURE & FIXTUR MACHINERY &	EQUIPMENT SEQUIPMENT 6COMPUTERS	* 990 PAGE 10 TOTAL MACHINERY & EQUIPM TRANSPORTATION EQUIPMENT	8AUTOS * 990 PAGE 10 TOTAL TRANSPORTATION EQU	LAND 1LAND * 990 PAGE 10 TOTAL LAND OTHER
Asset No.			4	Un.	r û		8	H

(D) - Asset disposed

* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

2013 DEPRECIATION AND AMORTIZATION REPORT FORM 990 PAGE 10

990

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
<u> </u>	CONSTRUCTION IN 2PROCESS	VARIES		000.	16	478,333.			478,333.			0
- 1×	7_LAND IMPROVEMENT	VARIES		000.	9	135,121.			135,121.	72,097.		7,150.
OI 88	12MORTGAGE LOAN FEE	102711461		М09	43	11,567.			11,567.	2,699.		2,313.
(1) Y	13MORTGAGE LOAN FEE	031510461		36M	44 8	1,500.			1,500.	1,500.		.0
₩.	14MORTGAGE LOAN FEE	110707461		М09	43	17,274.			17,274.	17,274.		0
10	15RESEARCH VIDEO	100112461		36M	4	50,000.			50,000.	4,167.		16,667.
						693,795.		0	693,795.	97,737.	0	26,130.
300000000	* GRAND TOTAL 990 PAGE 10 DEPR & AMOR					2595855.		0.	2595855.	1159056.	0	89,671.
99999999												
g (2000)												
99 990900												
(200) (2000)												
660000 60000000												
2000					∀- (Q)	(D) - Asset disposed		* ITC,	* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction	age, Bonus, Comr	nercial Revital	zation Deduction

(D) - Asset disposed

* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

4562 4562

Department of the Treasury Internal Revenue Service (99

Depreciation and Amortization

(Including Information on Listed Property)

► See separate instructions. ► Attach to your tax return.

OMB No. 1545-0172

990

Attachment

Name(s) shown on return Business or activity to which this form relates FORM 990 PAGE 10 INSTITUTE OF HEARTMATH 95-4023617 Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I. 500,000. Maximum amount (see instructions) 2 Total cost of section 179 property placed in service (see instructions) 2,000,000. Threshold cost of section 179 property before reduction in limitation 3 4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-5 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filling separately, see instructions (a) Description of property (b) Cost (business use only) 6 7 Listed property. Enter the amount from line 29 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 9 Tentative deduction. Enter the smaller of line 5 or line 8 9 10 Carryover of disallowed deduction from line 13 of your 2012 Form 4562 10 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 11 12 Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11 12 13 Carryover of disallowed deduction to 2014. Add lines 9 and 10, less line 12 Note: Do not use Part II or Part III below for listed property. Instead, use Part V. Special Depreciation Allowance and Other Depreciation (Do not include listed property.) 14 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year 14 15 Property subject to section 168(f)(1) election 15 70,691 16 Other depreciation (including ACRS) 16 MACRS Depreciation (Do not include listed property.) (See instructions.) Section A 17 MACRS deductions for assets placed in service in tax years beginning before 2013 17 18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B - Assets Placed in Service During 2013 Tax Year Using the General Depreciation System (c) Basis for depreciation (b) Month and (d) Recovery period (business/investment use only - see instructions) (a) Classification of property (a) Depreciation deduction 19a 3-year property 5-year property 7-year property C 10-year property 15-year property е f 20-year property 25-year property 25 yrs. S/L 27.5 yrs. MM S/L h Residential rental property 27.5 yrs. MM S/L 39 yrs. MM S/L i Nonresidential real property MM S/L Section C - Assets Placed in Service During 2013 Tax Year Using the Alternative Depreciation System 20a Class life S/L b 12-year S/L 12 yrs. 40-year S/L Summary (See instructions.) 21 Listed property. Enter amount from line 28 21 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. 70,691. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instr. 23 For assets shown above and placed in service during the current year, enter the

51 9-13 LHA For Paperwork Reduction Act Notice, see separate instructions.

portion of the basis attributable to section 263A costs

Form **4562** (2013)

23

Part V Listed Property (Include automobiles, certain other vehicles, certain computers, and property used for entertainment, recreation, or amusement.)

24a	Section A -	- Depreciation	on and Other	Informa	tion (Ca	ution	ı: Se	e the ii	nstruc	tions for lir	nits for pa	assenge	r autom	obiles.)		
	Do you have evidence to s	support the bu	1	nt use cla	imed?		Yes	:	No	24b lf "Ye	es," is the	eviden	ce writte	en?	Yes	No
	(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentag					for depre	stment	(f) Recovery period	(g Meth Conve	od/	(h Depred dedu	ciation	Elec sectio co	n 179
25	Special depreciation alle	owance for o	ualified listed	oroperty	placed	in ser	rvice	during	the t	ax year and	d					
	used more than 50% in	a qualified b	usiness use									25				
26	Property used more tha	ın 50% in a c	qualified busine	ess use:												
		1 . 1	9	6												
		: :	9	6												
		<u> </u>	9	6												
27	Property used 50% or l	ess in a qual	ified business	use:						1					100000000000000000000000000000000000000	000000000000
		1 : :	9	6							S/L·					
		<u> </u>	9	%							S/L·					
		<u> </u>		6							S/L·					
28	Add amounts in columr	ı (h), lines 25	through 27. E	nter here	and on	line 2	21, p	age 1				28				
29	Add amounts in column	ı (i), line 26. E	Enter here and	on line 7	7, page	1				<u></u>				29		
				ection E												
Cor	nplete this section for ve	ehicles used	by a sole prop	rietor, p	artner, o	r othe	er "m	nore th	an 5%	ó owner," c	or related	person.	If you p	provided	d vehicles	3
to y	our employees, first ans	wer the que	stions in Section	on C to s	see if yo	u mee	et an	excep	otion to	o completi	ng this se	ction fo	r those	vehicles	3.	
				T					T			· · · · · · · · · · · · · · · · · · ·				
				(6	a)		(b)	1		(c))	(€	e)	(f	
30	Total business/investment		•	Veh	icle	ļ'	Vehic	cle	\	/ehicle	Vehi	cle	Veh	icle	Veh	icle ·
	year (do not include com								`							
	Total commuting miles		-			ļ										
32	Total other personal (no	•	- ,													
	driven															
33	Total miles driven durin															
	Add lines 30 through 33				Γ	ļ			ļ							
34	Was the vehicle availab	•		Yes	No	Ye	s	No	Yes	s No	Yes	No	Yes	No	Yes	No
	during off-duty hours?				ļ				-							
35	Was the vehicle used p															
	than 5% owner or relat														-	
36	Is another vehicle availa															
	use?										<u> </u>				l	l
			- Questions									-				
	swer these questions to		you meet an e	xceptior	to com	pletir	ng Se	ection	B for v	vehicles us	ed by em	ployees	who ar	re not n	nore than	า 5%
	ners or related persons.															1
37	Do you maintain a writt		•		•					_	-				Yes	No
	employees?														-	-
38	Do you maintain a writt		•							•						
~~	employees? See the in															
	Do you treat all use of														.	
40	Do you provide more the															
40	the use of the vehicles															
	Do you meet the requir													• • • • • • • • • • • • • • • • • • • •	·-	<u> </u>
	Note: If your answer to art VI Amortization	37, 38, 39, 4	40, or 41 is Ye	s, ao n	ot comp	iete S	secti	on B to	or the	coverea ve	enicies.				1888888888	
41				(b)	T		(c)			(d)	1	(e)			(f)	
41					Į.		rtizable	е		Code		Amortizati	on	Д	mortization or this year	
41	(a)	of costs	Date	amortization					1							
41 P	(a) Description		, i	begins		am	ount			section		eriod or perc		f	or uns year	
41 P	(a)		uring your 201	begins 3 tax yea		am	ount			section				f	or uns year	
41 P	(a) Description		uring your 201	begins 3 tax yea		am	ount			section				f	or this year	
41 P	(a) Description	hat begins d	uring your 201	begins 3 tax yea	ar:	am						eriod or perc		f		980