## Form **990**

### **Return of Organization Exempt From Income Tax**

OMB No. 1545-0047

2013

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

▶ Do not enter Social Security numbers on this form as it may be made public.

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

<u> </u>	For the 2	013 calendar year, or tax year beginning 07/01 , 2013, and 6	ending	06/30	, 20 14							
В	Check if ap	oplicable: C Name of organization PUBLIC HIGHER EDUCATION NETWORK OF MA	SSACHUSETTS	D Employ	er identification n	umber						
	Address ch	nange Doing Business As PHENOM			26-2005130							
	Name char	nge Number and street (or P.O. box if mail is not delivered to street address) Roo	om/suite	E Telepho	ne number							
	Initial retur	PO Box 2281			413-627-5268							
	Terminated	City or town, state or province, country, and ZIP or foreign postal code										
	Amended i	return Amherst, MA 01004-2281		<b>G</b> Gross re	eceipts \$	66,059						
П	Application		H(a) Is this	a group return for	subordinates?  Yes	✓ No						
		PO Box 2281, Amherst, MA 01004-2281			s included? Tes	_						
	Tax-exemp				see instructions)							
J	Website:			up exemption	number ▶							
K		panization: ✓ Corporation ☐ Trust ☐ Association ☐ Other ► L Year of			of legal domicile:	MA						
	art I	Summary			<u> </u>							
		riefly describe the organization's mission or most significant activities:	dvocate for an	accessible	and affordable r	oublic						
ě		nigher education system in Massachusetts.										
Activities & Governance		IIIGITEI EUGLATION SYSTEM III WASSACHUSETTS.										
ern	2 0	heck this box ▶ ☐ if the organization discontinued its operations or dispo	sed of more th	an 25% of	its net assets.							
Š	1	lumber of voting members of the governing body (Part VI, line 1a)				8						
<u>«</u>	1	lumber of independent voting members of the governing body (Part VI, line				8						
ies	1	otal number of individuals employed in calendar year 2013 (Part V, line 2a)		. 5		2						
Ξ̈́	1	otal number of volunteers (estimate if necessary)		. 6		 16						
Act	1	otal unrelated business revenue from Part VIII, column (C), line 12		. 7a		0						
-		let unrelated business taxable income from Form 990-T, line 34		. 7b		0						
		,		Year	Current Ye							
Revenue	8 0	Contributions and grants (Part VIII, line 1h)		92,316		66,059						
	1	rogram service revenue (Part VIII, line 2g)		0		00,007						
š	1	estment income (Part VIII, column (A), lines 3, 4, and 7d)		0		0						
æ		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0		0						
		otal revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 1		92,316		66,059						
		Grants and similar amounts paid (Part IX, column (A), lines 1–3)	0		00,037							
	1	Benefits paid to or for members (Part IX, column (A), line 4)		0		0						
"		alaries, other compensation, employee benefits (Part IX, column (A), lines 5–10		52,513		44,326						
Expenses	1	rofessional fundraising fees (Part IX, column (A), line 11e)		32,313		71						
en	1			31								
찣		otal fundraising expenses (Part IX, column (D), line 25) 160ther expenses (Part IX, column (A), lines 11a–11d, 11f–24e)		29,388		15,380						
	1	otal expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	•	81,938		59,777						
	1	devenue less expenses. Subtract line 18 from line 12	•	10,378		6,282						
_ s		evenue icos expenses. Oubitaet inte 10 iron inte 12		Current Year	End of Ye							
Net Assets or Fund Balances	<b>20</b> T	otal assets (Part X, line 16)	30	11,729		17,552						
Asse	21 T	otal liabilities (Part X, line 26)		0		0						
Net Fundament	22 N	let assets or fund balances. Subtract line 21 from line 20		11,729		17,552						
	art II	Signature Block	•	11,727		17,552						
		es of perjury, I declare that I have examined this return, including accompanying schedules and	statements and t	o the best of r	ny knowledge, and	helief it is						
		and complete. Declaration of preparer (other than officer) is based on all information of which pr			ny knowloago ana	bollot, it lo						
Sig	an l	Signature of officer		L Date								
He	-	Kim Selwitz, President										
	-	Type or print name and title										
_		Print/Type preparer's name Preparer's signature	Date	0, , ,	; PTIN							
Pa				Check   self-emp								
	eparer	Firm's name	<u> </u>		/							
Us	e Only			Firm's EIN ►								
Ma	v the IRS	Firm's address ► discuss this return with the preparer shown above? (see instructions).		Phone no.	☐ Yes	. □ No						

Form 990 (2013) Page **2** 

Part	·									
1	Check if Schedule O contains a response or note to any line in this Part III	<u>.                                     </u>								
'	Advocate for an accessible and affordable public higher education system in Massachusetts.									
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?	☑ No								
	If "Yes," describe these new services on Schedule O.									
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	<b>☑</b> No								
	If "Yes," describe these changes on Schedule O.									
4	Describe the organization's program service accomplishments for each of its three largest program services, as meas expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to the total expenses, and revenue, if any, for each program service reported.									
4a	(Code: ) (Expenses \$ 25,899 including grants of \$ 0 ) (Revenue \$	0)								
	PHENOM continued to build public support for better funded, more affordable and more accessible public higher education o	n and								
	around public campuses across the state. This involved lectures, presentations to classes, meetings with campus and comm organizations, letter-writing campaigns.									
4b		<u>o</u> )								
	Throughout the year, PHENOM focused public attention on the need to understand and alleviate the student loan debt crisis.									
	involved research, dissemination of data and other information, discussions with MA students, organizing students to share stories, developing relationships with other groups in Massachusetts and around the country, and using social and traditional									
	modia									
	media.									
4c	(Code:) (Expenses \$10,375 including grants of \$0 ) (Revenue \$	o )								
	PHENOM organized and hosted monthly information meetings at the State House for advocates of public higher education. A									
	these meetings, groups representing college administrations, faculty and staff, students, and others shared information, deve									
	common perspectives around issues affecting the respective constituencies, and coordinated public relations strategies.									
4d	Other program services (Describe in Schedule O.) See Schedule O, Statement 1									
4e	(Expenses \$ 5,205 including grants of \$ 0 ) (Revenue \$ 0 )									
-10	Total program service expenses ► 51,864									

#### **Checklist of Required Schedules** Part IV Nο 1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," 1 2 1 2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? . . . . Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to 3 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) 4 V Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, 5 assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, 5 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 7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II . . . . 7 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," 8 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 9 Did the organization, directly or through a related organization, hold assets in temporarily restricted 10 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," 11a 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 c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII . . . . . . . . . . . 11c d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets 11d e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D. Part X 11e 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 ... 12 a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete 12a 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 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E..... 13 **14 a** 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. . . . . . 14b Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or 15 for any foreign organization? 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 other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV. . . . . . . . . . . 16 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) . . . . . 17 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on 18 18 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? 19 20 a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H . . . . . . . 20a

**b** If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

20b

Part	V Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		,
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		,
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		,
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		,
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? <b>Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	24d 25a		,
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		
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II	26		,
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		,
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		V
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28b 28c		V
29 30	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	29		V
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		,
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		,
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? <i>If</i> "Yes," <i>complete Schedule R, Part I</i>	33		,
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		,
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		<i>'</i>
36	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 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	35b 36		~
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? <i>If "Yes," complete Schedule R,</i>	30		
38	Part VI	37		~
	19? <b>Note.</b> All Form 990 filers are required to complete Schedule O	38	~	

## Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 0			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			
_	reportable gaming (gambling) winnings to prize winners?	1c	~	
<b>2</b> a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 2			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	~	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		~
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		~
b	If "Yes," enter the name of the foreign country: ▶			
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		~
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		~
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5с		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		~
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a		
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 was			
	required to file Form 8282?	7с		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			
	organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
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:			
a	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
40	against amounts due or received from them.)	46		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	4.5		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	<b>Note.</b> 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			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		~
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O .	14b		

Form 990 (2013) Page **6** 

Part VI

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a

response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Section A. Governing Body and Management Nο 1a Enter the number of voting members of the governing body at the end of the tax year . . . 8 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. Enter the number of voting members included in line 1a, above, who are independent . 8 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? 3 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 4 Did the organization become aware during the year of a significant diversion of the organization's assets? . 5 5 6 6 ~ Did the organization have members, stockholders, or other persons who had the power to elect or appoint 7a Are any governance decisions of the organization reserved to (or subject to approval by) members, 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8a ~ 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O. . . . . . . 9 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Nο 10a Did the organization have local chapters, branches, or affiliates? . . . . . . . . . . . . . . . 10a If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990. **12a** Did the organization have a written conflict of interest policy? If "No," go to line 13 12a Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? ~ 12b Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 12c 13 13 14 14 Did the organization have a written document retention and destruction policy? 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official . . . . . . 15a 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement 16a ~ b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶ 17 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) 18 available for public inspection. Indicate how you made these available. Check all that apply. Own website Another's website ✓ Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and 19 financial statements available to the public during the tax year. State the name, physical address, and telephone number of the person who possesses the books and records of the 20 organization: ► Benjamin Taylor, (413)388-3922

Form 990 (2013)	Page <b>7</b>
-----------------	---------------

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

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

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

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

☐ Check this box if neither the organization no	r any relate	d org	aniz	atic	n c	ompe	ensa	ted any currer	t officer, directo	r, or trustee.
				(0	C)					
(A)	(B)	(do n	ot oh		ition	e than o	ono	(D)	(E)	(F)
Name and Title	Average	,				is both		Reportable	Reportable	Estimated
	hours per week (list any	onicer and a director tracted)					<u> </u>	compensation from	compensation from related	amount of other
	hours for	Individual trustee or director	Inst	Officer	Key	emp	Former	the	organizations	compensation
	related organizations	vidu	Institutional trustee	cer	Key employee	nest	ner	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
	below dotted	al tr	onal		ploy	com		(11 2) 1000 111100)		and related
	line)	uste	trus		ee	pen				organizations
		Ф	tee			Highest compensated employee				
Kim Selwitz	4									
President		~		~				0	0	0
Colleen Avedikian	2									
Vice President		~		~				0	0	0
Max Page	2			١.						
Treasurer		~		~				0	0	0
Gillian Mason	2									
Fundraising Team Leader		~						0	0	0
Manny Pintado	2									
Communications Team Leader		~						0	0	0
Ken Haar	2									
Legislative Team Leader		~						0	0	0
Carl Ericson	1									
Organizing/Training Team Leader		~						0	0	0
Alex Kulenovic	40									
Organizing Director					~			34,887	0	0
Ferd Wulkan	10									
Communications Director					~			0	0	0
Benjamin Taylor	5									
Technology and Accounting Consultant					~			5,794	0	0
	<b>_</b>	1								
	<b></b>	-								
	<b>+</b>	+								

Par	Section A. Officers, Directors, Trus	tees, Key E	mplo	yees	s, ar	nd F	lighe	st C	ompensated E	mployees (	continu	ed)		
	(A) Name and title	(B) Average hours per	box,	unles	Pos neck s pe	rson	e than o is both or/trust	n an	(D)  Reportable compensation	(E) Reportab		Esti amo	(F) mated ount of	
		week (list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	related organizatic (W-2/1099-N		composition from from from from from from from from	ther ensatio m the nization related nizations	1
1b	Sub-total							<b>&gt;</b>	40,681		0			0
c d	Total from continuation sheets to Part Total (add lines 1b and 1c)	VII, Sectio			•			<b>▶</b>	40,681		0			0
2	Total number of individuals (including bur reportable compensation from the organ	t not limited	to th				above	e) w		ore than \$1		of		
													Yes	No
3	Did the organization list any <b>former</b> of employee on line 1a? <i>If "Yes," complete</i>											3		~
4	For any individual listed on line 1a, is the organization and related organizations													
	individual	•							•			4		~
5	Did any person listed on line 1a receive of for services rendered to the organization													
Secti	on B. Independent Contractors	: 11 163, 6	,опрі	CiC	OCI	icat	110 0 1	OI S	such person	· · · ·		5		<i>'</i>
1	Complete this table for your five highest compensation from the organization. Repyear.													ax
	(A) Name and business add	dress							(B) Description of s	ervices	(	(C) Compens	ation	
	Total number of independent contractor	ors (includir	ng bu	ıt n	ot I	limit	ed to	th	nose listed abo	ove) who				
	received more than \$100,000 of compens	sation from	the o	rgar	niza	tion	<b>&gt;</b>		0					

Form 9	90 (201	3)						Page \$
Part	: VIII	Statement of Revenue						
		Check if Schedule O contain	s a res	ponse or note to	any line in this (A) Total revenue	(B) Related or	(C) Unrelated	(D) Revenue
						exempt function revenue	business revenue	excluded from tax under sections 512-514
nts nts	1a	Federated campaigns		1,802				
Gra	b	Membership dues		0				
fts, r An	С	Fundraising events		0				
Contributions, Gifts, Grants and Other Similar Amounts	d	Related organizations Government grants (contributions	1d 1e	0				
ons Sin	e f	All other contributions, gifts, grants		0				
uti her	•	and similar amounts not included above		64,257				
호텔	g	Noncash contributions included in lines		04,237				
Cor	h	<b>Total.</b> Add lines 1a–1f		•	66,059			
				Business Code	,			
Program Service Revenue	2a							
Be	b							
<u>vi</u>	С							
Ser	d							
аш	е							
og.	f	All other program service reve						
	g	Total. Add lines 2a–2f			0			
	3	Investment income (including and other similar amounts) .	_					
	4	Income from investment of tax-ex		<b>⊢</b>				
	5	Royalties	-	· · · · · · · · · · · · · · · · · · ·				
	"	(i) R		(ii) Personal				
	6a	Gross rents						
	b	Less: rental expenses						
	C	Rental income or (loss)	0	0				
	d	Net rental income or (loss) .	<u>_</u>					
	7a	Gross amount from sales of (i) Secu		(ii) Other				
		assets other than inventory						
	b	Less: cost or other basis and sales expenses .						
	С	Gain or (loss)	0	0				
	d	Net gain or (loss)		▶				
Other Revenue	8a	Gross income from fundraising	g					
ě		events (not including \$	<u>0</u>					
Ę.		of contributions reported on line See Part IV, line 18	1C).					
the	L							
δ		Less: direct expenses Net income or (loss) from fund			0		0	
		Gross income from gaming act		events .	0		0	
	"	See Part IV, line 19						
	b	Less: direct expenses						
		Net income or (loss) from gam						
		Gross sales of inventory, returns and allowances	less					
	b	Less: cost of goods sold						
		Net income or (loss) from sale			0	0	0	(
		Miscellaneous Revenue		Business Code				
	11a							
	b							
	С							
	d	All other revenue						

0

0

66,059

Total. Add lines 11a-11d .

12

**Total revenue.** See instructions.

0

### Part IX Statement of Functional Expenses

Sectio	n 501(c)(3) and 501(c)(4) organizations must con				
	Check if Schedule O contains a respon	se or note to any lin	e in this Part IX .		🗆
	t include amounts reported on lines 6b, 7b, , and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	( <b>D</b> ) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the United States. See Part IV, line 21	0	0		
2	Grants and other assistance to individuals in the United States. See Part IV, line 22	0	0		
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States. See Part IV, lines 15 and 16	0	0		
4	Benefits paid to or for members	0	0		
5	Compensation of current officers, directors,				
_	trustees, and key employees	40,753	34,959	5,794	0
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		0	0	0	0
7 8	Other salaries and wages	371	371	0	0
O	section 401(k) and 403(b) employer contributions)		0	0	0
9	Other employee benefits	0	0	0	0
10	Payroll taxes	3,202	2,669	533	0
11	Fees for services (non-employees):	3,202	2,007	333	<u> </u>
	Management	0	0	0	0
b	Legal	0	0	0	0
C	Accounting	581	0	581	0
d	Lobbying	0	0	0	0
е	Professional fundraising services. See Part IV, line 17	71			71
f	Investment management fees	0	0	0	0
g	Other. (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule O.)	100	100	0	0
12	Advertising and promotion	577	417	160	0
13	Office expenses	1,326	1,062	171	93
14	Information technology	2,713	2,713	0	0
15	Royalties	0	0	0	0
16	Occupancy	0	0	0	0
17	Travel	1,234	1,234	0	0
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				_
10	-	0	0	0	0
19 20	Conferences, conventions, and meetings . Interest	8,105	7,933	172	0
21	Payments to affiliates	0	0	0	0
22	Depreciation, depletion, and amortization .	0	0	0	0
23	Insurance	278	0	278	0
24	Other expenses. Itemize expenses not covered		-		-
	above (List miscellaneous expenses in line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)				
а	Miscellaneous Expenses	466	406	55	5
b					
С					
d					
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	59,777	51,864	7,744	169
26	<b>Joint costs.</b> Complete this line only if the organization reported in column (B) joint costs				
	from a combined educational campaign and				
	fundraising solicitation. Check here following SOP 98-2 (ASC 958-720)				
	· · · · · · · · · · · · · · · · · · ·	1		1	

Part X Balance Sheet

		Check if Schedule O contains a response or	note to any line in this Par	1 X		
		Check ii Concadio C Containo a respense ci	Thore to any mile in time i al	(A)		(B)
				Beginning of year		End of year
	1	Cash—non-interest-bearing		11,729	1	17,552
	2	Savings and temporary cash investments	-	0	2	0
	3	Pledges and grants receivable, net		0	3	0
	4	Accounts receivable, net		0	4	0
	5	Loans and other receivables from current and for		<u> </u>	_	0
		trustees, key employees, and highest co				
				0	5	0
		Loans and other receivables from other disqualified person		<u> </u>	<u> </u>	U
	6	4958(f)(1)), persons described in section 4958(c)(3)(B), and	,			
		sponsoring organizations of section 501(c)(9) volunt				
<b>'</b> 0		organizations (see instructions). Complete Part II of Sched		•	6	
Assets	_	, , ,	_	0	6	0
SS	7	Notes and loans receivable, net		0	7	0
٩	8	Inventories for sale or use	<del>_</del>	0	8	
	9	Prepaid expenses and deferred charges		0	9	
	10a	Land, buildings, and equipment: cost or				
	_	other basis. Complete Part VI of Schedule D	10a			
	b	•	10b		10c	
	11			0		0
	12	Investments-other securities. See Part IV, line 1	0		0	
	13	Investments—program-related. See Part IV, line	<b>-</b>	0		0
	14	Intangible assets		0		0
	15	Other assets. See Part IV, line 11		0	15	0
	16	Total assets. Add lines 1 through 15 (must equa		11,729	16	17,552
	17	Accounts payable and accrued expenses		0	17	
	18	Grants payable	0	18		
	19	Deferred revenue		0	19	
	20	Tax-exempt bond liabilities		0	20	
	21	Escrow or custodial account liability. Complete P	Part IV of Schedule D .	0	21	
Se	22	Loans and other payables to current and fo	rmer officers, directors,			
Ě		trustees, key employees, highest compens				
Liabilities		disqualified persons. Complete Part II of Schedul	le L	0	22	
Ť	23	Secured mortgages and notes payable to unrelat	ed third parties	0	23	
	24	Unsecured notes and loans payable to unrelated	third parties	0	24	
	25	Other liabilities (including federal income tax, p	payables to related third			
		parties, and other liabilities not included on lines		0		
		of Schedule D			25	
	26	Total liabilities. Add lines 17 through 25		0	26	0
		Organizations that follow SFAS 117 (ASC 958)				
Ses		complete lines 27 through 29, and lines 33 and	I 34.			
anc	27	Unrestricted net assets	[		27	
3al	28	Temporarily restricted net assets			28	
d E	29	Permanently restricted net assets	<del> </del>		29	
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC 95				
Ϋ́		complete lines 30 through 34.				
S	30	Capital stock or trust principal, or current funds		11,729	30	17,552
set	31	Paid-in or capital surplus, or land, building, or eq		0		0
As	32	Retained earnings, endowment, accumulated inc	- ·	0		0
<u>e</u> t	33	Total net assets or fund balances		11,729		17,552
~	34	Total liabilities and net assets/fund balances .		11,729		17,552

Form 990 (2013) Page **12** 

Part	Reconciliation of Net Assets								
	Check if Schedule O contains a response or note to any line in this Part XI				. 🔽				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		6	6,059				
2	Total expenses (must equal Part IX, column (A), line 25)	2		5	9,777				
3	Revenue less expenses. Subtract line 2 from line 1	3			6,282				
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		1	1,729				
5	Net unrealized gains (losses) on investments	5			0				
6	Donated services and use of facilities	6			0				
7	Investment expenses	7			0				
8	Prior period adjustments	8			0				
9	Other changes in net assets or fund balances (explain in Schedule O)	9			-459				
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line								
	33, column (B))	10		1	7,552				
Part	Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII								
	Check if Schedule O contains a response or note to any line in this Part XII			<del></del>	<u>.                                    </u>				
				Yes	No				
1	Accounting method used to prepare the Form 990:  Cash Accrual Other		. I						
		pıaın	in						
•	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.  2a Were the organization's financial statements compiled or reviewed by an independent accountant?								
2a					~				
	If "Yes," check a box below to indicate whether the financial statements for the year were com reviewed on a separate basis, consolidated basis, or both:	Siled	Of						
	·								
<b>L</b>	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis  Were the organization's financial statements audited by an independent accountant?		. 2b		~				
D	If "Yes," check a box below to indicate whether the financial statements for the year were audit	 ad on							
	separate basis, consolidated basis, or both:	o on	a						
	☐ 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 or	/ersia	ht						
C	of the audit, review, or compilation of its financial statements and selection of an independent account								
	If the organization changed either its oversight process or selection process during the tax year, ex								
	Schedule O.	Piairi							
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set	forth	in						
ou	the Single Audit Act and OMB Circular A-133?		3a		V				
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo	rgo th		+-	<u> </u>				
-	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a		3b						
				QQ(	(0040)				

Form **990** (2013)

#### SCHEDULE A (Form 990 or 990-EZ)

### **Public Charity Status and Public Support**

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

2013

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

Name of the organization						i i	Employer id	dentificatio	n number	
PUBLIC HIGHER EDUCA									05130	
		<b>rity Status</b> (All orga			-			nstruction	ons.	
<ul> <li>2  A school descr</li> <li>3  A hospital or a</li> <li>4  A medical reservable</li> </ul>	rention of church ribed in <b>section</b> cooperative hos	hes, or association of 170(b)(1)(A)(ii). (Attac spital service organiza on operated in conjunc	churches ch Sched ation desc	s describe ule E.) cribed in	ed in <b>sec</b> section	tion 170( 170(b)(1)(	(b)(1)(A)(i (A)(iii).	•	<b>(iii).</b> Ente	r the
5 An organization	=	the benefit of a colle	ge or uni	versity o	wned or	operated	by a go	vernmen	tal unit d	escribed ir
7 An organization	n that normally	nment or government receives a substantia (A)(vi). (Complete Par	al part of					nit or fror	n the ger	neral public
9 An organization receipts from a support from the suppor										
11 An organization purposes of or 509(a)(3). Check	1 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See <b>section</b> 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h.									
e By checking the other than four	<ul> <li>a ☐ Type I</li> <li>b ☐ Type II</li> <li>c ☐ Type III-Functionally integrated</li> <li>d ☐ Type III-Non-functionally integrated</li> <li>e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).</li> </ul>									
organization, cl	heck this box .	a written determinatio							oe III sup 	porting
<b>g</b> Since August following person		he organization accep	oted any	gift or co	ontributio	n from a	ny of the	e		
		ndirectly controls, eithody of the supported of							nd 11g(i)	Yes No
		on described in (i) abo							11g(ii	,
		a person described in							11g(iii	)
h Provide the foll	owing informati	on about the supporte		. ,						
(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	in col. (i) lis		the orgai	ou notify nization in of your port?	organiza	Is the tion in col. ized in the S.?	, ,	nt of monetary upport
			Yes	No	Yes	No	Yes	No		
(A)										
(B)										
(C)										
(D)										
(E)										

Part II

	(Complete only if you checked the Part III. If the organization fails to				-	•	alify under
Secti	on A. Public Support	quality arias	51 1110 10010 110	tod Bolow, p	ioacc comple	no r art iii.j	
	dar year (or fiscal year beginning in)	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	<b>(e)</b> 2013	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	(1)					<b>()</b>
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
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)						
6	Public support. Subtract line 5 from line 4.						
	on B. Total Support				4 10 20 40		
	dar year (or fiscal year beginning in)	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	<b>(e)</b> 2013	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11 12 13	<b>Total support.</b> Add lines 7 through 10 Gross receipts from related activities, etc. <b>First five years.</b> If the Form 990 is for the	e organization	n's first, secon	d, third, fourth			
	organization, check this box and stop her	e					▶ □
	on C. Computation of Public Suppor						
14 15 16a	Public support percentage for 2013 (line 6 Public support percentage from 2012 Sch 331/3% support test—2013. If the organiz	edule A, Part	II, line 14 .			14 15 /3% or more, cl	% % heck this
	box and <b>stop here.</b> The organization qual			-			
b	331/3% support test—2012. If the organicheck this box and stop here. The organic					15 is 33 <sup>1</sup> / <sub>3</sub> %	or more, . ► □
17a	10%-facts-and-circumstances test—2013. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization						
b	10%-facts-and-circumstances test—20 15 is 10% or more, and if the organization Explain in Part IV how the organization me supported organization	ion meets the eets the "fact	e "facts-and-ci	rcumstances" tances" test. T	test, check th	is box and <b>st</b>	op here.
18	Private foundation. If the organization did	d not check a	box on line 13,	16a, 16b, 17a	a, or 17b, chec	k this box and	see

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

### 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.)

Secti	on A. Public Support			, , ,	<b>1</b>	,	
Calen	dar year (or fiscal year beginning in)	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	<b>(e)</b> 2013	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")	85,558	82,170	67,593	92,223	65,908	393,452
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	0	2,723	1,620	93	151	4,587
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513	0	0	0	0	0	0
4	Tax revenues levied for the						
	organization's benefit and either paid						
	to or expended on its behalf	0	0	0	0	0	0
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge	0	0	0	0	0	0
6	Total. Add lines 1 through 5	85,558	84,893	69,213	92,316	66,059	398,039
7a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons .	0	0	0	0	0	0
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	0	0			0	0
С	Add lines 7a and 7b	0	0	0	0	0	<u>0</u> 0
8	Public support (Subtract line 7c from	0	U	0	0	0	
	line 6.)						398,039
Secti	on B. Total Support						370,037
	dar year (or fiscal year beginning in) ▶	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	<b>(e)</b> 2013	(f) Total
9	Amounts from line 6	85,558	84,893	69,213	92,316	66,059	398,039
10a	Gross income from interest, dividends,	·	·	·			· · ·
	payments received on securities loans, rents,						
	royalties and income from similar sources .	0	0	0	О	0	0
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975	0	0	0	0	0	0
С	Add lines 10a and 10b	0	0	0	0	0	0
11	Net income from unrelated business						
	activities not included in line 10b, whether						
	or not the business is regularly carried on	0	0	0	0	0	0
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
10	(Explain in Part IV.)	0	0	0	0	0	0
13	and 12.)	05 550	04.000	(0.040			
14	First five years. If the Form 990 is for the	85,558	84,893	69,213	92,316	66,059	398,039 n 501(c)(3)
17	organization, check this box and <b>stop he</b>	•					* / . /
Secti	on C. Computation of Public Suppor						
15	Public support percentage for 2013 (line 8			3. column (f))		15	100 %
16	Public support percentage from 2012 Sch					16	100 %
	on D. Computation of Investment Inc			·		1	
17	Investment income percentage for 2013 (			y line 13, colun	nn (f))	17	0 %
18	Investment income percentage from 2012	Schedule A, F	Part III, line 17			18	0 %
19a	331/3% support tests-2013. If the organi						
	17 is not more than 331/3%, check this box						
b	33 <sup>1</sup> / <sub>3</sub> % support tests—2012. If the organiz						
	line 18 is not more than 331/3%, check this b	_	_		· · · · · · · ·		_
20	Private foundation. If the organization di	d not check a l	box on line 14,	19a, or 19b, c	neck this box	and see instru	ctions 🕨 🔲

chedule A (I	hedule A (Form 990 or 990-EZ) 2013				
Part IV					

### **SCHEDULE C** (Form 990 or 990-EZ)

### **Political Campaign and Lobbying Activities**

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

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

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

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

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

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

	ection 501(c)(4), (5), or (6) orga	anizations: Complete Part III.	,		
	of organization			Employer ider	ntification number
		TWORK OF MASSACHUSETTS			26-2005130
Part	_	e organization is exempt und		-	organization.
1	· · · · · · · · · · · · · · · · · · ·	the organization's direct and indire			
2	•				S 
3	volunteer nours				
Part	I-B Complete if the	e organization is exempt und	er section 501(d	c)(3).	
1	Enter the amount of any	excise tax incurred by the organiza	ation under section	n 4955 ▶ \$	3
2	Enter the amount of any	excise tax incurred by organization	managers under	section 4955 ▶ \$	5
3	If the organization incurre	ed a section 4955 tax, did it file For	m 4720 for this ye	ear?	Yes No
4a					Yes No
b	If "Yes," describe in Part				( )(2)
Part		e organization is exempt und			(c)(3).
1		ly expended by the filing organiz		· · · · · · · · · · · · · · · · · · ·	
2		filing organization's funds contrib			· 
2		vities			:
3		expenditures. Add lines 1 and 2.			
Ū	•				}
4		n file Form 1120-POL for this year?			Yes No
5		ses and employer identification nur			
		ents. For each organization listed,			
		ontributions received that were pro-			
	as a separate segregated	fund or a political action committe	e (PAC). If additio	nal space is needed, prov	ride information in Part IV.
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
				filing organization's funds. If none, enter -0	contributions received and promptly and directly
				Tarido: Il florio, oricor o :	delivered to a separate
					political organization. If none, enter -0
(1)					
<b>(0)</b>					
(2)					
(3)					
(3)					
(4)					
.,					
(5)					
(6)					

P	Complete if the organization section 501(h)).	is exempt under section 501(c)(3) and filed	d Form 5768 (ele	ction under
A		ngs to an affiliated group (and list in Part IV e		up member's
	•	ses, and share of excess lobbying expenditur	•	
В		cked box A and "limited control" provisions a	pply.	
	-	ing Expenditures	(a) Filing	(b) Affiliated
	· · · · · · · · · · · · · · · · · · ·	ans amounts paid or incurred.)	organization's totals	group totals
		public opinion (grass roots lobbying)	2,520	
		legislative body (direct lobbying)	0	
	c Total lobbying expenditures (add lines 1a	and 1b)	2,520	
	<b>d</b> Other exempt purpose expenditures		57,257	
	e Total exempt purpose expenditures (add I	ines 1c and 1d)	59,777	
	<b>f</b> Lobbying nontaxable amount. Enter the columns.	e amount from the following table in both	11,955	
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	Not over \$500,000	20% of the amount on line 1e.		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.		
	Over \$17,000,000	\$1,000,000.		
	g Grassroots nontaxable amount (enter 25%	6 of line 1f)	2,989	
	h Subtract line 1g from line 1a. If zero or les	s, enter -0-    .   .   .   .   .   .   .   .   .	0	
	i Subtract line 1f from line 1c. If zero or less	s, enter -0	0	
	j If there is an amount other than zero or reporting section 4911 tax for this year?	n either line 1h or line 1i, did the organization		Yes No
	(Some organizations that mad	r Averaging Period Under Section 501(h) e a section 501(h) election do not have to comp ee the instructions for lines 2a through 2f on pa		,

Lobbying Expenditures During 4-Year Averaging Period							
	Calendar year (or fiscal year beginning in)	<b>(a)</b> 2010	<b>(b)</b> 2011	<b>(c)</b> 2012	( <b>d)</b> 2013	(e) Total	
2a	Lobbying nontaxable amount	19,155	14,743	16,388	11,955	62,241	
b	Lobbying ceiling amount (150% of line 2a, column (e))					93,362	
С	Total lobbying expenditures	8,369	4,592	3,422	2,520	18,903	
d	Grassroots nontaxable amount	4,789	3,686	4,097	2,989	15,561	
е	Grassroots ceiling amount (150% of line 2d, column (e))					23,342	
f	Grassroots lobbying expenditures	4,185	1,431	3,122	2,520	11,258	

Schedule C (Form 990 or 990-EZ) 2013

Part	II-B Complete if the organization is exempt under section 501(c)(3) and has NOT (election under section 501(h)).	filed	Form	1 5768		
For e	each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed	(8	a)		(b)	
	iption of the lobbying activity.	Yes	No	Ar	noun	t
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:					
а	Volunteers?					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
С	Media advertisements?					
d	Mailings to members, legislators, or the public?					
е	Publications, or published or broadcast statements?					
f	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i	Other activities?					
j	Total. Add lines 1c through 1i					
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
b	If "Yes," enter the amount of any tax incurred under section 4912					
c d	If "Yes," enter the amount of any tax incurred by organization managers under section 4912 . If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Part		\(5\ c	or so	ction		
rait	501(c)(6).	)(J), (	JI 3C	Cuon		
	33 1(3)(3).				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1		+
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?			3		
Part						1
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," O answered "Yes."				line	3, is
1	Dues, assessments and similar amounts from members		1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts political expenses for which the section 527(f) tax was paid).	of				
а	Current year		2a			
b	Carryover from last year		2b			
С	Total		2c			
3	$Aggregate \ amount \ reported \ in \ section \ 6033(e)(1)(A) \ notices \ of \ nondeductible \ section \ 162(e) \ dues \ .$		3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of excess does the organization agree to carryover to the reasonable estimate of nondeductible lobby		_			
5	and political expenditure next year?	•	4			
5		•	5			
Pari						
	le the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated gro -B, line 1. Also, complete this part for any additional information.	up iisi	t); Pai	τ II-A, II	ine 2;	and
raitii	-b, line 1. Also, complete this part for any additional information.					

#### **SCHEDULE 0** (Form 990 or 990-EZ)

### Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

Name of the organization	Employer identification number
PUBLIC HIGHER EDUCATION NETWORK OF MASSACHUSETTS	26-2005130
Form 990, Part VI, Section A, Line 6 - PHENOM is a membership organization. Membership in PHENOM	l is open to any person who is a
resident of Massachusetts or is affiliated with a public college or university in Massachusetts, who su	oports the purpose of PHENOM, and
who is actively engaged in some aspect of PHENOM's work at either the chapter or statewide level. Me	embers elect the Board of Directors,
approve the budget and all major programs of the organization.	
Form 990, Part VI, Section A, Line 7a - All members of the Board of Directors are elected by the Members	ers
Form 990, Part VI, Section A, Line 7b - All major decisions of the Board are subject to approval by the	Mamhars
10 iii 770, 1 art vi, 3cction A, Eliic 70 - Ali iiia)oi decisions of the Board are subject to approvar by the	Wichibers.
Form 990, Part VI, Section B, Line 11b - The Board Treasurer reviews a draft of the 990. Once she/he ha	as signed off on the draft, it is
reviewed by the Executive Committee of the Board. When they are satisfied to the accuracy of the filin	g, it is shared with the full Board prior
to its filing.	
Form 990, Part VI, Section B, Line 12c - Staff and Members of the Board are required to notify the Boar	d of any conflict, as defined in
PHENOM's Conflict of Interest Policy, that might arise in the course of the year.	
Form 990, Part VI, Section C, Line 19 - All governing and policy documents are available on the organi	zation's website: phenomonline org
10 iii 770, 1 art vi, 3cction o, Eliic 17 - Ali governing and policy documents are available on the organi.	eation's website. pricromonime.org
Form 990, Part XI, Line 9 - Of -\$459: -\$250 is due to a check paid to the Massachusetts Democratic Par	ty to table at their yearly convention
during the FY, but not cashed until the following FY\$51 is due to a check paid to UMASS Amherst fo	r Work/Study during the FY, but not
cashed until the following FY\$68.20 is due to IRS Payroll Taxes owed during the final month of the F	
the following FY\$89.81 is due to Massachusetts Unemployment Tax liabilities accrued during the fin	al quarter of the FY, but not paid until
the first month of the following FY.	

Schedule O, Statement 1

## PUBLIC HIGHER EDUCATION NETWORK OF MASSACHUSETTS 26-2005130

Form: 990 Page: 2

Line Number: Part III Line 4d

### Other Program Services Accomplishments

Activity Code	Description	Expense	Grants	Revenue
	PHENOM published and disseminated information about how students and other activists can organize themselves to influence public opinion. These included fact sheets,	5,205	0	0
	how-to guides, news summaries and meetings with different organizations.			
Total:		5,205	0	0