Form

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private 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 **2**013 Open to Public Inspection

| | | alendar year, or tax year beginning , and ending | | | |
|-----------------------------|----------------------|--|---------------------|--------------------|--------------------------------|
| | Check if applicable: | C Name of organization | | D Emplo | yer identification number |
| | Address change | Mongabay Org Corp | | | |
| | Name change | Doing Business As Mongabay.org | | | 3714703 |
| \Box | Initial return | Number and street (or P.O. box if mail is not delivered to street address) | Room/suite | | one number |
| \equiv | | PO Box 0291 | | 650 | -260-4018 |
| | Terminated | City or town, state or province, country, and ZIP or foreign postal code | | | |
| | Amended return | Menlo Park CA 94062 | | G Gross rec | eipts\$ 528,218 |
| | Application pending | F Name and address of principal officer: | III-) le this e ar | oun roturn for a | subordinates Yes X No |
| ш | | Rhett Butler | H(a) Is this a gr | oup return tor s | |
| | | PO Box 0291 | H(b) Are all sub | ordinates incl | luded? Yes No |
| | | Menlo Park CA 94062 | If "No, | " attach a list. | (see instructions) |
| <u>ı</u> | Tax-exempt status: | X 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or 527 | | | |
| J | Website: ► W | ww.mongabay.org | H(c) Group exe | mption numb | er 🕨 |
| K | Form of organization | : X Corporation Trust Association Other L Ye | ear of formation: 2 | 011 | M State of legal domicile: CA |
| P | art I Su | ımmary | | | |
| | 1 Briefly de | escribe the organization's mission or most significant activities: | | | |
| ce | | Schedule O | | | |
| lan | | | | | |
| Governance | | | | | |
| Š | 2 Check th | is box if the organization discontinued its operations or disposed of more than | 25% of its net | assets. | |
| ∞ ∞ | | of voting members of the governing body (Part VI, line 1a) | | | 12 |
| es | | | | | 8 |
| Activities | | nber of individuals employed in calendar year 2013 (Part V, line 2a) | | | 4 |
| Ċţi | | nber of volunteers (estimate if necessary) | | 6 | 200 |
| ٩ | | elated business revenue from Part VIII, column (C), line 12 | | 7a | 0 |
| | | lated business taxable income from Form 990-T, Jine 34 | | . 7b | 0 |
| | | I \rott ('/\D | Prior Yea | | Current Year |
| <u>o</u> | 8 Contribu | tions and grants (Part VIII, line Ih | 92 | 2,319 | 527,294 |
| enc | 9 Program | service revenue (Part VIII, line 2g) | | | 0 |
| Revenue | | ent income (Part VIII, column (A), lines 3, 4, and 7d) | | | 530 |
| œ | 11 Other rev | venue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) | | | 394 |
| | 12 Total rev | enue – add lines 8 through 11 (must equal Part VIII, column (A), line 12) | 92 | 2,319 | 528,218 |
| | 13 Grants a | nd similar amounts paid (Part IX, column (A), lines 1–3) | | | 48,343 |
| | 14 Benefits | paid to or for members (Part IX, column (A), line 4) | | | 0 |
| es | 15 Salaries, | other compensation, employee benefits (Part IX, column (A), lines 5–10) | | | 41,412 |
| xpenses | 16aProfession | other compensation, employee benefits (Part IX, column (A), lines 5–10) onal fundraising fees (Part IX, column (A), line 11e) draising expenses (Part IX, column (D), line 25) ▶ 8,372 | | | 0 |
| Хpe | b Total fun | draising expenses (Part IX, column (D), line 25) ▶ 8,372 | | | |
| Ш | 17 Other ex | penses (Part IX, column (A), lines 11a-11d, 11f-24e) | | 3,996 | 158,465 |
| | 18 Total exp | penses. Add lines 13–17 (must equal Part IX, column (A), line 25) | 88 | 3,996 | 248,220 |
| | 19 Revenue | less expenses. Subtract line 18 from line 12 | | 3,323 | 279,998 |
| Sor | | | Beginning of Cu | | End of Year |
| Net Assets or Fund Balances | 20 Total ass | ets (Part X, line 16) | | 3,323 | 283,364 |
| et A | 21 Total liab | ilities (Part X, line 26) | | 0 | 0 2 2 2 4 |
| | | ts or fund balances. Subtract line 21 from line 20 | | 3,323 | 283,364 |
| ***** | | gnature Block | | | _ |
| | • | perjury, I declare that I have examined this return, including accompanying schedules and sta complete. Declaration of preparer (other than officer) is based on all information of which prepares | | | my knowledge and belief, it is |
| - 11 | ue, correct, and t | omplete. Declaration of preparer (other than officer) is based on all illiomation of which preparer | irei iias arīy kiic | wieuge. | |
| ~ : | . | ignature of officer | | Date | |
| Sig | j., ; | | L | Date | |
| He | _ | Rhett A. Butler President | dent | | |
| | | ype or print name and title | D-1- | | DTIN |
| Pai | `` | e preparer's name Preparer's signature | Date | Check | if PTIN |
| | naror | D. Heffernan, Ltd. | ' | /14 self-em | ployed P00949190 |
| | parer Firm's na | | F | irm's EIN | _ |
| USE | Only | 6650 Horseshoe Bend Dr | | | ECO 4EO 4E10 |
| | Firm's ac | - | F | hone no. | 763-478-6518 |
| | | ss this return with the preparer shown above? (see instructions) | | | X Yes No |

| Part III Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any | / line in this Part III |
|--|--|
| Briefly describe the organization's mission: | inte in this i art in |
| See Schedule O | |
| | |
| | |
| 2 Did the organization undertake any significant program services during the yea | □ Vaa ♥ Na |
| prior Form 990 or 990-EZ? If "Yes," describe these new services on Schedule O. | Yes X No |
| 3 Did the organization cease conducting, or make significant changes in how it co | onducts, any program |
| | Yes X No |
| If "Yes," describe these changes on Schedule O.Describe the organization's program service accomplishments for each of its th | ree largest program services, as measured by |
| expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report | |
| the total expenses, and revenue, if any, for each program service reported. | |
| The Indonesia Program ("Mongabay-Indones transparency and boosting public awarene Indonesia. Mongabay-Indonesia has a core correspondents in 16 cities across Indonesia for \$132,501 or 54% of Mongabay.org's sp. Mongabay-Indonesia made outstanding programment. | ess around environmental issues in e team of four on Java and nesia. Mongabay-Indonesia accounted pending in 2013. |
| 1,000 stories. The number of visitors to reaching 580,814 for the year. Our social with our Twitter followers climbing 269% increasing 240% to 8,500. These numbers 4b (Code:)(Expenses \$ 58,501 including grants of \$ Mongabay.org aims to raise awareness about relating to forests and other ecosystems special reporting initiatives. Mongabay facilitate detailed reporting on key is the communities that depend on it. Our sprogram enables professional journalists specific issue over a three-month period published on Mongabay under a Creative Cencourages, re-publishing elsewhere. The Initiatives program is that it enables he on an environmental issue that may be otherwise. | the site rose 193% over 2012, al media presence also grew in 2013, a to 5,900 and our Facebook fans exceeded our targets. 46,705) (Revenue \$) but social and environmental issues a. These are the program areas: corg was founded, in part, to sues affecting the environment and Expecial Reporting Initiatives (SRI) a to conduct in-depth reporting on a d. The resulting articles are Commons license that allows for, and a value of the Special Reporting high-quality and detailed reported cherwise overlooked or underreported |
| 4c (Code:) (Expenses \$ 32,880 including grants of \$ Special Reporting Initiatives Program |) (Revenue \$) |
| The Special Reporting Initiatives (SRI) prize that offers journalists opportunit investigative reporting around key envir | ies to do in-depth and |
| Our focus in 2013 was developing the corthe infrastructure, and launching the fi August 2013. The first winner was select were announced by the end of the year. | rst prize, which was announced in ced in November. Four more prizes |
| | |
| 4d Other program services. (Describe in Schedule O.) (Expenses \$ including grapts of\$ |) (Revenue \$ |
| (Expenses \$ including grants of\$ 4e Total program service expenses ▶ 223,890 |) (November y |

Form 990 (2013) Mongabay Org Corp
Part IV Checklist of Required Schedules

| | | | Yes | No |
|-----|--|-----|-----|----|
| 1 | Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," | | | |
| | complete Schedule A | 1 | X | |
| 2 | Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? | 2 | Х | |
| 3 | Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to | | | |
| | candidates for public office? If "Yes," complete Schedule C, Part I | 3 | | Х |
| 4 | Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) | | | |
| | election in effect during the tax year? If "Yes," complete Schedule C, Part II | 4 | | X |
| 5 | Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, | | | |
| | assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, | | | |
| | Part III | 5 | | Х |
| 6 | Did the organization maintain any donor advised funds or any similar funds or accounts for which donors | | | |
| | have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If | | | |
| _ | "Yes," complete Schedule D, Part I | 6 | | X |
| 7 | Did the organization receive or hold a conservation easement, including easements to preserve open space, | l _ | | 37 |
| _ | the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II | 7 | | X |
| 8 | Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," | | | 37 |
| _ | complete Schedule D, Part III | 8 | | X |
| 9 | Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a | | | |
| | custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or | | | 37 |
| | debt negotiation services? If "Yes," complete Schedule D, Part IV | 9 | | X |
| 10 | Did the organization, directly or through a related organization, hold assets in temporarily restricted | 40 | | ₹. |
| | endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V | 10 | | X |
| 11 | If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, | | | |
| _ | VII, VIII, IX, or X as applicable. | | | |
| а | Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," | 110 | | х |
| b | complete Schedule D, Part VI Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more | 11a | | Λ |
| b | of its total assets reported in Part X, line 167 If "Yes," complete Schedule D, Part VII | 11b | | х |
| С | Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more | 110 | | 21 |
| · | of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII | 11c | | х |
| d | Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets | | | |
| - | reported in Part X, line 16? If "Yes," complete Schedule D, Part IX | 11d | | X |
| е | Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X | 11e | | X |
| f | Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses | | | |
| | the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X | 11f | | х |
| 12a | Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete | | | |
| | Schedule D, Parts XI and XII | 12a | | Х |
| b | Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if | | | |
| | the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional | 12b | | X |
| 13 | Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E | 13 | | X |
| 14a | Did the organization maintain an office, employees, or agents outside of the United States? | 14a | X | |
| b | Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, | | | |
| | fundraising, business, investment, and program service activities outside the United States, or aggregate | | | |
| | foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV | 14b | X | |
| 15 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or | | | |
| | for any foreign organization? If "Yes," complete Schedule F, Parts II and IV | 15 | | X |
| 16 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other | | | |
| | assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV | 16 | | X |
| 17 | Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on | | | |
| | Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) | 17 | | X |
| 18 | Did the organization report more than \$15,000 total of fundraising event gross income and contributions on | | | |
| | Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II | 18 | | X |
| 19 | Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? | | | |
| | If "Yes," complete Schedule G, Part III | 19 | | X |
| 20a | Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H | 20a | | Х |
| b | If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? | 20b | | |

Form 990 (2013) Mongabay Org Corp

Part IV Checklist of Required Schedules (continued)

| 21 | Did the experiention report more than CF 000 of greate another arrival and the experience of the exper | | Yes | No |
|----|--|--------|-------|----------|
| 1 | Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II | 21 | х | |
| 2 | Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States | | Λ | |
| _ | on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III | 22 | | Х |
| 3 | Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the | | | |
| 3 | organization's current and former officers, directors, trustees, key employees, and highest compensated | | | 1 |
| | employees? If "Yes," complete Schedule J | 23 | | Х |
| 40 | Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than | | | Λ |
| 4a | \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b | | | 1 |
| | through 24d and complete Schedule K. If "No," go to line 25a | 24a | | Х |
| b | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? | 24a | | |
| | Did the organization mivest any proceeds of tax-exempt bonds beyond a temporary period exception: Did the organization maintain an escrow account other than a refunding escrow at any time during the year | | | |
| С | | 24c | | l |
| a | to defease any tax-exempt bonds? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? | 24c | | |
| | | 240 | | |
| эа | Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction | 25- | | Х |
| L | with a disqualified person during the year? If "Yes," complete Schedule L, Part I | 25a | | |
| D | Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior | | | l |
| | year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? | 051 | | v |
| _ | If "Yes," complete Schedule L, Part I | 25b | | Х |
| 6 | Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any | | | l |
| | current or former officers, directors, trustees, key employees, highest compensated employees, or | | | ٠, |
| _ | disqualified persons? If so, complete Schedule L, Part II | 26 | | Х |
| 7 | Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, | | | l |
| | 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 |
| 8 | 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) | | | |
| а | A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV | 28a | | X |
| b | A family member of a current or former officer, director, trustee, or key employee? If Yes," complete | | | 1 |
| | Schedule L, Part IV | 28b | Х | <u> </u> |
| С | An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) | | | 1 |
| | was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV | 28c | Х | <u> </u> |
| 9 | Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M | 29 | | X |
| 0 | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified | | | 1 |
| | conservation contributions? If "Yes," complete Schedule M | 30 | | X |
| 1 | Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, | | | l |
| | Part I | 31 | | X |
| 2 | Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," | | | l |
| | complete Schedule N, Part II | 32 | | X |
| 3 | Did the organization own 100% of an entity disregarded as separate from the organization under Regulations | | | 1 |
| | sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I | 33 | | X |
| 4 | Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, | | | 1 |
| | or IV, and Part V, line 1 | 34 | | X |
| 5a | 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 | | l |
| 6 | Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable | | | |
| | related organization? If "Yes," complete Schedule R, Part V, line 2 | 36 | | Х |
| 7 | 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, | | | l |
| | | 37 | | х |
| 8 | Part VI Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and | ······ | | |
| - | 19? Note. All Form 990 filers are required to complete Schedule O | 38 | х | l |
| | The state of the s | | n 990 | (00 |

Form 990 (2013) Mongabay Org Corp 45-37
Part V Statements Regarding Other IRS Filings and Tax Compliance

| | Check if Schedule O contains a response or note to any line in this Pa | art V | | | | <u></u> | . Ш |
|---------|---|------------|----------------------------|------------|------------|------------------------|-----|
| | | 1 1 | | | | Yes | No |
| 1a | Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable | 1a | 4 | | | | |
| b | Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable | _1b | 0 | | | | |
| С | Did the organization comply with backup withholding rules for reportable payments to vendors an | ıa | | | 4 - | Х | |
| 2- | reportable gaming (gambling) winnings to prize winners? | | | | 1c | ^ | |
| Za | Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax | 2- | 4 | | | | |
| h | Statements, filed for the calendar year ending with or within the year covered by this return | 2a | | | 2b | х | |
| b | Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) | | o: | | ZU | 22 | |
| 3a | Did the organization have unrelated business gross income of \$1,000 or more during the year? | 110113) | | | 3a | | х |
| b | If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Sched | Iule O | | | 3b | | |
| 4a | At any time during the calendar year, did the organization have an interest in, or a signature or ot | | thority | | | | |
| | over, a financial account in a foreign country (such as a bank account, securities account, or other | | - | | | | |
| | account)? | | | | 4a | х | |
| b | If "Yes," enter the name of the foreign country: ▶ Indonesia | | | | | | |
| | See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Finan | ncial A | counts. | | | | |
| 5a | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year | ar? | | | 5a | | X |
| b | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter tra | nsacti | on? | | 5b | | X |
| С | If "Yes" to line 5a or 5b, did the organization file Form 8886-T? | | | | 5c | | |
| 6a | Does the organization have annual gross receipts that are normally greater than \$100,000, and or | did the | | | | | |
| | organization solicit any contributions that were not tax deductible as charitable contributions? | | | | 6a | | X |
| b | If "Yes," did the organization include with every solicitation an express statement that such contril | butions | s or | | | | |
| _ | gifts were not tax deductible? | | | | 6b | | |
| 7 | Organizations that may receive deductible contributions under section 170(c). | . | | | | | |
| а | Did the organization receive a payment in excess of \$75 made partly as a contribution and partly and services provided to the payor? | ior go | ous | | 70 | | х |
| b | If "Yes," did the organization notify the donor of the value of the goods or services provided? | | 7 · · · · · · · · · | | 7a 7b | | |
| C | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which | it was | | | 7.0 | | |
| · | required to file Form 8282? | | | | 7c | | х |
| d | If "Yes," indicate the number of Forms 8282 filed during the year | 7d | | | . • | | |
| е | Did the organization receive any funds, directly or indirectly, to pay premiums on a personal bene | efit con | tract? | | 7e | | Х |
| f | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit of | | | | 7f | | Х |
| g | If the organization received a contribution of qualified intellectual property, did the organization file | e Forn | n 8899 as r | equired? | 7g | | X |
| h | If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization | anizatio | on file a Fo | rm 1098-C? | 7h | | X |
| 8 | Sponsoring organizations maintaining donor advised funds and section 509(a)(3) support | ing | | | | | |
| | organizations. Did the supporting organization, or a donor advised fund maintained by a sponsor | _ | | | | | |
| | organization, have excess business holdings at any time during the year? | | | | 8 | | |
| 9 | Sponsoring organizations maintaining donor advised funds. | | | | _ | | |
| a | Did the organization make any taxable distributions under section 4966? | | | | 9a | \vdash | - |
| b 10 | | | | | 9b | | |
| 10 | Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12 | 10a | | | | | |
| a b | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities | 10a | | | | | |
| 11 | Section 501(c)(12) organizations. Enter: | .00 | | | | | |
| а | Gross income from members or shareholders | 11a | | | | | |
| b | | | | | | | |
| | against amounts due or received from them.) | 11b | | | | | |
| 12a | Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of | Form 1 | 041? | | 12a | | |
| b | If "Yes," enter the amount of tax-exempt interest received or accrued during the year | 12b | | | | | |
| 13 | Section 501(c)(29) qualified nonprofit health insurance issuers. | | | | | | |
| а | | | | | 13a | | |
| | Note. See the instructions for additional information the organization must report on Schedule O. | | | | | | |
| b | , | ا ا | | | | | |
| | the organization is licensed to issue qualified health plans | 13b | | | | | |
| | Enter the amount of reserves on hand | 13c | | | 110 | | v |
| | Did the organization receive any payments for indoor tanning services during the tax year? If "Yes." has it filed a Form 720 to report these payments? If "No." provide an explanation in Sche | | | | 14a 14b | $\vdash \vdash \vdash$ | Х |
| IJ | - ii - i oo, i iido ii iilod a i oiiii i 20 to igpoit tiigog paviiigitio: II INO, DIOVIUG ali Gadialidii III Oblit | Judie | | | | | 1 |

Form 990 (2013) Mongabay Org Corp 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 12 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. Enter the number of voting members included in line 1a, above, who are independent ______ 8 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? X Did the organization delegate control over management duties customarily performed by or under the direct 3 supervision of officers, directors, or trustees, or key employees to a management company or other person? 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders? 6 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? b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? Х Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: The governing body? 8a b Each committee with authority to act on behalf of the governing body? X 8b 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 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? Х 10a b If "Yes," did the organization have written policies and affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b X Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990. **12a** Did the organization have a written conflict of interest policy? If "No," go to line 13 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done X 12c Did the organization have a written whistleblower policy? X 13 13 Did the organization have a written document retention and destruction policy? 14 14 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official X 15a Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? Х 16a 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? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶ CA 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. X Own website X Another's website X Upon request Other (explain in Schedule O) 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. State the name, physical address, and telephone number of the person who possesses the books and records of the 15 Clinton St., #1 organization: ▶ Rhett A Butler

650-315-5573

CA 94062

Redwood City

Form 990 (2013) Mongabay Org Corp

45-3714703

Page **7**

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

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

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

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

X Check this box if neither the organization nor any related organizations compensated any current officer, director, or trustee.

| (A) Name and Title | (B) Average hours per week (list any hours for | offi | k, unle | heck ss pe nd a d | ition more rson | than one is both ar or/trustee | 1 | (D) Reportable compensation from the organization | (E) Reportable compensation from related organizations (W-2/1099-MISC) | (F) Estimated amount of other compensation from the |
|------------------------------|---|--------------------------------|-----------------------|-------------------------|-----------------------|--------------------------------------|---|---|---|---|
| | related organizations below dotted line) | Individual trustee or director | Institutional trustee | Officer | Key employee | Highest compensated employee | 1 | (W-2/1099-MISC) | (W 2 1000 MIGO) | organization and related organizations |
| (1)Rhett A. Butler | | | | | | | | | | |
| ED/Chair to Oct/Sec. | 40.00 | X. | | x | | | | | 0 | 0 |
| (2) Nancy Abraham | 1 00 | | | 7 | Γ | Γ+ | | | Y | |
| Director | 0.00 | X | | 1 | | | | 0 | • о | 0 |
| (3)Alyson Blume | | | | | | | | | | |
| Dir/Chair Oct to Dec | 1.00 0.00 | x | | x | | | | 0 | 0 | 0 |
| (4) Penn A. Butler | | | | | | | | | | |
| Binachan | 1.00 | 3,5 | | | | | | 0 | | |
| Director (5) Brodie Ferguson | 0.00 | X | | | | | | 0 | 0 | 0 |
| (3) DI CAIC I CI GABOII | 1.00 | | | | | | | | | |
| Director/Chairman | 0.00 | X | | X | | | | 0 | 0 | 0 |
| (6)Triona Gogarty | 1 00 | | | | | | | | | |
| Director | 1.00 0.00 | x | | | | | | 0 | 0 | 0 |
| (7) Christopher Her | | | | | | | | | | |
| | 1.00 | | | | | | | | | |
| Director/Treasurer | 0.00 | X | | X | | | | 0 | 0 | 0 |
| (8) Tim Kelley | 1.00 | | | | | | | | | |
| Director | 0.00 | x | | | | | | 0 | 0 | 0 |
| (9)William F. Laur | | | | | | | | | | |
| | 1.00 | | | | | | | | | |
| Director | 0.00 | X | | | | | | 0 | 0 | 0 |
| (10)Marion O'Leary | 1 00 | | | | | | | | | |
| Director | 1.00 0.00 | X | | | | | | 0 | 0 | 0 |
| (11)Peter Riggs | 3.00 | | | | | | + | | | |
| | 1.00 | | | | | | | | | |
| Director DAA | 0.00 | X | | | | | | 0 | 0 | Form 990 (2013) |

| Part VII Section A. Officer (A) Name and title | (B) (C) Average hours per week (list any hours for | | | | | | one n an eee) | (D) Reportable compensation from the organization | (E) Reportable compensation from related organizations (W-2/1099-MISC) | (F) Estimated amount of other compensation from the |
|--|--|--------------------------------|-----------------------|---------------|--------------|---------------------------------|---------------------|--|---|---|
| | related organizations below dotted line) | Individual trustee or director | Institutional trustee | Officer | Key employee | Highest compensatec employee | Former | (W-2/1099-MISC) | | organization and related organizations |
| (12)Susan Sanchez | 1.00 | | | | | | | | | |
| Director (13)Griff Baker | 0.00 | X | | | | | | 0 | 0 | 0 |
| Director | 1.00 | х | | | | | | 0 | 0 | 0 |
| (14) | | | | | | | | | | |
| (15) | | | | | | | | | | |
| | | | | | | | | | | |
| (16) | | | | | | | | | | |
| (17) | | | | | | | | | | |
| (18) | | | | | | | | | | |
| | | | | | Ç. | L | 4 | $\bigcirc \bigcirc \bigcirc$ | V | |
| (19) | | | C | 1 | | - | | UUP | Y | |
| 1b Sub-total | | <u> </u> | | | | L | > | | | |
| c Total from continuation sho d Total (add lines 1b and 1c) | | | | | | | | | | |
| Total (add lines to and 1c) Total number of individuals (in reportable compensation from 1 c) | including but no | t lim | ited | | | | d ab | pove) who received more t | than \$100,000 in | |
| 3 Did the organization list any temployee on line 1a? If "Yes | | | | | | | | | | Yes No |
| 4 For any individual listed on line organization and related organization. | ne 1a, is the su anizations great | m of er th | repo an \$ | ortab 3150 | le co | ompe)? If " | ensa 'Yes | ation and other compensa s," complete Schedule J fo | r such | |
| individual5 Did any person listed on line for services rendered to the or | 1a receive or a | ccru "Yes | e co | mpe | nsat | ion f | rom | any unrelated organization | on or individual | 5 X |
| Section B. Independent Contract | tors | | | | | | | | | |
| Complete this table for your factoring compensation from the organization. | nization. Report | con | sate | satio | n fo | r the | nt co cal | endar year ending with or | within the organization's | |
| Name and | (A) I business address | | | | | | | Descrip | (B) tion of services | (C) Compensation |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| 2 Total number of independent received more than \$100,000 | t contractors (in | cludi on fi | ng b | ut no | ot lir | nited nizat | to to | those listed above) who | 0 | |

| • | | (A) Total revenue | (B) Related or exempt function revenue | (C) Unrelated business revenue | (D) Revenue excluded from tax under sections 512-514 |
|---------------------|---|----------------------|--|---|--|
| 1a b c c d de f f g | Federated campaigns 1a | | | | |
| b | Membership dues 1b | | | | |
| С | Fundraising events 1c | | | | |
| ď | Related organizations 1d | | | | |
| е | Government grants (contributions) 1e | | | | |
| f | All other contributions, gifts, grants, | | | | |
| | and similar amounts not included above 1f 527,294 | | | | |
| g | Noncash contributions included in lines 1a-1f: \$ | | | | |
| h | Total. Add lines 1a–1f | 527,294 | | | |
| | Busn. Code | | | | |
| 2a | | | | | |
| b | | | | | |
| С | | | | | |
| d | | | | | |
| е | | | | | |
| f | All other program service revenue | | | | |
| g | Total. Add lines 2a–2f | | | | |
| | Investment income (including dividends, interest, | | | | |
| | and other similar amounts) | 530 | 530 | | |
| 4 | Income from investment of tax-exempt bond proceed | | | | |
| 5 | Royalties | | | | |
| | (i) Real (ii) Personal | | | | |
| 6a | Gross rents | | | | |
| b | Less: rental exps. | | | | |
| С | Rental inc. or (loss) | | | | |
| d | Net rental income or (loss) | | / I I | | |
| 7a | Gross amount from (i) Securities (ii) Other | | | | |
| | sales of assets other than inventory | | | | |
| b | Less: cost or other | | | | |
| | basis & sales exps. | | | | |
| С | Gain or (loss) | | | | |
| | Net gain or (loss) | | | | |
| | Gross income from fundraising events | | | | |
| | (not including C | | | | |
| | of contributions reported on line 1c). | | | | |
| | See Part IV, line 18 a | | | | |
| h | Less: direct expenses b | | | | |
| | Net income or (loss) from fundraising events | | | | |
| | Gross income from gaming activities. | | | | |
| Ja | See Part IV, line 19 | | | | |
| h | Less: direct expenses b | | | | |
| | Net income or (loss) from gaming activities | | | | |
| | Gross sales of inventory, less | | | | |
| IVa | | | | | |
| h | returns and allowances a Less: cost of goods sold b | | | | |
| | | | | | |
| - c | Net income or (loss) from sales of inventory Miscellaneous Revenue Busn. Code | | | | |
| | | 394 | | | 394 |
| 44. | 3 | 334 | | | 394 |
| | Advertising | T T | Į. | | |
| b | | | | | |
| b b | | | | | |
| b c d | | 394 | | | |

Form 990 (2013) Mongabay Org Corp Part IX Statement of Functional Expenses

| Sect | ion 501(c)(3) and 501(c)(4) organizations must Check if Schedule O contains a resp | | | complete column (A). | X |
|----------|---|-----------------------|------------------------------|--------------------------------------|--------------------------|
| | not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII. | (A) Total expenses | (B) Program service expenses | (C) Management and general expenses | (D) Fundraising expenses |
| 1 | Grants and other assistance to governments and | | | | |
| | organizations in the U.S. See Part IV, line 21 | 48,343 | 48,343 | | |
| 2 | Grants and other assistance to individuals in | | | | |
| | the U.S. See Part IV, line 22 | | | | |
| 3 | Grants and other assistance to governments, | | | | |
| | organizations, and individuals outside the | | | | |
| | U.S. See Part IV, lines 15 and 16 | | | | |
| 4 | Benefits paid to or for members | | | | |
| 5 | Compensation of current officers, directors, | | | | |
| | trustees, and key employees | | | | |
| 6 | Compensation not included above, to disqualified | | | | |
| | persons (as defined under section 4958(f)(1)) and | | | | |
| | persons described in section 4958(c)(3)(B) | 20 4== | 21 112 | | |
| 7 | Other salaries and wages | 38,657 | 31,110 | 5,391 | 2,156 |
| 8 | Pension plan accruals and contributions (include | | | | |
| - | section 401(k) and 403(b) employer contributions) | | | | |
| 9 | Other employee benefits | 0 855 | 0.015 | 204 | 1 - 4 |
| 10 | Payroll taxes | 2,755 | 2,217 | 384 | 154 |
| 11 | Fees for services (non-employees): | | | | |
| _ | Management | | | | |
| b | = | 1,150 | | 1,150 | |
| 4 | Accounting Lobbying | 1,150 | | 1,130 | |
| | Professional fundraising services. See Part V, line 17 | (1 | | | |
| f | · · · · · · · · · · · · · · · · · · · | ratt-t | | Y | |
| g | Other. (If line 11g amount exceeds 10% of line 25, column | lait i | | | |
| · | (A) amount, list line 11g expenses on Schedule O.) | 114,987 | 110,764 | 3,801 | 422 |
| 12 | Advertising and promotion | | | | |
| 13 | Office expenses | 11,302 | 8,439 | 2,511 | 352 |
| 14 | Information technology | | | | |
| 15 | Royalties | | | | |
| 16 | Occupancy | 1,800 | 1,260 | 360 | 180 |
| 17 | Travel | 27,759 | 21,757 | 894 | 5,108 |
| 18 | Payments of travel or entertainment expenses | | | | |
| 40 | for any federal, state, or local public officials | | | | |
| 19 | Conferences, conventions, and meetings | | | | |
| 20 | Interest Payments to affiliates | | | | |
| 21 22 | Depreciation, depletion, and amortization | | | | |
| 23 | Insurance | 1,467 | | 1,467 | |
| 24 | Other expenses. Itemize expenses not covered | 1,10, | | ± / ± 0 / 1 | |
| | above (List miscellaneous expenses in line 24e. If | | | | |
| | line 24e amount exceeds 10% of line 25, column | | | | |
| | (A) amount, list line 24e expenses on Schedule O.) | | | | |
| а | | | | | |
| b | | | | | |
| С | | | | | |
| d | | | | | |
| е | All other expenses | | | | |
| 25 | Total functional expenses. Add lines 1 through 24e | 248,220 | 223,890 | 15,958 | 8,372 |
| 26 | Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶☐ if | | | | |
| DAA | following SOP 98-2 (ASC 958-720) | | | | Form 990 (2013) |

| | art / | Check if Schedule O contains a response or note to any line in this Part X | | | |
|-----------------------------|-------|---|---|-----|---|
| | | Ве | (A) ginning of year | | (B) End of year |
| | 1 | Cash—non-interest bearing | 3,323 | 1 | 283,364 |
| | 2 | Savings and temporary cash investments | | 2 | |
| | 3 | Pledges and grants receivable, net | | 3 | |
| | 4 | Accounts receivable, net | | 4 | |
| | 5 | Loans and other receivables from current and former officers, directors, | | | |
| | | trustees, key employees, and highest compensated employees. | | | |
| | | Complete Part II of Schedule L | | 5 | |
| | 6 | Loans and other receivables from other disqualified persons (as defined 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 | | | |
| ts | | organizations (see instructions). Complete Part II of Schedule L | | 6 | |
| Assets | 7 | Notes and loans receivable, net | | 7 | |
| Ä | 8 | Inventories for sale or use | | 8 | |
| | 9 | Prepaid expenses and deferred charges | | 9 | |
| | 10a | Land, buildings, and equipment: cost or | | | |
| | | other basis. Complete Part VI of Schedule D 10a | | | |
| | b | Less: accumulated depreciation 10b | | 10c | |
| | 11 | Investments—publicly traded securities | | 11 | |
| | 12 | Investments—other securities. See Part IV, line 11 | | 12 | |
| | 13 | Investments—program-related. See Part IV, line 11 | | 13 | |
| | 14 | Intangible assets | | 14 | _ |
| | 15 | Other assets. See Part IV, line 11 | | 15 | _ |
| | 16 | Total assets. Add lines 1 through 15 (must equal line 34) | 3,323 | 16 | 283,364 |
| | 17 | Accounts payable and accrued expenses | _ | 17 | _ |
| | 18 | Grants payable Deferred revenue Tay-exempt bond liabilities | | 18 | |
| | 19 | Deferred revenue | Y | 19 | _ |
| | 20 | Tax-exempt bond liabilities | | 20 | _ |
| | 21 | Escrow or custodial account liability. Complete Part IV of Schedule D | | 21 | _ |
| S | 22 | Loans and other payables to current and former officers, directors, | | | |
| Liabilities | | trustees, key employees, highest compensated employees, and | | | |
| abi | | disqualified persons. Complete Part II of Schedule L | | 22 | |
| = | 23 | Secured mortgages and notes payable to unrelated third parties | | 23 | _ |
| | 24 | Unsecured notes and loans payable to unrelated third parties | | 24 | |
| | 25 | Other liabilities (including federal income tax, payables to related third | | | |
| | | parties, and other liabilities not included on lines 17-24). Complete Part X | | | |
| | | of Schedule D | | 25 | |
| | 26 | Total liabilities. Add lines 17 through 25 | 0 | 26 | 0 |
| S | | Organizations that follow SFAS 117 (ASC 958), check here ▶X and | | | |
| Š | | complete lines 27 through 29, and lines 33 and 34. | | | |
| lar | 27 | Unrestricted net assets | 3,323 | 27 | 283,364 |
| B | 28 | Temporarily restricted net assets | | 28 | |
| pur | 29 | Permanently restricted net assets | | 29 | |
| 乓 | | Organizations that do not follow SFAS 117 (ASC 958), check here ▶ and | | | |
| <u>o</u> | | complete lines 30 through 34. | | | |
| ets. | 30 | Capital stock or trust principal, or current funds | 300000000000000000000000000000000000000 | 30 | nnannannan 5555555555555555555555555555 |
| ASS | 31 | Paid-in or capital surplus, or land, building, or equipment fund | | 31 | |
| Net Assets or Fund Balances | 32 | Retained earnings, endowment, accumulated income, or other funds | | 32 | |
| Z | 33 | Total net assets or fund balances | 3,323 | | 283,364 |
| | 34 | Total liabilities and net assets/fund balances | 3,323 | 34 | 283,364 |

Form **990** (2013)

| Pa | art XI Reconciliation of Net Assets | | | | | |
|----|---|----|----|---------|-----|--|
| | Check if Schedule O contains a response or note to any line in this Part XI | | | | | |
| 1 | Total revenue (must equal Part VIII, column (A), line 12) | 1 | 52 | 8,2 | 218 | |
| 2 | Total expenses (must equal Part IX, column (A), line 25) | 2 | 24 | 8,2 | 220 | |
| 3 | Revenue less expenses. Subtract line 2 from line 1 | 3 | 27 | 279,998 | | |
| 4 | Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) | 4 | | 3,3 | 323 | |
| 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 | | | 43 | |
| 9 | Other changes in net assets or fund balances (explain in Schedule O) | 9 | | | | |
| 10 | Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line | | | | | |
| | 33, column (B)) | 10 | 28 | 3,3 | 364 | |
| Pa | art XII Financial Statements and Reporting | | | | | |
| | Check if Schedule O contains a response or note to any line in this Part XII | | | | | |
| | | | | Yes | No | |
| 1 | Accounting method used to prepare the Form 990: X Cash Accrual Other | | | | | |
| | If the organization changed its method of accounting from a prior year or checked "Other," explain in | | | | | |
| | Schedule O. | | | | | |
| 2a | Were the organization's financial statements compiled or reviewed by an independent accountant? | | 2a | | X | |
| | If "Yes," check a box below to indicate whether the financial statements for the year were compiled or | | | | | |
| | reviewed on a separate basis, consolidated basis, or both: | | | | | |
| | Separate basis Consolidated basis Both consolidated and separate basis | | | | | |
| b | Were the organization's financial statements audited by an independent accountant? | | 2b | | X | |
| | If "Yes," check a box below to indicate whether the financial statements for the year were audited on a | | | | | |
| | separate basis, consolidated basis, or both: | | | | | |
| | Separate basis Consolidated basis Both consolidated and separate basis | | | | | |
| С | If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight | | | | | |
| | of the audit, review, or compilation of its financial statements and selection of an independent accountant? | | 2c | | | |
| | If the organization changed either its oversight process or selection process during the tax year, explain in | | | | | |
| | Schedule O. | | | | | |
| 3a | As a result of a federal award, was the organization required to undergo an audit or audits as set forth in | | | | | |
| | the Single Audit Act and OMB Circular A-133? | | 3a | | | |
| 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 | | 3b | | | |

Form **990** (2013)

SCHEDULE A

(Form 990 or 990-EZ)

Public Charity Status and Public Support

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

▶ Attach to Form 990 or Form 990-EZ.

Open to Public

OMB No. 1545-0047

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.

orm990. Inspection

| lame | of th | e organization | Mongabay Or | g Corp | | | | | - | - | itification n .4703 | umber | | |
|------|-----------|----------------|---|--|--------------------|--------------|-------------|------------------------|-------------------------|---------------------|------------------------|----------|--------|------------|
| Pa | art I | Reas | | y Status (All organizatio | ns mus | t compl | ete thi | s part. | | | | | | |
| | | 200000000 | | nuse it is: (For lines 1 through | | | | | , | | | | | |
| 1 | \bigcap | | • | ssociation of churches describ | | • | |)(i). | | | | | | |
| 2 | | | | I)(A)(ii). (Attach Schedule E.) | | | | , , | | | | | | |
| 3 | П | | | vice organization described in | section | 170(b)(1) | (A)(iii). | | | | | | | |
| 4 | П | - | | ted in conjunction with a hospi | | | | 70(b)(1) | (A)(iii) | . Enter | the hosp | oital's | name |) , |
| | | city, and sta | te: | | | | | | | | | | | |
| 5 | | - | tion operated for the benefit (b)(1)(A)(iv). (Complete Pa | it of a college or university owr art II.) | ned or ope | erated by | a gove | rnmenta | al unit d | lescribe | ed in | | | |
| 6 | | A federal, st | ate, or local government or | governmental unit described | in sectio i | n 170(b)(| 1)(A)(v) |). | | | | | | |
| 7 | X | An organiza | tion that normally receives | a substantial part of its suppor | rt from a g | governme | ental uni | t or fron | n the ge | eneral _l | public | | | |
| | | described in | section 170(b)(1)(A)(vi). | (Complete Part II.) | | | | | | | | | | |
| 8 | Ц | | | n 170(b)(1)(A)(vi). (Complete I | | | | | | | | | | |
| 9 | | - | | (1) more than 33 1/3% of its s | | | | | - | | _ | | | |
| | | - | | empt functions—subject to cer | - | | | | | | | | | |
| | | | = | and unrelated business taxabl | | | | 1 tax) fr | om bus | inesse | S | | | |
| | | | = | 30, 1975. See section 509(a | | | | | | | | | | |
| 10 | \square | _ | = | d exclusively to test for public | - | | | | | | | | | |
| 11 | | _ | - | d exclusively for the benefit of | - | | | | | | 4! | | | |
| | | | | orted organizations described i | | | | | | | ection | | | |
| | | | | s the type of supporting organi | | • | _ | | • | | otionally i | ntogu | atad | |
| _ | | a Type | | c Type III–Function rganization is not controlled di | | | d by and | | | | ctionally i | niegi | aleu | |
| е | | | | her than one or more pu blicly | | | | | | | | | | |
| | | or section 50 | | definations of more publicly | supported | Jolganiz | ations u | GSCIDE | u III 360 | JUI JU |)3(a)(1) | | | |
| f | | | | etermination from the IRS that | it is a Tyn | a I Type | II or T | ■ vne III s | unnorti | na | | | | |
| • | | _ | , check this box | stermination from the into that | пізатур | е і, туре | : 11, 01 1 | ype III s | ирропп | iig | | | | |
| ~ | | • | | zation accepted any gift or con | tribution f | rom anv | of the | | | | | | | . Ш |
| g | | following pe | = | eation accepted any gift of con | itiibatioii i | Torri arry | 01 1110 | | | | | | | |
| | | | | controls, either alone or togeth | ner with no | ersons de | escribed | l in (ii) a | nd | | | 1 | Yes | No |
| | | | | ne supported organization? | ioi wiiii p | 0100110 01 | 30011800 | · () ຜ | | | Ī | 11g(i) | | |
| | | | member of a person desc | | | | | | | | | 11g(ii) | | |
| | | | · · | n described in (i) or (ii) above? | | | | | | | | 11g(iii) | | |
| h | | | • | t the supported organization(s | | | | | | | | _ J\ / | | |
| (i) | Nam | e of supported | (ii) EIN | (iii) Type of organization | 1 | organization | (v) Did y | ou notify | (vi) | s the | (vii) An | nount c | f mone | tary |
| | org | ganization | | (described on lines 1–9 | 1.1 | sted in your | the organ | nization in of your | organizat (i) organi | ion in col. | | supp | ort | - |
| | | | | above or IRC section (see instructions)) | governing | document? | | port? | U. | | 1 | | | |
| | | | | (000 1100 1100 1100 1100 1100 1100 1100 | Yes | No | Yes | No | Yes | No | | | | |
| A) | | | | | | | | | | | | | | |
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Page 2

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.)

| | tion A. Public Support | | | | | | |
|-----------------|--|---------------------|----------------------|------------------------|--------------------------|-----------------|------------|
| Cale | ndar year (or fiscal year beginning in) | (a) 2009 | (b) 2010 | (c) 2011 | (d) 2012 | (e) 2013 | (f) Total |
| 1 | Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") | | | | 92,319 | 527,294 | 619,613 |
| 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 | | | | 92,319 | 527,294 | 619,613 |
| 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) | | | | | | 443,318 |
| <u>6</u> Sec | Public support. Subtract line 5 from line 4. | | | | | | 176,295 |
| | ndar year (or fiscal year beginning in) | (a) 2009 | (b) 2010 | (c) 2011 | (d) 2012 | (e) 2013 | (f) Total |
| 7 | Amounts from line 4 | (a) 2000 | (6) 2010 | (6) 2011 | 92,319 | 527,294 | 619,613 |
| 8 | Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources | | | | 92,319 | 327,234 | 019,013 |
| 9 | Net income from unrelated business activities, whether or not the business is regularly carried on |)ra | ft-C | OF | Υ | | |
| 10 | Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) | 5 | | | • | | |
| 11 | Total support. Add lines 7 through 10 | | | | | | 619,613 |
| 12 | Gross receipts from related activities, etc | c. (see instruction | ns) | | | 12 | 530 |
| 13 | First five years. If the Form 990 is for the | e organization's | first, second, third | , fourth, or fifth tax | x year as a section | 501(c)(3) | _ |
| | organization, check this box and stop he | | | | | | ▶ X |
| Sec | tion C. Computation of Public S | | | | | | |
| 14 | Public support percentage for 2013 (line | | | olumn (f)) | | 14 | %_ |
| 15 | Public support percentage from 2012 Sc | | | | | | %_ |
| 16a | 33 1/3% support test—2013. If the orga | | | | 4 is 33 1/3% or mo | re, check this | . \Box |
| | box and stop here. The organization qu | - | | | | | ▶ ∐ |
| b | 33 1/3% support test—2012. If the orga | | | | | r more, | |
| | check this box and stop here. The organ | | | | | | ▶ ⊔ |
| 1/a | 10%-facts-and-circumstances test—2 | - | | | | | |
| | 10% or more, and if the organization me | | | | - | • | |
| | Part IV how the organization meets the " | tacts-and-circum | stances" test. The | organization qua | lilities as a publicly s | supported | ▶ □ |
| | organization | | | | | | |
| b | 10%-facts-and-circumstances test—2 | • | | | | | |
| | 15 is 10% or more, and if the organization | | | | • | | |
| | Explain in Part IV how the organization r | | | · · | · | | ▶ □ |
| 10 | supported organization | | | | | | □ |
| 18 | | | | | | | ▶ □ |
| | instructions | | | | | | |

Page 3

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II.)

If the organization fails to qualify under the tests listed below, please complete Part II.)

| Sec | tion A. Public Support | quality unde | T THE TESTS HOTE | sa below, pice | ise complete i | art ii.j | |
|----------|--|-----------------------|--------------------|--------------------|--------------------|--------------|-------------------|
| | ndar year (or fiscal year beginning in) | (a) 2009 | (b) 2010 | (c) 2011 | (d) 2012 | (e) 2013 | (f) Total |
| 1 | Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") | (3) = 33 | (0) = 0.00 | (0, =0.11 | (5) | (5) = 5 + 5 | (1) |
| 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 | | | | | | |
| С | Add lines 7a and 7b | | | | | | |
| 8 | Public support (Subtract line 7c from | | | | | | |
| <u> </u> | line 6.) | | _ | | | | |
| | tion B. Total Support | 40000 | ££11.000 | | (d)/2012 | (.) 0040 | (O.T.) |
| 9 | Amounts from line 6 | (2009) | (b) 2010 | (c) 2011 | (6)/2012 | (e) 2013 | (f) Total |
| 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 | | | | | | |
| С | 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 IV.) | | | | | | |
| 13 | Total support. (Add lines 9, 10c, 11, and 12.) | | | | | | |
| 14 | First five years. If the Form 990 is for the organization, check this box and stop he | • | | | • | n 501(c)(3) | ▶ □ |
| Sec | tion C. Computation of Public S | | | | | | ········ F |
| 15 | Public support percentage for 2013 (line 8 | | | olumn (f)) | | 15 | % |
| 16 | Public support percentage from 2012 Sch | edule A, Part II | l, line 15 | | | 16 | % |
| | tion D. Computation of Investment | | | | | • | |
| 17 | Investment income percentage for 2013 (| | | e 13, column (f)) | | 17 | % |
| 18 | Investment income percentage from 2012 | Schedule A, P | art III, line 17 | | | 18 | % |
| 19a | 33 1/3% support tests—2013. If the orga | anization did no | t check the box or | | | | |
| | 17 is not more than 33 1/3%, check this b | ox and stop he | re. The organizat | ion qualifies as a | publicly supported | organization | ▶ □ |
| b | 33 1/3% support tests—2012. If the orga | | | | | | nd |
| | line 18 is not more than 33 1/3%, check the | | _ | • | | | ▶ _ |
| 20 | Private foundation. If the organization di | d not check a b | ox on line 14, 19a | , or 19b, check th | is box and see ins | structions | |

| Schedule A (| Form 990 or 990-E2 | 2013 Mongabay | y Org | Corp | | 45-3714703 | Page 4 |
|---|----------------------------------|--------------------|----------|--------------------------|---|---|-----------------|
| Part IV | Supplementa Part III, line 12 | I Information. Pro | vide the | explanation r any additi | ns required by Pa ional information. | 45-3714703 art II, line 10; Part II, line (See instructions). | 17a or 17b; and |
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Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF.

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

OMB No. 1545-0047

Employer identification number

45-3714703

Schedule B (Form 990, 990-EZ, or 990-PF) (2013)

| Mongabay Org | Corp | 45-3714703 |
|---|--|--|
| Organization type (check or | ne): | |
| Filers of: | Section: | |
| Form 990 or 990-EZ | X 501(c)(3) (enter number) organization | |
| | 4947(a)(1) nonexempt charitable trust not treated as a private foundation | |
| | 527 political organization | |
| Form 990-PF | 501(c)(3) exempt private foundation | |
| | 4947(a)(1) nonexempt charitable trust treated as a private foundation | |
| | 501(c)(3) taxable private foundation | |
| | | |
| | covered by the General Rule or a Special Rule . 7), (8), or (10) organization can check boxes for both the General Rule and a Specia | ıl Rule. See |
| General Rule | | |
| | iling Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in ne contributor. Complete Paris I and II. | money or |
| Special Rules | | |
| under sections 509(a | 3) organization filing Form 990 or 990-EZ that met the 33 ¹ / ₃ % support test of the replace (1)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a conduction of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, list II. | ontribution of |
| during the year, total | 7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one concontributions of more than \$1,000 for use exclusively for religious, charitable, scient ses, or the prevention of cruelty to children or animals. Complete Parts I, II, and III. | |
| during the year, control not total to more than year for an exclusive applies to this organic | 7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributions for use exclusively for religious, charitable, etc., purposes, but these contributions is checked, enter here the total contributions that were received by religious, charitable, etc., purpose. Do not complete any of the parts unless the Gezation because it received nonexclusively religious, charitable, etc., contributions of | outions did during the eneral Rule \$5,000 or |
| 990-EZ, or 990-PF), but it m | at is not covered by the General Rule and/or the Special Rules does not file Schedule ust answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its For certify that it does not meet the filing requirements of Schedule B (Form 990, 990-I | Form 990-EZ or on its |

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) (2013)

Name of organization
Mongabay Org Corp

Employer identification number 45-3714703

| Part I | Contributors (see instructions). Use duplicate copies of | f Part I if additional space i | s needed. |
|------------|---|--------------------------------|--|
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| . 1 | The Climate and Land Use Alliance 235 Montgomery St, #1300 San Francisco CA 94104 | \$ 160,500 | Person X Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 2 | The Celedon Group LLC 2 Moulton Dr Atherton CA 94027 | \$ 110,628 | Person X Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 3 | Gordon & Betty Moore Foundation 1661 Page Mill Road Palo Alto CA 94304 | \$ 30,250 OPY | Person X Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 4 | Overbrook Foundation 22 East 42nd street, #2500 New York NY 10168 | \$ 50,000 | Person X Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 5 | Packard Foundation 343 2nd St. Los Altos CA 94022 | \$ 60,000 | Person X Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 6 | Rockefeller Foundation 420 5th ave. New York NY 10018 | \$ 30,250 | Person X Payroll Noncash (Complete Part II for noncash contributions.) |

SCHEDULE F (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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.
 ► See separate instructions.

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

OMB No. 1545-0047 **2013**

Open to Public Inspection

Mongabay Org Corp

Employer identification number 45 - 3714703

| Pa | art I Ge | | n on Activities C | | s. Complete if the organization an | |
|-------------|-----------------|-------------------------|------------------------------------|--|--|----------------------------------|
| | Fo | rm 990, Part IV, line | e 14b. | | | |
| 1 | _ | _ | | ds to substantiate the amount o | = | |
| | grants or ass | | = | stance, and the selection criteria | used to award the | Yes No |
| _ | • | | | | | |
| 2 | _ | utside the United State | = | procedures for monitoring the u | ise of its grants and other | |
| 2 | | | | an be duplicated if additional sp | and is needed) | |
| 3 | (a) Region | (b) Number of | (c) Number of | (d) Activities conducted in | (e) If activity listed in (d) is | (f) Total |
| | (*, *) | offices in the region | employees, agents, and independent | region (by type) (e.g., fundraising, program services, | a program service, describe specific type of | expenditures for and investments |
| | | | contractors in region | investments, grants to recipients | service(s) in region | in region |
| Ea | ast Asia | and the Paci: | fic | located in the region) | | |
| (1) | 200 11014 | | | Program Services | Environmental issues | 132,712 |
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| (17) | Sub-total | | 4 | | | 132,712 |
| _ | oud-total | on | | | | 132,112 |
| sh | neets to Part I | | | | | |
| | otals (add | | | | | 120 710 |
| Ш | nes 3a and 3b | 'A | 4 | | | 132,712 |

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|---------------|-----------------|---------------------------|----------|--|
| 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 | X 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) | Yes | X 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 . | X 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 | X 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 | X 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) | ⁄es | X No |

Draft-COPY

Schedule F (Form 990) 2013

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 (see instructions).

| Draft-COPY | Region | Expenditures Investments | | | | | |
|------------|---------------------------|--------------------------|------------|---|--|--|--|
| | East Asia and the Pacific | \$ | 132,712 \$ | 0 | | | |
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SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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

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

► Attach to Form 990.

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

OMB No. 1545-0047 **2013**

Open to Public Inspection

Employer identification number

| Mongabay Org Corp | | | | | | 4 | 5-3714703 |
|--|----------------|-------------------------------------|-----------------------------|---------------------------------------|---|--|------------------------------------|
| Part I General Information on Grants an | d Assistance |) | | | | | _ |
| Does the organization maintain records to substantiate the selection criteria used to award the grants or assis Describe in Part IV the organization's procedures for n | tance? | | | | grants or assistar | nce, and | X Yes No |
| Part II Grants and Other Assistance to G Part IV, line 21, for any recipient that | | | | | fadditional spa | ce is needed | |
| 1 (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
| (1) EarthSoul Productions LLC 41 Rosewood Drive Sag Harbor NY 11963 | 38-3899094 | | 25,980 | | | | Film production |
| (2) Acate Amazon Conservation PO Box 15895 | 45-5132053 | | 20,725 | | | | Program expenses |
| (3) | | of | t | JD/ | / | | |
| (4) | וט | aı | 1-01 | | | | |
| (5) | | | | | | | |
| (e) | | | | | | | _ |
| (6) | | | | | | | |
| (7) | | | | | | | |
| (a) | | | | | | | |
| (8) | | | | | | | |
| (9) | | | | | | | |
| 2 Enter total number of section 501(c)(3) and government | | sted in the | line 1 table | | <u> </u> | | <u></u> |
| 3 Enter total number of other organizations listed in the larger Paperwork Reduction Act Notice, see the Instruction | | | | | | | Schedule I (Form 990) (2013) |

SCHEDULE L (Form 990 or 990-EZ)

Department of the Treasury

Transactions With Interested Persons

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

Attach to Form 990 or Form 990-EZ.

► See separate instructions.

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

Open To Public

OMB No. 1545-0047

Internal Revenue Service

| Name of the orga | | | | | | | · · | 271 40 | | tion nu | IIIDEI | | |
|------------------|---|--|--|---------|-----------------|--|------------------------|-----------|----------|----------|-------------------|---------|-------------------|
| Part I | Mongabay Org Co. Excess Benefit Transac | | 01(a)(2) and (| coction | n 501 | 1(a)(4) organiza | | 37147 | 03 | | | | |
| raiti | Complete if the organization ar | | | | | | | ırt V, li | ne 40 | Эb. | | | |
| 4 | | | (b) Relationship between disqualified person and | | | | nd | | | | (d) Co | | ted? |
| 1 | (a) Name of disqualified person | | organizati | on | | | (c) Description of tr | ansactio | n n | | Yes | ı | No |
| (1) | | | | | | | | | | | | | |
| (2) | | | | | | | | | | | | | |
| (3) | | | | | | | | | | | | | |
| (4) | | | | | | | | | | | | | |
| (5) | | | | | | | | | | | <u> </u> | | |
| (6) | | | | | | | | | | | | | |
| under | the amount of tax incurred by the obsection 4958the amount of tax, if any, on line 2. | | | | · | | · | | | | | | |
| Part II | Loans to and/or From I | nterested Pers | sons. | | | | | | | | | | |
| | Complete if the organization as | nswered "Yes" on F | Form 990-EZ | , Part | V, lin | ne 38a or Form | 990, Part IV, line | e 26; c | or if th | ne | | | |
| | organization reported an amou | | | | | | | | | | | | |
| | (a) Name of interested person | (b) Relationship with organization | (c) Purpose of loan | | oan to m the | (e) Original principal amount | (f) Balance due | (g) In (| default? | (h) Ap | proved pard or | | /ritten ement? |
| | | , and the second | | org | j.? | | | | | comm | nittee? | | 1 |
| | | | | То | From | | | Yes | No | Yes | No | Yes | No |
| (1) | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| (2) | | | | | | | | | \vdash | <u> </u> | | | - |
| (3) | | <u> Irai</u> | <u> </u> | | | <u>) </u> | Y | | | | | | |
| (4) | _ | | | | | | • | | | | | | |
| | | | | | | | | | | | | | |
| (5) | | | | | | | | | <u> </u> | <u> </u> | | | - |
| (6) | | | | | | | | | | | | | |
| (7) | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| (8) | | | | | | | | | - | | | | |
| (9) | | | | | | | | | | | | | <u> </u> |
| 10) | | | | | | | | | | | | | |
| Total | | | <u></u> | | | > \$ | | | | | | | |
| Part III | Grants or Assistance B | _ | | | | _ | | | | | | | |
| | Complete if the organization ar | | | | | | | | | | | | |
| | (a) Name of interested person | | ship between inte and the organizati | | (c) Am | ount of assistance | (d) Type of assistance | e | (e) | Purpose | e of assi | istance | ; |
| (1) | | | | | | | | | | | | | |
| (2) | | | | | | | | | | | | | |
| (3) | | | | | | | | | | | | | |
| (4) | | | | | | | | | | | | | |
| (5) (6) | | | | | | | | | | | | | |
| (7) | | | | | | | | | | | | | |
| (8) | | | | | | | | | | | | | |

(9)

Directors from January through October 2013, and Secretary of the Board of

Directors from November through December 2013, owns 100% The Celedon Group

| LLC. | Droft CODV | |
|------|------------|--|
| | Draft-COPY | |
| | | |
| | | |
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| | | |

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047 **2013**

Department of the Treasury Internal Revenue Service ► 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. Inspection

Open to Public

| Mongabay Org Corp | 45-3714703 |
|---|---------------------------------|
| Form 990 - Organization's Mission | |
| To raise awareness about social and environ | nmental issues relating to |
| tropical forests and other ecosystems, to | wildlife, and to the important |
| role that natural ecosystems play in mainta | aining critical services, |
| including stabilizing the global climate s | ystem. |
| Form 990, Part III, Line 4a - First Accomp | lishment |
| But beyond the raw numbers, Mongabay-Indone | esia's influence and reach also |
| expanded. Mongabay-Indonesia became an off | icial syndication partner for |
| Yahoo-Indonesia, which now distributes our Content from Mongabay Indonesia stories was | IP Y |
| Kompas, National Geographic Indonesia, Med | ia Indonesia, and Joyo News. |
| Mongabay-Indonesia continued to serve as a | news source for Google News. |
| Mongabay-Indonesia further expanded the dep | oth and breadth of its coverage |
| in 2013. Our network of journalists now in | cludes 22 reporters in 16 citie |
| across Indonesia, including cities on the | islands of Java, Bali, Sumatra, |
| Kalimantan, and Papua. This network has gre | eatly strengthened our reach an |
| is now serving as a model for development of | of a global reporting network o |
| forest issues (Americas, Congo Basin, West | Africa, Mekong, etc) as well a |

The Mongabay-Indonesia team also conducted a series of environmental

a Latin American environmental news service that is currently in the

conceptual phase.

Name of the organization

Mongabay Org Corp

45-3714703

literacy and journalism workshops, presentations at universities and government agencies, and public awareness events. From these events, Mongabay-Indonesia acquired new followers, contributed to better understanding of environmental issues, and also strengthened local environmental reporting.

Form 990, Part III, Line 4b - Second Accomplishment

by the broader media. In contrast to an aggregation of case studies in a

single report, a series of in-depth articles highlights each case study or

story separately, boosting its prominence. SRI fellows are given the

funding and support to become issue area experts, adding value to their own

career and contributing to the wider conversation regarding the state of

our natural world.

Draft-COPY

Mongabay.com's independent news reporting. Reporting on environmental and conservation issues.

Translation and non-English reporting on environmental issues. Priority languages include Latin American Spanish and Indonesian.

Educational materials, standards-based modules, and activities for K-8 children developed by school teachers and curriculum experts.

Tropical Conservation Science (TCS), an open-access academic journal that aims to provide opportunities for scientists in developing countries to publish their research. Unusually for an open-access journal, TCS does not charge any fees to readers or authors.

Name of the organization Employer identification number Mongabay Org Corp 45-3714703 In 2013, Mongabay.org: -formalized an internship program that published over 350 environmental science and conservation news articles on Mongabay-News, which as a whole published more than 1,300 articles; -created 10 standards-based environmental education books for kindergarden and first-grade students; -published over 1,000 articles in Indonesian on Mongabay-Indonesia and reached more than 3,000 Indonesians in person via journalism workshops and environmental education events; -leveraged a team of 120+ interns to translate 241 conservation news articles in Spanish, 125 in French, 112 in Italian, 97 in Portuguese, 33 in Chinese, 24 in German, and 10 in Japanese; -published six issues -gave out three contributor awards; and awarded one \$20,000 journalism prize for the next big idea in rainforest conservation and announced a call for applications for 4 more. Mongabay.org served as the fiscal sponsor for three organizations in 2013, two of which accounted for 100 percent of the expenses: Earth Soul Productions (head by Paul Stoutenburgh) and Acate Amazon Conservation. Earth Soul Productions received \$25,980 to develop a film about rainforest conservation, including Ecuador's decision not to proceed with the Yasuni-ITT Initiative, which aimed to protect one of the Amazon's richest forests from oil and gas exploration.

Schedule O (Form 990 or 990-EZ) (2013) Page 2 Employer identification number Name of the organization Mongabay Org Corp 45-3714703 Acate Amazon Conservation received \$20,725 to launch its program to help the Matses tribe in the Peruvian Amazon protect their rainforest homeland and traditional knowledge. Acate's programs include sustainable indigenous agriculture, preserving traditional plant knowledge, and creating sustainable livelihoods for the Matses people. Form 990, Part V, Line 4b - Financial Accounts in Foreign Countries Indonesia Form 990, Part VI, Line 8b - Documentation by Committee Explanation The organization not have any committees which have the authority to act on behalf of the governing body. rocess to Review Form 990 Form 990 is reviewed by the executive director after it is prepared by the independent accountant. The 990 is then sent to the Board of Directors for comment and approval prior to submission. Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy If there were potential conflicts of interest, the situation would be discussed by the Board of Directors and resolved.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation

The organization's governing and financial documents are on their website.

All documents will be made available to the public upon request.

Form 990, Part IX, Line 11g - Other Fees for Services

Federal Statements

4/7/2014 5:45 PM

FYE: 12/31/2013

Form 990, Part IX, Line 11g - Other Fees for Service (Non-employee)

| Description | Total Expenses | Program Service | agement & General | -und aising |
|-------------------------|-----------------------|------------------------|----------------------|----------------|
| Independent contractors | \$ 114,987 | \$ 110,764 | \$ 3,801 | \$ 422 |
| Total | \$ 114,987 | \$ 110,764 | \$ 3,801 | \$ 422 |

FYE: 12/31/2013

Federal Statements

gabay Org Corp 4/7/2014 5:45 PM

Schedule A, Part II, Line 1(e)

| Description | Amount |
|-----------------------------------|---------------|
| Other | \$ 85,666 |
| The Climate and Land Use Alliance | |
| Cash Contribution | 160,500 |
| The Celedon Group LLC | |
| Cash Contribution | 110,628 |
| Gordon & Betty Moore Foundation | |
| Cash Contribution | 30,250 |
| Overbrook Foundation | |
| Cash Contribution | 50,000 |
| Packard Foundation | |
| Cash Contribution | 60,000 |
| Rockefeller Foundation | |
| Cash Contribution | 30,250 |
| Total | \$ 527,294 |

Federal Statements

4/7/2014 5:45 PM

FYE: 12/31/2013

Schedule A, Part II, Line 5 - Excess Gifts

| Donor Name | Total | Excess |
|---------------------------------|---------------|---------------|
| Climate and Land Use Alliance | \$ 160,500 | \$ 148,108 |
| The Celedon Group LLC | 186,670 | 174,278 |
| Gordon & Betty Moore Foundation | 30,250 | 17,858 |
| Overbrook Foundation | 50,000 | 37,608 |
| Packard Foundation | 60,000 | 47,608 |
| Rockefeller Foundation | 30,250 | 17,858 |
| Total | \$ 517,670 | \$ 443,318 |

Federal Statements

4/7/2014 5:45 PM

FYE: 12/31/2013

Schedule A, Part II, Line 9(e)

| Description | Amount | |
|---------------------------------|---------------------|--|
| Advertising Less: Deductions | \$ 394 -1,000 | |
| Total | \$ -606 | |

Schedule A, Part II, Line 12

| Description | | mount |
|---|----|-------|
| Tax-exempt Interest on Savings and Temporary Cash Investments | \$ | 530 |
| Total | \$ | 530 |

034

MAIL TO:

Registry of Charitable Trusts P.O. Box 903447 Sacramento, CA 94203-4470 Telephone: (916) 445-2021

WEB SITE ADDRESS:

http://ag.ca.gov/charities/

ANNUAL REGISTRATION RENEWAL FEE REPORT TO ATTORNEY GENERAL OF CALIFORNIA

Sections 12586 and 12587, California Government Code 11 Cal. Code Regs. sections 301-307, 311 and 312

Failure to submit this report annually no later than four months and fifteen days after the end of the organization's accounting period may result in the loss of tax exemption and the assessment of a minimum tax of \$800, plus interest, and/or fines or filing penalties as defined in Government Code section 12586.1. IRS extensions will be honored.

| | | 1 | | | |
|--|--|--------------------|--|-------------|---------------------------|
| State Charity Registration Number 185794 | <u>1</u> | Check Cha | if: ange of address | | |
| Mongabay Org Corp | | | | | |
| Name of Organization | | L Am | ended report | | |
| PO Box 0291 Address (Number and Street) | | Corporate | e or Organization No. 342 | 0861 | |
| Menlo Park | CA 94062 | | | | |
| City or Town, State and ZIP Code | | Federal E | mployer I.D. No. <u>45-371</u> | L4703 | |
| ANNUAL REGISTRA | TION RENEWAL FEE SCHEDULE (11 Ca | I. Code R | egs. sections 301-307, 311 ar | nd 312) | |
| Make | Check Payable to Attorney General's Re | gistry of | Charitable Trusts | | |
| Gross Annual Revenue Fee | Gross Annual Revenue | <u>Fee</u> | Gross Annual Revenue | | <u>Fee</u> |
| Less than \$25,000 0 Between \$25,000 and \$100,000 \$25 | Between \$100,001 and \$250,000 Between \$250,001 and \$1 million | \$50 \$75 | Between \$1,000,001 and \$ Between \$10,000,001 and \$ Greater than \$50 million | | \$150 1 \$225 \$300 |
| PART A - ACTIVITIES | | | | | |
| For your most recent full accountin | g period (beginnin $91/01/13$ endi | ng 12/ | 31/13) list: | | |
| Gross annual revenue\$5 | 28,218 Total assets \$ 2 | 83,36 | 4 | | |
| PART B - STATEMENTS REGARI | ING ORGANIZATION DURING | HE PER | THIS REPORT | | |
| Note: If you answer "yes" to any of the | | | | | for each |
| response. Please review RRF-1 in | structions for information required. | | | | |
| | | | | Yes | No |
| | cts, loans, leases or other financial transactions between entity in which any such officer, director or trustee had ar | • | 40 | x | |
| director of trustee trefet effect directly of with all | chity in which any such officer, director of trustee had an | iy iirianolar iiri | Stmt 1 | | |
| 2. During this reporting period, was there any theft, et | mbezzlement, diversion or misuse of the organization's c | haritable prop | or funds? | | x |
| 3. During this reporting period, did non-program expe | nditures exceed 50% of gross revenues? | | | | х |
| During this reporting period, were any organization Internal Revenue Service, attach a copy. | funds used to pay any penalty, fine or judgment? If you | filed a Form 4 | 720 with the | | х |
| 5. During this reporting period, were the services of a | commercial fundraiser or fundraising counsel for charita | ble purposes ι | used? If "yes," | | х |
| provide an attachment listing the name, address, a | · ' ' | | | | |
| During this reporting period, did the organization re the agency, mailing address, contact person, and t | eceive any governmental funding? If so, provide an attact elephone number. | ment listing th | ne name of Stmt 2 | X | |
| During this reporting period, did the organization he number of raffles and the date(s) they occurred. | old a raffle for charitable purposes? If "yes," provide an a | ttachment indi | | | х |
| • | program? If "yes," provide an attachment indicating whet | ner the progra | m is operated | | v |
| · | s with a commercial fundraiser for charitable purposes. | , .5 | | | Х |
| Did your organization have prepared an audited fin reporting period? | ancial statement in accordance with generally accepted | accounting pri | nciples for this | | Х |
| Organization's area code and telephone nur | mbe i650-260-4018 | | | | |
| Organization's e-mail address tiffan | y@mongabay.org | | | | |
| I declare under penalty of perjury that I h belief, it is true, correct and complete. | ave examined this report, including acc | ompanyin | g documents, and to the bes | st of my kn | owledge |
| | Rhett A. Butler | P | resident | | |
| Signature of authorized officer | Printed Name | | Title | Dat | e |

California Statements

4/7/2014 5:45 PM

FYE: 12/31/2013

Statement 1 - Form RRF-1, Part B, Line 1 - Financial Transactions

Description

The Celedon Group LLC contributed \$110,628 to the organization in 2013. Mr. Rhett A. Butler, Executive Director, Chair of the Board of Directors from January through October 2013, and Secretary of the Board of Directors from November through December 2013, owns 100% of The Celedon Group LLC.

Statement 2 - Form RRF-1, Part B, Line 6 - Governmental Funding

Description

Contact: Sylvie Young, Assistant Cultural Attache, Public Affairs Section, U.S. Embassy Jakarta J1. Medan Merdeka Selatan No. 3 - 5 Jakarta 10110, Indonesia +62 21 3435 9556 \$10,000

Form

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private 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 **2**013 Open to Public Inspection

| | | alendar year, or tax year beginning , and ending | | | |
|-----------------------------|----------------------|--|---------------------|--------------------|--------------------------------|
| | Check if applicable: | C Name of organization | | D Emplo | yer identification number |
| | Address change | Mongabay Org Corp | | | |
| | Name change | Doing Business As Mongabay.org | | | 3714703 |
| \Box | Initial return | Number and street (or P.O. box if mail is not delivered to street address) | Room/suite | | one number |
| \equiv | | PO Box 0291 | | 650 | -260-4018 |
| | Terminated | City or town, state or province, country, and ZIP or foreign postal code | | | |
| | Amended return | Menlo Park CA 94062 | | G Gross rec | eipts\$ 528,218 |
| | Application pending | F Name and address of principal officer: | III-) le this e ar | oun roturn for a | subordinates Yes X No |
| ш | | Rhett Butler | H(a) Is this a gr | oup return tor s | |
| | | PO Box 0291 | H(b) Are all sub | ordinates incl | luded? Yes No |
| | | Menlo Park CA 94062 | If "No, | " attach a list. | (see instructions) |
| <u> </u> | Tax-exempt status: | X 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or 527 | | | |
| J | Website: ► W | ww.mongabay.org | H(c) Group exe | mption numb | er 🕨 |
| K | Form of organization | : X Corporation Trust Association Other L Ye | ear of formation: 2 | 011 | M State of legal domicile: CA |
| P | art I Su | ımmary | | | |
| | 1 Briefly de | escribe the organization's mission or most significant activities: | | | |
| ce | | Schedule O | | | |
| lan | | | | | |
| Governance | | | | | |
| Š | 2 Check th | is box if the organization discontinued its operations or disposed of more than | 25% of its net | assets. | |
| ø | | of voting members of the governing body (Part VI, line 1a) | | | 12 |
| es | | | | | 8 |
| Activities | | nber of individuals employed in calendar year 2013 (Part V, line 2a) | | | 4 |
| Ċţi | | nber of volunteers (estimate if necessary) | | 6 | 200 |
| ٩ | | elated business revenue from Part VIII, column (C), line 12 | | 7a | 0 |
| | | lated business taxable income from Form 990-T, Jine 34 | | . 7b | 0 |
| | | I \rott ('/\D | Prior Yea | | Current Year |
| <u>o</u> | 8 Contribu | tions and grants (Part VIII, line Ih | 92 | 2,319 | 527,294 |
| enc | 9 Program | service revenue (Part VIII, line 2g) | | | 0 |
| Revenue | | ent income (Part VIII, column (A), lines 3, 4, and 7d) | | | 530 |
| œ | 11 Other rev | venue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) | | | 394 |
| | 12 Total rev | enue – add lines 8 through 11 (must equal Part VIII, column (A), line 12) | 92 | 2,319 | 528,218 |
| | 13 Grants a | nd similar amounts paid (Part IX, column (A), lines 1–3) | | | 48,343 |
| | 14 Benefits | paid to or for members (Part IX, column (A), line 4) | | | 0 |
| es | 15 Salaries, | other compensation, employee benefits (Part IX, column (A), lines 5–10) | | | 41,412 |
| xpenses | 16aProfession | other compensation, employee benefits (Part IX, column (A), lines 5–10) onal fundraising fees (Part IX, column (A), line 11e) draising expenses (Part IX, column (D), line 25) ▶ 8,372 | | | 0 |
| χbe | b Total fun | draising expenses (Part IX, column (D), line 25) ▶ 8,372 | | | |
| Ш | 17 Other ex | penses (Part IX, column (A), lines 11a-11d, 11f-24e) | | 3,996 | 158,465 |
| | 18 Total exp | penses. Add lines 13–17 (must equal Part IX, column (A), line 25) | 88 | 3,996 | 248,220 |
| | 19 Revenue | less expenses. Subtract line 18 from line 12 | | 3,323 | 279,998 |
| Sor | | | Beginning of Cu | | End of Year |
| Net Assets or Fund Balances | 20 Total ass | ets (Part X, line 16) | | 3,323 | 283,364 |
| et A | 21 Total liab | ilities (Part X, line 26) | | 0 | 0 2 2 2 4 |
| | | ts or fund balances. Subtract line 21 from line 20 | | 3,323 | 283,364 |
| ***** | | gnature Block | | | _ |
| | • | perjury, I declare that I have examined this return, including accompanying schedules and sta complete. Declaration of preparer (other than officer) is based on all information of which prepares | | | my knowledge and belief, it is |
| - 11 | ue, correct, and t | omplete. Declaration of preparer (other than officer) is based on all illiomation of which preparer | irei iias arīy kiic | wieuge. | |
| ~ : | . | ignature of officer | | Date | |
| Sig | j., ; | | L | Date | |
| He | _ | Rhett A. Butler President | dent | | |
| | | ype or print name and title | D-1- | | DTIN |
| Pai | `` | e preparer's name Preparer's signature | Date | Check | if PTIN |
| | naror | D. Heffernan, Ltd. | ' | /14 self-em | ployed P00949190 |
| | parer Firm's na | | F | irm's EIN | _ |
| USE | Only | 6650 Horseshoe Bend Dr | | | ECO 4EO 4E10 |
| | Firm's ac | - | F | hone no. | 763-478-6518 |
| | | ss this return with the preparer shown above? (see instructions) | | | X Yes No |

| Part III Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any | / line in this Part III |
|--|--|
| Briefly describe the organization's mission: | inte in this i art in |
| See Schedule O | |
| | |
| | |
| 2 Did the organization undertake any significant program services during the yea | □ Vaa ♥ Na |
| prior Form 990 or 990-EZ? If "Yes," describe these new services on Schedule O. | Yes X No |
| 3 Did the organization cease conducting, or make significant changes in how it co | onducts, any program |
| | Yes X No |
| If "Yes," describe these changes on Schedule O.Describe the organization's program service accomplishments for each of its th | ree largest program services, as measured by |
| expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report | |
| the total expenses, and revenue, if any, for each program service reported. | |
| The Indonesia Program ("Mongabay-Indones transparency and boosting public awarene Indonesia. Mongabay-Indonesia has a core correspondents in 16 cities across Indonesia for \$132,501 or 54% of Mongabay.org's sp. Mongabay-Indonesia made outstanding programment. | ess around environmental issues in e team of four on Java and nesia. Mongabay-Indonesia accounted pending in 2013. |
| 1,000 stories. The number of visitors to reaching 580,814 for the year. Our social with our Twitter followers climbing 269% increasing 240% to 8,500. These numbers 4b (Code:)(Expenses \$ 58,501 including grants of \$ Mongabay.org aims to raise awareness about relating to forests and other ecosystems special reporting initiatives. Mongabay facilitate detailed reporting on key is the communities that depend on it. Our sprogram enables professional journalists specific issue over a three-month period published on Mongabay under a Creative Cencourages, re-publishing elsewhere. The Initiatives program is that it enables he on an environmental issue that may be otherwise. | the site rose 193% over 2012, al media presence also grew in 2013, a to 5,900 and our Facebook fans exceeded our targets. 46,705) (Revenue \$) but social and environmental issues a. These are the program areas: corg was founded, in part, to sues affecting the environment and Expecial Reporting Initiatives (SRI) a to conduct in-depth reporting on a d. The resulting articles are Commons license that allows for, and a value of the Special Reporting high-quality and detailed reported cherwise overlooked or underreported |
| 4c (Code:) (Expenses \$ 32,880 including grants of \$ Special Reporting Initiatives Program |) (Revenue \$) |
| The Special Reporting Initiatives (SRI) prize that offers journalists opportunit investigative reporting around key envir | ies to do in-depth and |
| Our focus in 2013 was developing the corthe infrastructure, and launching the fi August 2013. The first winner was select were announced by the end of the year. | rst prize, which was announced in ced in November. Four more prizes |
| | |
| 4d Other program services. (Describe in Schedule O.) (Expenses \$ including grapts of\$ |) (Revenue \$ |
| (Expenses \$ including grants of\$ 4e Total program service expenses ▶ 223,890 |) (November y |

Form 990 (2013) Mongabay Org Corp
Part IV Checklist of Required Schedules

| | | | Yes | No |
|-----|--|-----|-----|----|
| 1 | Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," | | | |
| | complete Schedule A | 1 | Х | |
| 2 | Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? | 2 | Х | |
| 3 | Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to | | | |
| | candidates for public office? If "Yes," complete Schedule C, Part I | 3 | | Х |
| 4 | Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) | | | |
| | election in effect during the tax year? If "Yes," complete Schedule C, Part II | 4 | | X |
| 5 | Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, | | | |
| | assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, | | | |
| | Part III | 5 | | Х |
| 6 | Did the organization maintain any donor advised funds or any similar funds or accounts for which donors | | | |
| | have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If | | | |
| _ | "Yes," complete Schedule D, Part I | 6 | | X |
| 7 | Did the organization receive or hold a conservation easement, including easements to preserve open space, | l _ | | 37 |
| _ | the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II | 7 | | X |
| 8 | Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," | | | 37 |
| _ | complete Schedule D, Part III | 8 | | X |
| 9 | Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a | | | |
| | custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or | | | 37 |
| | debt negotiation services? If "Yes," complete Schedule D, Part IV | 9 | | Х |
| 10 | Did the organization, directly or through a related organization, hold assets in temporarily restricted | 40 | | ₹. |
| | endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V | 10 | | X |
| 11 | If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, | | | |
| _ | VII, VIII, IX, or X as applicable. | | | |
| а | Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," | 110 | | х |
| b | complete Schedule D, Part VI Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more | 11a | | Λ |
| b | of its total assets reported in Part X, line 167 If "Yes," complete Schedule D, Part VII | 11b | | х |
| С | Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more | 110 | | 21 |
| · | of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII | 11c | | х |
| d | Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets | | | |
| - | reported in Part X, line 16? If "Yes," complete Schedule D, Part IX | 11d | | X |
| е | Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X | 11e | | X |
| f | Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses | | | |
| | the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X | 11f | | х |
| 12a | Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete | | | |
| | Schedule D, Parts XI and XII | 12a | | Х |
| b | Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if | | | |
| | the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional | 12b | | X |
| 13 | Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E | 13 | | X |
| 14a | Did the organization maintain an office, employees, or agents outside of the United States? | 14a | X | |
| b | Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, | | | |
| | fundraising, business, investment, and program service activities outside the United States, or aggregate | | | |
| | foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV | 14b | X | |
| 15 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or | | | |
| | for any foreign organization? If "Yes," complete Schedule F, Parts II and IV | 15 | | X |
| 16 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other | | | |
| | assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV | 16 | | X |
| 17 | Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on | | | |
| | Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) | 17 | | X |
| 18 | Did the organization report more than \$15,000 total of fundraising event gross income and contributions on | | | |
| | Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II | 18 | | X |
| 19 | Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? | | | |
| | If "Yes," complete Schedule G, Part III | 19 | | X |
| 20a | Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H | 20a | | Х |
| b | If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? | 20b | | |

Form 990 (2013) Mongabay Org Corp

Part IV Checklist of Required Schedules (continued)

| 21 | Did the experiention report more than CF 000 of greate another arrival and the experience of the exper | | Yes | No |
|----|--|--------|-------|----------|
| 1 | Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II | 21 | х | |
| 2 | Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States | | Λ | |
| _ | on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III | 22 | | Х |
| 3 | Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the | | | |
| 3 | organization's current and former officers, directors, trustees, key employees, and highest compensated | | | 1 |
| | employees? If "Yes," complete Schedule J | 23 | | Х |
| 40 | Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than | | | Λ |
| 4a | \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b | | | 1 |
| | through 24d and complete Schedule K. If "No," go to line 25a | 24a | | Х |
| b | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? | 24a | | |
| | Did the organization mivest any proceeds of tax-exempt bonds beyond a temporary period exception: Did the organization maintain an escrow account other than a refunding escrow at any time during the year | | | |
| С | | 24c | | l |
| a | to defease any tax-exempt bonds? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? | 24c | | |
| | | 240 | | |
| эа | Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction | 25- | | Х |
| L | with a disqualified person during the year? If "Yes," complete Schedule L, Part I | 25a | | |
| D | Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior | | | l |
| | year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? | 051 | | v |
| _ | If "Yes," complete Schedule L, Part I | 25b | | Х |
| 6 | Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any | | | l |
| | current or former officers, directors, trustees, key employees, highest compensated employees, or | | | ٠, |
| _ | disqualified persons? If so, complete Schedule L, Part II | 26 | | Х |
| 7 | Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, | | | l |
| | 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 |
| 8 | 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) | | | |
| а | A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV | 28a | | X |
| b | A family member of a current or former officer, director, trustee, or key employee? If Yes," complete | | | 1 |
| | Schedule L, Part IV | 28b | Х | <u> </u> |
| С | An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) | | | 1 |
| | was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV | 28c | Х | <u> </u> |
| 9 | Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M | 29 | | X |
| 0 | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified | | | 1 |
| | conservation contributions? If "Yes," complete Schedule M | 30 | | X |
| 1 | Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, | | | l |
| | Part I | 31 | | X |
| 2 | Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," | | | l |
| | complete Schedule N, Part II | 32 | | X |
| 3 | Did the organization own 100% of an entity disregarded as separate from the organization under Regulations | | | l |
| | sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I | 33 | | X |
| 4 | Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, | | | |
| | or IV, and Part V, line 1 | 34 | | X |
| 5a | 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 | | l |
| 6 | Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable | | | |
| | related organization? If "Yes," complete Schedule R, Part V, line 2 | 36 | | Х |
| 7 | 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, | | | l |
| | | 37 | | х |
| 8 | Part VI Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and | ······ | | |
| - | 19? Note. All Form 990 filers are required to complete Schedule O | 38 | х | l |
| | The state of the s | | n 990 | (00 |

Form 990 (2013) Mongabay Org Corp 45-37
Part V Statements Regarding Other IRS Filings and Tax Compliance

| | Check if Schedule O contains a response or note to any line in this Pa | art V | | | | <u></u> | . Ш |
|---------|---|------------|----------------------------|------------|------------|------------------------|-----|
| | | 1 1 | | | | Yes | No |
| 1a | Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable | 1a | 4 | | | | |
| b | Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable | _1b | 0 | | | | |
| С | Did the organization comply with backup withholding rules for reportable payments to vendors an | ıa | | | 4 - | Х | |
| 2- | reportable gaming (gambling) winnings to prize winners? | | | | 1c | ^ | |
| Za | Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax | 2- | 4 | | | | |
| h | Statements, filed for the calendar year ending with or within the year covered by this return | 2a | | | 2b | х | |
| b | Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) | | o: | | ZU | 22 | |
| 3a | Did the organization have unrelated business gross income of \$1,000 or more during the year? | 110113) | | | 3a | | х |
| b | If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Sched | Iule O | | | 3b | | |
| 4a | At any time during the calendar year, did the organization have an interest in, or a signature or ot | | thority | | | | |
| | over, a financial account in a foreign country (such as a bank account, securities account, or other | | - | | | | |
| | account)? | | | | 4a | х | |
| b | If "Yes," enter the name of the foreign country: ▶ Indonesia | | | | | | |
| | See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Finan | ncial A | counts. | | | | |
| 5a | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year | ar? | | | 5a | | X |
| b | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter tra | nsacti | on? | | 5b | | X |
| С | If "Yes" to line 5a or 5b, did the organization file Form 8886-T? | | | | 5c | | |
| 6a | Does the organization have annual gross receipts that are normally greater than \$100,000, and or | did the | | | | | |
| | organization solicit any contributions that were not tax deductible as charitable contributions? | | | | 6a | | X |
| b | If "Yes," did the organization include with every solicitation an express statement that such contril | butions | s or | | | | |
| _ | gifts were not tax deductible? | | | | 6b | | |
| 7 | Organizations that may receive deductible contributions under section 170(c). | . | | | | | |
| а | Did the organization receive a payment in excess of \$75 made partly as a contribution and partly and services provided to the payor? | ior go | ous | | 70 | | х |
| b | If "Yes," did the organization notify the donor of the value of the goods or services provided? | | 7 · · · · · · · · · | | 7a 7b | | |
| C | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which | it was | | | 7.0 | | |
| · | required to file Form 8282? | | | | 7c | | х |
| d | If "Yes," indicate the number of Forms 8282 filed during the year | 7d | | | . • | | |
| е | Did the organization receive any funds, directly or indirectly, to pay premiums on a personal bene | efit con | tract? | | 7e | | Х |
| f | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit of | | | | 7f | | Х |
| g | If the organization received a contribution of qualified intellectual property, did the organization file | e Forn | n 8899 as r | equired? | 7g | | X |
| h | If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization | anizatio | on file a Fo | rm 1098-C? | 7h | | X |
| 8 | Sponsoring organizations maintaining donor advised funds and section 509(a)(3) support | ing | | | | | |
| | organizations. Did the supporting organization, or a donor advised fund maintained by a sponsor | _ | | | | | |
| | organization, have excess business holdings at any time during the year? | | | | 8 | | |
| 9 | Sponsoring organizations maintaining donor advised funds. | | | | _ | | |
| a | Did the organization make any taxable distributions under section 4966? | | | | 9a | \vdash | - |
| b 10 | | | | | 9b | | |
| 10 | Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12 | 10a | | | | | |
| a b | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities | 10a | | | | | |
| 11 | Section 501(c)(12) organizations. Enter: | .00 | | | | | |
| а | Gross income from members or shareholders | 11a | | | | | |
| b | | | | | | | |
| | against amounts due or received from them.) | 11b | | | | | |
| 12a | Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of | Form 1 | 041? | | 12a | | |
| b | If "Yes," enter the amount of tax-exempt interest received or accrued during the year | 12b | | | | | |
| 13 | Section 501(c)(29) qualified nonprofit health insurance issuers. | | | | | | |
| а | | | | | 13a | | |
| | Note. See the instructions for additional information the organization must report on Schedule O. | | | | | | |
| b | , | ا ا | | | | | |
| | the organization is licensed to issue qualified health plans | 13b | | | | | |
| | Enter the amount of reserves on hand | 13c | | | 110 | | v |
| | Did the organization receive any payments for indoor tanning services during the tax year? If "Yes." has it filed a Form 720 to report these payments? If "No." provide an explanation in Sche | | | | 14a 14b | $\vdash \vdash \vdash$ | Х |
| IJ | - ii - i oo, i iido ii iilod a i oiiii i 20 to igpoit tiigog paviiigitio: II INO, DIOVIUG ali Gadialidii III Oblit | Judie | | | | | 1 |

Form 990 (2013) Mongabay Org Corp 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 12 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. Enter the number of voting members included in line 1a, above, who are independent ______ 8 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? X Did the organization delegate control over management duties customarily performed by or under the direct 3 supervision of officers, directors, or trustees, or key employees to a management company or other person? 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders? 6 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? b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? Х Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: The governing body? 8a b Each committee with authority to act on behalf of the governing body? X 8b 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 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? X 10a b If "Yes," did the organization have written policies and affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b X Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990. **12a** Did the organization have a written conflict of interest policy? If "No," go to line 13 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done X 12c Did the organization have a written whistleblower policy? X 13 13 Did the organization have a written document retention and destruction policy? 14 14 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official X 15a Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? Х 16a 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? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶ CA 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. X Own website X Another's website X Upon request Other (explain in Schedule O) 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. State the name, physical address, and telephone number of the person who possesses the books and records of the 15 Clinton St., #1 organization: ▶ Rhett A Butler

650-315-5573

CA 94062

Redwood City

Form 990 (2013) Mongabay Org Corp

45-3714703

Page **7**

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

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

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

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

X Check this box if neither the organization nor any related organizations compensated any current officer, director, or trustee.

| (A) Name and Title | (B) Average hours per week (list any hours for | offi | k, unle | heck ss pe nd a d | ition more rson | than one is both ar or/trustee | 1 | (D) Reportable compensation from the organization | (E) Reportable compensation from related organizations (W-2/1099-MISC) | (F) Estimated amount of other compensation from the |
|------------------------------|---|--------------------------------|-----------------------|-------------------------|-----------------------|--------------------------------------|---|---|---|---|
| | related organizations below dotted line) | Individual trustee or director | Institutional trustee | Officer | Key employee | Highest compensated employee | 1 | (W-2/1099-MISC) | (W 2 1000 MIGO) | organization and related organizations |
| (1)Rhett A. Butler | | | | | | | | | | |
| ED/Chair to Oct/Sec. | 40.00 | X. | | x | | | | | 0 | 0 |
| (2) Nancy Abraham | 1 00 | | | 7 | Γ | Γ+ | | | Y | |
| Director | 0.00 | X | | 1 | | | | 0 | • о | 0 |
| (3)Alyson Blume | | | | | | | | | | |
| Dir/Chair Oct to Dec | 1.00 0.00 | x | | x | | | | 0 | 0 | 0 |
| (4) Penn A. Butler | | | | | | | | | | |
| Binachan | 1.00 | 3,5 | | | | | | 0 | | |
| Director (5) Brodie Ferguson | 0.00 | X | | | | | | 0 | 0 | 0 |
| (3) DI CAIC I CI GABOII | 1.00 | | | | | | | | | |
| Director/Chairman | 0.00 | X | | X | | | | 0 | 0 | 0 |
| (6)Triona Gogarty | 1 00 | | | | | | | | | |
| Director | 1.00 0.00 | x | | | | | | 0 | 0 | 0 |
| (7) Christopher Her | | | | | | | | | | |
| | 1.00 | | | | | | | | | |
| Director/Treasurer | 0.00 | X | | X | | | | 0 | 0 | 0 |
| (8) Tim Kelley | 1.00 | | | | | | | | | |
| Director | 0.00 | x | | | | | | 0 | 0 | 0 |
| (9)William F. Laur | | | | | | | | | | |
| | 1.00 | | | | | | | | | |
| Director | 0.00 | X | | | | | | 0 | 0 | 0 |
| (10)Marion O'Leary | 1 00 | | | | | | | | | |
| Director | 1.00 0.00 | X | | | | | | 0 | 0 | 0 |
| (11)Peter Riggs | 3.00 | | | | | | + | | | |
| | 1.00 | | | | | | | | | |
| Director DAA | 0.00 | X | | | | | | 0 | 0 | Form 990 (2013) |

| Part VII Section A. Officer (A) Name and title | (B) (C) Average hours per week (list any hours for | | | | | | one n an eee) | (D) Reportable compensation from the organization | (E) Reportable compensation from related organizations (W-2/1099-MISC) | (F) Estimated amount of other compensation from the |
|--|--|--------------------------------|-----------------------|---------------|--------------|---------------------------------|---------------------|--|---|---|
| | related organizations below dotted line) | Individual trustee or director | Institutional trustee | Officer | Key employee | Highest compensatec employee | Former | (W-2/1099-MISC) | | organization and related organizations |
| (12)Susan Sanchez | 1.00 | | | | | | | | | |
| Director (13)Griff Baker | 0.00 | X | | | | | | 0 | 0 | 0 |
| Director | 1.00 | х | | | | | | 0 | 0 | 0 |
| (14) | | | | | | | | | | |
| (15) | | | | | | | | | | |
| | | | | | | | | | | |
| (16) | | | | | | | | | | |
| (17) | | | | | | | | | | |
| (18) | | | | | | | | | | |
| | | | | | Ç. | L | 4 | $\bigcirc \bigcirc \bigcirc$ | V | |
| (19) | | | C | 1 | | L - | | UUP | Y | |
| 1b Sub-total | | <u> </u> | | | | L | > | | | |
| c Total from continuation sho d Total (add lines 1b and 1c) | | | | | | | | | | |
| Total (add lines to and 1c) Total number of individuals (in reportable compensation from 1 c) | including but no | t lim | ited | | | | d ab | pove) who received more t | than \$100,000 in | |
| 3 Did the organization list any temployee on line 1a? If "Yes | | | | | | | | | | Yes No |
| 4 For any individual listed on line organization and related organization. | ne 1a, is the su anizations great | m of er th | repo an \$ | ortab 3150 | le co | ompe)? If " | ensa 'Yes | ation and other compensa s," complete Schedule J fo | r such | |
| individual5 Did any person listed on line for services rendered to the or | 1a receive or a | ccru "Yes | e co | mpe | nsat | ion f | rom | any unrelated organization | on or individual | 5 X |
| Section B. Independent Contract | tors | | | | | | | | | |
| Complete this table for your factoring compensation from the organization. | nization. Report | con | sate | satio | n fo | r the | nt co cal | endar year ending with or | within the organization's | |
| Name and | (A) I business address | | | | | | | Descrip | (B) tion of services | (C) Compensation |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| 2 Total number of independent received more than \$100,000 | t contractors (in | cludi on fi | ng b | ut no | ot lir | nited nizat | to to | those listed above) who | 0 | |

| • | | (A) Total revenue | (B) Related or exempt function revenue | (C) Unrelated business revenue | (D) Revenue excluded from tax under sections 512-514 |
|---------------------|---|----------------------|--|---|--|
| 1a b c c d de f f g | Federated campaigns 1a | | | | |
| b | Membership dues 1b | | | | |
| С | Fundraising events 1c | | | | |
| ď | Related organizations 1d | | | | |
| е | Government grants (contributions) 1e | | | | |
| f | All other contributions, gifts, grants, | | | | |
| | and similar amounts not included above 1f 527,294 | | | | |
| g | Noncash contributions included in lines 1a-1f: \$ | | | | |
| h | Total. Add lines 1a–1f | 527,294 | | | |
| | Busn. Code | | | | |
| 2a | | | | | |
| b | | | | | |
| С | | | | | |
| d | | | | | |
| е | | | | | |
| f | All other program service revenue | | | | |
| g | Total. Add lines 2a–2f | | | | |
| | Investment income (including dividends, interest, | | | | |
| | and other similar amounts) | 530 | 530 | | |
| 4 | Income from investment of tax-exempt bond proceed | | | | |
| 5 | Royalties | | | | |
| | (i) Real (ii) Personal | | | | |
| 6a | Gross rents | | | | |
| b | Less: rental exps. | | | | |
| С | Rental inc. or (loss) | | | | |
| d | Net rental income or (loss) | | / I I | | |
| 7a | Gross amount from (i) Securities (ii) Other | | | | |
| | sales of assets other than inventory | | | | |
| b | Less: cost or other | | | | |
| | basis & sales exps. | | | | |
| С | Gain or (loss) | | | | |
| | Net gain or (loss) | | | | |
| | Gross income from fundraising events | | | | |
| | (not including C | | | | |
| | of contributions reported on line 1c). | | | | |
| | See Part IV, line 18 a | | | | |
| h | Less: direct expenses b | | | | |
| | Net income or (loss) from fundraising events | | | | |
| | Gross income from gaming activities. | | | | |
| Ja | See Part IV, line 19 | | | | |
| h | Less: direct expenses b | | | | |
| | Net income or (loss) from gaming activities | | | | |
| | Gross sales of inventory, less | | | | |
| IVa | | | | | |
| h | returns and allowances a Less: cost of goods sold b | | | | |
| | | | | | |
| - c | Net income or (loss) from sales of inventory Miscellaneous Revenue Busn. Code | | | | |
| | | 394 | | | 394 |
| 44. | 3 | 334 | | | 394 |
| | Advertising | T T | Į. | | |
| b | | | | | |
| b b | | | | | |
| b c d | | 394 | | | |

Form 990 (2013) Mongabay Org Corp Part IX Statement of Functional Expenses

| Sect | ion 501(c)(3) and 501(c)(4) organizations must Check if Schedule O contains a resp | | | complete column (A). | X |
|----------|---|-----------------------|------------------------------|--------------------------------------|--------------------------|
| | not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII. | (A) Total expenses | (B) Program service expenses | (C) Management and general expenses | (D) Fundraising expenses |
| 1 | Grants and other assistance to governments and | | | | |
| | organizations in the U.S. See Part IV, line 21 | 48,343 | 48,343 | | |
| 2 | Grants and other assistance to individuals in | | | | |
| | the U.S. See Part IV, line 22 | | | | |
| 3 | Grants and other assistance to governments, | | | | |
| | organizations, and individuals outside the | | | | |
| | U.S. See Part IV, lines 15 and 16 | | | | |
| 4 | Benefits paid to or for members | | | | |
| 5 | Compensation of current officers, directors, | | | | |
| | trustees, and key employees | | | | |
| 6 | Compensation not included above, to disqualified | | | | |
| | persons (as defined under section 4958(f)(1)) and | | | | |
| | persons described in section 4958(c)(3)(B) | 20 4== | 21 112 | | |
| 7 | Other salaries and wages | 38,657 | 31,110 | 5,391 | 2,156 |
| 8 | Pension plan accruals and contributions (include | | | | |
| - | section 401(k) and 403(b) employer contributions) | | | | |
| 9 | Other employee benefits | 0 855 | 0.015 | 204 | 1 - 4 |
| 10 | Payroll taxes | 2,755 | 2,217 | 384 | 154 |
| 11 | Fees for services (non-employees): | | | | |
| _ | Management | | | | |
| b | <u> </u> | 1,150 | | 1,150 | |
| 4 | Accounting Lobbying | 1,150 | | 1,130 | |
| | Professional fundraising services. See Part V, line 17 | (1 | | | |
| f | · · · · · · · · · · · · · · · · · · · | ratt-t | | Y | |
| g | Other. (If line 11g amount exceeds 10% of line 25, column | lait i | | | |
| · | (A) amount, list line 11g expenses on Schedule O.) | 114,987 | 110,764 | 3,801 | 422 |
| 12 | Advertising and promotion | | | | |
| 13 | Office expenses | 11,302 | 8,439 | 2,511 | 352 |
| 14 | Information technology | | | | |
| 15 | Royalties | | | | |
| 16 | Occupancy | 1,800 | 1,260 | 360 | 180 |
| 17 | Travel | 27,759 | 21,757 | 894 | 5,108 |
| 18 | Payments of travel or entertainment expenses | | | | |
| 40 | for any federal, state, or local public officials | | | | |
| 19 | Conferences, conventions, and meetings | | | | |
| 20 | Interest Payments to affiliates | | | | |
| 21 22 | Depreciation, depletion, and amortization | | | | |
| 23 | Insurance | 1,467 | | 1,467 | |
| 24 | Other expenses. Itemize expenses not covered | 1,10, | | ± / ± 0 / 1 | |
| | above (List miscellaneous expenses in line 24e. If | | | | |
| | line 24e amount exceeds 10% of line 25, column | | | | |
| | (A) amount, list line 24e expenses on Schedule O.) | | | | |
| а | | | | | |
| b | | | | | |
| С | | | | | |
| d | | | | | |
| е | All other expenses | | | | |
| 25 | Total functional expenses. Add lines 1 through 24e | 248,220 | 223,890 | 15,958 | 8,372 |
| 26 | Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶☐ if | | | | |
| DAA | following SOP 98-2 (ASC 958-720) | | | | Form 990 (2013) |

| | art / | Check if Schedule O contains a response or note to any line in this Part X | | | |
|-----------------------------|-------|---|---|-----|---|
| | | Ве | (A) ginning of year | | (B) End of year |
| | 1 | Cash—non-interest bearing | 3,323 | 1 | 283,364 |
| | 2 | Savings and temporary cash investments | | 2 | |
| | 3 | Pledges and grants receivable, net | | 3 | |
| | 4 | Accounts receivable, net | | 4 | |
| | 5 | Loans and other receivables from current and former officers, directors, | | | |
| | | trustees, key employees, and highest compensated employees. | | | |
| | | Complete Part II of Schedule L | | 5 | |
| | 6 | Loans and other receivables from other disqualified persons (as defined 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 | | | |
| ts | | organizations (see instructions). Complete Part II of Schedule L | | 6 | |
| Assets | 7 | Notes and loans receivable, net | | 7 | |
| Ä | 8 | Inventories for sale or use | | 8 | |
| | 9 | Prepaid expenses and deferred charges | | 9 | |
| | 10a | Land, buildings, and equipment: cost or | | | |
| | | other basis. Complete Part VI of Schedule D 10a | | | |
| | b | Less: accumulated depreciation 10b | | 10c | |
| | 11 | Investments—publicly traded securities | | 11 | |
| | 12 | Investments—other securities. See Part IV, line 11 | | 12 | |
| | 13 | Investments—program-related. See Part IV, line 11 | | 13 | |
| | 14 | Intangible assets | | 14 | _ |
| | 15 | Other assets. See Part IV, line 11 | | 15 | _ |
| | 16 | Total assets. Add lines 1 through 15 (must equal line 34) | 3,323 | 16 | 283,364 |
| | 17 | Accounts payable and accrued expenses | _ | 17 | _ |
| | 18 | Grants payable Deferred revenue Tay-exempt bond liabilities | | 18 | |
| | 19 | Deferred revenue | Y | 19 | _ |
| | 20 | Tax-exempt bond liabilities | | 20 | _ |
| | 21 | Escrow or custodial account liability. Complete Part IV of Schedule D | | 21 | _ |
| S | 22 | Loans and other payables to current and former officers, directors, | | | |
| Liabilities | | trustees, key employees, highest compensated employees, and | | | |
| abi | | disqualified persons. Complete Part II of Schedule L | | 22 | |
| = | 23 | Secured mortgages and notes payable to unrelated third parties | | 23 | _ |
| | 24 | Unsecured notes and loans payable to unrelated third parties | | 24 | |
| | 25 | Other liabilities (including federal income tax, payables to related third | | | |
| | | parties, and other liabilities not included on lines 17-24). Complete Part X | | | |
| | | of Schedule D | | 25 | |
| | 26 | Total liabilities. Add lines 17 through 25 | 0 | 26 | 0 |
| S | | Organizations that follow SFAS 117 (ASC 958), check here ▶X and | | | |
| Š | | complete lines 27 through 29, and lines 33 and 34. | | | |
| lar | 27 | Unrestricted net assets | 3,323 | 27 | 283,364 |
| B | 28 | Temporarily restricted net assets | | 28 | |
| pur | 29 | Permanently restricted net assets | | 29 | |
| 乓 | | Organizations that do not follow SFAS 117 (ASC 958), check here ▶ and | | | |
| <u>o</u> | | complete lines 30 through 34. | | | |
| ets. | 30 | Capital stock or trust principal, or current funds | 300000000000000000000000000000000000000 | 30 | nnannannan 5555555555555555555555555555 |
| ASS | 31 | Paid-in or capital surplus, or land, building, or equipment fund | | 31 | |
| Net Assets or Fund Balances | 32 | Retained earnings, endowment, accumulated income, or other funds | | 32 | |
| Z | 33 | Total net assets or fund balances | 3,323 | | 283,364 |
| | 34 | Total liabilities and net assets/fund balances | 3,323 | 34 | 283,364 |

Form **990** (2013)

| Pa | art XI Reconciliation of Net Assets | | | | | |
|----|---|----|----|---------|-----|--|
| | Check if Schedule O contains a response or note to any line in this Part XI | | | | | |
| 1 | Total revenue (must equal Part VIII, column (A), line 12) | 1 | 52 | 8,2 | 218 | |
| 2 | Total expenses (must equal Part IX, column (A), line 25) | 2 | 24 | 8,2 | 220 | |
| 3 | Revenue less expenses. Subtract line 2 from line 1 | 3 | 27 | 279,998 | | |
| 4 | Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) | 4 | | 3,3 | 323 | |
| 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 | | | 43 | |
| 9 | Other changes in net assets or fund balances (explain in Schedule O) | 9 | | | | |
| 10 | Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line | | | | | |
| | 33, column (B)) | 10 | 28 | 3,3 | 364 | |
| Pa | art XII Financial Statements and Reporting | | | | | |
| | Check if Schedule O contains a response or note to any line in this Part XII | | | | | |
| | | | | Yes | No | |
| 1 | Accounting method used to prepare the Form 990: X Cash Accrual Other | | | | | |
| | If the organization changed its method of accounting from a prior year or checked "Other," explain in | | | | | |
| | Schedule O. | | | | | |
| 2a | Were the organization's financial statements compiled or reviewed by an independent accountant? | | 2a | | X | |
| | If "Yes," check a box below to indicate whether the financial statements for the year were compiled or | | | | | |
| | reviewed on a separate basis, consolidated basis, or both: | | | | | |
| | Separate basis Consolidated basis Both consolidated and separate basis | | | | | |
| b | Were the organization's financial statements audited by an independent accountant? | | 2b | | X | |
| | If "Yes," check a box below to indicate whether the financial statements for the year were audited on a | | | | | |
| | separate basis, consolidated basis, or both: | | | | | |
| | Separate basis Consolidated basis Both consolidated and separate basis | | | | | |
| С | If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight | | | | | |
| | of the audit, review, or compilation of its financial statements and selection of an independent accountant? | | 2c | | | |
| | If the organization changed either its oversight process or selection process during the tax year, explain in | | | | | |
| | Schedule O. | | | | | |
| 3a | As a result of a federal award, was the organization required to undergo an audit or audits as set forth in | | | | | |
| | the Single Audit Act and OMB Circular A-133? | | 3a | | | |
| 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 | | 3b | | | |

Form **990** (2013)

SCHEDULE A

(Form 990 or 990-EZ)

Public Charity Status and Public Support

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

▶ Attach to Form 990 or Form 990-EZ.

Open to Public

OMB No. 1545-0047

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.

orm990. Inspection

| lame | of th | e organization | Mongabay Or | g Corp | | | | | - | - | itification n .4703 | umber | | |
|------|-----------|----------------|---|--|--------------------|--------------|-------------|------------------------|-------------------------|---------------------|------------------------|----------|--------|------|
| Pa | art I | Reas | | y Status (All organizatio | ns mus | t compl | ete thi | s part. | | | | | | |
| | | 200000000 | | nuse it is: (For lines 1 through | | | | | , | | | | | |
| 1 | \bigcap | | • | ssociation of churches describ | | • | |)(i). | | | | | | |
| 2 | | | | I)(A)(ii). (Attach Schedule E.) | | | | , , | | | | | | |
| 3 | П | | | vice organization described in | section | 170(b)(1) | (A)(iii). | | | | | | | |
| 4 | П | - | | ted in conjunction with a hospi | | | | 70(b)(1) | (A)(iii) | . Enter | the hosp | oital's | name | θ, |
| | | city, and sta | te: | | | | | | | | | | | |
| 5 | | - | tion operated for the benefit (b)(1)(A)(iv). (Complete Pa | it of a college or university owr art II.) | ned or ope | erated by | a gove | rnmenta | al unit d | lescribe | ed in | | | |
| 6 | | A federal, st | ate, or local government or | governmental unit described | in sectio i | n 170(b)(| 1)(A)(v) |). | | | | | | |
| 7 | X | An organiza | tion that normally receives | a substantial part of its suppor | rt from a g | governme | ental uni | t or fron | n the ge | eneral _l | public | | | |
| | | described in | section 170(b)(1)(A)(vi). | (Complete Part II.) | | | | | | | | | | |
| 8 | Ц | | | n 170(b)(1)(A)(vi). (Complete I | | | | | | | | | | |
| 9 | | - | | (1) more than 33 1/3% of its s | | | | | - | | _ | | | |
| | | - | | empt functions—subject to cer | - | | | | | | | | | |
| | | | = | and unrelated business taxabl | | | | 1 tax) fr | om bus | inesse | S | | | |
| | | | = | 30, 1975. See section 509(a | | | | | | | | | | |
| 10 | \square | _ | = | d exclusively to test for public | - | | | | | | | | | |
| 11 | | _ | - | d exclusively for the benefit of | - | | | | | | 4! | | | |
| | | | | orted organizations described i | | | | | | | ection | | | |
| | | | | s the type of supporting organi | | • | _ | | • | | otionally i | ntogu | atad | |
| _ | | a Type | | c Type III–Function rganization is not controlled di | | | d by and | | | | ctionally i | niegi | aleu | |
| е | | | | her than one or more pu blicly | | | | | | | | | | |
| | | or section 50 | | definations of more publicly | supported | Jolganiz | ations u | GSCIDE | u III 360 | JUI JU |)3(a)(1) | | | |
| f | | | | etermination from the IRS that | it is a Tyn | a I Type | II or T | ■ vne III s | unnorti | na | | | | |
| • | | _ | , check this box | stermination from the into that | пізатур | е і, туре | : 11, 01 1 | ype III s | ирропп | iig | | | | |
| ~ | | • | | zation accepted any gift or con | tribution f | rom anv | of the | | | | | | | . Ш |
| g | | following pe | = | eation accepted any gift of con | itiibatioii i | Torri arry | 01 1110 | | | | | | | |
| | | | | controls, either alone or togeth | ner with no | ersons de | escribed | l in (ii) a | nd | | | 1 | Yes | No |
| | | | | ne supported organization? | ioi wiiii p | 0100110 01 | 30011800 | () 🚨 | | | Ī | 11g(i) | | |
| | | | member of a person desc | | | | | | | | | 11g(ii) | | |
| | | | · · | n described in (i) or (ii) above? | | | | | | | | 11g(iii) | | |
| h | | | • | t the supported organization(s | | | | | | | | _ J\ / | | |
| (i) | Nam | e of supported | (ii) EIN | (iii) Type of organization | 1 | organization | (v) Did y | ou notify | (vi) | s the | (vii) An | nount c | f mone | tary |
| | org | ganization | | (described on lines 1–9 | 1.1 | sted in your | the organ | nization in of your | organizat (i) organi | ion in col. | | supp | ort | - |
| | | | | above or IRC section (see instructions)) | governing | document? | | port? | U. | | 1 | | | |
| | | | | (000 1100 1100 1100 1100 1100 1100 1100 | Yes | No | Yes | No | Yes | No | | | | |
| A) | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| B) | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| C) | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| D) | | | | | | | | | | | | | | |
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| E) | | | | | | | | | | | | | | |
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| ota | | | | | | | | | | | | | | |

Page 2

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.)

| | tion A. Public Support | | | | | | |
|-----------------|--|---------------------|----------------------|------------------------|--------------------------|-----------------|------------|
| Cale | ndar year (or fiscal year beginning in) | (a) 2009 | (b) 2010 | (c) 2011 | (d) 2012 | (e) 2013 | (f) Total |
| 1 | Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") | | | | 92,319 | 527,294 | 619,613 |
| 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 | | | | 92,319 | 527,294 | 619,613 |
| 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) | | | | | | 443,318 |
| <u>6</u> Sec | Public support. Subtract line 5 from line 4. | | | | | | 176,295 |
| | ndar year (or fiscal year beginning in) | (a) 2009 | (b) 2010 | (c) 2011 | (d) 2012 | (e) 2013 | (f) Total |
| 7 | Amounts from line 4 | (a) 2000 | (6) 2010 | (6) 2011 | 92,319 | 527,294 | 619,613 |
| 8 | Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources | | | | 92,319 | 327,234 | 019,013 |
| 9 | Net income from unrelated business activities, whether or not the business is regularly carried on |)ra | ft-C | OF | Υ | | |
| 10 | Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) | 5 | | | • | | |
| 11 | Total support. Add lines 7 through 10 | | | | | | 619,613 |
| 12 | Gross receipts from related activities, etc | c. (see instruction | ns) | | | 12 | 530 |
| 13 | First five years. If the Form 990 is for the | e organization's | first, second, third | , fourth, or fifth tax | x year as a section | 501(c)(3) | _ |
| | organization, check this box and stop he | | | | | | ▶ X |
| Sec | tion C. Computation of Public S | | | | | | |
| 14 | Public support percentage for 2013 (line | | | olumn (f)) | | 14 | %_ |
| 15 | Public support percentage from 2012 Sc | | | | | | %_ |
| 16a | 33 1/3% support test—2013. If the orga | | | | 4 is 33 1/3% or mo | re, check this | . \Box |
| | box and stop here. The organization qu | - | | | | | ▶ ∐ |
| b | 33 1/3% support test—2012. If the orga | | | | | r more, | |
| | check this box and stop here. The organ | | | | | | ▶ ⊔ |
| 1/a | 10%-facts-and-circumstances test—2 | - | | | | | |
| | 10% or more, and if the organization me | | | | - | • | |
| | Part IV how the organization meets the " | tacts-and-circum | stances" test. The | organization qua | lilities as a publicly s | supported | ▶ □ |
| | organization | | | | | | |
| b | 10%-facts-and-circumstances test—2 | • | | | | | |
| | 15 is 10% or more, and if the organization | | | | • | | |
| | Explain in Part IV how the organization r | | | · · | · | | ▶ □ |
| 10 | supported organization | | | | | | □ |
| 18 | | | | | | | ▶ □ |
| | instructions | | | | | | |

Page 3

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II.)

If the organization fails to qualify under the tests listed below, please complete Part II.)

| Sec | tion A. Public Support | quality unde | T THE TESTS HOTE | sa below, pice | ise complete i | art ii.j | |
|----------|--|-----------------------|--------------------|--------------------|--------------------|--------------|-------------------|
| | ndar year (or fiscal year beginning in) | (a) 2009 | (b) 2010 | (c) 2011 | (d) 2012 | (e) 2013 | (f) Total |
| 1 | Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") | (3) = 33 | (0) = 0.00 | (0, =0.11 | (5) | (0, 2010 | (1) |
| 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 | | | | | | |
| С | Add lines 7a and 7b | | | | | | |
| 8 | Public support (Subtract line 7c from | | | | | | |
| <u> </u> | line 6.) | | _ | | | | |
| | tion B. Total Support | 40000 | ££11200 | | (d)/2012 | (.) 0040 | (O.T.) |
| 9 | Amounts from line 6 | (2009) | (b) 2010 | (c) 2011 | (6)/2012 | (e) 2013 | (f) Total |
| 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 | | | | | | |
| С | 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 IV.) | | | | | | |
| 13 | Total support. (Add lines 9, 10c, 11, and 12.) | | | | | | |
| 14 | First five years. If the Form 990 is for the organization, check this box and stop he | • | | | • | n 501(c)(3) | ▶ □ |
| Sec | tion C. Computation of Public S | | | | | | ········ F |
| 15 | Public support percentage for 2013 (line 8 | | | olumn (f)) | | 15 | % |
| 16 | Public support percentage from 2012 Sch | edule A, Part II | l, line 15 | | | 16 | % |
| | tion D. Computation of Investment | | | | | • | |
| 17 | Investment income percentage for 2013 (| | | e 13, column (f)) | | 17 | % |
| 18 | Investment income percentage from 2012 | Schedule A, P | art III, line 17 | | | 18 | % |
| 19a | 33 1/3% support tests—2013. If the orga | anization did no | t check the box or | | | | |
| | 17 is not more than 33 1/3%, check this b | ox and stop he | re. The organizat | ion qualifies as a | publicly supported | organization | ▶ □ |
| b | 33 1/3% support tests—2012. If the orga | | | | | | nd |
| | line 18 is not more than 33 1/3%, check the | | _ | • | | | ▶ _ |
| 20 | Private foundation. If the organization di | d not check a b | ox on line 14, 19a | , or 19b, check th | is box and see ins | structions | |

| Schedule A (| Form 990 or 990-E2 | 2) 2013 Mongaba | y Org | Corp | | 45-3714703 | Page 4 |
|---|----------------------------------|------------------------|----------|--------------------------|---|---|-----------------|
| Part IV | Supplementa Part III, line 12 | I Information. Pro | vide the | explanation r any additi | ns required by Pa ional information. | 45-3714703 art II, line 10; Part II, line (See instructions). | 17a or 17b; and |
| | | • | • | | | | |
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Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF.

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

OMB No. 1545-0047

Employer identification number

45-3714703

Schedule B (Form 990, 990-EZ, or 990-PF) (2013)

| Mongabay Org | Corp | 45-3714703 |
|---|--|--|
| Organization type (check or | ne): | |
| Filers of: | Section: | |
| Form 990 or 990-EZ | X 501(c)(3) (enter number) organization | |
| | 4947(a)(1) nonexempt charitable trust not treated as a private foundation | |
| | 527 political organization | |
| Form 990-PF | 501(c)(3) exempt private foundation | |
| | 4947(a)(1) nonexempt charitable trust treated as a private foundation | |
| | 501(c)(3) taxable private foundation | |
| | | |
| | covered by the General Rule or a Special Rule . 7), (8), or (10) organization can check boxes for both the General Rule and a Specia | ıl Rule. See |
| General Rule | | |
| | iling Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in ne contributor. Complete Paris I and II. | money or |
| Special Rules | | |
| under sections 509(a | 3) organization filing Form 990 or 990-EZ that met the 33 ¹ / ₃ % support test of the replace (1)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a conduction of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, list II. | ontribution of |
| during the year, total | 7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one concontributions of more than \$1,000 for use exclusively for religious, charitable, scient ses, or the prevention of cruelty to children or animals. Complete Parts I, II, and III. | |
| during the year, control not total to more than year for an exclusive applies to this organic | 7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributions for use exclusively for religious, charitable, etc., purposes, but these contributions is checked, enter here the total contributions that were received by religious, charitable, etc., purpose. Do not complete any of the parts unless the Gezation because it received nonexclusively religious, charitable, etc., contributions of | outions did during the eneral Rule \$5,000 or |
| 990-EZ, or 990-PF), but it m | at is not covered by the General Rule and/or the Special Rules does not file Schedule ust answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its For certify that it does not meet the filing requirements of Schedule B (Form 990, 990-I | Form 990-EZ or on its |

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) (2013)

Name of organization

Mongabay Org Corp

Employer identification number 45-3714703

| Part I | Contributors (see instructions). Use duplicate copies of | f Part I if additional space i | s needed. |
|------------|---|--------------------------------|--|
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| . 1 | The Climate and Land Use Alliance 235 Montgomery St, #1300 San Francisco CA 94104 | \$ 160,500 | Person X Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 2 | The Celedon Group LLC 2 Moulton Dr Atherton CA 94027 | \$ 110,628 | Person X Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 3 | Gordon & Betty Moore Foundation 1661 Page Mill Road Palo Alto CA 94304 | \$ 30,250 OPY | Person X Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 4 | Overbrook Foundation 22 East 42nd street, #2500 New York NY 10168 | \$ 50,000 | Person X Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 5 | Packard Foundation 343 2nd St. Los Altos CA 94022 | \$ 60,000 | Person X Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 6 | Rockefeller Foundation 420 5th ave. New York NY 10018 | \$ 30,250 | Person X Payroll Noncash (Complete Part II for noncash contributions.) |

SCHEDULE F (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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.
 ► See separate instructions.

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

OMB No. 1545-0047 **2013**

Open to Public Inspection

Mongabay Org Corp

Employer identification number 45 - 3714703

| Pa | art I Ge | | n on Activities C | | s. Complete if the organization an | |
|-------------|-----------------|-------------------------|------------------------------------|--|--|----------------------------------|
| | Fo | rm 990, Part IV, line | e 14b. | | | |
| 1 | _ | _ | | ds to substantiate the amount o | = | |
| | grants or ass | | = | stance, and the selection criteria | used to award the | Yes No |
| _ | • | | | | | |
| 2 | _ | utside the United State | = | procedures for monitoring the u | ise of its grants and other | |
| 2 | | | | an be duplicated if additional sp | and is needed) | |
| 3 | (a) Region | (b) Number of | (c) Number of | (d) Activities conducted in | (e) If activity listed in (d) is | (f) Total |
| | (*, *) | offices in the region | employees, agents, and independent | region (by type) (e.g., fundraising, program services, | a program service, describe specific type of | expenditures for and investments |
| | | | contractors in region | investments, grants to recipients | service(s) in region | in region |
| Ea | ast Asia | and the Paci: | fic | located in the region) | | |
| (1) | 200 11014 | | | Program Services | Environmental issues | 132,712 |
| | | | | | | |
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| (16) | | | | | | |
| | | | | | | |
| (17) | Sub-total | | 4 | | | 132,712 |
| _ | oud-total | on | | | | 132,112 |
| sh | neets to Part I | | | | | |
| | otals (add | | | | | 120 710 |
| Ш | nes 3a and 3b | 'A | 4 | | | 132,712 |

| Jonicadic i (| 1 01111 000) 20 | io iloligada ₂ | <u> </u> | |
|---------------|-----------------|---------------------------|----------|--|
| 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 | X 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) | Yes | X 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 . | X 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 | X 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 | X 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) | ⁄es | X No |

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Schedule F (Form 990) 2013

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 (see instructions).

| Draft-COPY | Region | Expenditures Investments | | | | | |
|------------|---------------------------|--------------------------|------------|---|--|--|--|
| | East Asia and the Pacific | \$ | 132,712 \$ | 0 | | | |
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SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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

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

► Attach to Form 990.

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

OMB No. 1545-0047 **2013**

Open to Public Inspection

Employer identification number

| Mongabay Org Corp | | | | | | 4 | 5-3714703 |
|--|----------------|-------------------------------------|-----------------------------|---------------------------------------|---|--|------------------------------------|
| Part I General Information on Grants an | d Assistance |) | | | | | _ |
| Does the organization maintain records to substantiate the selection criteria used to award the grants or assis Describe in Part IV the organization's procedures for n | tance? | | | | grants or assistar | nce, and | X Yes No |
| Part II Grants and Other Assistance to G Part IV, line 21, for any recipient that | | | | | fadditional spa | ce is needed | |
| 1 (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
| (1) EarthSoul Productions LLC 41 Rosewood Drive Sag Harbor NY 11963 | 38-3899094 | | 25,980 | | | | Film production |
| (2) Acate Amazon Conservation PO Box 15895 | 45-5132053 | | 20,725 | | | | Program expenses |
| (3) | | of | t | JD/ | / | | |
| (4) | וט | aı | 1-01 | | | | |
| (5) | | | | | | | |
| (e) | | | | | | | _ |
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| (7) | | | | | | | |
| (a) | | | | | | | |
| (8) | | | | | | | |
| (9) | | | | | | | |
| 2 Enter total number of section 501(c)(3) and government | | sted in the | line 1 table | | <u> </u> | | |
| 3 Enter total number of other organizations listed in the larger Paperwork Reduction Act Notice, see the Instruction | | | | | | | Schedule I (Form 990) (2013) |

SCHEDULE L (Form 990 or 990-EZ)

Department of the Treasury

Transactions With Interested Persons

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

Attach to Form 990 or Form 990-EZ.

► See separate instructions.

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

Open To Public

OMB No. 1545-0047

Internal Revenue Service

| Name of the orga | | | | | | | · · | 271 40 | | tion nu | IIIDEI | | |
|------------------|---|--|--|---------|-----------------|--|------------------------|-----------|----------|----------|-------------------|---------|-------------------|
| Part I | Mongabay Org Co. Excess Benefit Transac | | 01(a)(2) and (| coction | n 501 | 1(a)(4) organiza | | 37147 | 03 | | | | |
| raiti | Complete if the organization ar | | | | | | | ırt V, li | ne 40 | Эb. | | | |
| 4 | | | (b) Relationship between disqualified person and | | | | nd | | | | (d) Co | | ted? |
| 1 | (a) Name of disqualified person | | organizati | on | | | (c) Description of tr | ansactio | n n | | Yes | ı | No |
| (1) | | | | | | | | | | | | | |
| (2) | | | | | | | | | | | | | |
| (3) | | | | | | | | | | | | | |
| (4) | | | | | | | | | | | | | |
| (5) | | | | | | | | | | | <u> </u> | | |
| (6) | | | | | | | | | | | | | |
| under | the amount of tax incurred by the obsection 4958the amount of tax, if any, on line 2. | | | | · | | | | | | | | |
| Part II | Loans to and/or From I | nterested Pers | sons. | | | | | | | | | | |
| | Complete if the organization as | nswered "Yes" on F | Form 990-EZ | , Part | V, lin | ne 38a or Form | 990, Part IV, line | e 26; c | or if th | ne | | | |
| | organization reported an amou | | | | | | | | | | | | |
| | (a) Name of interested person | (b) Relationship with organization | (c) Purpose of loan | | oan to m the | (e) Original principal amount | (f) Balance due | (g) In (| default? | (h) Ap | proved pard or | | /ritten ement? |
| | | , and the second | | org | j.? | | | | | comm | nittee? | | 1 |
| | | | | То | From | | | Yes | No | Yes | No | Yes | No |
| (1) | | | | | | | | | | | | | |
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| (2) | | | | | | | | | \vdash | <u> </u> | | | - |
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| 10) | | | | | | | | | | | | | |
| Total | | | <u></u> | | | > \$ | | | | | | | |
| Part III | Grants or Assistance B | _ | | | | _ | | | | | | | |
| | Complete if the organization ar | | | | | | | | | | | | |
| | (a) Name of interested person | | ship between inte and the organizati | | (c) Am | ount of assistance | (d) Type of assistance | e | (e) | Purpose | e of assi | istance | ; |
| (1) | | | | | | | | | | | | | |
| (2) | | | | | | | | | | | | | |
| (3) | | | | | | | | | | | | | |
| (4) | | | | | | | | | | | | | |
| (5) (6) | | | | | | | | | | | | | |
| (7) | | | | | | | | | | | | | |
| (8) | | | | | | | | | | | | | |

(9)

Directors from January through October 2013, and Secretary of the Board of

Directors from November through December 2013, owns 100% The Celedon Group

| LLC. | Droft CODV | |
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SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047 **2013**

Department of the Treasury Internal Revenue Service ► 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. Inspection

Open to Public

| Mongabay Org Corp | 45-3714703 |
|---|---------------------------------|
| Form 990 - Organization's Mission | |
| To raise awareness about social and environ | nmental issues relating to |
| tropical forests and other ecosystems, to | wildlife, and to the important |
| role that natural ecosystems play in mainta | aining critical services, |
| including stabilizing the global climate s | ystem. |
| Form 990, Part III, Line 4a - First Accomp | lishment |
| But beyond the raw numbers, Mongabay-Indone | esia's influence and reach also |
| expanded. Mongabay-Indonesia became an off | icial syndication partner for |
| Yahoo-Indonesia, which now distributes our Content from Mongabay Indonesia stories was | IP Y |
| Kompas, National Geographic Indonesia, Med | ia Indonesia, and Joyo News. |
| Mongabay-Indonesia continued to serve as a | news source for Google News. |
| Mongabay-Indonesia further expanded the dep | oth and breadth of its coverage |
| in 2013. Our network of journalists now in | cludes 22 reporters in 16 citie |
| across Indonesia, including cities on the | islands of Java, Bali, Sumatra, |
| Kalimantan, and Papua. This network has gre | eatly strengthened our reach an |
| is now serving as a model for development of | of a global reporting network o |
| forest issues (Americas, Congo Basin, West | Africa, Mekong, etc) as well a |

The Mongabay-Indonesia team also conducted a series of environmental

a Latin American environmental news service that is currently in the

conceptual phase.

Name of the organization

Mongabay Org Corp

45-3714703

literacy and journalism workshops, presentations at universities and government agencies, and public awareness events. From these events, Mongabay-Indonesia acquired new followers, contributed to better understanding of environmental issues, and also strengthened local environmental reporting.

Form 990, Part III, Line 4b - Second Accomplishment

by the broader media. In contrast to an aggregation of case studies in a

single report, a series of in-depth articles highlights each case study or

story separately, boosting its prominence. SRI fellows are given the

funding and support to become issue area experts, adding value to their own

career and contributing to the wider conversation regarding the state of

our natural world.

Draft-COPY

Mongabay.com's independent news reporting. Reporting on environmental and conservation issues.

Translation and non-English reporting on environmental issues. Priority languages include Latin American Spanish and Indonesian.

Educational materials, standards-based modules, and activities for K-8 children developed by school teachers and curriculum experts.

Tropical Conservation Science (TCS), an open-access academic journal that aims to provide opportunities for scientists in developing countries to publish their research. Unusually for an open-access journal, TCS does not charge any fees to readers or authors.

Name of the organization Employer identification number Mongabay Org Corp 45-3714703 In 2013, Mongabay.org: -formalized an internship program that published over 350 environmental science and conservation news articles on Mongabay-News, which as a whole published more than 1,300 articles; -created 10 standards-based environmental education books for kindergarden and first-grade students; -published over 1,000 articles in Indonesian on Mongabay-Indonesia and reached more than 3,000 Indonesians in person via journalism workshops and environmental education events; -leveraged a team of 120+ interns to translate 241 conservation news articles in Spanish, 125 in French, 112 in Italian, 97 in Portuguese, 33 in Chinese, 24 in German, and 10 in Japanese; -published six issues -gave out three contributor awards; and awarded one \$20,000 journalism prize for the next big idea in rainforest conservation and announced a call for applications for 4 more. Mongabay.org served as the fiscal sponsor for three organizations in 2013, two of which accounted for 100 percent of the expenses: Earth Soul Productions (head by Paul Stoutenburgh) and Acate Amazon Conservation. Earth Soul Productions received \$25,980 to develop a film about rainforest conservation, including Ecuador's decision not to proceed with the Yasuni-ITT Initiative, which aimed to protect one of the Amazon's richest forests from oil and gas exploration.

Schedule O (Form 990 or 990-EZ) (2013) Page 2 Employer identification number Name of the organization Mongabay Org Corp 45-3714703 Acate Amazon Conservation received \$20,725 to launch its program to help the Matses tribe in the Peruvian Amazon protect their rainforest homeland and traditional knowledge. Acate's programs include sustainable indigenous agriculture, preserving traditional plant knowledge, and creating sustainable livelihoods for the Matses people. Form 990, Part V, Line 4b - Financial Accounts in Foreign Countries Indonesia Form 990, Part VI, Line 8b - Documentation by Committee Explanation The organization not have any committees which have the authority to act on behalf of the governing body. rocess to Review Form 990 Form 990 is reviewed by the executive director after it is prepared by the independent accountant. The 990 is then sent to the Board of Directors for comment and approval prior to submission. Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy If there were potential conflicts of interest, the situation would be discussed by the Board of Directors and resolved.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation

The organization's governing and financial documents are on their website.

All documents will be made available to the public upon request.

Form 990, Part IX, Line 11g - Other Fees for Services

034 DO NOT MAIL THIS FORM TO THE FTB Date Accepted California e-file Return Authorization for TAXABLE YEAR **Exempt Organizations** 8453-EO 2013 **Exempt Organization name** Identifying number Mongabay Org Corp 45-3714703 Part I Electronic Return Information (whole dollars only) 528,218 1 Total gross receipts (Form 199, line 4) 2 Total gross income (Form 199, line 8) 528,218 248,220 3 Total expenses and disbursements (Form 199, Line 9) Part II Settle Your Account Electronically for Taxable Year 2013 Electronic funds withdrawal 4b Withdrawal date (mm/dd/yyyy) 4 4a Amount Part III Banking Information (Have you verified the exempt organization's banking information?) 322271627 5 Routing number 7 Type of account: X Checking 6 Account number Savings Part IV Declaration of Officer I authorize the exempt organization's account be settled as designated in Part II. If I check Part II, Box 4, I authorize an electronic funds withdrawal for the amount listed on line 4a. Under penalties of perjury, I declare that I am an officer of the above exempt organization and that the information I provided to my Electronic return originator (ERO), transmitter, or intermediate service provider and the amounts in Part I above agree with the amounts on the corresponding lines of the exempt organization's 2013 California electronic return. To the best of my knowledge and belief, the exempt organization's return is true, correct, and complete. If the exempt organization is filing a balance due return, I understand that if the Franchise Tax Board (FTB) does not receive full and timely payment of the exempt organization's fee liability, the exempt organization will remain liable for the fee liability and all applicable interest and penalties. I authorize the exempt organization return and accompanying schedules and statements be transmitted to the FTB by the ERO, transmitter, or intermediate service provider. If the processing of the exempt organization's return or refund is delayed, I authorize the FTB to disclose to the ERO, intermediate service provider, the reason(s) for the delay. Sign Signature of Officer Here Declaration of Electronic Return Originator (ERO) and Paid Preparer. See instructions. I declare that I have reviewed the above exempt organization's return and that the entries on form FTB 8453-EO are complete and correct to the best of my knowledge. (If I am only an Intermediate Service Provider, I understand that I am not responsible for reviewing the exempt organization's return. I declare, however, that form FTB 8453-EO accurately reflects the data on the return.) I have obtained the organization officer's signature on form FTB 8453-EO before transmitting this return to the FTB; I have provided the organization officer with a copy of all forms and information that I will file with the FTB, and I have followed all other requirements described in FTB Pub. 1345, 2013 e-file Handbook for Authorized e-file Providers. I will keep form FTB 8453-EO on file for four years from the due date of the return or four years from the date the exempt organization return is filed, whichever is later, and I will make a copy available to the FTB upon request. If I am also the paid preparer, under penalties of perjury, I declare that I have examined the above exempt organization's return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. I make this declaration based on all information of which I have knowledge. ERO's PTIN Check if Check if self-ERO'salso paid **ERO** P00949190 signature Must FEIN Firm's name (or yours Sherry D. Heffernan, Ltd. Sign if self-employed) 6650 Horseshoe Bend ZIP Code and address 55340-9549 Under penalties of perjury, I declare that I have examined the above organization's return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. I make this declaration based on all information of which I have knowledge. Paid Check Paid preparer's PTIN Paid if selfpreparer's employed signature **Preparer** FEIN Must Firm's name (or yours if self-employed) Sign and address ZIP Code

Voucher at bottom of page.



DO NOT MAIL A PAPER COPY OF THE CORPORATE OR EXEMPT ORGANIZATION TAX RETURN WITH THE PAYMENT VOUCHER.

If the amount of payment is zero, do not mail this voucher.

WHERE TO FILE:

Using black or blue ink, make check or money order payable to the "Franchise Tax Board." Write the corporation number or FEIN and "2013 FTB 3586" on the check or money order. Detach voucher below. Enclose, but **do not** staple, payment with voucher and mail to:

FRANCHISE TAX BOARD PO BOX 942857 SACRAMENTO CA 94257-0531

Make all checks or money orders payable in U.S. dollars and drawn against a U.S. financial institution.

WHEN TO FILE: Fiscal Year – See instructions.

Calendar Year - File and Pay by March 17, 2014.

When the due date falls on a weekend or holiday, the deadline to file and pay without penalty is extended to the next business day.

Dian-COI I

ONLINE SERVICES: Corporations can make payments online with Web Pay for

Businesses. After a one-time online registration, corporations can make an immediate payment or schedule payments up to a year in

advance. Go to **ftb.ca.gov** for more information.

__ DETACH HERE __ _ _ JF NO PAYMENT IS DUE OR PAID ELECTRONICALLY, DO NOT MAIL THIS VOUCHER_ _ _ DETACH HERE

CAUTION: You may be required to pay electronically, see instructions.

2013

Payment Voucher for Corps and Exempt Orgs e-filed Returns

CALIFORNIA FORM

3586 (e-file)

3420861 MONG 45-3714703 00000000000 13 FORM 3 TYB 01-01-2013 TYE 12-31-2013

MONGABAY ORG CORP

PO BOX 0291 MENLO PARK

CA 94062

650-260-4018

TOTAL PAYMENT AMT 10.

034 6181136

California Exempt Organization 2013 Annual Information Return

____FORM

199

| Calendar Y | ear 2013 or fiscal year beginning (mm/dd/yyyy) | , and ending (mm/do | l/yyyy) | · | |
|------------------------|---|---|------------------------------|-------------------------------|--|
| Corporation/Org | anization Name | California corpora | tion number | | |
| Mongal | pay Org Corp | | 3420863 | 1 | |
| | room, or PMB no.) | | FEIN | <u> </u> | |
| PO Box | | | 45-3714 | 703 | |
| Menlo | Park CZ | | | | |
| A First Re | | J If exempt under R&TC | | • | |
| | ed Information Return Yes X No | during the year: (1) par | | . • | |
| | rmation Return? • Dissolved • Surrendered (Withdrawn) | or (2) attempted to influor (3) made an election | - | - | |
| | erged/Reorganized | (relating to lobbying by | | . — — | |
| | iter date: (mm/dd/yyyy) ● | If "Yes," complete and | | — — | |
| | accounting method: | | | 23701g? . ● ☐ Yes X No | |
| (1) X | Cash (2) Accrual (3) Other | If "Yes," enter the gross red | eipts from nonmembe | er — — — | |
| _ | return filed? | sources. | | \$ | |
| | 990T (2) ● 990 PF (3) ● Sch H (990) | L If organization is exem | | | |
| | group filing for the subordinates/affiliates? ● ☐ Yes X No attach a roster. See instructions | exclusively religious, e supported primarily (50 | | | |
| • | rganization in a group exemption? | check box. No filing fee | | | |
| | what is the parent's name? | M Is the organization a Li | | | |
| | | N Did the organization file | e Form 100 or For | | |
| | rganization have any changes in its activities, | to report taxable incom | | | |
| | g instrument, articles of incorporation, or bylaws | O Is the organization und | | | |
| | not been reported to the Franchise Tax Beard? Yes X Noplain, and attach copies of revised documents. | the RS audited in a pr | oryear? | • Yes X No | |
| | omplete Part I unless not required to file this form. See Ger | eral Instructions B and C | <u> </u> | | |
| | 1 Gross sales or receipts from other sources. From Side 2, | | • 1 | 924 00 | |
| | 2 Gross dues and assessments from members and affiliate | S | • 2 | 00 | |
| Receipts | 3 Gross contributions, gifts, grants, and similar amounts rec | | • 3 | 527,294 00 | |
| and | 4 Total gross receipts for filing requirement test. Add line 1 through lin | | F20 21000 | | |
| Revenues | This line must be completed. If the result is less than \$50,000, s | see General Instruction B | 00 | 528,218 00 | |
| | Cost of goods soldCost or other basis, and sales expenses of assets sold | 6 | 00 | | |
| | 7 Total costs. Add line 5 and line 6 | | 7 | 00 | |
| | | | ● 8 | 528,218 00 | |
| Expenses | 9 Total expenses and disbursements. From Side 2, Part II, | line 18 | ● 9 | 248,220 00 | |
| | 10 Excess of receipts over expenses and disbursements. Su | btract line 9 from line 8 | | 279,998 00 | |
| | | | | 10 00 00 | |
| Filing | 12 Total payments 13 Penalties and Interest. See General Instruction J | | 4.0 | 00 | |
| Fee | 44 Line toy Con Congrel Instruction I/ | | • 14 | 00 | |
| | 15 Balance due. Add line 11, line 13, and line 14. Then subt | tract line 12 from the result | | 10 00 | |
| Sign | Under penalties of perjury, I declare that I have examined this return, including accomptrue, correct, and complete. Declaration of preparer (other than taxpayer) is based on a | panying schedules and statements, a | nd to the best of my k | nowledge and belief, it is | |
| Jigii Here | Signature Title | | Date | Telephone | |
| | of officer President | | | 650-260-4018 | |
| D. 1 I | Preparer's signature | | Check if self- employed ▶ | ● PTIN P00949190 | |
| Paid Preparer's | | 01/01/2014 | · · · · · · | FEIN | |
| Preparer s Use Only | Firm's name (or yours, if (or | | | • | |
| , | self-employed) and address 6650 Horseshoe Bend Discontinuous Corcoran, MN 55340-9 | | | Telephone 763-478-6518 | |
| | May the FTB discuss this return with the preparer shown abo | | | | |

034

Mongabay Org Corp

45-3714703

Part II Organizations with gross receipts of more than \$50,000 and private foundations regardless of amount of gross receipts — complete Part II or furnish substitute information.

| | | 1 | Gross sales or receipts from | all business activities. S | See instruc | ctions | • | 1 | | | 00 |
|----------------|------------------------|------------------|--|------------------------------|-------------|---------------------|-------------------------|-----------|----------|---------|----------------------------|
| | | | | | | | _ | 2 | | 530 | 00 |
| Receip | ots | 3 | District and a | | | | _ | 3 | | | 00 |
| from | | 4 | 0 | | | | _ | 4 | | | 00 |
| Other | | 5 | Gross royalties | | | | _ | 5 | | | 00 |
| Source | es | 6 | Gross amount received from sale | of assets (See Instructions) | | | • | 6 | | | 00 |
| | | | Other income. Attach schedu | | See | Statemen | nt 1 ● | 7 | | 394 | 00 |
| | | 8 | Total gross sales or receipts from other | | | | | 8 | | 924 | 00 |
| | | 9 | Contributions, gifts, grants, and similar and | mounts paid. Attach schedule | See | Statemen | nt 2 ● | 9 | | 48,343 | 00 |
| | | 10 | Disbursements to or for mem | bers | | | • | 10 | | | 00 |
| | | 11 | Compensation of officers, directors, and | trustees. Attach schedule | See | Statemen | nt 3 • | 11 | | | 00 |
| | | 12 | Other salaries and wages | ••••• | | | • | 12 | | 38,657 | |
| Expen | ses | | | | | | | 13 | | | 00 |
| and | | 14 | Taxes | | | | | 14 | | | 00 |
| Disbur | se- | 15 | | | | | | 15 | | 1,800 | |
| ments | | 16 | Depreciation and depletion (S | See instructions) | | | • | 16 | | | 00 |
| | | 17 | Other Expenses and Disbursemen | nts. Attach schedule. | See | Statemen | nt 4 ● | 17 | | 159,420 | |
| | | | Total expenses and disbursemen | | | | | 18 | | 248,220 | |
| Sche | dule | | Balance Sheets | Beginning o | | | | d of ta | xable ye | | 100 |
| Assets | | | | (a) | | (b) | (c) | | | (d) | |
| 1 Ca | | | | ζ- / | | 3,323 | χ-7 | | • | 283,3 | 64 |
| | | | s receivable | | | . , | | | • | | |
| | | | ivable. | | | | | | • | | |
| | | | | | | | | | • | | |
| 5 Fede | eral and | state | | | | | | | • | | |
| gove 6 Invo | ernment | obliga in oth | ations | | | | | | • | | |
| 7 Inv | estme | nte | in stock. | | | | | | • | | |
| | tgage | | | | | | | | • | | |
| Othe | er inves | tmen | ts. | | U | \cup | | | • | | |
| 10 a | | | systs | | | | | | | | |
| | | | nulated depreciation (|) | | | <u> </u> | |) | | |
| 11 Lar | | | | 1 | | | (| | - | | |
| 42 Othe | er asset | S. | | | | | | | | | |
| | | | | | | 3,323 | | | | 283,30 | 64 |
| Liabilit | ies a | nd r | net worth | | | J , U = U | | | | _00/0 | |
| 14 Acc | | | | | | | | | • | | |
| | | | gifts, or grants payable | | | | | | • | | |
| | | | payable. | | | | | | • | | |
| 17 Mor | | | | | | | | | • | | |
| 18 Othe | er liabilit ch sche | ties. | | | | | | | | | |
| | | | or principle fund | | | | | | • | | |
| | - | | tal surplus. Attach | | | | | | - | | |
| | onciliat | | - | | | | | | | | |
| | | | ngs or income fund | | | 3,323 | | | • | 283,3 | 64 |
| | | | es and net worth | | | 3,323 | | | | 283,3 | $\frac{\overline{64}}{64}$ |
| Sche | dule | M- | 1 Reconciliation of income Do not complete this sched | per books with incom | e per retu | urn | | | | | |
| | | | | | | line 13, column | (d), is less tha | n \$50,0 | 000. | | |
| | | | oer books | <u>• 279,9</u> | 998 7 | Income recorded | • | ear | | | |
| 2 Fee | deral i | nco | me tax | | | not included in the | nis return. Attach | | | | |
| 3 Exc | ess of | capi | tal losses over capital gains | | | | | | | | |
| 4 Inc | ome r | not r | ecorded on books this year. | | 8 | | is return not char | • | | | |
| Atta | ach so | chec | lule | | | against book inc | ome this year. At | tach | | | |
| | | | ed on books this year not deducted | | | | | | | | |
| in th | is return | . Atta | ch schedule | | 9 | Total. Add line | 7 and line 8 . | | . | | |
| 6 Tot | al. Ad | ld lir | ne 1 through line 5 | 279, | 998 10 | Net income per retu | rn. Subtract line 9 fro | om line 6 | . | 279,99 | 98 |

Side 2 Form 199 c1 2013 034 3652134

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF.

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

OMB No. 1545-0047

Employer identification number

45-3714703

Schedule B (Form 990, 990-EZ, or 990-PF) (2013)

| Mongabay Org | Corp | 45-3714703 |
|---|--|--|
| Organization type (check or | ne): | |
| Filers of: | Section: | |
| Form 990 or 990-EZ | X 501(c)(3) (enter number) organization | |
| | 4947(a)(1) nonexempt charitable trust not treated as a private foundation | |
| | 527 political organization | |
| Form 990-PF | 501(c)(3) exempt private foundation | |
| | 4947(a)(1) nonexempt charitable trust treated as a private foundation | |
| | 501(c)(3) taxable private foundation | |
| | | |
| | covered by the General Rule or a Special Rule . 7), (8), or (10) organization can check boxes for both the General Rule and a Specia | ıl Rule. See |
| General Rule | | |
| | iling Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in ne contributor. Complete Paris I and II. | money or |
| Special Rules | | |
| under sections 509(a | 3) organization filing Form 990 or 990-EZ that met the 33 ¹ / ₃ % support test of the replace (1)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a conduction of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, list II. | ontribution of |
| during the year, total | 7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one concontributions of more than \$1,000 for use exclusively for religious, charitable, scient ses, or the prevention of cruelty to children or animals. Complete Parts I, II, and III. | |
| during the year, control not total to more than year for an exclusive applies to this organic | 7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributions for use exclusively for religious, charitable, etc., purposes, but these contributions is checked, enter here the total contributions that were received by religious, charitable, etc., purpose. Do not complete any of the parts unless the Gezation because it received nonexclusively religious, charitable, etc., contributions of | outions did during the eneral Rule \$5,000 or |
| 990-EZ, or 990-PF), but it m | at is not covered by the General Rule and/or the Special Rules does not file Schedule ust answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its For certify that it does not meet the filing requirements of Schedule B (Form 990, 990-I | Form 990-EZ or on its |

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) (2013)

Name of organization

Mongabay Org Corp

Employer identification number 45-3714703

| Part I | Contributors (see instructions). Use duplicate copies of | f Part I if additional space i | s needed. |
|------------|---|--------------------------------|--|
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| . 1 | The Climate and Land Use Alliance 235 Montgomery St, #1300 San Francisco CA 94104 | \$ 160,500 | Person X Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 2 | The Celedon Group LLC 2 Moulton Dr Atherton CA 94027 | \$ 110,628 | Person X Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 3 | Gordon & Betty Moore Foundation 1661 Page Mill Road Palo Alto CA 94304 | \$ 30,250 OPY | Person X Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 4 | Overbrook Foundation 22 East 42nd street, #2500 New York NY 10168 | \$ 50,000 | Person X Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 5 | Packard Foundation 343 2nd St. Los Altos CA 94022 | \$ 60,000 | Person X Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 6 | Rockefeller Foundation 420 5th ave. New York NY 10018 | \$ 30,250 | Person X Payroll Noncash (Complete Part II for noncash contributions.) |

9456 Mongabay Org Corp 45-3714703

California Statements

4/7/2014 5:45 PM

FYE: 12/31/2013

Statement 1 - Form 199, Part II, Line 7 - Other Income

| Description | Amount |
|-------------|------------|
| Advertising | \$ 394 |
| Total | \$ 394 |

Draft-COPY

Name

California Statements

FYE: 12/31/2013

45-3714703

<u>Statement 2 - Form 199, Part II, Line 9 - Contributions, Gifts, Grants, and Similar Amounts</u>

| PSA | Class | Name Name | | Name Address | | City | | ite Zip | |
|-----|--------------|-------------------|-----------------------------|-----------------------------|------------------------|--------------------|----------------------|---------------------------|------|
| | Relationship | Status | Purpose | Amount | Noncash Description | FMV Explanation | Book Value Amount | Book Value Explanation | Date |
| 1 | | | | 1,638 | | | | | |
| 2 | Grant | EarthSoul Product | ions LLC Film production | 41 Rosewood Drive 25,980 | | Sag Harbor | NY | 11963 | |
| 2 | Grant | Acate Amazon Cons | | PO Box 15895 20,725 | | San Francisco | CA | 94115 | |
| 2 | Subtotal | | | \$ 46,705 | | | | | |
| | Total | | | \$ 48,343 | | | | | |

Statement 3 - Form 199, Part II, Line 11 - Officer Compensation Address

| | City | State | Zip | Title | Avg Compensation Hrs Amount |
|---------------------|------|-------|-----|----------------------|--------------------------------|
| Rhett A. Butler | - | | • | | |
| Nancy Abraham | | | | ED/Chair to Oct/Sec. | 40.00 |
| - | | | | Director | 1.00 |
| Alyson Blume | | | | Dir/Chair Oct to Dec | 1.00 |
| Penn A. Butler | | | | | |
| Brodie Ferguson | | | | Director | 1.00 |
| _ | | | | Director/Chairman | 1.00 |
| Triona Gogarty | | | | Director | 1.00 |
| Christopher Herndon | | | | | |
| Tim Kelley | | | | Director/Treasurer | 1.00 |
| TIM ROTTCy | | | | Director | 1.00 |

9456 Mongabay Org Corp 45-3714703

California Statements

4/7/2014 5:45 PM

FYE: 12/31/2013

Statement 3 - Form 199, Part II, Line 11 - Officer Compensation (continued)

| Name | | | Addı | ress | |
|---------------------|------|---------|------|----------|-----------------------------|
| | City | State _ | Zip | Title | Avg Compensation Hrs Amount |
| William F. Laurance | | | | Piece | 1 00 |
| Marion O'Leary | | | | Director | 1.00 |
| _ | | | | Director | 1.00 |
| Peter Riggs | | | | Director | 1.00 |
| Susan Sanchez | | | | | |
| Griff Baker | | | | Director | 1.00 |
| Grill Baker | | | | Director | 1.00 |
| Total | | | | | 0 |

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9456 Mongabay Org Corp 45-3714703

California Statements

4/7/2014 5:45 PM

FYE: 12/31/2013

Statement 4 - Form 199, Part II, Line 17 - Other Expenses

| Description | | Amount |
|-------------------------|----|---------|
| Payroll Taxes | \$ | 2,755 |
| Accounting | | 1,150 |
| Independent contractors | | 114,987 |
| Travel | | 27,759 |
| Office | | 11,302 |
| Insurance | _ | 1,467 |
| Total | \$ | 159,420 |

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