

PUBLIC DISCLOSURE COPY

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ARMANINO ^{LLP}

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Form **990**Department of the Treasury
Internal Revenue Service

PUBLIC DISCLOSURE COPY - STATE REGISTRATION NO. 58948

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter social security numbers on this form as it may be made public.

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

OMB No. 1545-0047

2014Open to Public
Inspection

A For the 2014 calendar year, or tax year beginning and ending		D Employer identification number
B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization	
	INSTITUTE OF HEARTMATH	
	Doing business as HEARTMATH INSTITUTE	95-4023617
	Number and street (or P.O. box if mail is not delivered to street address) Room/suite	E Telephone number
	P.O. BOX 1463	(831) 338-8500
City or town, state or province, country, and ZIP or foreign postal code	G Gross receipts \$	
BOULDER CREEK, CA 95006	2,628,930.	
F Name and address of principal officer: BRIAN KABAKER		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
SAME AS C ABOVE		H(b) Are all subordinates included? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
		If "No," attach a list. (see instructions)
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		H(c) Group exemption number ▶
J Website: WWW.HEARTMATH.ORG		
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		L Year of formation: 1991 M State of legal domicile: CA

Part I Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities: TO HELP PEOPLE AROUND THE WORLD ESTABLISH HEART-BASED LIVING AND GLOBAL COHERENCE.		
	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3	Number of voting members of the governing body (Part VI, line 1a)	3	7
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	4
	5	Total number of individuals employed in calendar year 2014 (Part V, line 2a)	5	23
	6	Total number of volunteers (estimate if necessary)	6	30
Revenue	7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
	b	Net unrelated business taxable income from Form 990-T, line 34	7b	0.
	8	Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9	Program service revenue (Part VIII, line 2g)	235,498.	563,059.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	641,250.	802,722.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1,517.	691.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	812,158.	756,607.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	1,690,423.	2,123,079.
	14	Benefits paid to or for members (Part IX, column (A), line 4)	76,859.	51,653.
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	0.	0.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)	788,961.	768,699.
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 72,136.	0.	0.
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	0.	0.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	1,027,476.	1,035,216.
	19	Revenue less expenses. Subtract line 18 from line 12	1,893,296.	1,855,568.
			-202,873.	267,511.
Net Assets or Fund Balances		Beginning of Current Year	End of Year	
	20	Total assets (Part X, line 16)	2,127,141.	2,552,207.
	21	Total liabilities (Part X, line 26)	1,420,785.	1,578,340.
	22	Net assets or fund balances. Subtract line 21 from line 20	706,356.	973,867.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign	Signature of officer	Date	
Here	BRIAN KABAKER, CFO		
	Type or print name and title		
Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> PTIN
LAWRENCE S. KUECHLER	LAWRENCE S. KUECHLER	07/27/15	Self-employed P00233621
Firm's name	ARMANINO LLP	Firm's EIN	94-2763139
Use Only	Firm's address	Phone no.	
	50 W. SAN FERNANDO ST. #500	408-200-6400	
	SAN JOSE, CA 95113		

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

☒ Yes ☐ No

Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response or note to any line in this Part III ☒ X

1 Briefly describe the organization's mission:

IHM'S MISSION IS TO INSPIRE PEOPLE TO CONNECT WITH THE INTELLIGENCE
AND GUIDANCE OF THEIR OWN HEARTS TO HELP ESTABLISH PERSONAL AND GLOBAL
COHERENCE. THIS IS ACCOMPLISHED BY CREATING AND DELIVERING EDUCATIONAL
RESOURCES AND TRAINING PROGRAMS FOR: PRE-K THROUGH COLLEGE AGE

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☒ Yes ☐ 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? ☐ Yes ☒ No

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.

Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 950,043. including grants of \$ 51,587.) (Revenue \$ 1,115,802.)
EDUCATION DIVISION

EDUCATION DIVISION- TOOLS AND TECHNOLOGIES HELP CHILDREN, PARENTS,
SENIORS, NON-PROFIT CONSTITUENTS, INDIVIDUALS, TEENS, VETERANS,
MILITARY PERSONAL AND FAMILIES LEARN HOW TO SELF-REGULATE EMOTIONS,
INCREASE EMOTIONAL INTELLIGENCE AND REDUCE STRESS. ACTIVITIES OF THIS
DIVISION INCLUDE: DISSEMINATING EDUCATIONAL AND RESEARCH INFORMATION
VIA E-TECHNOLOGY, SOCIAL MEDIA, PRODUCTS, LECTURES AND CONFERENCES;
MEMBERSHIP PROGRAM; COLLABORATION; PROGRAM DEVELOPMENT, PROGRAM
MATERIALS AND PRODUCT DEVELOPMENT; TRAINING AND EDUCATION PROGRAMS;
SOME HIGHLIGHTS OF 2014 ARE:

4b (Code:) (Expenses \$ 316,083. including grants of \$) (Revenue \$ 100,564.)
RESEARCH DIVISION

THE RESEARCH CENTER CONDUCTS BASIC RESEARCH INTO PSYCHOPHYSIOLOGY,
NEUROCARDIOLOGY AND BIOPHYSICS, AND OUTCOME STUDIES IN CLINICAL,
WORKPLACE, EDUCATIONAL AND MILITARY SETTINGS, FREQUENTLY IN
COLLABORATION WITH UNIVERSITIES, RESEARCH CENTERS AND
HEALTH-CARE-SYSTEM PARTNERS.
RESEARCH INTERESTS ALSO INCLUDE THE ELECTROPHYSIOLOGY OF INTUITION AND
EXPLORING HOW WE ARE ALL GLOBALLY INTERCONNECTED AT A DEEP, FUNDAMENTAL
LEVEL VIA ELECTROMAGNETIC FIELDS AND BIOFIELDS. SOME HIGHLIGHTS OF 2014
ARE:

4c (Code:) (Expenses \$ 252,571. including grants of \$ 66.) (Revenue \$ 101,838.)
GLOBAL COHERENCE INITIATIVE

THE GLOBAL COHERENCE INITIATIVE (GCI) IS A SCIENCE-BASED IHM PROJECT
DESIGNED TO HELP INDIVIDUALS AND GROUPS WORK TOGETHER SYNCHRONISTICALLY
AND STRATEGICALLY TO INCREASE THE IMPACT OF THEIR INDIVIDUAL EFFORTS TO
CREATE POSITIVE CHANGE ON A GLOBAL LEVEL.

1. TESTED POTENTIAL SITES FOR THE GLOBAL COHERENCE MONITORING SYSTEM IN
NEW ZEALAND AND INSTALLED THE SITE ON THE NORTH ISLAND, AND INSTALLED
THE SITE THAT WAS PREVIOUSLY LOCATED IN THE UNITED KINGDOM TO ITS NEW
HOME IN LITHUANIA. POTENTIAL SITE LOCATIONS WERE IDENTIFIED AND TESTING
ARRANGEMENTS WERE MADE FOR THE INSTALLATION OF A SITE IN SOUTH AFRICA

4d Other program services (Describe in Schedule O.)

(Expenses \$ 4,364. including grants of \$) (Revenue \$ 171,416.)

4e Total program service expenses 1,523,061.

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2 Is the organization required to complete Schedule B, Schedule of Contributors?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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	<input type="checkbox"/>	<input checked="" type="checkbox"/>
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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	<input type="checkbox"/>	<input checked="" type="checkbox"/>
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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	<input type="checkbox"/>	<input checked="" type="checkbox"/>
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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	<input checked="" type="checkbox"/>	<input type="checkbox"/>
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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	<input type="checkbox"/>	<input checked="" type="checkbox"/>
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	<input type="checkbox"/>	<input checked="" type="checkbox"/>
14a Did the organization maintain an office, employees, or agents outside of the United States?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	<input checked="" type="checkbox"/>	<input type="checkbox"/>
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	<input type="checkbox"/>	<input checked="" type="checkbox"/>
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	<input type="checkbox"/>	<input checked="" type="checkbox"/>
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	<input type="checkbox"/>	<input checked="" type="checkbox"/>
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	<input type="checkbox"/>	<input checked="" type="checkbox"/>
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	<input type="checkbox"/>	<input checked="" type="checkbox"/>
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	<input type="checkbox"/>	<input checked="" type="checkbox"/>
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Part IV Checklist of Required Schedules (continued)

	Yes	No
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	X
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	X
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete 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	
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c	
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a	X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b	X
26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26	X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27	X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	X
b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	X
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	X
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 contributions? If "Yes," complete Schedule M	30	X
31 Did the organization liquidate, terminate, or dissolve and cease operations?		
If "Yes," complete Schedule N, Part I	31	X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32	X
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	X
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	X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	X
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?	38	X

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

Form 990 (2014)

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	21	
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	0	
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	23	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	X	
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		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		
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)?	X	
b	If "Yes," enter the name of the foreign country: See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	X	
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	X	
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		
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?	X	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	X	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	X	
d	If "Yes," indicate the number of Forms 8282 filed during the year		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	X	
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	X	
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	N/A	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	N/A	
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	N/A	
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the sponsoring organization make any taxable distributions under section 4966?	N/A	
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	N/A	
10	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on Part VIII, line 12	N/A	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		
11	Section 501(c)(12) organizations. Enter:		
a	Gross income from members or shareholders	N/A	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	N/A	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a	Is the organization licensed to issue qualified health plans in more than one state?	N/A	
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?		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		

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

☒**Section 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	1a	7
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	4
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:		
a The governing body?	8a	X
b Each committee with authority to act on behalf of the governing body?	8b	X
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

Section 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 filing the form?	11a	X
b Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12a Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X
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	X
13 Did the organization have a written whistleblower policy?	13	X
14 Did the organization have a written document retention and destruction policy?	14	X
15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a The organization's CEO, Executive Director, or top management official	15a	X
b Other officers or key employees of the organization	15b	X
If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		
16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar 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	

Section 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) available for public inspection. Indicate how you made these available. Check all that apply.

☐ Own website ☐ Another's website ☒ 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, and financial statements available to the public during the tax year.

20 State the name, address, and telephone number of the person who possesses the organization's books and records: **LYNN LIPPOLD - (831) 338-8719**
P.O. BOX 1463, BOULDER CREEK, CA 95006

Part VIII Statement of RevenueCheck if Schedule O contains a response or note to any line in this Part VIII ☐

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a			
	b Membership dues	1b 49,871.			
	c Fundraising events	1c			
	d Related organizations	1d			
	e Government grants (contributions)	1e			
	f All other contributions, gifts, grants, and similar amounts not included above	1f 513,188.			
	g Noncash contributions included in lines 1a-1f: \$	51,676.			
	h Total. Add lines 1a-1f	563,059.			
Program Service Revenue	2 a EDUCATION PROGRAMS	Business Code 611600	600,320.	600,320.	
	b RESEARCH SERVICES	541700	202,402.	202,402.	
	c				
	d				
	e				
	f All other program service revenue				
	g Total. Add lines 2a-2f	802,722.			
	Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		691.	
4 Income from investment of tax-exempt bond proceeds					
5 Royalties			171,415.	171,415.	
6 a Gross rents		(i) Real 96,150.			
b Less: rental expenses		26,441.			
c Rental income or (loss)		69,709.			
d Net rental income or (loss)			69,709.		69,709.
7 a Gross amount from sales of assets other than inventory		(i) Securities (ii) Other			
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 \$ 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 994,893.				
b Less: cost of goods sold	b 479,410.				
c Net income or (loss) from sales of inventory		515,483.	515,483.		
Miscellaneous Revenue		Business Code			
11 a					
b					
c					
d All other revenue					
e Total. Add lines 11a-11d					
12 Total revenue. See instructions.		2,123,079.	1,489,620.	0.	70,400.

Part IX Statement of Functional Expenses

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

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

☒ X

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.				
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	44,699.	44,699.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	2,254.	2,254.		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	4,700.	4,700.		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	211,552.	150,008.	49,652.	11,892.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	439,578.	349,941.	83,737.	5,900.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	3,321.	2,859.	462.	
9 Other employee benefits	65,865.	48,408.	17,076.	381.
10 Payroll taxes	48,383.	37,393.	9,784.	1,206.
11 Fees for services (non-employees):				
a Management				
b Legal	4,717.	3,849.	868.	
c Accounting	17,750.		17,750.	
d Lobbying				
e 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.)	427,593.	406,004.	944.	20,645.
12 Advertising and promotion	20,336.	14,494.	25.	5,817.
13 Office expenses	118,455.	85,432.	19,365.	13,658.
14 Information technology	82,485.	72,241.	7,943.	2,301.
15 Royalties	1,069.	1,069.		
16 Occupancy	132,170.	108,910.	22,435.	825.
17 Travel	43,889.	38,453.	159.	5,277.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	20,598.	20,517.		81.
20 Interest	48.	44.	3.	1.
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	90,242.	78,826.	10,813.	603.
23 Insurance	12,559.	7,537.	4,737.	285.
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a MAINTENANCE	37,286.	27,760.	8,689.	837.
b DUES AND SUBSCRIPTIONS	11,652.	9,702.	643.	1,307.
c OTHER	5,809.	5,176.	32.	601.
d LICENSES, FEES AND TAXE	4,675.	2,598.	1,558.	519.
e All other expenses	3,883.	187.	3,696.	
25 Total functional expenses. Add lines 1 through 24e	1,855,568.	1,523,061.	260,371.	72,136.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				
Check here <input checked="" type="checkbox"/> X if following SOP 98-2 (ASC 956-720)	2,827.	1,680.	0.	1,147.

Part X Balance SheetCheck if Schedule O contains a response or note to any line in this Part X ☐

		(A) Beginning of year	(B) End of year
Assets	1 Cash - non-interest-bearing	40,611.	244,045.
	2 Savings and temporary cash investments	394,072.	336,661.
	3 Pledges and grants receivable, net		
	4 Accounts receivable, net	56,739.	145,921.
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L		
	7 Notes and loans receivable, net		
	8 Inventories for sale or use		
	9 Prepaid expenses and deferred charges	19,090.	28,111.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 2,587,515.	
b Less: accumulated depreciation	10b 1,275,987.	1,311,407.	
11 Investments - publicly traded securities		1,311,528.	
12 Investments - other securities. See Part IV, line 11	244,500.	294,500.	
13 Investments - program-related. See Part IV, line 11			
14 Intangible assets	35,722.	16,741.	
15 Other assets. See Part IV, line 11	25,000.	174,700.	
16 Total assets. Add lines 1 through 15 (must equal line 34)	2,127,141.	2,552,207.	
Liabilities	17 Accounts payable and accrued expenses	105,230.	109,477.
	18 Grants payable		
	19 Deferred revenue	12,500.	188,645.
	20 Tax-exempt bond liabilities		
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		99,700.
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L	85,000.	85,000.
	23 Secured mortgages and notes payable to unrelated third parties	1,058,355.	1,038,107.
	24 Unsecured notes and loans payable to unrelated third parties		
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	159,700.	57,411.
	26 Total liabilities. Add lines 17 through 25	1,420,785.	1,578,340.
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.		
	27 Unrestricted net assets	642,048.	736,145.
	28 Temporarily restricted net assets	64,308.	237,722.
	29 Permanently restricted net assets		
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.		
	30 Capital stock or trust principal, or current funds		
	31 Paid-in or capital surplus, or land, building, or equipment fund		
	32 Retained earnings, endowment, accumulated income, or other funds		
	33 Total net assets or fund balances	706,356.	973,867.
	34 Total liabilities and net assets/fund balances	2,127,141.	2,552,207.

Part XI Reconciliation of Net AssetsCheck if Schedule O contains a response or note to any line in this Part XI ☐

1	Total revenue (must equal Part VIII, column (A), line 12)	1	2,123,079.
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,855,568.
3	Revenue less expenses. Subtract line 2 from line 1	3	267,511.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	706,356.
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	973,867.

Part XII Financial Statements and ReportingCheck if Schedule O contains a response or note to any line in this Part XII ☐

	Yes	No
1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
b Were the organization's financial statements audited by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? _____ If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	X	
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? _____	X	
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits _____		

Form 990 (2014)

OMB No. 1545-0047

2014

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

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

Name of the organization

Employer identification number

95-4023617

INSTITUTE OF HEARTMATH

Part I	Reason for Public Charity Status (All organizations must complete this part.) See instructions.
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The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

- 1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E.)
- 3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state:
- 5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
- 6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7 ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9 ☐ An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
- 10 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g.
- a ☐ **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
- b ☐ **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
- c ☐ **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
- d ☐ **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
- e ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.

f Enter the number of supported organizations

a. Provide the following information about the supported organization(s)

[illegible]

Total

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	488,217.	444,832.	281,669.	235,498.	563,059.	2013275.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	488,217.	444,832.	281,669.	235,498.	563,059.	2013275.
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)						399,780.
6 Public support. Subtract line 5 from line 4						1613495.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
7 Amounts from line 4	488,217.	444,832.	281,669.	235,498.	563,059.	2013275.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	3,274.	97,894.	97,973.	97,292.	96,841.	393,274.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 Total support. Add lines 7 through 10						2406549.
12 Gross receipts from related activities, etc. (see instructions)					12	9,679,923.
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here. <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2014 (line 6, column (f) divided by line 11, column (f))	14	67.05 %
15 Public support percentage from 2013 Schedule A, Part II, line 14	15	67.81 %
16a 33 1/3% support test - 2014. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization <input checked="" type="checkbox"/>		
b 33 1/3% support test - 2013. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
17a 10% -facts-and-circumstances test - 2014. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
b 10% -facts-and-circumstances test - 2013. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions <input type="checkbox"/>		

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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(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 performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here. ☐

Section C. Computation of Public Support Percentage

15 Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2013 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2014 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2013 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2014. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization. ☐

b 33 1/3% support tests - 2013. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization. ☐

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions. ☐

Part IV Supporting Organizations

(Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.		
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2) (B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.		
4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).		
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations; (b) individuals that are part of the charitable class benefited by one or more of its supported organizations; or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI .		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990).		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI .		
b Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI .		
c Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .		
10a Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer (b) below.		
b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)		

Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?		
b A family member of a person described in (a) above?		
c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI .		

Section B. Type I Supporting Organizations

	Yes	No
1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.		
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.		

Section C. Type II Supporting Organizations

	Yes	No
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).		

Section D. Type III Supporting Organizations

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).		
3 By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.		

Section E. Type III Functionally-Integrated Supporting Organizations

	Yes	No
1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions):		
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).		
2 Activities Test. Answer (a) and (b) below.		
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.		
b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.		
3 Parent of Supported Organizations. Answer (a) and (b) below.		
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI .		
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

- 1 ☐ Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970. See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income

	(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1	
2 Recoveries of prior-year distributions	2	
3 Other gross income (see instructions)	3	
4 Add lines 1 through 3	4	
5 Depreciation and depletion	5	
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7 Other expenses (see instructions)	7	
8 Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8	

Section B - Minimum Asset Amount

	(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a Average monthly value of securities	1a	
b Average monthly cash balances	1b	
c Fair market value of other non-exempt-use assets	1c	
d Total (add lines 1a, 1b, and 1c)	1d	
e Discount claimed for blockage or other factors (explain in detail in Part VI):		
2 Acquisition indebtedness applicable to non-exempt-use assets	2	
3 Subtract line 2 from line 1d	3	
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4	
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6 Multiply line 5 by .035	6	
7 Recoveries of prior-year distributions	7	
8 Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount

		Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2 Enter 85% of line 1	2	
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4 Enter greater of line 2 or line 3	4	
5 Income tax imposed in prior year	5	
6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	
7 <input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions).		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI). See instructions.	
7 Total annual distributions. Add lines 1 through 6.	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	
9 Distributable amount for 2014 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014
1 Distributable amount for 2014 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2014 (reasonable cause required-see instructions)			
3 Excess distributions carryover, if any, to 2014:			
a			
b			
c			
d			
e From 2013			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2014 distributable amount			
i Carryover from 2009 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2014 from Section D, line 7:			
a Applied to underdistributions of prior years			
b Applied to 2014 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2014, if any. Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions).			
6 Remaining underdistributions for 2014. Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions).			
7 Excess distributions carryover to 2015. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a			
b			
c			
d Excess from 2013			
e Excess from 2014			

Part VI**Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12.

Also complete this part for any additional information. (See instructions).

Schedule B

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

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047

2014

Name of the organization

Employer identification number

INSTITUTE OF HEARTMATH

95-4023617

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

☒ 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

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

- ☐ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

- ☒ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ▶ \$

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

Name of organization

Employer identification number

INSTITUTE OF HEARTMATH**95-4023617****Part I Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>1</u>		\$ <u>30,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>2</u>		\$ <u>50,000.</u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
<u>3</u>		\$ <u>181,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>4</u>		\$ <u>100,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (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
2	33,333 SHARES QUANTUM INTECH STOCK	\$ 50,000.	09/12/14
(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 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
		\$	

Name of organization

Employer identification number

INSTITUTE OF HEARTMATH

95-4023617

Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. 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 info once) ▶ \$

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 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 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 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

SCHEDULE C
(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

2014

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.
 ▶ 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) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization

INSTITUTE OF HEARTMATH

Employer identification number

95-4023617

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.

2 Political expenditures ▶ \$

3 Volunteer hours

Part I-B Complete if the organization is exempt under section 501(c)(3).

1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ \$

2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$

3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes ☐ No

4a Was a correction made? ☐ Yes ☐ No

b If "Yes," describe in Part IV.

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ \$

2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ \$

3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ▶ \$

4 Did the filing organization file Form 1120-POL for this year? ☐ Yes ☐ No

5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-

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

Schedule C (Form 990 or 990-EZ) 2014

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

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.)

(a) Filing organization's totals

(b) Affiliated group totals

1a Total lobbying expenditures to influence public opinion (grass roots lobbying)	0.	
b Total lobbying expenditures to influence a legislative body (direct lobbying)	0.	
c Total lobbying expenditures (add lines 1a and 1b)	0.	
d Other exempt purpose expenditures	1,523,061.	
e Total exempt purpose expenditures (add lines 1c and 1d)	1,523,061.	
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.	226,153.	

If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:
Not over \$500,000	20% of the amount on line 1e.
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess 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 \$1,500,000 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)	56,538.	
h Subtract line 1g from line 1a. If zero or less, enter -0-	0.	
i Subtract line 1f from line 1c. If zero 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 reporting section 4911 tax for this year?	<input type="checkbox"/> Yes <input type="checkbox"/> 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 separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period

Calendar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) Total
2a Lobbying nontaxable amount	211,997.	221,767.	226,124.	226,153.	886,041.
b Lobbying ceiling amount (150% of line 2a, column(e))					1,329,062.
c Total lobbying expenditures					
d Grassroots nontaxable amount	52,999.	55,442.	56,531.	56,538.	221,510.
e Grassroots ceiling amount (150% of line 2d, column (e))					332,265.
f Grassroots lobbying expenditures					

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)).

For each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.

	(a)		(b)
	Yes	No	Amount
1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a Volunteers?			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c Media advertisements?			
d Mailings to members, legislators, or the public?			
e Publications, or published or broadcast statements?			
f Grants to other organizations for lobbying purposes?			
g Direct contact with legislators, their staffs, government officials, or a legislative body?			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i Other activities?			
j Total. Add lines 1c through 1i			
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b If "Yes," enter the amount of any tax incurred under section 4912			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 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	
3 Did the organization agree to carry over lobbying and political expenditures from the prior year?	3	

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, line 3, is answered "Yes."

1 Dues, assessments and similar amounts from members	1
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	
a Current year	2a
b Carryover from last year	2b
c Total	2c
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4
5 Taxable amount of lobbying and political expenditures (see instructions)	5

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions); and Part II-B, line 1. Also, complete this part for any additional information.

SCHEDULE C, PART II-A**DURING 2014, THERE WERE NO LOBBYING ACTIVITIES CONDUCTED.**

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

2014Open to Public
Inspection

Name of the organization

Employer identification number

INSTITUTE OF HEARTMATH**95-4023617****Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.** Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?		<input type="checkbox"/> Yes <input type="checkbox"/> No

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).

<input type="checkbox"/> Preservation of land for public use (e.g., recreation or education)	<input type="checkbox"/> Preservation of a historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> Preservation of open space	

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶

4 Number of states where property subject to conservation easement is located ▶

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenue included in Form 990, Part VIII, line 1 ▶ \$

(ii) Assets included in Form 990, Part X ▶ \$

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

a Revenue included in Form 990, Part VIII, line 1 ▶ \$

b Assets included in Form 990, Part X ▶ \$

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items

(check all that apply):

- a ☐ Public exhibition
 b ☐ Scholarly research
 c ☐ Preservation for future generations
 d ☐ Loan or exchange programs
 e ☐ Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets

to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☒ No**Part IV Escrow and Custodial Arrangements.** Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☒ No

b If "Yes," explain the arrangement in Part XIII and complete the following table:

	Amount
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	1f

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? ☒ Yes ☐ Nob If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII ☒**Part V Endowment Funds.** Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a Board designated or quasi-endowment ☐ %
 b Permanent endowment ☐ %
 c Temporarily restricted endowment ☐ %

The percentages in lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

- (i) unrelated organizations
 (ii) related organizations

	Yes	No
3a(i)		
3a(ii)		
3b		

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		191,645.		191,645.
b Buildings		1,125,159.	691,253.	433,906.
c Leasehold improvements				
d Equipment		540,905.	361,391.	179,514.
e Other		729,806.	223,343.	506,463.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				1,311,528.

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A) DONATED INVESTMENT	294,500.	END-OF-YEAR MARKET VALUE
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	294,500.	

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-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.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1) LICENCE FEES AND ROYALTIES RECEIVABLE	75,000.
(2) FISCAL AGENCY FUNDS	99,700.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	174,700.

Part X Other Liabilities.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) RELATED PARTY PAYABLE	57,411.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	57,411.

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

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

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	2,149,520.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	0.
3	Subtract line 2e from line 1	3	2,149,520.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	-26,441.
c	Add lines 4a and 4b	4c	-26,441.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	2,123,079.

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

Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements	1	1,882,009.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	26,441.
e	Add lines 2a through 2d	2e	26,441.
3	Subtract line 2e from line 1	3	1,855,568.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	1,855,568.

Part XIII Supplemental Information.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

PART IV, LINE 2B:

DURING THE YEAR ENDED DECEMBER 31, 2013 IHM SERVED AS A FISCAL AGENT FOR FUNDS FROM HOLOS INSTITUTE OF HEALTH, INC. (HIH) AMOUNTING TO \$126,000. ALL FUNDS RECEIVED FROM HIH, WITH THE EXCEPTION OF A ONE-TIME 5% SERVICE FEE, TAKEN BY IHM, WERE DEPOSITED IN A CASH ACCOUNT MAINTAINED BY IHM AND INCLUDED IN THE STATEMENT OF FINANCIAL POSITION AS "FISCAL AGENCY FUND" WITH A CORRESPONDING LIABILITY UNDER CURRENT LIABILITIES. AS PER HIH REQUEST, THESE FUNDS ARE TO BE DISBURSED TO THE WILLIAM A. TILLER FOUNDATION, THE PARENT ORGANIZATION FOR THE WILLIAM A. TILLER INSTITUTE OF PSYCHOENERGETIC RESEARCH. DISBURSEMENTS WAS \$20,000 AND \$0 FOR THE YEARS ENDED DECEMBER 31, 2014 AND 2013, RESPECTIVELY. AS OF DECEMBER 31, 2014 AND 2013, THE BALANCE OF FISCAL AGENCY FUND WAS \$99,700 AND \$119,700.

Part XIII Supplemental Information (continued)

RESPECTIVELY.

PART X, LINE 2:

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

THE ORGANIZATION FILES INFORMATION RETURNS IN THE U.S. FEDERAL JURISDICTION AND STATE OF CALIFORNIA. THE ORGANIZATION'S FEDERAL RETURNS FOR THE TAX YEARS 2011 AND BEYOND REMAIN SUBJECT TO EXAMINATION BY THE INTERNAL REVENUE SERVICE. THE ORGANIZATION'S CALIFORNIA RETURNS FOR THE TAX YEARS 2010 AND BEYOND REMAIN SUBJECT TO EXAMINATION BY THE FRANCHISE TAX BOARD.

PART XI, LINE 4B - OTHER ADJUSTMENTS:

RENTAL EXPENSE -26,441.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

RENTAL EXPENSE 26,441.

SCHEDULE F
(Form 990)Department of the Treasury
Internal Revenue Service**Statement of Activities Outside the United States**

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

▶ Attach to Form 990.

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

OMB No. 1545-0047

2014Open to Public
Inspection

Name of the organization

Employer identification number

INSTITUTE OF HEARTMATH**95-4023617****Part I** **General Information on Activities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.**1 For grantmakers.** Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ **Yes** ☐ **No****2 For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.**3 Activities per Region.** (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
EAST ASIA AND THE PACIFIC	0	0	PROGRAM SERVICES	GLOBAL; INSTALLED A GLOBAL COHERENCE MONITORING SITE IN NEW ZEALAND, THE SYSTEM	46,806.
EUROPE (INCLUDING ICELAND & GREENLAND)	0	0	PROGRAM SERVICES	GLOBAL; INSTALLED A GLOBAL COHERENCE MONITORING SITE IN LITHUANIA, THE SYSTEM	47,256.
3 a Sub-total	0	0			94,062.
b Total from continuation sheets to Part I	0	0			0.
c Totals (add lines 3a and 3b)	0	0			94,062.

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

Schedule F (Form 990) 2014

SEE PART V FOR COLUMN (E) DESCRIPTIONS

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

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

3 Enter total number of other organizations or entities

Part IV Foreign Forms

- 1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926) ☐ Yes ☒ No
- 2 Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; do not file with Form 990) ☐ Yes ☒ No
- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations (see Instructions for Form 5471) ☐ Yes ☒ No
- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621) ☐ Yes ☒ No
- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865) ☐ Yes ☒ No
- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713; do not file with Form 990) ☐ Yes ☒ No

Schedule F (Form 990) 2014

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information.

PART I, LINE 2:

STAFF COLLABORATE WITH VOLUNTEERS FOR SITE SELECTION, SUPERVISE
VOLUNTEERS AND WORK ON THE INSTALLATION. AFTER THE INSTALLATION, STAFF
MONITORS THE DATA RECEIVED CONTINUALLY AND COMMUNICATES WITH ONSITE
VOLUNTEERS REGARDING SITE MAINTENANCE AND REPAIRS.

PART I, LINE 3, COLUMN (E):

REGION: EAST ASIA AND THE PACIFIC

(E) SPECIFIC TYPES OF SERVICES IN REGION: GLOBAL; INSTALLED A GLOBAL
COHERENCE MONITORING SITE IN NEW ZEALAND. THE SYSTEM COLLECTS DATA ON THE
EARTH'S GEOMAGNETIC FIELDS IN THE REGION AND SENDS IT TO IHM'S RESEARCH
FACILITY.

REGION: EUROPE (INCLUDING ICELAND & GREENLAND)

(E) SPECIFIC TYPES OF SERVICES IN REGION: GLOBAL; INSTALLED A GLOBAL
COHERENCE MONITORING SITE IN LITHUANIA. THE SYSTEM COLLECTS DATA ON THE
EARTH'S GEOMAGNETIC FIELDS IN THE REGION AND SENDS IT TO IHM'S RESEARCH
FACILITY.

SCHEDULE L
(Form 990 or 990-EZ)

Transactions With Interested Persons

OMB No. 1545-0047

2014

Department of the Treasury
Internal Revenue Service

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

Open To Public Inspection

Name of the organization

Employer identification number

INSTITUTE OF HEARTMATH

95-4023617

Part I Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and 501(c)(29) organizations only).

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

1 (a) Name of disqualified person	(b) Relationship between disqualified person and organization	(c) Description of transaction	(d) Corrected?	
			Yes	No

2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958 ▶ \$

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization ▶ \$

Part II Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22.

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the organization?		(e) Original principal amount	(f) Balance due	(g) In default?		(h) Approved by board or committee?		(i) Written agreement?	
			To	From			Yes	No	Yes	No	Yes	No
ROLLIN MCCRATY	OFFICER	TO HELP	X		85,000.	85,000.		X	X		X	

Total ▶ \$ **85,000.**

Part III Grants or Assistance Benefiting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance

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

Schedule L (Form 990 or 990-EZ) 2014

SEE PART V FOR CONTINUATIONS

Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
QUANTUM INTECH	DOC CHILDRE, CEO OF	151,128.	RCVD LICENS		X
HEARTMATH LLC	QI IS THE PARENT CO	436,263.	PAID COGS-C		X
HEARTMATH LLC	QI IS THE PARENT CO	10,416.	SOLD SERVIC		X
QUANTUM INTECH	DOC CHILDRE, CEO OF	148,872.	PREPAYMENT		X

Part V Supplemental Information

Provide additional information for responses to questions on Schedule L (see instructions).

SCHEDULE L, PART II, LOANS TO AND FROM INTERESTED PERSONS:

(A) NAME OF PERSON: ROLLIN MCCRATY

(B) RELATIONSHIP WITH ORGANIZATION: OFFICER

(C) PURPOSE OF LOAN: TO HELP CASH FLOW

(D) LOAN TO OR FROM ORGANIZATION? = TO

(E) ORIGINAL PRINCIPAL AMOUNT \$ 85,000. (F) BALANCE DUE \$ 85,000.

(G) LOAN IN DEFAULT? = NO

(H) APPROVED BY BOARD OR COMMITTEE? = YES

(I) WRITTEN AGREEMENT? = YES

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

(A) NAME OF PERSON: QUANTUM INTECH

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:

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

(C) AMOUNT OF TRANSACTION \$ 151,128.

(D) DESCRIPTION OF TRANSACTION: RCVD LICENSE FEES - INSTITUTE OF HEARTMATH (IHM) HAS GRANTED A WORLDWIDE EXCLUSIVE LICENSE FOR THE HEARTMATH SYSTEM TO QI, WHICH IN TURN SUBLICENSES IT TO PARTNERS AROUND THE WORLD, INCLUDING HMLLC. IN RETURN, THE INSTITUTE RECEIVES A PERCENTAGE OF ROYALTIES AND LICENSING FEES FROM THE TRADEMARKED AND/OR

Part V Supplemental Information

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

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(E) SHARING OF ORGANIZATION REVENUES? = NO

(A) NAME OF PERSON: HEARTMATH LLC

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:

QI IS THE PARENT COMPANY OF HEARTMATH LLC

(C) AMOUNT OF TRANSACTION \$ 436,263.

(D) DESCRIPTION OF TRANSACTION: PAID COGS-COSTS OF GOODS SOLD -

INSTITUTE OF HEARTMATH PURCHASES PRODUCTS FROM HEARTMATH LLC FOR SALE AND SHIPPING REIMBURSEMENTS.

(E) SHARING OF ORGANIZATION REVENUES? = NO

(A) NAME OF PERSON: HEARTMATH LLC

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:

QI IS THE PARENT COMPANY OF HEARTMATH LLC

(C) AMOUNT OF TRANSACTION \$ 10,416.

(D) DESCRIPTION OF TRANSACTION: SOLD SERVICES - INSTITUTE OF HEARTMATH PROVIDED TRAINING SERVICES TO HEARTMATH LLC.

(E) SHARING OF ORGANIZATION REVENUES? = NO

(A) NAME OF PERSON: QUANTUM INTECH

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:

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

(D) DESCRIPTION OF TRANSACTION: PREPAYMENT OF LICENSE FEES - INSTITUTE OF HEARTMATH (IHM) HAS GRANTED A WORLDWIDE EXCLUSIVE LICENSE FOR THE HEARTMATH SYSTEM TO QI, WHICH IN TURN SUBLICENSES IT TO PARTNERS AROUND THE WORLD, INCLUDING HMLLC. IN RETURN, THE INSTITUTE RECEIVES A PERCENTAGE OF ROYALTIES AND LICENSING FEES FROM THE TRADEMARKED AND/OR

Part V Supplemental Information

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

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SCHEDULE M
(Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

OMB No. 1545-0047

2014

Open To Public
Inspection

- ▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
▶ Attach to Form 990.
▶ Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization

INSTITUTE OF HEARTMATH

Employer identification number

95-4023617

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded	X	1	1,076.	FMV
10 Securities - Closely held stock	X	1	50,000.	COST
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (SUPPLIES)	X	1	600.	COST
26 Other ▶ ()				
27 Other ▶ ()				
28 Other ▶ ()				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement

29

0

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?

	Yes	No
30a		X
31	X	
32a		X

b If "Yes," describe the arrangement in Part II.

31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?

b If "Yes," describe in Part II.

33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.

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

Schedule M (Form 990) (2014)

Part II **Supplemental Information.** Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

SCHEDULE M, PART I, COLUMN (B):

THE NUMBER OF CONTRIBUTIONS REPRESENTS THE NUMBER OF INDIVIDUAL DONORS
THAT CONTRIBUTED IN EACH RESPECTIVE CATEGORY.

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Name of the organization

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

2014

Open to Public
Inspection

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 2, NEW PROGRAM SERVICES:

RECEIVED FUNDING FOR DEVELOPMENT/ REDESIGN OF THREE NEW EDUCATION
PROGRAMS AND ONE NEW RESEARCH PROJECT IN 2015: SMART BRAIN WISE HEART
\$73,540; EARLY HEARTSMARTS AND HEARTSMARTS \$35,000 AND THE
INTERCONNECTEDNESS RESEARCH PROJECT \$35,000.

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

1. CENTER FOR STUDY OF SOCIAL POLICY, A DC POLICY THINK TANK, JUST
RECOGNIZED EARLY HEARTSMARTS AS AN "EFFECTIVE PROGRAM AND PRACTICE
GUIDE FOR EXPECTANT AND PARENTING YOUTH IN FOSTER CARE." THIS REPORT
WILL BE "WIDELY DISTRIBUTED" TO THE CHILD WELFARE FIELD.

2. DELIVERED HEARTMATH CERTIFIED TRAINING PROGRAMS TO 93 TRAINERS,
QUALIFIED PERSONAL RESILIENCE TRAININGS TO 91 MENTORS AND HEARTMATH
INTERVENTIONS TO 30 TRAINERS. DELIVERED 6 TRAINING PROGRAMS OFFSITE TO
ORGANIZATIONS AND PERSONAL RESILIENCE MENTORING TO 20 INDIVIDUALS.
TRAINERS DELIVER HEARTMATH RESILIENCE TRAININGS TO NONPROFITS,
GOVERNMENT SERVICE AGENCIES, EDUCATORS, COUNSELORS, TEACHERS,
ADMINISTRATORS, SCHOOL STAFF, THE GENERAL PUBLIC (FREE OF CHARGE),
EMERGENCY SERVICE PROVIDERS, HEALTH-CARE PROVIDERS AND SERVICES OR

Name of the organization

INSTITUTE OF HEARTMATH

Employer identification number

95-4023617

INCORPORATE HEARTMATH TECHNIQUES INTO THEIR EXISTING TRAINING PROGRAMS.

3. PRESENTED AT AND PARTICIPATED IN SEVEN NATIONAL EDUCATION
CONFERENCES IN 2014

4. HOSTED FOUR FREE PUBLIC IHM WEBINARS WITH 15,891 PEOPLE REGISTERING
TO ATTEND.

5. NUMBER OF ACTIVE MEMBERS: 2,038

6. SOCIAL NETWORK SITES: FACEBOOK: 349,240 FANS, IHM TWITTER: 31,964
FOLLOWERS, HEARTMATH MY KIDS!: 132,066 FANS; HEARTMATH FOR TROOPS,
VETERANS AND FAMILIES FACEBOOK: 51,818 FANS, IHM YOUTUBE 12,610
SUBSCRIBERS.

7. BEGAN DEVELOPING A NEW WEBSITE TO BE LAUNCHED IN 2015 AND MAINTAINED
CURRENT WEBSITE: WWW.HEARTMATH.ORG WHICH HAD 731,074 UNIQUE VISITORS IN
2014.

8. HEARTMATH INSTITUTE PARTNERED WITH OR HELPED TO TRAIN PEOPLE
DELIVERING PROGRAMS IN THE MILITARY, LAW ENFORCEMENT OR TO VETERANS,
INCLUDING:

- A. DEPARTMENT OF JUSTICE VALOR PROGRAM
- B. BLUE COURAGE
- C. LA COUNTY SHERIFF'S DEPARTMENT
- D. NAVAL SPECIAL WARFARE DEVELOPMENT GROUP

9. SEVERAL CLINICS AND/OR EDUCATIONAL CENTERS PARTNERING WITH
BEHAVIORAL HEALTH CENTERS ARE USING THE HEARTMATH EDUCATION TECHNOLOGY

Name of the organization

INSTITUTE OF HEARTMATH

Employer identification number

95-4023617

AND SKILLSETS TO ENHANCE THEIR OFFERINGS INCLUDING THIS PARTIAL LIST:

A. BUFFALO AND PROVIDENCE PSYCHIATRIC CENTERS

B. HOHM PRESS PROVIDED 6400 HEART TO HEART BOOKS TO THE FLORIDA
DEPARTMENT OF CHILDREN AND THEIR FOURTEEN SITES.

C. ASPENPOINTE, A NONPROFIT MULTI-COUNTY MENTAL HEALTH SERVICE PROVIDER
IN THE DENVER

D. LAVISTA/PAPILLION SCHOOL DISTRICT CHILDREN'S BEHAVIORAL HEALTH, A
PART OF OMAHA CHILDREN'S HOSPITAL COMPLETED YEAR TWO OF AN ANXIETY
STUDY WITH AROUND 60 UPPER ELEMENTARY/SECONDARY STUDENTS FROM 15
SCHOOLS. THE STATISTICALLY SIGNIFICANT RESULTS SHOULD BE FORTHCOMING IN
THE NEXT FEW MONTHS AS A STUDY SUBMISSION TO AN EDUCATION, PSYCHOLOGY
JOURNAL.

E. NEAH BAY AND THE MAKAH NATIVE AMERICAN NATION

10. OTHER EDUCATIONAL INSTITUTIONS HAVE IMPLEMENTED HEARTMATH
TECHNOLOGY AND PROGRAMS IN VARIOUS WAYS INCLUDING:

A. SOUTH DAKOTA STATE UNIVERSITY

B. FLORIDA STATE UNIVERSITY

C. KANSAS STATE UNIVERSITY

D. PAWTUCKET PUBLIC SCHOOLS

SERVED 1,310,406

HEARTMATH EDUCATION PROJECT

THE HEARTMATH EDUCATION PROJECT IS SUPPORTED SOLELY BY IHM DONORS AND
MEMBERS. THIS IHM CARING INITIATIVE PROVIDES SCHOLARSHIPS FOR 1)

HEARTMATH TECHNOLOGY AND PRODUCTS FOR CLASSROOMS, SCHOOLS, COLLEGES AND

Name of the organization

INSTITUTE OF HEARTMATH

Employer identification number

95-4023617

UNIVERSITIES AND 2) PROVIDES TRAININGS AND WORKSHOPS FOR EDUCATORS, SCHOOL COUNSELORS, SOCIAL WORKERS, HEALTH CARE PROFESSIONALS WORKING WITH LOW-INCOME FAMILIES, STUDENTS WITH EMOTIONAL/BEHAVIORAL DISABILITIES SUCH AS ADHD, PROGRAMS FOR AT-RISK YOUTH, ACADEMIC STRESS REDUCTION INTERVENTION, NO BULLYING PROJECTS, INCREASING CONFIDENCE AT SCHOOL, RAISING TEST SCORES AND IMPROVING OVERALL ACADEMIC PERFORMANCE.

1. ASSISTED 10,604 STUDENTS AND HUNDREDS OF EDUCATORS.

2. AWARDED 28 SPONSORSHIPS FOR A TOTAL OF \$24,501.

3. RECEIVED FUNDING FOR DEVELOPMENT/ REDESIGN OF THREE NEW PROGRAMS IN 2015: SMART BRAIN WISE HEART \$73,540; EARLY HEARTSMARTS AND HEARTSMARTS \$35,000.

SERVED 10,604

MILITARY SERVICE APPRECIATION INITIATIVE

THE MILITARY SERVICE APPRECIATION INITIATIVE 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 INITIATIVE 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. BEGAN WORK ON UPDATING AND REVISING THE HEARTMATH EDUCATION AND RESILIENCE TRAINING (H.E.A.R.T.) PROGRAM DVD. DISTRIBUTED TO 1,194 SERVICE MEMBERS, VETERANS, VA CENTERS AND COLLEGES IN 2014.

Name of the organization

INSTITUTE OF HEARTMATH

Employer identification number

95-4023617

2. PROVIDED 15 SPONSORSHIPS OF MATERIALS AND TRAININGS TO INDIVIDUALS AND ORGANIZATIONS PROVIDING SERVICES TO PROVIDE HEARTMATH TOOLS AND TECHNIQUES TO VETERANS, SERVICE PERSONS AND THEIR FAMILIES.

SERVED 8,121

HEARTMATH FOR COMMUNITIES PROJECT

THE DONOR SUPPORTED HEARTMATH FOR COMMUNITIES PROJECT IS UNDERGOING REVISION TO PROVIDE SCHOLARSHIPS FOR INDIVIDUALS, NONPROFIT AND SERVICE ORGANIZATION REPRESENTATIVES, POLICE DEPARTMENTS AND EMERGENCY FIRST RESPONDERS TO BE TRAINED AND LICENSED TO BECOME HEARTMATH QUALIFIED INSTRUCTORS. ONCE TRAINED, THESE COMMUNITY ADVOCATES CAN OFFER TRAINING TO PEOPLE IN THEIR COMMUNITY.

1. Awardees trained in prior years trained an estimated 2,000 people in their communities in 2014.

2. Also \$250 was raised for a special project with the Boys & Girls Club

Began development for new SmartBrainwiseHeart Learning Program for middle and high school.

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

1. Presented research at seven scientific conferences and symposiums in 2014

2. The research team provided: 814 Autonomic Assessment Reports, 4,418 Psychometric Survey Forms and 2,741 Pre and Post Psychometric Survey

Name of the organization

INSTITUTE OF HEARTMATH

Employer identification number

95-4023617

REPORTS FOR INDIVIDUALS, ORGANIZATIONS AND INDEPENDENT RESEARCHERS.3. PUBLICATIONS OF MANUSCRIPTS ON BASIC RESEARCH AND CHAPTERS:

A. SHAFFER, F., R. MCCRATY, AND C. ZERR, A HEALTHY HEART IS NOT A
METRONOME: AN INTEGRATIVE REVIEW OF THE HEART'S ANATOMY AND HEART RATE
VARIABILITY. FRONTIERS IN PSYCHOLOGY, 2014. 5:1040.

B. MCCRATY, R., ELECTROPHYSIOLOGY OF INTUITION: PRE-STIMULUS RESPONSES
IN GROUP AND INDIVIDUAL PARTICIPANTS USING A ROULETTE PARADIGM. GLOBAL
ADVANCES IN HEALTH AND MEDICINE, 2014. 3(2): P. 16-27.

C. MCCRATY, R. AND M. ATKINSON, ELECTROPHYSIOLOGY OF INTUITION:
PRE-STIMULUS RESPONSES IN GROUP AND INDIVIDUAL PARTICIPANTS USING A
ROULETTE PARADIGM. GLOB ADV HEALTH MED, 2014. 3(2): P. 16-27.

D. MCCRATY, R. AND M. ATKINSON, BIOPHYSIOLOGY: HEART-BRAIN INTERACTIONS
AND PSYCHOPHYSIOLOGICAL COHERENCE, IN PSYCHOLOGY'S NEW DESIGN SCIENCE:
THEORY AND RESEARCH, S.I.J. SACKTER, EDITOR 2014, COMMON GROUND
PUBLISHING LLC: CHAMPAIGN, ILLINOIS. P. 141-207.

E. MCCRATY, R. AND M. ZAYAS, INTUITIVE INTELLIGENCE, SELF-REGULATION,
AND LIFTING CONSCIOUSNESS. GLOB ADV HEALTH MED, 2014. 3(2): P. 56-65.

F. MCCRATY, R. AND M. ZAYAS, CARDIAC COHERENCE, SELF-REGULATION,
AUTONOMIC STABILITY, AND PSYCHOSOCIAL WELL-BEING. FRONTIERS IN
PSYCHOLOGY, 2014. 5(SEPTEMBER): P. 1-13.

4. STUDIES BY INDEPENDENT RESEARCHERS THAT UTILIZED HEARTMATH
TECHNIQUES AND PRACTICES:

A. SOER, R., ET AL., HEART COHERENCE TRAINING COMBINED WITH BACK SCHOOL
IN PATIENTS WITH CHRONIC NON-SPECIFIC LOW BACK PAIN: FIRST PRAGMATIC
CLINICAL RESULTS. APPL PSYCHOPHYSIOL BIOFEEDBACK, 2014.

B. MCCOY, K.M., ET AL., EVALUATION OF A BIOFEEDBACK INTERVENTION IN

Name of the organization

INSTITUTE OF HEARTMATH

Employer identification number

95-4023617

COLLEGE STUDENTS DIAGNOSED WITH AN AUTISM SPECTRUM DISORDER. DADD

ONLINE JOURNAL: P. 121.

C. EDWARDS, S.D., EFFECTS OF BIOFEEDBACK TRAINING ON PHYSIOLOGICAL COHERENCE, HEALTH AND SPIRITUALITY PERCEPTIONS: SPORT AND EXERCISE PSYCHOLOGY. AFRICAN JOURNAL FOR PHYSICAL HEALTH EDUCATION, RECREATION AND DANCE, 2014. 20(2.1): P. 500-510.

D. EDWARDS, S.D., EVALUATION OF A HEARTMATH WORKSHOP FOR PHYSIOLOGICAL AND PSYCHOLOGICAL VARIABLES. AFRICAN JOURNAL FOR PHYSICAL HEALTH EDUCATION, RECREATION AND DANCE, 2014. 20(1): P. 236-245.

E. CLIMOV, D., ET AL., BIOFEEDBACK ON HEART RATE VARIABILITY IN CARDIAC REHABILITATION: PRACTICAL FEASIBILITY AND PSYCHO-PHYSIOLOGICAL EFFECTS. ACTA CARDIOL, 2014. 69(3): P. 299-307.

F. BOTHE, D.A., J.B. GRIGNON, AND K.N. OLNESS, THE EFFECTS OF A STRESS MANAGEMENT INTERVENTION IN ELEMENTARY SCHOOL CHILDREN. JOURNAL OF DEVELOPMENTAL & BEHAVIORAL PEDIATRICS, 2014. 35(1): P. 62-67.

G. SCOLNICK, B., D.I. MOSTOFSKY, AND R.J. KEANE, PILOT STUDY EMPLOYING HEART RATE VARIABILITY BIOFEEDBACK TRAINING TO DECREASE ANXIETY IN PATIENTS WITH EATING DISORDERS. JOURNAL OF EATING DISORDERS, 2014. 2: P. 17.

H. LUTZ, B., AN INSTITUTIONAL CASE STUDY: EMOTION REGULATION WITH HEARTMATH AT SANTA CRUZ COUNTY CHILDREN'S MENTAL HEALTH. GLOBAL ADVANCES IN HEALTH AND MEDICINE, 2014. 3(2): P. 68-71.

I. WELTMAN, G., ET AL., POLICE DEPARTMENT PERSONNEL STRESS RESILIENCE TRAINING: AN INSTITUTIONAL CASE STUDY. GLOBAL ADVANCES IN HEALTH AND MEDICINE, 2014. 3(2): P. 72-79.

J. BERRY, M.E., ET AL., NON-PHARMACOLOGICAL INTERVENTION FOR CHRONIC PAIN IN VETERANS: A PILOT STUDY OF HEART RATE VARIABILITY BIOFEEDBACK.

GLOBAL ADVANCES IN HEALTH AND MEDICINE, 2014. 3(2): P. 28-33.

Name of the organization

INSTITUTE OF HEARTMATH

Employer identification number

95-4023617

K. REZAEI, S., M. MIRZAEI, AND M. REZA ZALI, NONLOCAL INTUITION:
REPLICATION AND PAIRED-SUBJECTS ENHANCEMENT EFFECTS. GLOBAL ADVANCES IN
HEALTH AND MEDICNE, 2014. 3(2): P. 5-15.

L. WHITED, A., K.T. LARKIN, AND M. WHITED, EFFECTIVENESS OF EMWAVE
BIOFEEDBACK IN IMPROVING HEART RATE VARIABILITY REACTIVITY TO AND
RECOVERY FROM STRESS. APPLIED PSYCHOPHYSIOLOGY AND BIOFEEDBACK, 2014.
39(2): P. 75-88.

SERVED 129,373

RESEARCH FUND

THE RESEARCH FUND WAS ESTABLISHED IN 2012 TO EXPAND, DISSEMINATE AND
CARRY OUT IHM'S RESEARCH.

1. THE HEART'S INTUITIVE INTELLIGENCE: A PATH TO PERSONAL, SOCIAL AND
GLOBAL COHERENCE VIDEO RELEASED IN 2013 - CONTINUES TO EDUCATE THE
PUBLIC ON LEADING EDGE RESEARCH ON THE ROLE OF THE HEART IN THE HUMAN
SYSTEM WITH 328,986 VIEWS IN 2014.

2. FUNDS SUPPORTED ONGOING RESEARCH, COLLABORATIONS WITH UNIVERSITIES
AND OTHER RESEARCHERS AROUND THE WORLD, SCIENTIFIC STUDIES AND
RESULTING PUBLICATIONS. RESEARCH STAFF PUBLISHED SIX RESEARCH PAPERS IN
2014 AND EXPANDED DATA COLLECTION OF MEASUREMENTS OF ELECTRICAL SIGNALS
FROM TREES.

SERVED 328,986

ADOPTED SCIENTIST FUND/INTERCONNECTIVITY PROJECT

Name of the organization

INSTITUTE OF HEARTMATH

Employer identification number

95-4023617

THE ADOPTED SCIENTIST FUND WAS ESTABLISHED IN 2013 TO HIRE A NEW DATA ANALYSIS SCIENTIST WHO IS NOW FULLY ENGAGED IN ANALYZING DATA FOR A NEW INTERCONNECTIVITY STUDY AND THE GLOBAL COHERENCE INITIATIVE.

1. RECEIVED FUNDING FOR A NEW RESEARCH PROJECT IN 2015. INVESTIGATING THE DYNAMIC INTERCONNECTIVITY BETWEEN HUMANITY AND EARTH'S ENERGETIC SYSTEMS: A STUDY OF MULTIPLE GROUPS OF PEOPLE IN MULTIPLE LOCATIONS TO TEST THE HYPOTHESIS THAT THE HEART RHYTHMS OF ALL THE PEOPLE IN ALL THE GROUPS WILL BE SYNCHRONIZED, AND SYNCHRONIZED WITH THE RHYTHMS IN THE LOCAL AND GLOBAL TIME-VARYING MAGNETIC FIELD. - (AMOUNT RAISED IN 2014 \$30,000)

FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS:
WITH WILL TAKE PLACE IN 2015.

2. MAINTAINED GLOBAL COHERENCE MONITORING SYSTEM SENSOR SITES IN THE UNITED STATES, SAUDI ARABIA AND CANADA.

3. MAINTAINED THE GCI WEBSITE WHICH HOSTS A GLOBAL CARE ROOM THAT UNITED GCI MEMBERS FROM AROUND THE GLOBE IN A SYNCHRONOUS HEART COHERENCE SESSIONS TOTALING 101,157 UNIQUE VISITORS IN 2014.

4. PROVIDED FREE INFORMATION INCLUDING WEBINARS, TRAINING AND RESOURCES TO MORE THAN 57,195 GCI MEMBERS WORLDWIDE.

5. SOCIAL NETWORKING: GCI FACEBOOK: 165,818 FANS; GCI TWITTER: 21,471 FOLLOWERS, GCI YOUTUBE: 1,560 SUBSCRIBERS.

Name of the organization

INSTITUTE OF HEARTMATH

Employer identification number

95-4023617

6. HOSTED THE THIRD EVENT AT THE TAO RESORT AND WELLNESS CENTER IN THE RIVIERA MAYA ON THE YUCATAN PENINSULA, MEXICO FOR 60 ATTENDEES. THIS EVENT WAS DESIGNED TO HELP PEOPLE LEARN HOW TO INCREASE ACCESS TO THEIR HEART'S INTUITIVE INTELLIGENCE AND MORE EFFECTIVELY INCREASE PERSONAL, SOCIAL AND GLOBAL COHERENCE .

7. HOSTED 12 GCI CARE FOCUSES IN THE GLOBAL CARE ROOM.

8. SPOKE AT 15 EVENTS AND CONFERENCES AROUND THE WORLD IN ADDITION TO NUMEROUS FREE TELESEMINARS AND WEBINARS.

SERVED 291,506

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

LICENSING & ROYALTIES

THE HEARTMATH INSTITUTE EXPANDED OUTREACH THROUGH LICENSING AND PUBLISHING AGREEMENTS WITH OTHER ORGANIZATIONS.

SERVED 240,000

EXPENSES \$ 4,364. INCLUDING GRANTS OF \$ 0. REVENUE \$ 171,416.

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

COPIES OF THE FINAL DRAFT ARE EMAILED TO BOARD OF DIRECTORS FOR REVIEW BEFORE THE 990 IS APPROVED AND FILED.

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

CONFLICT OF INTEREST DISCLOSURE FORM IS SENT ANNUALLY TO OFFICERS,

Name of the organization

INSTITUTE OF HEARTMATH

Employer identification number

95-4023617

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:

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:

DOCUMENTS ARE AVAILABLE ON REQUEST. IF REQUESTER WILL NOT OR CAN NOT SUPPLY AN EMAIL ADDRESS WHERE THE DOCUMENTS CAN BE DELIVERED, THEN ADVANCE PAYMENT OF A COPY FEE OF \$.20 USD PER PAGE IS REQUIRED PLUS ACTUAL POSTAGE AND VALID POSTAL ADDRESS(IF MAILING THE DOCUMENTS). INDIVIDUALS MAY VIEW THE DOCUMENTS ONSITE DURING OFFICE HOURS BARRING UNUSUAL CIRCUMSTANCES. REQUESTS ARE FULFILLED WITHIN 2 WEEKS OF RECEIPT OF THE REQUEST OR PAYMENT OF REQUIRED FEES(IF APPLICABLE), AND THE INFORMATION REQUIRED TO FULFILL THE REQUEST. ADDITIONAL CHARGES AND/OR TIME MAY BE ADDED FOR REQUESTS FOR NON-STANDARD DOCUMENTS THAT INCUR ADDITIONAL RETRIEVAL COSTS FOR THE

Name of the organization

Employer identification number

INSTITUTE OF HEARTMATH

95-4023617

ORGANIZATION.

FORM 990, PART IX, LINE 11G, OTHER FEES:

WRITING & EDITING:

PROGRAM SERVICE EXPENSES	43,293.
MANAGEMENT AND GENERAL EXPENSES	271.
FUNDRAISING EXPENSES	1,531.
TOTAL EXPENSES	45,095.

OUTSIDE SERVICES:

PROGRAM SERVICE EXPENSES	3,859.
MANAGEMENT AND GENERAL EXPENSES	13.
FUNDRAISING EXPENSES	2,307.
TOTAL EXPENSES	6,179.

CATERING:

PROGRAM SERVICE EXPENSES	15,976.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	79.
TOTAL EXPENSES	16,055.

MAILING SERVICES:

PROGRAM SERVICE EXPENSES	0.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	5,485.
TOTAL EXPENSES	5,485.

VIDEOGRAPHY & ANIMATION:

Name of the organization

INSTITUTE OF HEARTMATH

Employer identification number

95-4023617

PROGRAM SERVICE EXPENSES 15,515.

MANAGEMENT AND GENERAL EXPENSES 0.

FUNDRAISING EXPENSES 0.

TOTAL EXPENSES 15,515.

IP MANAGEMENT:

PROGRAM SERVICE EXPENSES 4,320.

MANAGEMENT AND GENERAL EXPENSES 0.

FUNDRAISING EXPENSES 0.

TOTAL EXPENSES 4,320.

EVENT COORDINATION & TRAINING:

PROGRAM SERVICE EXPENSES 84,518.

MANAGEMENT AND GENERAL EXPENSES 0.

FUNDRAISING EXPENSES 0.

TOTAL EXPENSES 84,518.

RESEARCH:

PROGRAM SERVICE EXPENSES 81,986.

MANAGEMENT AND GENERAL EXPENSES 0.

FUNDRAISING EXPENSES 0.

TOTAL EXPENSES 81,986.

SALES COMMISSIONS:

PROGRAM SERVICE EXPENSES 1,178.

MANAGEMENT AND GENERAL EXPENSES 0.

FUNDRAISING EXPENSES 0.

TOTAL EXPENSES 1,178.

Name of the organization	Employer identification number
INSTITUTE OF HEARTMATH	95-4023617

ADVERTISING & PR:

PROGRAM SERVICE EXPENSES	16,000.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	1,500.
TOTAL EXPENSES	17,500.

COMPUTER & IT SERVICES:

PROGRAM SERVICE EXPENSES	139,359.
MANAGEMENT AND GENERAL EXPENSES	660.
FUNDRAISING EXPENSES	9,743.
TOTAL EXPENSES	149,762.
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	427,593.

FORM 990 PART IX COLUMN C

\$202,591 OF THE \$260,371 MANAGEMENT AND GENERAL EXPENSES ARE INDIRECT COSTS. INDIRECT COSTS ARE EXPENSES SHARED BY THE ENTIRE ORGANIZATION, SUCH AS: EXPENSES FOR MANAGERIAL, FACILITIES AND CLERICAL STAFF POSITIONS THAT SERVE THE WHOLE ORGANIZATION, CONTRIBUTING TO PROGRAM ACTIVITIES AS WELL AS SUPPORT ACTIVITIES. MANY NONPROFITS ALLOCATE INDIRECT COSTS TO PROGRAMS SO THEIR MANAGEMENT AND GENERAL EXPENSES APPEAR LOWER. IF WE ALLOCATED THE \$202,591 INDIRECT COSTS, THEN \$16,572 WOULD GO TO MANAGEMENT AND GENERAL AND FUNDRAISING AND \$186,019 WOULD GO TO PROGRAMS, MAKING OUR TOTAL SUPPORT EXPENSE \$ 146,488 OR 8% AND PROGRAMS \$1,709,080 OR 92% OF TOTAL EXPENSES.

FORM 990 PART IX LINE 13

OFFICE EXPENSE INCLUDES TELEPHONE, SUPPLIES, PRINTING, AND POSTAGE

Name of the organization

INSTITUTE OF HEARTMATH

Employer identification number

95-4023617

EXPENSES WHICH ARE LARGELY USED FOR PROGRAM ACTIVITIES, NOT OUR

OFFICES.

2014 DEPRECIATION AND AMORTIZATION REPORT

FORM 990, PAGE 10

990

Asset No	Description	Date Acquired	Method	Life	C o n v	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	Reduction in Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
3	BUILDINGS * 990 PAGE 10 TOTAL	VARIOUS		.000	HXL6	1,125,159.				1,125,159.	653,902.		37,351.	691,253.
	BUILDINGS					1,125,159.				1,125,159.	653,902.		37,351.	691,253.
4	FURNITURE & FIXTURES	VARIOUS		.000	HXL6	50,918.				50,918.	49,243.		72.	49,315.
9	EQUIPMENT * 990 PAGE 10 TOTAL	VARIOUS		.000	HXL6	97,872.				97,872.	84,489.		3,038.	87,527.
	FURNITURE & FIXTURES					148,790.				148,790.	133,732.		3,110.	136,842.
	MACHINERY & EQUIPMENT													
5	EQUIPMENT	VARIOUS		.000	HXL6	330,670.				330,670.	148,491.		17,799.	166,290.
6	COMPUTERS * 990 PAGE 10 TOTAL	VARIOUS		.000	HXL6	85,195.				85,195.	65,722.		6,340.	72,062.
	MACHINERY & EQUIPMENT					415,865.				415,865.	214,213.		24,139.	238,352.
	TRANSPORTATION EQUIPMENT													
8	AUTOS * 990 PAGE 10 TOTAL	VARIOUS		.000	HXL6	125,040.				125,040.	121,319.		1,720.	123,039.
	TRANSPORTATION EQUIPMENT					125,040.				125,040.	121,319.		1,720.	123,039.
	LAND													
1	LAND * 990 PAGE 10 TOTAL LAND	VARIOUS		.000	HXL6	191,645.				191,645.	0.		0.	0.
	OTHER					191,645.				191,645.	0.		0.	0.

438511-1
05-01-14

(D). Asset disposed

* ITC, Salvage, Bonus, Commercial Revitalization Deduction, QO Zone

2014 DEPRECIATION AND AMORTIZATION REPORT

FORM 990, PAGE 10

990

Asset No.	Description	Date Acquired	Method	Life	C o n v	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
2	CONSTRUCTION IN PROCESS	VARIOUS		.000		HY16	437,308.				437,308.			0.	
7	LAND IMPROVEMENT	VARIOUS		.000		HY16	143,708.				143,708.	79,247.		7,254.	86,501.
12	MORTGAGE LOAN FEE	10/27/11	461	60M		HY43	11,567.				11,567.	5,012.		2,313.	7,325.
13	MORTGAGE LOAN FEE	03/15/10	461	36M		HY43	1,500.				1,500.	1,500.		0.	1,500.
14	MORTGAGE LOAN FEE	11/07/07	461	60M		HY43	17,274.				17,274.	17,274.		0.	17,274.
15	RESEARCH VIDEO	10/01/12	461	36M		HY43	50,000.				50,000.	20,834.		16,667.	37,501.
	* 990 PAGE 10 TOTAL OTHER						661,357.				661,357.	123,867.		26,234.	150,101.
	* GRAND TOTAL 990 PAGE 10 DEFER & AMORT						2,667,856.				2,667,856.	1,247,033.		92,554.	1,339,587.

439111
05-01-14

(D) - Asset disposed

* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

Form **4562****Depreciation and Amortization**

(Including Information on Listed Property)

990

OMB No. 1545-0172

2014Department of the Treasury
Internal Revenue Service (99)

Name(s) shown on return

▶ Attach to your tax return.

▶ Information about Form 4562 and its separate instructions is at www.irs.gov/form4562.Attachment
Sequence No. 179

Identifying number

INSTITUTE OF HEARTMATH**FORM 990 PAGE 10****95-4023617****Part I Election To Expense Certain Property Under Section 179** Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount (see instructions)	1	500,000.
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation	3	2,000,000.
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2013 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 2015. Add lines 9 and 10, less line 12	13	

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.

Part II 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	
16	Other depreciation (including ACRS)	16	73,574.

Part III MACRS Depreciation (Do not include listed property.) (See instructions.)**Section A**

17	MACRS deductions for assets placed in service in tax years beginning before 2014	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 2014 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only - see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property	/		27.5 yrs.	MM	S/L	
	/		27.5 yrs.	MM	S/L	
i Nonresidential real property	/		39 yrs.	MM	S/L	
	/			MM	S/L	

Section C - Assets Placed in Service During 2014 Tax Year Using the Alternative Depreciation System

20a Class life				S/L
b 12-year		12 yrs.		S/L
c 40-year	/	40 yrs.	MM	S/L

Part IV 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. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instr.	22	73,574.
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

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

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A - Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)

24a Do you have evidence to support the business/investment use claimed?		Yes <input type="checkbox"/>	No <input type="checkbox"/>	24b If "Yes," is the evidence written?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/ Convention	(h) Depreciation deduction
25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use							25
26 Property used more than 50% in a qualified business use:							
		%					
		%					
27 Property used 50% or less in a qualified business use:							
		%			S/L -		
		%			S/L -		
		%			S/L -		
28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1							28
29 Add amounts in column (i), line 26. Enter here and on line 7, page 1							29

Section B - Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

	(a) Vehicle	(b) Vehicle	(c) Vehicle	(d) Vehicle	(e) Vehicle	(f) Vehicle
30 Total business/investment miles driven during the year (do not include commuting miles)						
31 Total commuting miles driven during the year						
32 Total other personal (noncommuting) miles driven						
33 Total miles driven during the year. Add lines 30 through 32						
34 Was the vehicle available for personal use during off-duty hours?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
35 Was the vehicle used primarily by a more than 5% owner or related person?						
36 Is another vehicle available for personal use?						

Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons.

37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners		
39 Do you treat all use of vehicles by employees as personal use?		
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?		
41 Do you meet the requirements concerning qualified automobile demonstration use?		

Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles.

Part VI **Amortization**

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
42 Amortization of costs that begins during your 2014 tax year:					
43 Amortization of costs that began before your 2014 tax year					43
					18,980.
44 Total. Add amounts in column (f). See the instructions for where to report					44
					18,980.