Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047 Open to Public Inspection

Department of the Treasury

benefit trust or private foundation)

The organization may have to use a copy of this return to satisfy state reporting requirements. and ending JUN 30, 2013 For the 2012 calendar year, or tax year beginning JUL 1, 2012 D Employer identification number Check if C Name of organization Address ROCKY MOUNTAIN INSTITUTE Name change 74-2244146 Doing Business As nitial return Room/suite Number and street (or P.O. box if mail is not delivered to street address) E Telephone number 303-245-1003 Termin-ated 1820 FOLSOM STREET Amended G Gross receipts \$ 16,933,176. City, town, or post office, state, and ZIP code Applica-BOULDER, CO 80302 H(a) Is this a group return pending F Name and address of principal officer: JULES KORTENHORST for affiliates? 1820 FOLSOM STREET, BOULDER, CO H(b) Are all affiliates included? 527 Tax-exempt status: X 501(c)(3) 4947(a)(1) or 501(c)() (insert no.) If "No," attach a list. (see instructions) J Website: WWW.RMI.ORG H(c) Group exemption number K Form of organization: X Corporation L Year of formation: 1982 M State of legal domicile: CO Trust Association Other > Part I Summary Briefly describe the organization's mission or most significant activities: OUR MISSION IS TO DRIVE THE Governance EFFICIENT AND RESTORATIVE USE OF RESOURCES. if the organization discontinued its operations or disposed of more than 25% of its net assets Check this box 17 Number of voting members of the governing body (Part VI, line 1a) 14 Number of independent voting members of the governing body (Part VI, line 1b) 97 Total number of individuals employed in calendar year 2012 (Part V, line 2a) 5 20 6 Total number of volunteers (estimate if necessary) 4.935. 7a 7 a Total unrelated business revenue from Part VIII, column (C), line 12 0. b Net unrelated business taxable income from Form 990-T, line 34 Prior Year **Current Year** 7,622,879 13,905,792. Contributions and grants (Part VIII, line 1h) Revenue 2,761,184 2,374,423. Program service revenue (Part VIII, line 2g) 152,083. -278,218 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 45,082. -84,999 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 16,477,380. 10 020 846 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 0 0. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0 0. Benefits paid to or for members (Part IX, column (A), line 4) 7,456,118 8,515,261. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 0. 16a Professional fundraising fees (Part IX, column (A), line 11e) **b** Total fundraising expenses (Part IX, column (D), line 25) 4,299,744 4,035,557. Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 11,755,862 12,550,818. Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) -1,735,016 3,926,562. Revenue less expenses. Subtract line 18 from line 12 **Beginning of Current Year** 50 **End of Year** 10,280,047 13,475,076. Total assets (Part X, line 16) 2,720,530 1,713,682. 21 Total liabilities (Part X, line 26) let | 7,559,517. 11,761,394. Net assets or fund balances. Subtract line 21 from line 20 Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Signature of officer Sign JULES KORTENHORST PRESIDENT & CEO Here Type or print name and title Date Print/Type preparer's name 11/6/2013 P00645252 Paid DORI J. EGGETT 46-1497033 Firm's name EKS&H LLLP Firm's EIN > Preparer Firm's address 7979 E. TUFTS AVENUE, Use Only SUITE Phone no. 303-740-9400 DENVER, CO 80237-2521 Yes No May the IRS discuss this return with the preparer shown above? (see instructions)

Pa	t III Statement of Program Service Accomplishments	_
	Check if Schedule O contains a response to any question in this Part III	<u>_</u>
1	Briefly describe the organization's mission:	
	WE ENVISON A WORLD THRIVING, VERDANT, AND SECURE, FOR ALL, FOR EVER.	_
	TO THAT END, OUR MISSION IS TO DRIVE THE EFFICIENT AND RESTORATIVE USE	_
	OF RESOURCES.	_
_		_
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?	
)
•	If "Yes," describe these new services on Schedule O. Did the organization cease conducting, or make significant changes in how it conducts, any program services? X Yes No.	_
3	· · · · · · · · · · · · · · · · · · ·)
4	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and	
	revenue, if any, for each program service reported.	
 4а	(Code:) (Expenses \$ 8 , 247 , 204 . including grants of \$) (Revenue \$ 2 , 373 , 673 .	_
Ta	TRANSFORM GLOBAL ENERGY USE TO CREATE A CLEAN, PROSPEROUS, AND SECURE	,)
	FUTURE. DRIVE SECTOR IMPACT: BUILDINGS - ENVISION ENERGY EFFICIENCY	-
	REVOLUTION REDUCING FOSSIL FUEL USE WHILE REVITALIZING REAL-ESTATE	_
	SECTOR, CREATING JOBS, AND REVIVING U.S. ECONOMY; ELECTRICITY -	_
	ACCELERATE CHANGE OF AGING, FOSSIL FUEL RELIANT, ELECTRICAL SYSTEM TO	_
	CLEAN, RELIABLE, AFFORDABLE, CUSTOMER-CENTRIC SYSTEM, USING DISTRIBUTED	_
	RENEWABLE RESOURCES; TRANSPORTATION - INCREASE LIGHTWEIGHT,	_
	ADVANCED-COMPOSITE MATERIALS AND MANUFACTURING TO ANSWER DESIGN AND	
	AUTO MAKING CHALLENGES FOR SAFE, ULTRALIGHT, EFFICIENT VEHICLES;	
	INDUSTRY - RESOLVE CHALLENGES FOR INDUSTRIAL PROCESSES AND EQUIPMENT TO	
	INCREASE ENERGY EFFICIENCY WHILE INVIGORATING AND DE-RISKING THE	
	SECTOR, CREATING JOBS AND DRIVING GLOBAL COMPETITIVENESS.	
4b	(Code:) (Expenses \$1,555,195. including grants of \$) (Revenue \$750.)
	COMMUNICATION: THIS GROUP COVERS THE FULL COMPLEMENT OF	
	COMMUNICATION BY WORKING WITH RMI'S RESEARCH & CONSULTING STAFF TO	_
	CREATE THE NECESSARY PLANS TO SUPPORT THE VARIOUS PROGRAM	_
	INITIATIVES AND PROJECTS. A LEAD COMMUNICATIONS PERSON IS PLACED	_
	WITH EACH R&C TEAM TO COORDINATE ALL COMMUNICATIONS ACTIVITIES	_
	INCLUDING: CONSULTING REPORTS, WHITE PAPERS, CONFERENCE PAPERS,	_
	ANNUAL REPORTS AND BOOKS. ADDITIONALLY, THROUGH WEB, FILM,	_
	MULTIMEDIA AND BROADCASTING, THE COMMUNICATIONS GROUP CREATES BOTH IN-HOUSE AND SUBCONTRACTED PRODUCTIONS THAT PROVIDE CONSIDERABLE	_
	MEDIA COVERAGE OF RMI'S WORK AND PEOPLE.	_
	MEDIA COVERAGE OF RMI S WORK AND PEOPLE.	_
		_
40	(Code:) (Expenses \$ 54,319. including grants of \$) (Revenue \$	_
-10	(Code:) (Expenses \$54,319. including grants of \$) (Revenue \$) WINDSTAR LAND CONSERVANCY: RMI WORKS IN CONJUNCTION WITH THE WINDSTAR	. ,
	FOUNDATION TO MANAGE AND PROTECT, IN PERPETUITY, THE AESTHETIC,	_
	WILDLIFE, AND NATURAL VALUES OF A 957-ACRE PROPERTY LOCATED IN OLD	_
	SNOWMASS, CO WHERE RMI'S OFFICES ARE LOCATED.	_
		_
		_
		_
4d	Other program services (Describe in Schedule O.)	
	(Expenses \$ including grants of \$) (Revenue \$)	_
4e	Total program service expenses ▶ 9,856,718.	

232002 12-10-12

Form 990 (2012) ROCKY MOUNTAIN INS Part IV Checklist of Required Schedules

1 Is the organization described in section S01(c)(s) or 4947(s)(1) (other than a private foundation)? 1				Yes	No
2 Is the organization required to complete Schedule <i>B</i> , Schedule of Contributore 3 Did the organization regigne in direct or indirect political campagin activities on behalf of or in opposition to candidates for public direct if Yes," complete Schedule <i>C</i> , Part <i>I</i> 4 Section 501(c)(3) organizations. Did the organization rangage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>I</i> Yes, "complete Schedule <i>C</i> , Part <i>II</i> 5 Is the organization as ection 501(c)(4) of 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as adefined in Revenue Procedure 98 1917 <i>I</i> Yes, "complete Schedule <i>C</i> , Part <i>II</i> 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 drands or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such drands or accounts? <i>II</i> Yes, "complete Schedule <i>D</i> , Part <i>II</i> 7 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>II</i> Yes," complete Schedule <i>D</i> , Part <i>III</i> 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>II</i> Yes," complete Schedule <i>D</i> , Part <i>III</i> 9 Did the organization 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 oredit consensing, debt management, credit repair, or debt negotiation services? <i>II</i> Yes," if Yes," complete Schedule <i>D</i> , Part <i>III</i> 10 Did the organization report an amount for Irrest programs in temporarily restricted endowments, permanent endowments, or quasi-admonwents? <i>II</i> Yes," complete Schedule <i>D</i> , Part <i>VII</i> 11 Did the organization report an amount for Irrestments, program related in Part X, line 107 <i>II</i> Yes," complete Schedule <i>D</i> , Part <i>VII</i> 12 Did the organization report an amoun	1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
3 Dit the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public offices (Pres) "Yes", complete Schedule C, Part I			1		
public office? If "Yes," complete Schedule C, Part I 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 Is the organization a section 501(c)(3) or 501(c)(6). or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-197 If "Yes," complete Schedule C, Part III Is 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 II If the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historical dreasas, or historical treasures, or other similar assets? If "Yes," complete Schedule D, Part II If the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part IV Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV If the organization dischort of through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V II If the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V II Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V II Did the organization report an amount for other assets in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X II Did the organi	2		2	Х	
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) leaction in effect during the text year? If "Yes," complete Schedule C, Part II be organization as 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 1-9? If "Yes," complete Schedule C, Part II bit he 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 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 II Did the organization maintain any donor advised funds or any similar funds or accounts? If "Yes," complete Schedule D, Part II Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent and owners, or quasi-endowments? If "Yes," complete Schedule D, Part V Did the organization assets or any of the foliowing questions is "Yes," then complete Schedule D, Part V II If the organization saves to any of the foliowing questions is "Yes," then complete Schedule D, Part V II If the organization report an amount for investments ofter securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 167 If "Yes," complete Schedule D, Part VII Did the organization report an amount for investments of the securities in Part X, line 150 If "Yes," complete Schedule D, Part X II II II X III Did the organization is liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," c	3		3		Х
5 Is the organization a section 501(c)(4), 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98.197 If "yes," complete Schedule C, Part III 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 II Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV Did the organization's answer to any of the following questions is "Yes," then complete Schedule D, Part V 11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Part V, II If the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI 11 If the organization report an amount for investments - other securities in Part X, line 10? If "Yes," complete Schedule D, Part VI 11 If X 2 Did the organization report an amount for investments - other asseutiries in Part X, line 13 that is 5% or more of its total assests reported in Part X, line 16? If "Yes," complete Schedule D, Part VI 11 X 2 Did the organization report an amount for investments - program related in Part X, line 16? If "Yes," complete Schedule D, Part VI 11 X 2 Did the organization report an amount for investments - program related in Part X, line 16? If "Yes," complete Schedule D, Part XI If X 2 Did the organization orbital ass	4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	4		х
similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III or Provide advice on the distribution or investment of amounts in such funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such 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 III or Ves," complete Schedule D, Part III or Ves, "complete Schedule D, Part III or Ves," complete Schedule D, Part III or Ves, "complete Schedule D, Part III or Ves," complete Schedule D, Part III or Ves," complete Schedule D, Part III or Ves, "complete Schedule D, Part III or Ves," complete Schedule D, Part III or Ves, "complete Schedule D, Part III or Ves," complete Schedule D, Part III or Ves," complete Schedule D, Part III or Ves, "complete Schedule D, Part III or Ves," complete Schedule D, Part III or Ves, "complete Schedule D, Part III or Ves," complete Schedule D, Part III or Ves," complete Schedule D, Part III or Ves, "complete Schedule D, Part III or Ves," complete Schedule D, Part III or Ves, "complete Schedule D, Part III or Ves," complete Schedule D, Part III or Ves," complete Schedule D, Part III or Ves," complete S	5				
provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 8			5		Х
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part III 9 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 9 Did the organization or port an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 10 Did the organization or sanswer to any of the following questions is "Yes," then complete Schedule D, Part V 11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Part V 12 If the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V 13 If the organization report an amount for investments - other securities in Part X, line 10? If "Yes," complete Schedule D, Part VII 14 D b dthe organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 15 Did the organization report an amount for investments - other assets in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 16 Did the organization report an amount for their 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 X 11 D Lit the organization report an amount for their liabilities 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 X 11 D Lit the organization sparate or consolidated financial statements for the tax year? If Yes," complete Sch	6	,	6		х
the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 8 Solid the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	7				
8			7		х
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not liated in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments of "Yes," complete Schedule D, Part V 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. 12 Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI 13 Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 14 Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 15 Did the organization report an amount for other liabilities 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 X III X 16 Did the organization is liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X III X 17 Did the organization beganate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X III X 18 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 19 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate gra	8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	8		Х
amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable. a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII d Did the organization report an amount for investments - other securities in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 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 X III d Did the organization report an amount for other liabilities 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 X III d Did the organization is separate or consolidated financial statements for the tax year include a footnote that addresses the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X IIII b Was the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X IIII b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X IIII b Was the organization have aggregate revelues or expense	9				
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, III, IX, or X as applicable. a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI 11a X 1b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 11b X 11b X 11c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 11c X 1		amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?	g		Х
endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable. a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII d Did the organization report an amount for other labilities 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 VIII 11c	10				
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. 2 Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI 2 Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 2 Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 3 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 VIII 4 Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 5 Did the organization's siability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 6 Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X I and XII 7 Did the organization an included in consolidated, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII is optional 8 Did the organization an answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 9 Did the organization an animatian an office, employees, or agents outside of the United States? 10 Did the organization report on Part IX, column (A), line 3, 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 entity located outside the United States? If "Yes," complete Schedule F, Parts III and IV 15 Did the organization report on Part IX, column (A), l			10	х	
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 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 X III III X 11d	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			
b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 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 VIII e Did the organization report an amount for other liabilities 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 X 110 the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 111 that X 112 Did the organization is liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 113 Did the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X and XII is optional 113 Is 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, Part X and XII is optional 114 Did the organization maintain an office, employees, or agents outside of the United States? 115 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 II and IV 116 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of garegate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	а	• • •			
b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 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 e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 110			11a	х	
c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII. 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. e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part 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 111 X 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X I and XII b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII is optional 12a X 13 Is the organization a school described in section 170(b)(1)A(ii)? If "Yes," complete Schedule D, Parts XI and XII is optional 12b 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 II and IV 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV 15 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 II 17 X X 15 Did the organ	b				
assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 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 e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part 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 111		assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	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 e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part 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 116	С				
Part X, line 16? If "Yes," complete Schedule D, Part IX e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part 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 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X I and XII b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII is the organization a school described in section 170(b)(1)(A)(iii)? If "Yes," complete Schedule E 13			11c		Х
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization obtain separate, independent audited FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X I and XII 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 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13	d				
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 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII 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? 14b 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 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts III and IV 16 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV 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 II 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines and 8a? If "Yes," complete Schedule G, Part III 19 Did the organization report more					
the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII 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 Is the organization a school described in section 170(b)(1)(A)(iii)? If "Yes," complete Schedule E 13			11e		
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII 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)(iii)? If "Yes," complete Schedule E 13 X 14a Did the organization maintain an office, employees, or agents outside of the United States? 14a 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 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts III and IV 16 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 17 Did the organization report more than \$15,000 of expenses for professional fundraising services on Part VIII, lines and 8a? If "Yes," complete Schedule G, Part II 18 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 II 18 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	T		115	x	
Schedule D, Parts XI and XII 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 Did the organization maintain an office, employees, or agents outside of the United States? 14a 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 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV 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 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines and 8a? If "Yes," complete Schedule G, Part II 18 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 Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	122		111		
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 15 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 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV 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 II 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1 and 8a? If "Yes," complete Schedule G, Part II 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 Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a X	ızu		12a	х	
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 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 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV 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 II 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 10 10 10 10 10 10 10 10 10 10 10 10 10 1	b	· · · · · · · · · · · · · · · · · · ·			
14a Did the organization maintain an office, employees, or agents outside of the United States? 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 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV 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 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1 and 8a? If "Yes," complete Schedule G, Part II 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 Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a X		If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
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 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV 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 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 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 20 Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20 Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	13		13		Х
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 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV 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 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 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 Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a X	14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
or more? If "Yes," complete Schedule F, Parts I and IV 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV 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 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 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 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	b				
Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV 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 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 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 20 Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20 X					
or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV 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 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 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 20 Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20 X			14b		Х
Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? 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 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 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 20 Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20 X	15		4-		v
located outside the United States? If "Yes," complete Schedule F, Parts III and IV 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 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 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 X	16		15		
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 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 20 Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20 X	Ю		16		x
column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I 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 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 20 Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20 X	17		10		
1c and 8a? If "Yes," complete Schedule G, Part II 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 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a X		column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		Х
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 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a X	18	1c and 8a? If "Yes," complete Schedule G, Part II	18		Х
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a X	19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	19		Х
	20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H			Х

Part IV Checklist of Required Schedules (continued)

21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the		Yes	No
_ '	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		х
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to line 25	24a		х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Х
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Х
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If</i> "Yes," <i>complete Schedule M</i>	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	х	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	37		Х
-	Note. All Form 990 filers are required to complete Schedule O	38	x	

Statements Regarding Other IRS Filings and Tax Compliance Part V

	Check if Schedule O contains a response to any question in this Part V					ᆜ
			1		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		39			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and r					
	(gambling) winnings to prize winners?	;	 I	1c	Х	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,					
	filed for the calendar year ending with or within the year covered by this return	2a	97			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retu	rns?		2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instruction					
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?			3a	Х	
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O			3b	Х	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other		•			ĺ
	financial account in a foreign country (such as a bank account, securities account, or other financial	accou	nt)?	4a		Х
b	If "Yes," enter the name of the foreign country: ►					
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	action	?	5b		Х
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			5с		<u> </u>
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did t	he org	anization solicit			ĺ
	any contributions that were not tax deductible as charitable contributions?			6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contribu	tions c	or gifts			ĺ
	were not tax deductible?			6b		
7	Organizations that may receive deductible contributions under section 170(c).					
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and se	rvices p	provided to the payor?	7a		Х
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w	as rec	quired			ĺ
	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 benefit of	contra	ct?	7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit cont	ract?		7f		Х
g	If the organization received a contribution of qualified intellectual property, did the organization file F	orm 88	399 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization	ation f	ile a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section $509(a)(3)$ supporting organizations. D					
	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at	any tin	ne during the year?	8		<u> </u>
9	Sponsoring organizations maintaining donor advised funds.					
а	Did the organization make any taxable distributions under section 4966?			9a		<u> </u>
b	Did the organization make a distribution to a donor, donor advisor, or related person?			9b		<u> </u>
10	Section 501(c)(7) organizations. Enter:					
а	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	Section 501(c)(12) organizations. Enter:					
а	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against					
	amounts due or received from them.)	11b				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1041	?	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	Is the organization licensed to issue qualified health plans in more than one state?			13a		
	Note. See the instructions for additional information the organization must report on Schedule O.					
b	Enter the amount of reserves the organization is required to maintain by the states in which the					
	organization is licensed to issue qualified health plans	13b				
	Enter the amount of reserves on hand	13c				
	Did the consciention was in a second of the balance transfer and the theory of the second of the sec			14a		Х
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedul	le O		14b		
				Form	990	(2012)

Pai	t VI Governance, Management, and Disclosure For each "Yes" response to lines 2 th	-		"No" r	espon	se		
	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O					х		
800	Check if Schedule O contains a response to any question in this Part VI					Δ		
Sec	tion A. Governing Body and Management				V	N _a		
4.		۱	1	7	Yes	No		
та	Enter the number of voting members of the governing body at the end of the tax year	1a		4				
	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.	46	1	4				
	Enter the number of voting members included in line 1a, above, who are independent	1b		1				
2				2		х		
3	officer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or under th							
3	of officers, directors, or trustees, or key employees to a management company or other person?		· · · · · ·	3		x		
4	Did the organization make any significant changes to its governing documents since the prior Form 9			4		Х		
5	Did the organization become aware during the year of a significant diversion of the organization's ass			5		Х		
6	Did the organization have members or stockholders?			6		Х		
7a	Did the organization have members, stockholders, or other persons who had the power to elect or approximately an electron and the power to elect or approximately and the organization have members and stockholders.			–				
, u	more members of the governing body?			7a		x		
h	Are any governance decisions of the organization reserved to (or subject to approval by) members, s			, u				
~	persons other than the governing body?			7b		x		
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year			1.5				
а	The governing body?	-	=	8a	х			
b	Each committee with authority to act on behalf of the governing body?			8b	х			
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be rea							
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9		х		
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	evenue	e Code.)					
					Yes	No		
10a	Did the organization have local chapters, branches, or affiliates?			10a		Х		
b	If "Yes," did the organization have written policies and procedures governing the activities of such cl	napter	s, affiliates,					
	and branches to ensure their operations are consistent with the organization's exempt purposes? $\ _{\cdot\cdot\cdot}$			10b				
	Has the organization provided a complete copy of this Form 990 to all members of its governing bod	y befo	re filing the form?	11a	Х			
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.							
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a	Х			
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise			12b	Х			
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y	es," de	escribe					
40	in Schedule O how this was done			12c	X			
13	Did the organization have a written whistleblower policy?			13	X			
14	Did the organization have a written document retention and destruction policy?			14				
15	Did the process for determining compensation of the following persons include a review and approve		iuepenaent					
_	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			450	х			
a h	The organization's CEO, Executive Director, or top management official			15a 15b	Х			
b	Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			130				
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arranger	ment w	/ith a					
···u	taxable entity during the year?			16a		х		
h	If "Yes," did the organization follow a written policy or procedure requiring the organization to evalua			100				
~	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ							
	exempt status with respect to such arrangements?			16b				
Sec	tion C. Disclosure							
17	List the states with which a copy of this Form 990 is required to be filed AL, AK, AZ, AR, CA, CO, CO	r,DC,	FL,GA,HI,IL					
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T			availat	le			
	for public inspection. Indicate how you made these available. Check all that apply.							
	Own website Another's website I Upon request Other (explain	in Sch	nedule O)					
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, co	onflict	of interest policy, a	nd finai	ncial			
	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.	

ED MCCULLOUGH - 303-245-1003 1820 FOLSOM STREET, BOULDER, CO 80302

232006 12-10-12

SEE SCHEDULE O FOR FULL LIST OF STATES

Form **990** (2012)

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization:

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

Check if Schedule O contains a response to any question 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.

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

- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

(A) Name and Title	(B) Average hours per week	box	not c , unle: cer an	ss pe	ition more rson	than is bot	h an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(list any hours for related organizations below line)	Les for men institutional trustee or direct from the molecular frustee or direct frustee from the molecular frustee or direct frustee from the molecular frustee or direct frustee	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations					
(1) JOHN ABELE TRUSTEE	1.00	.,						0.	0.	0
(2) DAVID ALLEN	1.00	Х						0.	0,	0.
TRUSTEE	1.00	х						0.	0.	0.
(3) SHARMY ALTSHULER	1.00	^						0.	0.	
TRUSTEE	1.00	х						0.	0.	0.
(4) CARL BASS	1.00									
TRUSTEE		x						0.	0.	0.
(5) PETER BOYER	1,00									
TRUSTEE		x						0.	0.	0.
(6) MARY CAULKINS	1.00									
TRUSTEE		х						0.	0.	0.
(7) TOM DINWOODIE	1.00									
LEAD TRUSTEE		х		х				0.	0.	0.
(8) MICHAEL FAIN	1.00									
TRUSTEE		х						0.	0.	0.
(9) SUZANNE FARVER	1.00									
TRUSTEE/TREASURER		Х		Х				0.	0.	0.
(10) ARJUN GUPTA	1.00									
TRUSTEE		Х						0.	0.	0.
(11) KRISTINA JOHNSON	1.00									
TRUSTEE		Х						0.	0.	0.
(12) CHRIS SAWYER	1.00									
TRUSTEE		Х						0.	0.	0.
(13) TED WHITE	1.00									
TRUSTEE		Х						0.	0.	0.
(14) REUBEN MUNGER	1.00									
TRUSTEE	10.00	Х						0.	0.	0.
(15) AMORY LOVINS	40.00			. I				705 064	2	00 010
CHIEF SCIENTIST	40.00	Х		Х	_			725,261.	0.	22,818.
(16) MICHAEL POTTS	40.00	x		. I				207 051	0.	26 225
PRESIDENT & CEO (17) MARTHA PICKETT	40.00	^		Х	_			307,851.	0.	26,225.
EXECUTIVE DIRECTOR	40.00	x		х				286 961	0.	20 82 <u>8</u>
EVECOTIAE DIKECTOK	l	^		Λ		<u> </u>		286,961.	υ.	20,828.

232007 12-10-12

1 61111 666 (2612)	UNTAIN INSTITUT	E							74-2244146	Р	age 8
Part VII Section A. Officers, Directors	, Trustees, Key Em	ploy	ees	, and	d Hi	ghe	st C	ompensated Employe	es (continued)		
(A)	(B)			_ (0	•			(D)	(E)	(F)	
Name and title	Average	(do	not c	Pos heck			one	Reportable	Reportable	Estimate	ed
	hours per	box	, unle cer ar	ss pe	rson i	is bot	h an	compensation	compensation	amount	
	week (list any	H.	T a		110010	17 4 40	T	from	from related	other	
	hours for	lirect				L		the organization	organizations (W-2/1099-MISC)	compensa from th	
	related	e or c	stee			ısatec		(W-2/1099-MISC)	(***2/1099*****100)	organiza	
	organizations	truste	al trus		yee	ın pe		(** =/ *********************************		and relat	
	below	ndividual trustee or director	nstitutional trustee	er	Key employee	Highest compensated employee	Je.			organizat	ions
	line)	Indiv	Instit	Officer	Key e	High emp	Former				
(18) EDGAR MCCULLOUGH	40.00										
DIRECTOR OF FINANCE				Х				139,066.	0.	20	,547
(19) ROBERT HUTCHINSON	40.00										
PROGRAM DIRECTOR		Ш			Х			241,824.	0.	24	,975
(20) EDWARD HARVEY	40.00										
VP - DEVELOPMENT		Ш			Х			244,700.	0.	10	,250.
(21) JON CREYTS	40.00										
PROGRAM DIRECTOR					Х			173,478.	0.	12	,165
(22) JAMES NEWCOMB	40.00										
PROGRAM DIRECTOR					Х			233,324.	0.	24	,475
(23) BRAD MUSHOVIC	40.00										
VP - COMMUNICATIONS					Х			200,574.	0.	22	,725
(24) CAROL NASTA	40.00										
DIRECTOR OF HUMAN RESOURCES						Х		133,944.	0.	20	,645
(25) VICTOR OLGYAY	40.00										
PRINCIPAL						Х		135,759.	0.	21	,187
(26) JAMES BREW	40.00										
PRINCIPAL						Х		139,386.	0.		,561
1b Sub-total								2,962,128.	0.		,401
c Total from continuation sheets to P	art VII, Section A					\blacktriangleright		270,635.	0.		,804
d Total (add lines 1b and 1c)		<u></u>				<u> </u>		3,232,763.	0.	262	,205
2 Total number of individuals (including	but not limited to th	ıose	liste	ed al	bove	e) wł	no re	eceived more than \$100	0,000 of reportable		
compensation from the organization	>										19
									,	Yes	No
3 Did the organization list any former o	fficer, director, or tru	uste	e, ke	y er	nplo	yee	, or l	highest compensated e	mployee on		

Did the organization list any **former** officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual

For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual

Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
REOS PARTNERS, INC, ONE BROADWAY, 14TH		
FLOOR, CAMBRIDGE, MA 02142	CONSULTING	220,440.
TABLA RAZA		
75 FLINT HILL ROAD, LYME, NH 03768	CONSULTING	175,960.
CMGRP, INC		
P.O. BOX 7247-6593, PHILADELPHIA, PA 19170	MARKETING-BRANDING	126,150.

? Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization

Form **990** (2012)

rendered to the organization? If "Yes," complete Schedule J for such person

Form 990 ROCKY MOUNTAI	N INSTITUT	E							74-224414	6
Part VII Section A. Officers, Directors, Tru	ıstees, Key Er	nplo	yee	s, a	nd l	ligh	est	Compensated Employ	ees (continued)	
(A) Name and title	(B) Average hours	(cl	neck	Pos	C) ition that		oly)	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	per week (list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(27) JULIE LEVINE	40.00					x		127 626	0.	6 520
DIRECTOR OF DEVELOPMENT (28) LENA HANSEN	40.00					^		137,636.	0.	6,529
PRINCIPAL						х		132,999.	0.	16,275
Total to Part VII, Section A, line 1c	<u> </u>					<u> </u>		270,635.		22,804

Form	990	(2012) ROCKY M	OUNTAIN INST	ITUTE			74-2244146	Page 9
	rt VI	III Statement of Rever						
		Check if Schedule O cont	ains a response	to any question i	n this Part VIII			
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
nts nts	1 a	Federated campaigns	1a					
Contributions, Gifts, Grants and Other Similar Amounts		Membership dues						
Am (Fundraising events						
重	(d Related organizations	1d	4,105,793.				
i,i	•	e Government grants (contribut	ions) 1e					
ţi	f	f All other contributions, gifts, gran	ts, and					
ള		similar amounts not included above	ve 1f	9,799,999.				
불위	ç	g Noncash contributions included in lines	1a-1f: \$	89,228.				
a S	ŀ	n Total. Add lines 1a-1f			13,905,792.			
				Business Code				
8	2 a	CONSULTING FEES		541610	2,102,951.	2,102,951.		
و چَ	k	PROJECT REVENUE		541900	243,930.	243,930.		
Sugar	c	RENTAL INCOME		531120	26,792.	26,792.		
eve eve	c	d PUBLICATION REVENUE		511190	750.	750.		
Program Service Revenue	6	e						
- □	f	f All other program service reve	nue					
	ç	Total. Add lines 2a-2f			2,374,423.			
	3	Investment income (including	dividends, intere	est, and				
		other similar amounts)		▶	169,350.			169,350.
	4	Income from investment of tax		· •				
	5	Royalties			39,149.			39,149.
			(i) Real	(ii) Personal				
		a Gross rents						
		Less: rental expenses						
		Rental income or (loss)						
		d Net rental income or (loss)						
	7 a	a Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory	34,827.	403,702.				
	k	Less: cost or other basis	F1 465	404 221				
		and sales expenses	51,465. -16,638.					
	•	Gain or (loss)			-17,267.	-629.		-16,638.
		d Net gain or (loss)		·····	-17,207.	-029.		-10,030,
Other Revenue	8 8	 Gross income from fundraising including \$ 						
, er		including \$ contributions reported on line						
8		•	•					
her		Part IV, line 18 b Less: direct expenses						
ᅙ		Net income or (loss) from fund						
		a Gross income from gaming ac						
	5.	Part IV, line 19						
	ŀ	Less: direct expenses						
		Net income or (loss) from gam						
		a Gross sales of inventory, less		·····				
		and allowances						
	ŀ	Less: cost of goods sold						
		Net income or (loss) from sale						
		Miscellaneous Revenu		Business Code				
İ	11 a			900099	5,933.		4,935.	998.
	k	<u> </u>						

232009 12-10-12

Form **990** (2012)

192,859.

d All other revenue e Total. Add lines 11a-11d

Total revenue. See instructions.

5,933. 16,477,380.

2,373,794.

4,935.

Part IX | Statement of Functional Expenses

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

3000	Check if Schedule O contains a respons		- D-+ IV	, , ,	
	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 United States. See Part IV, line 21		охроносо	gorioral experiesce	охроносс
2	Grants and other assistance to individuals in				
_	the United States. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	2,738,047.	2,241,489.	117,246.	379,312.
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	4,633,270.	3,805,377.	250,443.	577,450.
8	Pension plan accruals and contributions (include	120 222	110 702	12 062	5 577
•	section 401(k) and 403(b) employer contributions)	138,332. 541,134.	119,792. 399,803.	12,963. 74,871.	5,577. 66,460.
9	Other employee benefits	464,478.	381,580.	41,038.	41,860.
10 11	Payroll taxes Fees for services (non-employees):	101,170.	301,300.	41,030.	41,000.
	` ` , ,				
	Management	6,887.		6,887.	
	Legal	51,000.		51,000.	
	Lobbying	7 - 7 - 7 - 7			
	Professional fundraising services. See Part IV, line 17				
	Investment management fees	35,133.		35,133.	
g	Other. (If line 11g amount exceeds 10% of line 25,				
·	column (A) amount, list line 11g expenses on Sch O.)				
12	Advertising and promotion	44,847.	44,634.	9.	204.
13	Office expenses	360,334.	221,368.	56,107.	82,859.
14	Information technology	202,425.	145,682.	28,889.	27,854.
15	Royalties				
16	Occupancy	744,022.	487,970.	185,537.	70,515.
17	Travel	843,800.	720,019.	31,848.	91,933.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	66,630	56 356	2 (20	7 (42
19	Conferences, conventions, and meetings	66,638.	56,356. 76,610.	2,639. 16,760.	7,643. 13,656.
20	Interest	107,026.	70,010.	10,700.	13,636.
21 22	Payments to affiliates Depreciation, depletion, and amortization	282,078.	201,912.	44,173.	35,993.
23	In	16,145.	16,145.	11,270	
23 24	Other expenses. Itemize expenses not covered	20,220.	20,220.		
	above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A)				
а	amount, list line 24e expenses on Schedule 0.)	858,922.	760,213.	42,176.	56,533.
a b	MISCELLANEOUS	218,715.	45,296.	129,068.	44,351.
C	RECRUITING	186,038.	120,925.	65,113.	11,001.
d	RES PRESENTATION MTG	11,547.	11,547.		
	All other expenses	, -	, -		
25	Total functional expenses. Add lines 1 through 24e	12,550,818.	9,856,718.	1,191,900.	1,502,200.
26	Joint costs . Complete this line only if the organization		. ,	. ,	· ,
٠	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				
22201	0 12-10-12				Form 990 (2012)

Form 990 (2012) Part X | Balance Sheet

Pa	π λ	Balance Sheet					
		Check if Schedule O contains a response to an	y quest	ion in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			926,287.	1	474,398.
	2	Savings and temporary cash investments			2,590.	2	2,270,386.
	3	Pledges and grants receivable, net			324,000.	3	300,000.
	4	Accounts receivable, net		587,865.	4	452,885	
	5	Loans and other receivables from current and for					
		trustees, key employees, and highest compens					
		Part II of Schedule L		5			
	6	Loans and other receivables from other disquali					
		section 4958(f)(1)), persons described in section					
Assets		employers and sponsoring organizations of sec	tion 50	1(c)(9) voluntary			
		employees' beneficiary organizations (see instr)	. Comp	lete Part II of Sch L		6	
	7	Notes and loans receivable, net			19,673.	7	94,299
Ass	8	Inventories for sale or use			11,768.	8	2,420
-	9	B			88,474.	9	123,689
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	3,636,514.			
	b	Less: accumulated depreciation		1,973,497.	1,626,392.	10c	1,663,017.
	11	Investments - publicly traded securities		5,981,209.	11	1,482,569.	
	12	Investments - other securities. See Part IV, line			12	5,970,555.	
	13	Investments - program-related. See Part IV, line		13			
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11	711,789.	15	640,858.		
	16	Total assets. Add lines 1 through 15 (must equ		10,280,047.	16	13,475,076.	
	17	Accounts payable and accrued expenses			1,483,219.	17	1,567,510.
	18	Grants payable		18			
	19	Deferred revenue		19			
	20	Tax-exempt bond liabilities		299,039.	20	0,	
S	21	Escrow or custodial account liability. Complete				21	
ij	22	Loans and other payables to current and forme					
Liabilities		key employees, highest compensated employee	es, and	disqualified persons.			
ב						22	
	23	Secured mortgages and notes payable to unrela	ated th	rd parties		23	
	24	Unsecured notes and loans payable to unrelate		The state of the s		24	
	25	Other liabilities (including federal income tax, pa					
		parties, and other liabilities not included on lines	s 17-24	. Complete Part X of			
		Schedule D			938,272.	25	146,172.
	26	Total liabilities. Add lines 17 through 25			2,720,530.	26	1,713,682.
		Organizations that follow SFAS 117 (ASC 958	3), ched	k here X and			
es		complete lines 27 through 29, and lines 33 ar	nd 34.				
S C	27	Unrestricted net assets			6,284,219.	27	10,374,196.
3ak	28	Temporarily restricted net assets	561,144.	28	560,508.		
β	29	Permanently restricted net assets		<u></u>	714,154.	29	826,690.
Ξ		Organizations that do not follow SFAS 117 (A	SC 95	B), check here ▶Ш			
ō		and complete lines 30 through 34.					
Net Assets or Fund Balances	30	Capital stock or trust principal, or current funds			30		
Ass	31	Paid-in or capital surplus, or land, building, or ed	quipme	nt fund		31	
et/	32	Retained earnings, endowment, accumulated in				32	
Z	33	Total net assets or fund balances			7,559,517.	33	11,761,394.
	34	Total liabilities and net assets/fund balances			10,280,047.	34	13,475,076.

Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1			,380.
2	Total expenses (must equal Part IX, column (A), line 25)	2	12	,550	,818.
3	Revenue less expenses. Subtract line 2 from line 1	3	3	,926	,562.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	7	,559	,517.
5	Net unrealized gains (losses) on investments	5		275	,315.
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	11	,761	,394.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				Ш
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	О.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d 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	Х	<u> </u>
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	e 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	e audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O.			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Audit			
	Act and OMB Circular A-133?		За		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required				
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		<u> </u>

SCHEDULE A

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support

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

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Employer identification number

		ROCKY MOUNTAIN INSTITUTE						74	4-224414	6			
Pa	art I	Reason	for Public Char	ity Status (All organiz	ations mu	st complet	e this part	:.) See inst	ructions.				
Γhe	organ	ization is not a	private foundation	because it is: (For lines	1 through	11, check	only one b	ox.)					
1		A church, cor	nvention of churche	s, or association of chur	ches desc	ribed in se	ction 170	(b)(1)(A)(i)					
2		•	ool described in section 170(b)(1)(A)(ii). (Attach Schedule E.)										
3		A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).											
4		A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name,											
•		city, and state:											
5		An organization operated for the benefit of a college or university owned or operated by a governmental unit described in											
3		-	•	-	inversity of	wrica or of	ociated by	a govern	nontal ani	t deserie	oca III		
6		section 170(b)(1)(A)(iv). (Complete Part II.)											
6	х	A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in											
7					or its supp	ort from a	governme	ental unit C	or ironi trie	general	public des	scribed	III
_			b)(1)(A)(vi). (Comple		(0	D4 II.)							
8	H			section 170(b)(1)(A)(vi).									
9				eives: (1) more than 33									
				nctions - subject to certa									
				axable income (less sect	tion 511 ta	x) from bu	sinesses a	acquired b	y the orga	ınization	after June	: 30, 197	75.
			509(a)(2). (Complete	•									
10	Н			perated exclusively to te									
11				perated exclusively for the									or
				ations described in secti				2). See se o	ction 509(a)(3). Ch	eck the bo	ox that	
				organization and compl					. — _				
		a Type I		•	ype III - Fu	-	-				n-function	•	•
e	• 📖			at the organization is not									
				han one or more publicly						9(a)(1) or	section 50)9(a)(2).	
f		If the organiz	ation received a writ	ten determination from t	the IRS tha	at it is a Ty	pe I, Type	II, or Type	e III				
			rganization, check th										. Ш
ç	J			organization accepted ar									
				lirectly controls, either al								Yes	No
				upported organization?									—
				n described in (i) above?									—
				person described in (i) o							11g(ii	<u>i) </u>	
h	1	Provide the fo	ollowing information	about the supported or	ganization	(s).							
				1	I		I		1 6-23-1-	H			
(i) Name	of supported	(ii) EIN	(iii) Type of organization		organization			(vi) Is organizațio	i tne on in col.	(vii) Amou	nt of mo	netary
	orga	anization		(described on lines 1-9 above or IRC section	in col. (i) lis	document?			(i) organiz U.S	ed in the	SL	upport	
				(see instructions))									
				, , , , , , , , , , , , , , , , , , , ,	Yes	No	Yes	No	Yes	No			
Γ∩+·	al												

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

Schedule A (Form 990 or 990-EZ) 2012

Page 2

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

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

Sec	tion A. Public Support								
Cale	ndar year (or fiscal year beginning in) 🖊	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total		
1	Gifts, grants, contributions, and								
	membership fees received. (Do not	7 002 170	0 000 505	10 400 010	7 622 070	13 005 700	40 601 272		
	include any "unusual grants.")	7,803,178.	9,868,505.	10,490,919.	7,622,879.	13,905,792.	49,691,273.		
2	Tax revenues levied for the organ-								
	ization's benefit and either paid to								
	or expended on its behalf								
3	The value of services or facilities								
	furnished by a governmental unit to								
	the organization without charge								
	Total. Add lines 1 through 3	7,803,178.	9,868,505.	10,490,919.	7,622,879.	13,905,792.	49,691,273.		
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)						13,876,724.		
	Public support. Subtract line 5 from line 4.						35,814,549.		
_	tion B. Total Support					· · · · · · · · · · · · · · · · · · ·			
Cale	ndar year (or fiscal year beginning in) 🖊	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total		
	Amounts from line 4	7,803,178.	9,868,505.	10,490,919.	7,622,879.	13,905,792.	49,691,273.		
8	Gross income from interest,								
	dividends, payments received on								
	securities loans, rents, royalties								
	and income from similar sources	218,201.	180,538.	155,537.	115,594.	208,499.	878,369.		
9	Net income from unrelated business								
	activities, whether or not the								
	business is regularly carried on			850.		963.	1,813.		
10	Other income. Do not include gain								
	or loss from the sale of capital								
	assets (Explain in Part IV.)	20,798.	12,251.	-42,230.	11,701.	5,933.	8,453.		
11	Total support. Add lines 7 through 10						50,579,908.		
12	Gross receipts from related activities,	etc. (see instruction	ons)			12	15,608,927.		
13	First five years. If the Form 990 is for	-			•				
~	organization, check this box and stop						>		
	tion C. Computation of Publi								
	Public support percentage for 2012 (li					14	70.81 %		
	Public support percentage from 2011					15	78.88 %		
16a	33 1/3% support test - 2012. If the o								
	stop here. The organization qualifies								
b	33 1/3% support test - 2011. If the o								
	and stop here. The organization quali	fies as a publicly s	upported organiza	ition			▶□		
17a	10% -facts-and-circumstances test	-							
	and if the organization meets the "fac-	ts-and-circumstand	ces" test, check th	is box and stop h	ere. Explain in Pai	rt IV how the organ	ization		
	meets the "facts-and-circumstances"	test. The organizat	tion qualifies as a p	oublicly supported	l organization		▶□		
b	10% -facts-and-circumstances test	-							
	more, and if the organization meets the	ne "facts-and-circur	mstances" test, ch	eck this box and	stop here. Explain	in Part IV how the			
	organization meets the "facts-and-circ	cumstances" test.	The organization q	ualifies as a public	cly supported orga	anization	▶Щ		
18									

Schedule A (Form 990 or 990-EZ) 2012

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

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

Section A. Public Support		,				
Calendar year (or fiscal year beginning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not						
include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and						
3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6.)						
Section B. Total Support				•	•	
Calendar year (or fiscal year beginning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income						
(less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b 11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on 12 Other income. Do not include gain or loss from the sale of capital						
assets (Explain in Part IV.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)14 First five years. If the Form 990 is for	the organization's	L s first second thir	L d fourth or fifth to	ax vear as a section	1 nn 501(c)(3) organia	zation
•	ū	•		•		· . 🗀
Section C. Computation of Publi						
15 Public support percentage for 2012 (li			column (f))		15	<u></u> %
16 Public support percentage from 2011					16	%
Section D. Computation of Inves					• •	
17 Investment income percentage for 20	12 (line 10c, colur	nn (f) divided by lir	ne 13, column (f))		17	%
18 Investment income percentage from 2					18	%
19a 33 1/3% support tests - 2012. If the						
more than 33 1/3%, check this box ar	-					
b 33 1/3% support tests - 2011. If the						
line 18 is not more than 33 1/3%, che	ck this box and s f	top here. The orga	anization qualifies	as a publicly supp	orted organization	▶□
20 Private foundation. If the organization	n did not check a	box on line 14, 19	a, or 19b, check th	his box and see in	structions	>

** PUBLIC DISCLOSURE COPY **

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.

OMB No. 1545-0047

Employer identification number

ROCKY MOUNTAIN INSTITUTE 74-2244146 Organization type (check one): Filers of Section: 501(c)(3) (enter number) organization Form 990 or 990-EZ 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. **Special Rules** For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year. contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on Part I, line 2 of its Form 990-PF, to

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2012)

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

Name of organization Employer identification number

ROCKY MO	UNTAIN INSTITUTE		2244146
Part I	Contributors (see instructions). Use duplicate copies of Part I if a	dditional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$\$.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)

Name of organization Employer identification number

ROCKY MOUNTAIN INSTITUTE

74-2244146

Part II	Noncash Property (see instructions). Use duplicate copies of Part	II if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from	(b) Description of noncash property given	(c) FMV (or estimate)	(d) Date received
Part I		(see instructions)	
		_	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		_	
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		_	
		_	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
-			
(a) No. from	(b) Description of noncash property given	(c) FMV (or estimate)	(d) Date received
Part I		(see instructions)	
		<u> </u>	
_			
3453 12-21-	-12	Schedule B (Form	 990, 990-EZ, or 990-PF) (20

Name of orga	anization		Employer identification number
ROCKY MOU	NTAIN INSTITUTE		74-2244146
Part III	Exclusively religious, charitable, etc., indi year. Complete columns (a) through (e) and the total of exclusively religious, charitable, etc. Use duplicate copies of Part III if addition	tc., contributions of \$1,000 or less fo	I(c)(7), (8), or (10) organizations that total more than \$1,000 for that total more than \$1,000 for the total more than \$1,000 for the total more.
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gi	
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, a	(e) Transfer of gi	gift Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gi	gift
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		/o\ Transfer of oi	nift
	Transferee's name, address, a	(e) Transfer of gi	Relationship of transferor to transferee

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

➤ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ➤ Attach to Form 990. ➤ See separate instructions. 2012
Open to Public Inspection

Name of the organization

Employer identification number

	ROCKY MOUNTAIN INSTITUTE	74-2244146	
Pai	t I Organizations Maintaining Donor Advise	d Funds or Other Similar Funds o	r Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line		·
	g,	(a) Donor advised funds	(b) Funds and other accounts
4	Total number at end of year	,	
1			
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	-	
	are the organization's property, subject to the organization's	exclusive legal control?	Yes L No
6	Did the organization inform all grantees, donors, and donor a	dvisors in writing that grant funds can be use	ed only
	for charitable purposes and not for the benefit of the donor of	or donor advisor, or for any other purpose cor	nferring
	impermissible private benefit?		Yes No
Pai	t II Conservation Easements. Complete if the org	ganization answered "Yes" to Form 990, Part	IV, line 7.
1	Purpose(s) of conservation easements held by the organization	on (check all that apply).	
	Preservation of land for public use (e.g., recreation or e	education) Preservation of an histori	ically important land area
	Protection of natural habitat	Preservation of a certified	d historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quali-	fied conservation contribution in the form of a	a conservation easement on the last
	day of the tax year.		
	, ,		Held at the End of the Tax Year
а	Total number of conservation easements		
b	Total acreage restricted by conservation easements		
	Number of conservation easements on a certified historic str		
ا	Number of conservation easements included in (c) acquired		
u		•	2d
3	listed in the National Register		
	vear >	reased, extinguished, or terminated by the or	ganization during the tax
4	Number of states where property subject to conservation ea	soment is located	
5	Does the organization have a written policy regarding the per	·	
3	violations, and enforcement of the conservation easements i		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,		
7	Amount of expenses incurred in monitoring, inspecting, and		
8	Does each conservation easement reported on line 2(d) above		
0		• • • • • • • • • • • • • • • • • • • •	
9	and section 170(h)(4)(B)(ii)?		
9		·	·
	include, if applicable, the text of the footnote to the organiza	tion's illiancial statements that describes the	organization's accounting for
Dai	t III Organizations Maintaining Collections o	f Art Historical Treasures or Othe	ar Similar Assats
ı uı	Complete if the organization answered "Yes" to Form		on on har Assets.
			the small bealeness about a visual so of sub-
Id	If the organization elected, as permitted under SFAS 116 (AS	**	·
	historical treasures, or other similar assets held for public ext		e of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that descri		
b	If the organization elected, as permitted under SFAS 116 (AS		
	treasures, or other similar assets held for public exhibition, e	ducation, or research in furtherance of public	service, provide the following amounts
	relating to these items:		
	(i) Revenues included in Form 990, Part VIII, line 1		> \$
2	If the organization received or held works of art, historical tre	asures, or other similar assets for financial ga	ain, provide
	the following amounts required to be reported under SFAS 1		
а	Revenues included in Form 990, Part VIII, line 1		> \$

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

b Assets included in Form 990, Part X

Sche	dule D (Form 990) 2012 ROCKY MOUNT	AIN INSTITUTE				74-22441	.46	Pa	age 2
Par	rt III Organizations Maintaining C	ollections of Ar	t, Historical Tr	easures, or	Other	Similar Asse	ts (contir	nued)	
3	Using the organization's acquisition, accession	on, and other record	s, check any of the	following that a	re a sign	ificant use of its	collectio	n item	s
	(check all that apply):								
а	Public exhibition	d		hange program					
b	Scholarly research	е	U Other						
С	Preservation for future generations								
4	Provide a description of the organization's co	llections and explair	n how they further t	he organization	's exemp	t purpose in Par	t XIII.		
5	During the year, did the organization solicit or	receive donations of	of art, historical trea	sures, or other s	similar as	ssets	7		,
	to be sold to raise funds rather than to be ma						Yes		No
Par	rt IV Escrow and Custodial Arrang		te if the organizatio	n answered "Ye	es" to Fo	rm 990, Part IV, I	ine 9, or		
	reported an amount on Form 990, Par								
1a	Is the organization an agent, trustee, custodia		•				7		1
	on Form 990, Part X?						Yes		J No
b	If "Yes," explain the arrangement in Part XIII a	and complete the fol	lowing table:						
						 	Amoun	<u>t </u>	
	Beginning balance					1c			
	Additions during the year					1d			
e	Distributions during the year					1e			
7	Ending balance	own 000 Dart V line	010			1f	Yes	\top	N ₂
	Did the organization include an amount on Fo								J No ∃
	If "Yes," explain the arrangement in Part XIII. T V Endowment Funds. Complete if								
· u	Endownient i ando: Complete ii	(a) Current year	(b) Prior year	(c) Two years b		Three years back	(a) Four	vears	hack
12	Beginning of year balance	710,719.	746,828.	<u> </u>		706,173.	(e) i oui		896.
h	Contributions	125,365.	3,421.		710.	1,754.		, ,	
	Net investment earnings, gains, and losses	52,732.	-35,339.			-251.		-11	413.
4	Grants or scholarships	,	,	,					500.
e	Other expenditures for facilities								
·	and programs	12,829.						13	200.
f	Administrative expenses	, -	4,191.	4.2	224.	3,806.			610.
g	End of year balance	875,987.	710,719.			703,870.		706,	173.
2	Provide the estimated percentage of the curr		e (line 1a. column (a	a)) held as:		,			
а	Board designated or quasi-endowment	.00	%						
b	Permanent endowment > 94.37	%	_						
С	Temporarily restricted endowment ▶	5.63 %							
	The percentages in lines 2a, 2b, and 2c shou	ld equal 100%.							
За	Are there endowment funds not in the posses		tion that are held a	nd administered	d for the	organization			
	by:							Yes	No
	(i) unrelated organizations						3a(i)	Х	
	(ii) related organizations						3a(ii)		Х
b	If "Yes" to 3a(ii), are the related organizations						3b		
4	Describe in Part XIII the intended uses of the	organization's endo	wment funds.						
Par	rt VI Land, Buildings, and Equipm	ent. See Form 990,	, Part X, line 10.						
	Description of property	(a) Cost or ot	her (b) Cost	or other	(c) Accu	ımulated	(d) Bool	k valu	Э
		basis (investm	nent) basis	(other)	depre	ciation			
1a	Land			86,964.					964.
b	Buildings			703,028.		238,095.			933.
С	Leasehold improvements			,077,437.		369,421.			016.
d	Equipment		1	,312,130.	1	,092,560.			570.
	Other			456,955.		273,421.			534.
Total	Add lines 1a through 1e (Column (d) must ed	gual Form 990 Part	X column (R) line 1	(O(c))		▶ I	1	663	017.

1	Page	ج

(a) Description of security or category (including name of security)	(b) Book value		aluation: Cost or en	d-of-year market value
(1) Financial derivatives				
(2) Closely-held equity interests				
(3) Other				
(A) ASSETS HELD BY THE DENVER FOUNDATION	5,970,555	. END-OF-YEAR	MARKET VALUE	
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
(1)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶	5,970,555			
Part VIII Investments - Program Related. Se	e Form 990, Part X, line	13.		
(a) Description of investment type	(b) Book value		aluation: Cost or en	d-of-year market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶				
Part IX Other Assets. See Form 990, Part X, line	15.	•		
(a) [Description			(b) Book value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
Total. (Column (b) must equal Form 990, Part X, col. (B) line			>	
Part X Other Liabilities. See Form 990, Part X, li	ne 25.			
1. (a) Description of liability		(b) Book value		
(1) Federal income taxes				
(2) CAPITAL LEASE OBLIGATIONS		146,172.		
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
(11)				
Total. (Column (b) must equal Form 990, Part X, col. (B) line	25.)	146,172.		
2. FIN 48 (ASC 740) Footnote. In Part XIII, provide the tex	t of the footnote to the	organization's financia	statements that re	ports the organization's
liability for uncertain tax positions under FIN 48 (ASC 74	40). Check here if the te	ext of the footnote has	been provided in Pa	art XIII X

Schedule D (Form 990) 2012

NO AMOUNTS HAVE BEEN RECOGNIZED AS OF JUNE 30, 2013.

SCHEDULE J (Form 990)

Department of the Treasury

Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Complete if the organization answered "Yes" to Form 990, Part IV, line 23.

➤ Attach to Form 990. ➤ See separate instructions.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

ROCKY MOUNTAIN INSTITUTE

Employer identification number 74-2244146

Pa	art I Questions Regarding Compensation			
	<u> </u>		Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b	Х	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors,			
	trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2	Х	
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	X Compensation committee Written employment contract			
	Independent compensation consultant X Compensation survey or study			
	Form 990 of other organizations X Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		Х
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	Х	
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		Х
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			
а	The organization?	5a		Х
	Any related organization?	5b		Х
	If "Yes" to line 5a or 5b, describe in Part III.			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			
	The organization?	6a		Х
	Any related organization?	6b		Х
	If "Yes" to line 6a or 6b, describe in Part III.			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments			
	not described in lines 5 and 6? If "Yes," describe in Part III	7	Х	
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		Х
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9	l	1

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

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported as deferred		
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	Deficition	(15)(1)*(10)	in prior Form 990		
(1) AMORY LOVINS	(i)	245,736.	100,000.	379,525.	12,776.	10,042.	748,079.	0.		
CHIEF SCIENTIST	(ii)	0.	0.	0.	0.	0.	0.	0.		
(2) MICHAEL POTTS	(i)	226,904.	80,000.	947.	11,797.	14,428.	334,076.	0.		
PRESIDENT & CEO	(ii)	0.	0.	0.	0.	0.	0.	0.		
(3) MARTHA PICKETT	(i)	206,236.	80,000.	725.	10,786.	10,042.	307,789.	0.		
EXECUTIVE DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.		
(4) EDGAR MCCULLOUGH	(i)	113,119.	25,000.	947.	6,119.	14,428.	159,613.	0.		
DIRECTOR OF FINANCE	(ii)	0.	0.	0.	0.	0.	0.	0.		
(5) ROBERT HUTCHINSON	(i)	198,877.	42,000.	947.	10,547.	14,428.	266,799.	0.		
PROGRAM DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.		
(6) EDWARD HARVEY	(i)	203,500.	41,000.	200.	10,250.	0.	254,950.	0.		
VP - DEVELOPMENT	(ii)	0.	0.	0.	0.	0.	0.	0.		
(7) JON CREYTS	(i)	154,848.	13,368.	5,262.	0.	12,165.	185,643.	0.		
PROGRAM DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.		
(8) JAMES NEWCOMB	(i)	192,377.	40,000.	947.	10,047.	14,428.	257,799.	0.		
PROGRAM DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.		
(9) BRAD MUSHOVIC	(i)	158,877.	40,750.	947.	8,297.	14,428.	223,299.	0.		
VP - COMMUNICATIONS	(ii)	0.	0.	0.	0.	0.	0.	0.		
(10) CAROL NASTA	(i)	108,277.	24,720.	947.	6,217.	14,428.	154,589.	0.		
DIRECTOR OF HUMAN RESOURCES	(ii)	0.	0.	0.	0.	0.	0.	0.		
(11) VICTOR OLGYAY	(i)	128,102.	6,710.	947.	6,759.	14,428.	156,946.	0.		
PRINCIPAL	(ii)	0.	0.	0.	0.	0.	0.	0.		
(12) JAMES BREW	(i)	137,439.	1,000.	947.	6,981.	5,580.	151,947.	0.		
PRINCIPAL	(ii)	0.	0.	0.	0.	0.	0.	0.		
	(i)									
	(ii)									
	(i)									
	(ii)									
	(i)									
	(ii)									
	(i)	_	_							
	(ii)									

Schedule J (Form 990) 2012	ROCKY MOUNTAIN INSTITUTE	74-2244146	Page 3
Part III Supplemental Informa	rtion		
Complete this part to provide the	information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c,	5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any	J
additional information.			
PART I, LINE 1A: BUSINESS	USE OF PERSONAL RESIDENCE - AMORY LOVINS		
RENTS APPROXIMATELY 1200	SQ FT OF HIS HOUSE, PLUS SHARED SPACE TO RMI AS		
OFFICE SPACE UNDER A 1-YE	AR WRITTEN LEASE ENDING JUNE 30, 2014. THE RENT IS		
\$1,790 PER MONTH.			
PART I, LINE 7: NON-FIXED	PAYMENTS - SOME EMPLOYEES WERE PAID		
PERFORMANCE BONUSES AT TH	E DISCRETION OF MANAGEMENT.		
DADM II. OMHED DEDODMADLE	COMPENSATION OFFICE DEPON		
PART II: OTHER REPORTABLE	COMPENSATION - OTHER REPORT		
COMPENSATION INCLINES & C	379,000 PAYOUT OF A DEFERRED COMPENSATION 457(F)		
COMPENSATION INCLUDES A \$	779,000 FAIOUI OF A DEFEARED COMPENSATION 437(F)		
PLAN FOR AMORY LOVINS.			
IMM TOK IMOKI BOVIND.			
_			

SCHEDULE M (Form 990)

Noncash Contributions

➤ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

➤ Attach to Form 990.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

ROCKY MOUNTAIN INSTITUTE

Employer identification number 74-2244146

Pa	rt I Types of Property							
		(a)	(b)	(c)	(d)		_	
		Check if	Number of contributions or	Noncash contribution amounts reported on	Method of de			
		applicable		Form 990, Part VIII, line 1	noncash contrib	ution ai	mount	S
1	Art - Works of art							
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities - Publicly traded	X	9	89,228.	FMV			
10	Securities - Closely held stock			,				
	Securities - Closely field stock Securities - Partnership, LLC, or							
11								
40	trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation contribution -							
	Historic structures							
14	Qualified conservation contribution - Other							
15	Real estate - Residential							
16	Real estate - Commercial							
17	Real estate - Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other ()							
26	Other ()							
27	Other ()							
28	Other ()							
29	Number of Forms 8283 received by the organization	zation during	g the tax year for o	contributions	•			
	for which the organization completed Form 828							
							Yes	No
30a	During the year, did the organization receive by	/ contributio	on any property re	ported in Part I, lines 1-28	hat it must hold for			
	at least three years from the date of the initial of							
	the entire holding period?		•	•		30a		Х
b	If "Yes," describe the arrangement in Part II.							
31								
	Does the organization hire or use third parties of					31		Х
∪£a			_	· ·		32a		х
h	contributions? If "Yes," describe in Part II.					UZa		
33	If the organization did not report an amount in	column (a) f	or a type of propo	rty for which column (a) is	chackad			
00		columni (c) i	or a type or prope	ity for without column (a) is	oneoneu,			
LLIA	describe in Part II. For Paperwork Reduction Act Notice, see	the Instance	tions for Form 00	<u> </u>	Schedule M	(Eeur	000) (2040
LHA	i oi i apei work neudolion Act Notice, see			···	Juliedule IVI	11 101111	22U) (_U IZ)

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Department of the Treasury Internal Revenue Service Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

2012
Open to Public Inspection

Name of the organization **Employer identification number** ROCKY MOUNTAIN INSTITUTE 74 - 2244146FORM 990, PART III, LINE 3, CHANGES IN PROGRAM SERVICES: IN 1996 RMI PURCHASED A 50% INTEREST IN THE WINDSTAR PROPERTY IN OLD SNOWMASS CO (PROPERTY). AT THE TIME OF RMI'S PURCHASE WINDSTAR FOUNDATION ("WF") OWNED THE REMAINING 50%. IN CONJUNCTION WITH THE PURCHASE, RMI AND WF AGREED TO TRANSFER THEIR PROPERTY INTERESTS TO A CHARITABLE, NOT-FOR-PROFIT ORGANIZATION, WINDSTAR LAND CONSERVANCY ("WLC") TO HOLD TITLE ON BEHALF OF THE TWO ORGANIZATIONS. WLC WAS GOVERNED BY A BOARD COMPRISING TWO REPRESENTATIVES EACH FROM RMI AND WF PLUS A FIFTH AT-LARGE DIRECTOR. WLC RMI AND WF PLACED A CONSERVATION EASEMENT ON THE PROPERTY FOR THE PURPOSE OF PRESERVING IN PERPETUITY 927 ACRES OF THE TOTAL 957 ACRES. IN APRIL 2013, THE PROPERTY WAS SOLD AND THE SALE PROCEEDS WERE DIVIDED EQUALLY BETWEEN RMI AND THE JOHN DENVER ASPENGLOW FUND AT THE ASPEN COMMUNITY FOUNDATION (AS DIRECTED BY THE FORMER DIRECTORS OF THE WINDSTAR FOUNDATION WHICH WAS DISSOLVED IN 2012). DESPITE THE CHANGE IN OWNERSHIP, THE PROPERTY CONTINUES TO BE PROTECTED BY THE PERMANENT CONSERVATION EASEMENT, THE BENEFICIARIES OF WHICH ARE THE PITKIN COUNTY OPEN SPACE AND TRAILS, AND ASPEN VALLEY PER THE SALE AGREEMENT, RMI MAY OCCUPY THE OFFICE SPACE LOCATED ON THE PROPERTY WITHOUT RENT FOR A PERIOD OF TWO YEARS. RMI CONTINUES TO HOLD THE ENDOWMENT FUNDS THAT RMI SECURED FOR THE PURPOSE OF COVERING ITS EXPENSES TO MAINTAIN THE PROPERTY AND WILL SEEK TO REPURPOSE THEM SINCE ITS OBLIGATION TO MAINTAIN THE PROPERTY WAS ASSUMED BY THE NEW OWNER. THESE FUNDS ARE CURRENTLY REPORTED AS A COMPONENT OF RMI'S PERMANENTLY RESTRICTED NET ASSETS.

FORM 990, PART VI, SECTION B, LINE 11: RMI'S REVIEW PROCESS FOR THE 990

Schedule O (Form 990 or 990-EZ) (2012)

Name of the organization ROCKY MOUNTAIN INSTITUTE	Employer identification number 74-2244146
FORM BEGINS WITH A FORMAL REVIEW BY THE SENIOR MANAGEMENT TEAM (CEO,	
EXECUTIVE DIRECTOR, VP-DEVELOPMENT, AND DIRECTOR OF FINANCE). ONCE	
REVIEWED, A SECOND EVALUATION IS PERFORMED BY THE BOARD OF TRUSTEES AUDIT	
COMMITTEE WITH THE CEO AND DIRECTOR OF FINANCE IN ATTENDANCE. ONCE	
APPROVED, THE AUDIT COMMITTEE WILL FORMALLY ACCEPT THE REPORT AND AUTHORIZE	
THE AUDITORS TO FILE THE ANNUAL 990 FORM. THE MINUTES AND RECOMMENDATIONS	
OF THE AUDIT COMMITTEE WILL BE REPORTED TO THE BOARD OF TRUSTEES AT THE	
NEXT TRI-ANNUAL MEETING (JANUARY, APRIL, AND OCTOBER).	
FORM 990, PART VI, SECTION B, LINE 12C: TRUSTEES ARE CONTACTED THROUGH AN	
ANNUAL AFFIRMATION TO UPDATE ANY CHANGES TO THEIR PERSONAL SITUATION.	
TRUSTEES ARE REQUIRED TO REPORT ANY CHANGES THAT MAY CONSTITUTE A POTENTIAL	
CONFLICT OF INTEREST. TRUSTEES ARE ASKED TO COMPLETE A CONFLICT OF	
INTEREST QUESTIONNAIRE EACH YEAR. IF A CONFLICT OF INTEREST OR AN	
APPEARANCE OF A CONFLICT OF INTEREST ARISES, THE EXECUTIVE COMMITTEE	
REVIEWS AND INVESTIGATES COMPLIANCE ISSUES.	
FORM 990, PART VI, SECTION B, LINE 15: DURING FISCAL YEAR 2010, RMI	
RETAINED A CERTIFIED COMPENSATION PROFESSIONAL TO CONDUCT A DETAILED	
ANALYSIS OF ALL CURRENT POSITIONS. THIS ANALYSIS UTILIZED "WORLD AT WORK"	
BEST PRACTICES TO DETERMINE MARKET PRICES FOR THE ROLES THAT CURRENTLY	
EXIST WITHIN RMI AND ESTABLISH A GRADE TABLE. THE RESULTS OF THIS WORK	
ENABLE RMI LEADERSHIP TO ENSURE APPROPRIATE COMPENSATION LEVELS FOR CURRENT	
ROLES AS WELL AS NEW OR RESTRUCTURED JOBS IN THE ORGANIZATION.	
IN ORDER TO MAINTAIN THE INTEGRITY OF THIS TABLE, MEMBERS OF THE LEADERSHIP	
TEAM HAVE BEEN EDUCATED ON THE PHILOSOPHY BEHIND AND USE OF THE	
COMDENGATION CHINY DECLIARS FILDRAFED DESCRETE FOR ADDROADITATELY "DETCING"	

COMPENSATION STUDY RESULTS. FURTHER, PROCESSES FOR APPROPRIATELY "PRICING"

Name of the organization ROCKY MOUNTAIN INSTITUTE	Employer identification number 74-2244146
NEW ROLES ARE BEING ESTABLISHED TO ENSURE FUTURE COMPLIANCE.	
IN 2011, THE ORGANIZATION ENGAGED AN OUTSIDE EXECUTIVE COMPENSATION FIRM TO	
REVIEW EXECUTIVE COMPENSATION AND PROVIDE AN INTERMEDIATE SANCTIONS LETTER.	
THIS EXECUTIVE COMPENSATION STUDY YIELDED SOLID DATA CONFIRMING RMI	
EXECUTIVES ARE PAID APPROPRIATELY FOR NONPROFIT EXECUTIVES IN AN	
ORGANIZATION OF RMI'S SIZE.	
CURRENTLY, RMI CONTINUES TO UTILIZE CERTIFIED COMPENSATION PROFESSIONALS TO	
ENSURE NEW AND MODIFIED POSITIONS OF ALL LEVELS ARE APPROPRIATELY PRICED	
WITH REGARD TO SALARY AND BONUS. ADDITIONALLY, THE BOARD OF TRUSTEES	
FORMED A COMPENSATION COMMITTEE IN THE 2ND QUARTER OF 2013 TO ENSURE	
APPROPRIATE COMPENSATION PRACTICES ARE IN PLACE FOR THE EXECUTIVE LEVEL.	
THE CHIEF SCIENTIST, CEO AND EXECUTIVE DIRECTOR POSITIONS WERE REVIEWED BY	
THE OUTSIDE COMPENSATION PROFESSIONALS NOTED ABOVE; THE COMPENSATION	
COMMITTEE THEN UTILIZED THAT INFORMATION TO HELP ENSURE APPROPRIATE	
SALARIES AND BONUSES ARE IN PLACE FOR THE INDIVIDUALS IN THOSE POSITIONS.	
FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:	
AL,AK,AZ,AR,CA,CO,CT,DC,FL,GA,HI,IL,KS,KY,LA,ME,MD,MA,MI,MN,MS,MO,NH,NJ,NM	
NY,NC,ND,OH,OK,OR,PA,RI,SC,TN,UT,VA,WA,WV,WI	
FORM 990, PART VI, SECTION C, LINE 19: RMI'S ARTICLES OF INCORPORATION ARE	
OF PUBLIC RECORD WITH THE COLORADO SECRETARY OF STATE. ANNUAL REPORTS, IRS	
FORM 990, AND AUDITED FINANCIAL STATEMENTS ARE AVAILABLE ON THE RMI WEBSITE	
(WWW.RMI.ORG). COPIES OF ANY POLICY, INCLUDING BYLAWS, ARE AVAILABLE UPON	
REQUEST.	

SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

Related Organizations and Unrelated Partnerships

► Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.

► Attach to Form 990.

► See separate instructions.

2012
Open to Public Inspection

Name of the organization

ROCKY MOUNTAIN INSTITUTE

Employer identification number 74-2244146

(a)	(b)	(c)	(d)	(e))	(f)			
Name, address, and EIN (if applicable) of disregarded entity	Primary activity	Primary activity Legal domicile (state or foreign country)		ome End-of-year		Direct o	ontrolling ntity	g	
Part II Identification of Related Tax-Exempt Or organizations during the tax year.)	I rganizations (Complete if the organizat	ion answered "Yes" to Form 990	I), Part IV, line 34 b	ecause it had one	or more	related tax-exer	npt		
Part II Identification of Related Tax-Exempt Or organizations during the tax year.) (a) Name, address, and EIN of related organization	rganizations (Complete if the organizat (b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section	Direc	related tax-exer (f) ct controlling entity	Section S conti	g) 512(b)(13) rolled tity?	
organizations during the tax year.) (a) Name, address, and EIN of related organization	(b)	(c) Legal domicile (state or	(d) Exempt Code	(e) Public charity	Direc	(f)	Section s	rolled	
organizations during the tax year.) (a) Name, address, and EIN of related organization WINDSTAR LAND CONSERVANCY - 84-1107299 2317 SNOWMASS CREEK ROAD	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	Direc	(f)	Section S conti	rolled tity?	
organizations during the tax year.) (a) Name, address, and EIN of related organization WINDSTAR LAND CONSERVANCY - 84-1107299	(b)	(c) Legal domicile (state or	(d) Exempt Code	(e) Public charity status (if section	Direc	(f)	Section S conti	rolled tity?	
organizations during the tax year.) (a) Name, address, and EIN of related organization WINDSTAR LAND CONSERVANCY - 84-1107299 2317 SNOWMASS CREEK ROAD	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	Direc	(f)	Section S conti	rolled tity?	
organizations during the tax year.) (a) Name, address, and EIN of related organization WINDSTAR LAND CONSERVANCY - 84-1107299 2317 SNOWMASS CREEK ROAD	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	Direc	(f)	Section S conti	rolled tity?	

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

Part III Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.)

		,,			T	_			1			
(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)		(i)	(j)	(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or	Direct controlling entity	ect controlling entity Predominant income (related, unrelated, excluded from tax under sections 512-514) Share of total income end-of-year assets Share of end-of-year assets Share of end-of-year assets Yes No Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)		portion- Code V-UBI amount in box		Gene mana	ral or laging	Percentage ownership		
		foreign		excluded from tax under	der end-of-year assets are allocations? Shale of total income end-of-year assets Yes No K-1 (Form 1065) No		partner?		p			
		country)		Sections 5 (2-5 (4)			Yes	No	K-1 (Form 1065)	Yes	No	
]											
	1											
	1											
										\vdash	\vdash	
	1											
	1											
	1											
							<u> </u>			\vdash	\vdash	
	1											
	1											
			= ./0			". 5						

Part IV Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership		Section 512(b)(13) controlled entity? Yes No	
								res	NO	

Not	e. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.					Yes	No		
1	During the tax year, did the organization engage in any of the following transactions	with one or more re	elated organizations listed	in Parts II-IV?					
а	Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity		-		1a		Х		
	Gift, grant, or capital contribution to related organization(s)				1b		Х		
	Gift, grant, or capital contribution from related organization(s)				1c	Х			
	d Loans or loan guarantees to or for related organization(s)								
	Loans or loan guarantees by related organization(s)				1e		Х		
	, , , , , , , , , , , , , , , , , , , ,								
f	Dividends from related organization(s)				1f		х		
	f Dividends from related organization(s) g Sale of assets to related organization(s)								
					1h		Х		
i	h Purchase of assets from related organization(s) i Exchange of assets with related organization(s)								
j Lease of facilities, equipment, or other assets to related organization(s)							Х		
k	k Lease of facilities, equipment, or other assets from related organization(s)								
	Performance of services or membership or fundraising solicitations for related organ				11		Х		
	Performance of services or membership or fundraising solicitations by related organ				1m		Х		
	Sharing of facilities, equipment, mailing lists, or other assets with related organizatio				1n	Х			
	Sharing of paid employees with related organization(s)				10	Х			
р	Reimbursement paid to related organization(s) for expenses				1p		Х		
q	Reimbursement paid by related organization(s) for expenses				1q	Х			
r	Other transfer of cash or property to related organization(s)				1r		Х		
s	Other transfer of cash or property from related organization(s)				1s		Х		
2	If the answer to any of the above is "Yes," see the instructions for information on wh	no must complete t	his line, including covered	relationships and transaction thresholds.					
	(a)	(b)	(c)	(d)					
	Name of other organization	Transaction	Amount involved	Method of determining amount invo	olved				
		type (a-s)							

(1) WINDSTAR LAND CONSERVANCY С 4,105,793.ACTUAL (2) (3) (4) (5) (6)

Schedule R (Form 990) 2012 ROCKY MOUNTAIN INSTITUTE 74-2244146

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under section 512-514)	Are all partners se 501(c)(3 orgs.?	(f) Share of total income	(g) Share of end-of-year assets	Disprotional allocati	ppor- ate ions?	General manag partn	ral or P ging her?	(k) Percentage ownership
									\coprod		

Page 4