

Form **990**

## Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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

**2021**

Department of the Treasury  
Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

Open to Public Inspection

**A** For the 2021 calendar year, or tax year beginning **OCT 1, 2021** and ending **SEP 30, 2022**

<b>B</b> Check if applicable:  <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C</b> Name of organization <b>INSTITUTE FOR SUSTAINABLE COMMUNITIES</b> Doing business as Number and street (or P.O. box if mail is not delivered to street address) Room/suite <b>535 STONE CUTTERS WAY</b> City or town, state or province, country, and ZIP or foreign postal code <b>MONTPELIER, VT 05602</b> <b>F</b> Name and address of principal officer: <b>ANN CONDON</b> <b>SAME AS C ABOVE</b>	<b>D</b> Employer identification number <b>22-3098727</b> <b>E</b> Telephone number <b>802-229-2900</b> <b>G</b> Gross receipts \$ <b>14,698,879.</b> <b>H(a)</b> Is this a group return for subordinates? ..... <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>H(b)</b> Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions <b>H(c)</b> Group exemption number ▶
<b>I</b> Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) ( ) ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		
<b>J</b> Website: ▶ <b>WWW.SUSTAIN.ORG</b>		
<b>K</b> Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		
		<b>L</b> Year of formation: <b>1991</b>
		<b>M</b> State of legal domicile: <b>VT</b>

**Part I Summary**

	<b>1</b>	Briefly describe the organization's mission or most significant activities: <b>HELP COMMUNITIES AROUND THE WORLD ADDRESS ENVIRONMENTAL, ECONOMIC AND SOCIAL CHALLENGES TO BUILD</b>		
	<b>2</b>	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
<b>Activities &amp; Governance</b>	<b>3</b>	Number of voting members of the governing body (Part VI, line 1a)	<b>3</b>	<b>12</b>
	<b>4</b>	Number of independent voting members of the governing body (Part VI, line 1b)	<b>4</b>	<b>12</b>
	<b>5</b>	Total number of individuals employed in calendar year 2021 (Part V, line 2a)	<b>5</b>	<b>36</b>
	<b>6</b>	Total number of volunteers (estimate if necessary)	<b>6</b>	<b>14</b>
	<b>7a</b>	Total unrelated business revenue from Part VIII, column (C), line 12	<b>7a</b>	<b>0.</b>
	<b>7b</b>	Net unrelated business taxable income from Form 990-T, Part I, line 11	<b>7b</b>	<b>0.</b>
	<b>Revenue</b>	<b>8</b>	Contributions and grants (Part VIII, line 1h)	<b>Prior Year</b> 7,952,946.
<b>9</b>		Program service revenue (Part VIII, line 2g)	484,751.	774,431.
<b>10</b>		Investment income (Part VIII, column (A), lines 3, 4, and 7d)	10,955.	7,571.
<b>11</b>		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	88,210.	7.
<b>12</b>		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	8,536,862.	13,919,870.
<b>Expenses</b>		<b>13</b>	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	2,510,640.
	<b>14</b>	Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	<b>15</b>	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	3,601,213.	4,200,969.
	<b>16a</b>	Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	<b>b</b>	Total fundraising expenses (Part IX, column (D), line 25) ▶ <b>274,629.</b>		
	<b>17</b>	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	2,538,694.	2,823,348.
	<b>18</b>	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	8,650,547.	8,107,738.
	<b>19</b>	Revenue less expenses. Subtract line 18 from line 12	-113,685.	5,812,132.
<b>Net Assets or Fund Balances</b>	<b>20</b>	Total assets (Part X, line 16)	<b>Beginning of Current Year</b> 7,463,052.	<b>End of Year</b> 13,221,875.
	<b>21</b>	Total liabilities (Part X, line 26)	1,071,582.	1,032,942.
	<b>22</b>	Net assets or fund balances. Subtract line 21 from line 20	6,391,470.	12,188,933.

**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.

<b>Sign Here</b>	Signature of officer <b>INTERIM PRESIDENT</b> Type or print name and title	Date
<b>Paid Preparer Use Only</b>	Print/Type preparer's name <b>FRANK H. SMITH</b>	Preparer's signature Date Check if self-employed <input type="checkbox"/> PTIN <b>P00639053</b>
	Firm's name ▶ <b>MARCUM LLP</b> Firm's address ▶ <b>1899 L STREET, NW, SUITE 850 WASHINGTON, DC 20036</b>	Firm's EIN ▶ <b>11-1986323</b> Phone no. (202) <b>227-4000</b>

May the IRS discuss this return with the preparer shown above? See instructions  Yes  No

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III [X]

1 Briefly describe the organization's mission: THE INSTITUTE FOR SUSTAINABLE COMMUNITIES (ISC) IS AN INTERNATIONAL, 501(C)(3) NONPROFIT ORGANIZATION THAT SUPPORTS COMMUNITIES, NONGOVERNMENTAL ORGANIZATIONS (NGOS), BUSINESSES AND GOVERNMENT AGENCIES BY CREATING, IMPLEMENTING, AND SCALING EQUITABLE CLIMATE

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [ ] Yes [X] No If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [ ] Yes [X] No If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code: ) (Expenses \$ 1,065,071. including grants of \$ 118,587. ) (Revenue \$ ) MEKONG SUSTAINABLE MANUFACTURING ALLIANCE:

THE MEKONG SUSTAINABLE MANUFACTURING ALLIANCE (THE ALLIANCE), A \$10 MILLION PROJECT FUNDED BY THE U.S. AGENCY FOR INTERNATIONAL DEVELOPMENT (USAID), IMPLEMENTED BY ISC AND IN PARTNERSHIP WITH ELEVATE AND THE ASIAN INSTITUTE FOR TECHNOLOGY, LAUNCHED AT THE END OF 2020 AND IS NOW IN ITS SECOND YEAR OF OPERATIONS. THE ALLIANCE STRENGTHENS SUSTAINABLE AND COMPETITIVE MULTI-SECTOR MANUFACTURING IN CAMBODIA, THAILAND, AND VIETNAM BY SUPPORTING FACTORIES TO ADVANCE INITIATIVES THAT INCREASE THE REGIONAL ADOPTION OF ENVIRONMENTAL, SOCIAL AND GOVERNANCE (ESG) STANDARDS.

4b (Code: ) (Expenses \$ 928,639. including grants of \$ 542,727. ) (Revenue \$ 3,198. ) CHINA DEEP DECARBONIZATION AND EQUITABLE LONG-TERM STRATEGIES ALLIANCE:

BUILDING OFF ISC'S 15 YEARS OF EXTENSIVE URBAN DECARBONIZATION WORK IN 30 CHINESE CITIES, WE LAUNCHED THE CHINA DEEP DECARBONIZATION AND EQUITABLE LONG-TERM STRATEGIES ALLIANCE (CHINA DELTA) IN 2020 WITH FUNDING FROM THE SWEDISH POSTCODE FOUNDATION. CHINA DELTA IS AN 18-MONTH PROJECT TO DRAMATICALLY REDUCE CLIMATE EMISSIONS AND THE SCALE OF GLOBAL CLIMATE DISRUPTION BY SUPPORTING CHINA'S ACHIEVEMENT OF ITS 2060 NEUTRALITY PLEDGE WITH A FOCUS ON THE KEY CITIES OF CHANGSHA, GUANGZHOU, AND TIANJIN. ISC ESTIMATES THAT WITH THE SUCCESSFUL IMPLEMENTATION OF CHINA DELTA, CHANGSHA AND TIANJIN WILL BE ON COURSE TO AVERT 1 BILLION CUMULATIVE METRIC TONS OF CO2 EQUIVALENT BY 2060. IN

4c (Code: ) (Expenses \$ 874,725. including grants of \$ 20,825. ) (Revenue \$ 54,859. ) INDIA:

ISC LAUNCHED THE ENERGY EFFICIENCY ALLIANCE FOR INDUSTRY PROJECT IN 2019, WITH FUNDING FROM PARTNERING FOR GREEN GROWTH AND THE GLOBAL GOALS 2030 (P4G). THE PROGRAM IS AIMED AT ACCELERATING THE ADOPTION OF INDUSTRIAL ENERGY EFFICIENCY IN ASIA THROUGH INNOVATIVE BUSINESS MODELS. REINVENTING EXISTING ENERGY SERVICE COMPANY (ESCO) AND DEMAND AGGREGATION BASED MODELS, THE PROJECT TACKLED CRITICAL CHALLENGES TO THE ON-GROUND ADOPTION OF ENERGY EFFICIENT TECHNOLOGIES. IT IMPLEMENTED A WIDE RANGE OF INTERVENTIONS INCLUDING UNIQUE FINANCING MECHANISMS, TECHNICAL ASSISTANCE, CAPACITY-BUILDING ACTIVITIES, AND POLICY-RELATED INITIATIVES.

4d Other program services (Describe on Schedule O.) (Expenses \$ 2,530,138. including grants of \$ 401,282. ) (Revenue \$ 716,374. )

4e Total program service expenses 5,398,573.

Part IV Checklist of Required Schedules

Table with 3 columns: Question ID, Yes, No. Rows include questions 1 through 21 regarding organizational requirements and schedules A through I.

**Part IV Checklist of Required Schedules** (continued)

	Yes	No
<b>22</b> Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i> .....		X
<b>23</b> 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? <i>If "Yes," complete Schedule J</i> .....	X	
<b>24a</b> 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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i> .....		X
<b>b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? .....		
<b>c</b> Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? .....		
<b>d</b> Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? .....		
<b>25a Section 501(c)(3), 501(c)(4), and 501(c)(29) 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> .....		X
<b>b</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? <i>If "Yes," complete Schedule L, Part I</i> .....		X
<b>26</b> Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i> .....		X
<b>27</b> Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i> .....		X
<b>28</b> Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions):		
<b>a</b> A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i> .....		X
<b>b</b> A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i> .....		X
<b>c</b> A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i> .....		X
<b>29</b> Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> .....		X
<b>30</b> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> .....		X
<b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> .....		X
<b>32</b> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i> .....		X
<b>33</b> 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 "Yes," complete Schedule R, Part I</i> .....	X	
<b>34</b> Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i> .....	X	
<b>35a</b> Did the organization have a controlled entity within the meaning of section 512(b)(13)? .....	X	
<b>b</b> If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> .....		X
<b>36 Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> .....		X
<b>37</b> 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, Part VI</i> .....		X
<b>38</b> Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? .....	X	

**Note:** All Form 990 filers are required to complete Schedule O

**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
<b>1a</b> Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable .....		
<b>b</b> Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable .....		
<b>c</b> Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? .....	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

Table with columns for question number, question text, and Yes/No response boxes. Includes questions 2a through 17 regarding employee counts, tax returns, unrelated business income, foreign accounts, prohibited transactions, and charitable contributions.

Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

Check if Schedule O contains a response or note to any line in this Part VI [X]

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members... 12; 1b Enter the number of voting members included... 12; 2 Did any officer, director, trustee, or key employee have a family relationship... X; 3 Did the organization delegate control over management duties... X; 4 Did the organization make any significant changes to its governing documents... X; 5 Did the organization become aware during the year of a significant diversion of the organization's assets... X; 6 Did the organization have members or stockholders... X; 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body... X; 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body... X; 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? X; b Each committee with authority to act on behalf of the governing body? X; 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O... X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates? X; 10b 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? X; 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? X; 11b Describe on 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... X; 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? X; 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done... X; 13 Did the organization have a written whistleblower policy? X; 14 Did the organization have a written document retention and destruction policy? X; 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official... X; b Other officers or key employees of the organization... X; 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? X; 16b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? X

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed OR, VT
18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. [X] Own website [ ] Another's website [X] Upon request [ ] Other (explain on Schedule O)
19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, address, and telephone number of the person who possesses the organization's books and records MICHAEL WETHERELL - (802) 229-2900 535 STONE CUTTERS WAY, MONTPELIER, VT 05602

**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 the 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, Form 1099-MISC, and/or box 1 of Form 1099-NEC) 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. See the instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) DEEOHN FERRIS PRESIDENT	40.00			X			234,351.	0.	22,195.	
(2) BRENT HABIG VP INT'L PROGRAMS UNTIL 12/21	40.00				X		150,672.	0.	28,210.	
(3) NICHOLAS STEVENS CHIEF OPERATING OFFICER	40.00			X			147,668.	0.	27,752.	
(4) JONATHAN LASH CHAIR	2.00	X		X			0.	0.	0.	
(5) LUANN BENNETT VICE CHAIR	2.00	X		X			0.	0.	0.	
(6) ANN CONDON SECRETARY	2.00	X		X			0.	0.	0.	
(7) JOHN A. DOOLEY TREASURER	2.00	X		X			0.	0.	0.	
(8) RICK BARTON BOARD MEMBER	1.00	X					0.	0.	0.	
(9) JAN BLOMSTRANN BOARD MEMBER	1.00	X					0.	0.	0.	
(10) BRYAN GARCIA BOARD MEMBER	1.00	X					0.	0.	0.	
(11) DAVID GRANT BOARD MEMBER	1.00	X					0.	0.	0.	
(12) DR. SUSAN M. PEPIN BOARD MEMBER	1.00	X					0.	0.	0.	
(13) DR. J. MARSHALL SHEPHERD BOARD MEMBER	1.00	X					0.	0.	0.	
(14) NATHANIEL SMITH BOARD MEMBER	1.00	X					0.	0.	0.	
(15) REV. EUGENE TAYLOR SUTTON BOARD MEMBER	1.00	X					0.	0.	0.	

**Part VII** Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
<b>1b Subtotal</b>							532,691.	0.	78,157.	
<b>c Total from continuation sheets to Part VII, Section A</b>							0.	0.	0.	
<b>d Total (add lines 1b and 1c)</b>							532,691.	0.	78,157.	

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **3**

	Yes	No
3 Did the organization list any <b>former</b> officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		X
4 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? <i>If "Yes," complete Schedule J for such individual</i>	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		X

**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
FELICIA T PEREZ 310 THOMA STREET, RENO, NV 89502	PR/MEDIA CONSULTING	105,498.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **1**



**Part VIII Statement of Revenue**

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

				(A)	(B)	(C)	(D)	
				Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	<b>1 a</b>	Federated campaigns .....	<b>1a</b>					
	<b>b</b>	Membership dues .....	<b>1b</b>					
	<b>c</b>	Fundraising events .....	<b>1c</b>					
	<b>d</b>	Related organizations .....	<b>1d</b>					
	<b>e</b>	Government grants (contributions) .....	<b>1e</b>	2,193,276.				
	<b>f</b>	All other contributions, gifts, grants, and similar amounts not included above ...	<b>1f</b>	10,944,585.				
	<b>g</b>	Noncash contributions included in lines 1a-1f	<b>1g</b>	\$				
	<b>h</b>	<b>Total.</b> Add lines 1a-1f .....			13,137,861.			
Program Service Revenue	<b>2 a</b>	CONTRACTS	<b>Business Code</b>	900099	774,431.	774,431.		
	<b>b</b>							
	<b>c</b>							
	<b>d</b>							
	<b>e</b>							
	<b>f</b>	All other program service revenue .....						
	<b>g</b>	<b>Total.</b> Add lines 2a-2f .....			774,431.			
Other Revenue	<b>3</b>	Investment income (including dividends, interest, and other similar amounts) .....			7,571.		7,571.	
	<b>4</b>	Income from investment of tax-exempt bond proceeds .....						
	<b>5</b>	Royalties .....						
	<b>6 a</b>	Gross rents .....	<b>6a</b>	(i) Real	(ii) Personal			
	<b>b</b>	Less: rental expenses ...	<b>6b</b>					
	<b>c</b>	Rental income or (loss)	<b>6c</b>					
	<b>d</b>	Net rental income or (loss) .....						
	<b>7 a</b>	Gross amount from sales of assets other than inventory .....	<b>7a</b>	(i) Securities	(ii) Other			
						779,009.		
	<b>b</b>	Less: cost or other basis and sales expenses .....	<b>7b</b>	779,009.				
	<b>c</b>	Gain or (loss) .....	<b>7c</b>	0.				
<b>d</b>	Net gain or (loss) .....			0.				
<b>8 a</b>	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18 .....	<b>8a</b>						
<b>b</b>	Less: direct expenses .....	<b>8b</b>						
<b>c</b>	Net income or (loss) from fundraising events .....							
<b>9 a</b>	Gross income from gaming activities. See Part IV, line 19 .....	<b>9a</b>						
<b>b</b>	Less: direct expenses .....	<b>9b</b>						
<b>c</b>	Net income or (loss) from gaming activities .....							
<b>10 a</b>	Gross sales of inventory, less returns and allowances .....	<b>10a</b>						
<b>b</b>	Less: cost of goods sold .....	<b>10b</b>						
<b>c</b>	Net income or (loss) from sales of inventory .....							
Miscellaneous Revenue	<b>11 a</b>	GAIN ON FOREIGN CURREN	<b>Business Code</b>	900099	7.		7.	
	<b>b</b>							
	<b>c</b>							
	<b>d</b>	All other revenue .....						
	<b>e</b>	<b>Total.</b> Add lines 11a-11d .....			7.			
<b>12</b>	<b>Total revenue.</b> See instructions .....			13,919,870.	774,431.	0.	7,578.	

**Part IX Statement of Functional Expenses**

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
<b>1</b> Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 ...	401,282.	401,282.		
<b>2</b> Grants and other assistance to domestic individuals. See Part IV, line 22 .....				
<b>3</b> Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 .....	682,139.	682,139.		
<b>4</b> Benefits paid to or for members .....				
<b>5</b> Compensation of current officers, directors, trustees, and key employees .....	551,683.	61,132.	457,451.	33,100.
<b>6</b> Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) .....				
<b>7</b> Other salaries and wages .....	2,885,119.	1,782,605.	947,884.	154,630.
<b>8</b> Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	137,158.	76,244.	51,787.	9,127.
<b>9</b> Other employee benefits .....	380,639.	211,592.	143,717.	25,330.
<b>10</b> Payroll taxes .....	246,370.	136,954.	93,021.	16,395.
<b>11</b> Fees for services (nonemployees):				
<b>a</b> Management .....				
<b>b</b> Legal .....	24,568.	3,168.	21,400.	
<b>c</b> Accounting .....	60,027.	58,097.	463.	1,467.
<b>d</b> Lobbying .....				
<b>e</b> Professional fundraising services. See Part IV, line 17				
<b>f</b> Investment management fees .....				
<b>g</b> Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	1,600,051.	1,312,559.	273,294.	14,198.
<b>12</b> Advertising and promotion .....	44,263.	4,988.	38,004.	1,271.
<b>13</b> Office expenses .....	137,837.	51,553.	80,217.	6,067.
<b>14</b> Information technology .....	94,806.	24,276.	64,480.	6,050.
<b>15</b> Royalties .....				
<b>16</b> Occupancy .....	203,086.	131,413.	71,673.	
<b>17</b> Travel .....	209,244.	115,214.	87,601.	6,429.
<b>18</b> Payments of travel or entertainment expenses for any federal, state, or local public officials ...				
<b>19</b> Conferences, conventions, and meetings .....	360,457.	332,808.	27,469.	180.
<b>20</b> Interest .....				
<b>21</b> Payments to affiliates .....				
<b>22</b> Depreciation, depletion, and amortization .....	23,628.		23,476.	152.
<b>23</b> Insurance .....				
<b>24</b> Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
<b>a</b> <b>STAFF RECRUITMENT &amp; DEV</b>	62,738.	10,751.	51,754.	233.
<b>b</b> <b>REGISTRATIONS</b>	2,643.	1,798.	845.	
<b>c</b> _____				
<b>d</b> _____				
<b>e</b> All other expenses _____				
<b>25</b> <b>Total functional expenses.</b> Add lines 1 through 24e	8,107,738.	5,398,573.	2,434,536.	274,629.
<b>26</b> <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  if following SOP 98-2 (ASC 958-720)

**Part X Balance Sheet**

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

		(A) Beginning of year		(B) End of year
<b>Assets</b>	<b>1</b> Cash - non-interest-bearing .....	85,403.	<b>1</b>	275,546.
	<b>2</b> Savings and temporary cash investments .....	3,842,650.	<b>2</b>	5,274,345.
	<b>3</b> Pledges and grants receivable, net .....	3,200,074.	<b>3</b>	7,247,568.
	<b>4</b> Accounts receivable, net .....	134,747.	<b>4</b>	329,686.
	<b>5</b> Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons .....		<b>5</b>	
	<b>6</b> Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) .....		<b>6</b>	
	<b>7</b> Notes and loans receivable, net .....		<b>7</b>	
	<b>8</b> Inventories for sale or use .....		<b>8</b>	
	<b>9</b> Prepaid expenses and deferred charges .....	154,225.	<b>9</b>	61,138.
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D .....	<b>10a</b> 875,394.		
	<b>b</b> Less: accumulated depreciation .....	<b>10b</b> 848,423.	38,816.	<b>10c</b> 26,971.
	<b>11</b> Investments - publicly traded securities .....		<b>11</b>	
	<b>12</b> Investments - other securities. See Part IV, line 11 .....		<b>12</b>	
	<b>13</b> Investments - program-related. See Part IV, line 11 .....		<b>13</b>	
	<b>14</b> Intangible assets .....		<b>14</b>	
	<b>15</b> Other assets. See Part IV, line 11 .....	7,137.	<b>15</b>	6,621.
<b>16 Total assets.</b> Add lines 1 through 15 (must equal line 33) .....	7,463,052.	<b>16</b>	13,221,875.	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses .....	510,394.	<b>17</b>	1,032,942.
	<b>18</b> Grants payable .....		<b>18</b>	
	<b>19</b> Deferred revenue .....	88,463.	<b>19</b>	
	<b>20</b> Tax-exempt bond liabilities .....		<b>20</b>	
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D .....		<b>21</b>	
	<b>22</b> Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons .....		<b>22</b>	
	<b>23</b> Secured mortgages and notes payable to unrelated third parties .....		<b>23</b>	
	<b>24</b> Unsecured notes and loans payable to unrelated third parties .....	472,725.	<b>24</b>	
	<b>25</b> Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D .....		<b>25</b>	
	<b>26 Total liabilities.</b> Add lines 17 through 25 .....	1,071,582.	<b>26</b>	1,032,942.
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow FASB ASC 958, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27, 28, 32, and 33.</b>			
	<b>27</b> Net assets without donor restrictions .....	1,200,539.	<b>27</b>	1,378,331.
	<b>28</b> Net assets with donor restrictions .....	5,190,931.	<b>28</b>	10,810,602.
	<b>Organizations that do not follow FASB ASC 958, check here</b> <input type="checkbox"/> <b>and complete lines 29 through 33.</b>			
	<b>29</b> Capital stock or trust principal, or current funds .....		<b>29</b>	
	<b>30</b> Paid-in or capital surplus, or land, building, or equipment fund .....		<b>30</b>	
	<b>31</b> Retained earnings, endowment, accumulated income, or other funds .....		<b>31</b>	
	<b>32</b> Total net assets or fund balances .....	6,391,470.	<b>32</b>	12,188,933.
	<b>33</b> Total liabilities and net assets/fund balances .....	7,463,052.	<b>33</b>	13,221,875.

**Part XI Reconciliation of Net Assets**

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	13,919,870.
2	Total expenses (must equal Part IX, column (A), line 25)	2	8,107,738.
3	Revenue less expenses. Subtract line 2 from line 1	3	5,812,132.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	6,391,470.
5	Net unrealized gains (losses) on investments	5	-14,669.
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 on Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	12,188,933.

**Part XII Financial Statements and Reporting**

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

- 1 Accounting method used to prepare the Form 990:  Cash  Accrual  Other \_\_\_\_\_  
If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.
- 2a Were the organization's financial statements compiled or reviewed by an independent accountant? .....  
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:  
 Separate basis  Consolidated basis  Both consolidated and separate basis
- b Were the organization's financial statements audited by an independent accountant? .....  
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:  
 Separate basis  Consolidated basis  Both consolidated and separate basis
- c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? .....  
If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.
- 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? .....
- b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits .....

	Yes	No
2a		X
2b	X	
2c	X	
3a	X	
3b	X	

Form 990 (2021)



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

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

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....	5,365,045.	9,246,236.	6,852,217.	7,952,946.	13,137,861.	42,554,305.
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge .....						
<b>4 Total.</b> Add lines 1 through 3 .....	5,365,045.	9,246,236.	6,852,217.	7,952,946.	13,137,861.	42,554,305.
<b>5</b> 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) .....						17,905,128.
<b>6 Public support.</b> Subtract line 5 from line 4.						24,649,177.

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
<b>7</b> Amounts from line 4 .....	5,365,045.	9,246,236.	6,852,217.	7,952,946.	13,137,861.	42,554,305.
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources .....	18,463.	45,841.	37,647.	13,908.	7,571.	123,430.
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on .....						
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .....	247,350.	474.	1,064.	88,210.		337,098.
<b>11 Total support.</b> Add lines 7 through 10						43,014,833.
<b>12</b> Gross receipts from related activities, etc. (see instructions) .....					12	2,302,197.
<b>13 First 5 years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> .....						<input type="checkbox"/>

**Section C. Computation of Public Support Percentage**

<b>14</b> Public support percentage for 2021 (line 6, column (f), divided by line 11, column (f)) .....	<b>14</b>	57.30 %
<b>15</b> Public support percentage from 2020 Schedule A, Part II, line 14 .....	<b>15</b>	65.95 %
<b>16a 33 1/3% support test - 2021.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization .....		<input checked="" type="checkbox"/>
<b>b 33 1/3% support test - 2020.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization .....		<input type="checkbox"/>
<b>17a 10% -facts-and-circumstances test - 2021.</b> 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 <b>stop here.</b> Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization .....		<input type="checkbox"/>
<b>b 10% -facts-and-circumstances test - 2020.</b> If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and <b>stop here.</b> Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization .....		<input type="checkbox"/>
<b>18 Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions .....		<input type="checkbox"/>

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

(Complete only if you checked the box on line 10 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) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....						
<b>2</b> 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 .....						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513 .....						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge .....						
<b>6 Total.</b> Add lines 1 through 5 .....						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons .....						
<b>b</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 .....						
<b>c</b> Add lines 7a and 7b .....						
<b>8 Public support.</b> (Subtract line 7c from line 6.)						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
<b>9</b> Amounts from line 6 .....						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources .....						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 .....						
<b>c</b> Add lines 10a and 10b .....						
<b>11</b> Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on .....						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .....						
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.)						

**14 First 5 years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** .....

**Section C. Computation of Public Support Percentage**

<b>15</b> Public support percentage for 2021 (line 8, column (f), divided by line 13, column (f)) .....	<b>15</b>	%
<b>16</b> Public support percentage from 2020 Schedule A, Part III, line 15 .....	<b>16</b>	%

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for 2021 (line 10c, column (f), divided by line 13, column (f)) .....	<b>17</b>	%
<b>18</b> Investment income percentage from 2020 Schedule A, Part III, line 17 .....	<b>18</b>	%

**19a 33 1/3% support tests - 2021.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization .....

**b 33 1/3% support tests - 2020.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization .....

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

**Part IV Supporting Organizations**

(Complete only if you checked a box in line 12 on Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

**Section A. All Supporting Organizations**

	Yes	No
<b>1</b> Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>		
<b>2</b> Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
<b>3a</b> Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		
<b>b</b> Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
<b>c</b> Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
<b>4a</b> Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>		
<b>b</b> Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
<b>c</b> Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>		
<b>5a</b> Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
<b>b Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
<b>c Substitutions only.</b> Was the substitution the result of an event beyond the organization's control?		
<b>6</b> Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
<b>7</b> Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
<b>8</b> Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
<b>9a</b> Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
<b>b</b> Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
<b>c</b> Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
<b>10a</b> Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer line 10b below.</i>		
<b>b</b> Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		



Part IV Supporting Organizations (continued)

Table with 3 columns: Question, Yes, No. Row 11: Has the organization accepted a gift or contribution from any of the following persons? Sub-rows 11a, 11b, 11c.

Section B. Type I Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? Row 2: Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization?

Section C. Type II Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)?

Section D. All Type III Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? Row 2: Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? Row 3: By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year?

Section E. Type III Functionally Integrated Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). Sub-rows a, b, c. Row 2: Activities Test. Answer lines 2a and 2b below. Sub-rows a, b. Row 3: Parent of Supported Organizations. Answer lines 3a and 3b below. Sub-rows a, b.

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

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

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

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	<b>Total</b> (add lines 1a, 1b, and 1c)	1d	
e	<b>Discount</b> claimed for blockage or other factors ( <i>explain in detail in Part VI</i> ):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by 0.035.	6	
7	Recoveries of prior-year distributions	7	
8	<b>Minimum Asset Amount</b> (add line 7 to line 6)	8	

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	
2	Enter 0.85 of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

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

Section D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required - provide details in Part VI)	5
6	Other distributions (describe in Part VI). See instructions.	6
7	<b>Total annual distributions.</b> Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	8
9	Distributable amount for 2021 from Section C, line 6	9
10	Line 8 amount divided by line 9 amount	10

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2021	(iii) Distributable Amount for 2021
1	Distributable amount for 2021 from Section C, line 6		
2	Underdistributions, if any, for years prior to 2021 (reasonable cause required - explain in Part VI). See instructions.		
3	Excess distributions carryover, if any, to 2021		
a	From 2016		
b	From 2017		
c	From 2018		
d	From 2019		
e	From 2020		
f	<b>Total</b> of lines 3a through 3e		
g	Applied to underdistributions of prior years		
h	Applied to 2021 distributable amount		
i	Carryover from 2016 not applied (see instructions)		
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.		
4	Distributions for 2021 from Section D, line 7: \$		
a	Applied to underdistributions of prior years		
b	Applied to 2021 distributable amount		
c	Remainder. Subtract lines 4a and 4b from line 4.		
5	Remaining underdistributions for years prior to 2021, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.		
6	Remaining underdistributions for 2021. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.		
7	<b>Excess distributions carryover to 2022.</b> Add lines 3j and 4c.		
8	Breakdown of line 7:		
a	Excess from 2017		
b	Excess from 2018		
c	Excess from 2019		
d	Excess from 2020		
e	Excess from 2021		

Schedule A (Form 990) 2021

**Part VI** **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:

MISCELLANEOUS INCOME

2017 AMOUNT: \$ 2,523.

2018 AMOUNT: \$ 474.

2019 AMOUNT: \$ 1,064.

2020 AMOUNT: \$ 88,210.

TRANSFER FROM OSC

2017 AMOUNT: \$ 244,827.

SCHEDULE A, PART II:

FOR TAX YEAR 2018 AND GOING FORWARD, SCHEDULE A PART II INCLUDES THE OPERATIONS OF ISC'S FOREIGN OFFICES IN THE PUBLIC SUPPORT CALCULATION. PLEASE SEE SCHEDULE O FOR ADDITIONAL DETAILS RELATED TO THE FOREIGN OFFICES AND THE INCLUSION OF THE OPERATIONS IN THE FORM 990.

**Schedule B**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Schedule of Contributors**

▶ Attach to Form 990 or Form 990-PF.  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2021**

Name of the organization

**INSTITUTE FOR SUSTAINABLE COMMUNITIES**

Employer identification number

**22-3098727**

Organization type (check one):

**Filers of:**

**Section:**

Form 990 or 990-EZ

501(c)( 3 ) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

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

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

**General Rule**

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

**Special Rules**

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000; or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ..... ▶ \$ \_\_\_\_\_

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

Name of organization  <b>INSTITUTE FOR SUSTAINABLE COMMUNITIES</b>	Employer identification number  <b>22-3098727</b>
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**Part I Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	_____ _____ _____	\$ <u>1,779,019.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	_____ _____ _____	\$ <u>550,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	_____ _____ _____	\$ <u>380,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	_____ _____ _____	\$ <u>2,850,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	_____ _____ _____	\$ <u>586,881.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	_____ _____ _____	\$ <u>2,000,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization  <b>INSTITUTE FOR SUSTAINABLE COMMUNITIES</b>	Employer identification number  <b>22-3098727</b>
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**Part I** **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	<hr/> <hr/> <hr/>	\$ <u>4,428,571.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization  <b>INSTITUTE FOR SUSTAINABLE COMMUNITIES</b>	Employer identification number  <b>22-3098727</b>
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**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
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____



Name of organization  <b>INSTITUTE FOR SUSTAINABLE COMMUNITIES</b>	Employer identification number  <b>22-3098727</b>
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**Part III** Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of **\$1,000 or less** for the year. (Enter this info. once.) ▶ \$ \_\_\_\_\_  
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No. 1545-0047

2021

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization INSTITUTE FOR SUSTAINABLE COMMUNITIES Employer identification number 22-3098727

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include total number at end of year, aggregate value of contributions, grants, and end of year, and two Yes/No questions regarding donor property and grant fund usage.

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

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include purpose(s) of conservation easements, a table for lines 2a-2d (Total number, acreage, certified historic structures, and National Register listings), and questions about monitoring, expenses, and reporting.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include questions about reporting art and historical treasures, and a table for revenue and assets included in Form 990.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule D (Form 990) 2021

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

- 3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):
- a  Public exhibition
  - b  Scholarly research
  - c  Preservation for future generations
  - d  Loan or exchange program
  - e  Other \_\_\_\_\_
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  Yes  No

**Part IV Escrow and Custodial Arrangements.** Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?  Yes  No
- b If "Yes," explain the arrangement in Part XIII and complete the following table:
- |                                 | Amount |
|---------------------------------|--------|
| c Beginning balance             | 1c     |
| d Additions during the year     | 1d     |
| e Distributions during the year | 1e     |
| f Ending balance                | 1f     |
- 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?  Yes  No
- b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

**Part V Endowment Funds.** Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

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

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment \_\_\_\_\_%
  - b Permanent endowment \_\_\_\_\_%
  - c Term endowment \_\_\_\_\_%
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- |   | Yes    | No |
|---|--------|----|
| (i) Unrelated organizations   | 3a(i)  |    |
| (ii) Related organizations  | 3a(ii) |    |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? <input type="checkbox"/> | 3b     |    |
- 4 Describe in Part XIII the intended uses of the organization's endowment funds.

**Part VI Land, Buildings, and Equipment.**

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		75,663.	62,161.	13,502.
d Equipment		217,796.	205,277.	12,519.
e Other		581,935.	580,985.	950.
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				<b>26,971.</b>

**Part VII Investments - Other Securities.**

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

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

**Part VIII Investments - Program Related.**

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

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
<b>Total.</b> (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶		

**Part IX Other Assets.**

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

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	

**Part X Other Liabilities.**

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	

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

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

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

<b>1</b>	Total revenue, gains, and other support per audited financial statements	<b>1</b>	13,905,194.
<b>2</b>	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
<b>a</b>	Net unrealized gains (losses) on investments	<b>2a</b>	-14,669.
<b>b</b>	Donated services and use of facilities	<b>2b</b>	
<b>c</b>	Recoveries of prior year grants	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIII.)	<b>2d</b>	
<b>e</b>	Add lines <b>2a</b> through <b>2d</b>	<b>2e</b>	-14,669.
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b>	<b>3</b>	13,919,863.
<b>4</b>	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b	<b>4a</b>	
<b>b</b>	Other (Describe in Part XIII.)	<b>4b</b>	7.
<b>c</b>	Add lines <b>4a</b> and <b>4b</b>	<b>4c</b>	7.
<b>5</b>	Total revenue. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 12.)	<b>5</b>	13,919,870.

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

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

<b>1</b>	Total expenses and losses per audited financial statements	<b>1</b>	8,107,731.
<b>2</b>	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
<b>a</b>	Donated services and use of facilities	<b>2a</b>	
<b>b</b>	Prior year adjustments	<b>2b</b>	
<b>c</b>	Other losses	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIII.)	<b>2d</b>	-7.
<b>e</b>	Add lines <b>2a</b> through <b>2d</b>	<b>2e</b>	-7.
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b>	<b>3</b>	8,107,738.
<b>4</b>	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b	<b>4a</b>	
<b>b</b>	Other (Describe in Part XIII.)	<b>4b</b>	
<b>c</b>	Add lines <b>4a</b> and <b>4b</b>	<b>4c</b>	0.
<b>5</b>	Total expenses. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 18.)	<b>5</b>	8,107,738.

**Part XIII Supplemental Information.**

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

**PART X, LINE 2:**

THE ORGANIZATION PERFORMED AN EVALUATION OF UNCERTAINTY IN INCOME TAXES FOR THE YEAR ENDED SEPTEMBER 30, 2022, AND DETERMINED THAT THERE WERE NO MATTERS THAT WOULD REQUIRE RECOGNITION IN THE CONSOLIDATED FINANCIAL STATEMENTS OR THAT MAY HAVE ANY EFFECT ON ITS TAX-EXEMPT STATUS.

**PART XI, LINE 4B - OTHER ADJUSTMENTS:**

FOREIGN CURRENCY TRANSACTION GAIN

**PART XII, LINE 2D - OTHER ADJUSTMENTS:**

FOREIGN CURRENCY TRANSACTION GAIN



**SCHEDULE F  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Statement of Activities Outside the United States**

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

▶ Attach to Form 990.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2021**

Open to Public  
Inspection

Name of the organization **INSTITUTE FOR SUSTAINABLE COMMUNITIES** Employer identification number **22-3098727**

**Part I** **General Information on Activities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

**1 For grantmakers.** Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? .....  Yes  No

**2 For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

**3 Activities per Region.** (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
EAST AND SOUTH ASIA, AND THE PACIFIC	6	28	PROGRAM SERVICES	TRAINING & CAPACITY BUILDING	1,829,123.
EAST AND SOUTH ASIA, AND THE PACIFIC	0	0	GRANTS TO RECIPIENTS LOCATED IN REGION		682,139.
<b>3 a</b> Subtotal .....	6	28			2,511,262.
<b>b</b> Total from continuation sheets to Part I .....	0	0			0.
<b>c Totals</b> (add lines 3a and 3b) .....	6	28			2,511,262.

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

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EAST ASIA AND THE PACIFIC	CLIMATE & ENVIRONMENTAL	542,727.	WIRE TRANSFER	0.		
		EAST ASIA AND THE PACIFIC	CLIMATE & ENVIRONMENTAL	118,587.	WIRE TRANSFER	0.		
		SOUTH ASIA	CLIMATE & ENVIRONMENTAL	10,046.	WIRE TRANSFER	0.		
		SOUTH ASIA - AFGHANISTAN, BANGLADESH, BHUTAN, INDIA,	CLIMATE & ENVIRONMENTAL	9,860.	WIRE TRANSFER	0.		

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

3 Enter total number of other organizations or entities ..... **2**





**Part IV Foreign Forms**

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

**Part V Supplemental Information**

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

**PART I, LINE 2:**

ISC HOLDS COMPETITIVE SUB-GRANT APPLICATION SOLICITATIONS AND AWARDS. THE AWARDEES ARE REVIEWED FOR ELIGIBILITY AND CAPACITY TO PERFORM; IN MOST CASES THE POTENTIAL AWARDEES ARE ALSO REVIEWED BY USAID PRIOR TO THE AWARD. ISC MONITORS BOTH MATERIAL AND FINANCIAL PROGRESS ON THE AWARDS THROUGH ACCOUNTING RECORDS, PROGRESS REPORTS AND SITE VISITS.

**PART I, LINE 3:**

FOREIGN EXPENDITURES WERE ACCOUNTED FOR USING THE ACCRUAL METHOD OF ACCOUNTING.

**SCHEDULE I  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

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

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

▶ **Attach to Form 990.**

▶ **Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.**

OMB No. 1545-0047

**2021**

**Open to Public  
Inspection**

Name of the organization **INSTITUTE FOR SUSTAINABLE COMMUNITIES** Employer identification number **22-3098727**

**Part I General Information on Grants and Assistance**

**1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  **Yes**  **No**

**2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

<b>1 (a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section (if applicable)	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of noncash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of noncash assistance	<b>(h)</b> Purpose of grant or assistance
ASIAN PACIFIC ENVIRONMENTAL NETWORK - 426 17TH ST, SUITE 500 - OAKLAND, CA 94612	94-3261846	501C3	23,000.	0.			CAPACITY BUILDING
CALIFORNIA INDIAN MUSEUM & CULTURAL CENTER - 5250 AERO DR - SANTA ROAS, CA 95403	94-3244506	501C3	23,000.	0.			CAPACITY BUILDING
EASTSIDE COMMUNTIY NETWORK 4401 CONNOR ST. DETROIT, MI 48215	38-5611225	501C3	23,000.	0.			CAPACITY BUILDING
GARFIELD PARK COMMUNITY COUNCIL 300 N CENTRAL PARK DR. CHICAGO, IL 60624	45-4055306	501C3	23,000.	0.			CAPACITY BUILDING
HEALTHY COMMUNITY RESOURCES AND ADVOCACY - 1855 DUELS ST - NEW ORLEANS, LA 70119	82-4941170	501C3	23,000.	0.			CAPACITY BUILDING
HEALTHY GULF 1010 COMMON ST, SUITE 902 NEW ORLEANS, LA 70112	72-1447742	501C3	112,497.	0.			CAPACITY BUILDING

**2** Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶ 12.

**3** Enter total number of other organizations listed in the line 1 table ▶

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

Schedule I (Form 990) 2021

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LA MUJER OBRERA 2120 TEXAS AVE EL PASO, TX 79901	74-2219654	501C3	23,000.	0.			CAPACITY BUILDING
POWER 52 3545 ELLICOTT MILLS DR. ELLICOTT CITY, MD 21043	47-5176575	501C3	23,000.	0.			CAPACITY BUILDING
UNITED PARENTS AGAINST LEAD P.O. BOX 24773 RICHMOND, VA 23224	13-4251647	501C3	23,000.	0.			CAPACITY BUILDING
WALNUT WAY 2240 N 17TH ST MILWAUKEE, WI 53205	39-2007850	501C3	23,000.	0.			CAPACITY BUILDING
WE STAY - NOS QUEDAMOS, INC 754 MELROSE AVE BRONX, NY 10541	13-3724388	501C3	23,000.	0.			CAPACITY BUILDING
TEXAS SOUTHERN UNIVERSITY FOUNDATION - 3100 CLEBURNE STREET - HOUSTON, TX 77004	74-1620415	501C3	53,785.	0.			CAPACITY BUILDING

**Part III** **Grants and Other Assistance to Domestic Individuals.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22.  
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance

**Part IV** **Supplemental Information.** Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

**PART I, LINE 2:**

ISC HOLDS COMPETITIVE SUB-GRANT APPLICATION SOLICITATIONS AND AWARDS. THE AWARDEES ARE REVIEWED FOR ELIGIBILITY AND CAPACITY TO PERFORM; IN SOME CASES THE POTENTIAL AWARDEES ARE ALSO REVIEWED BY USAID PRIOR TO THE AWARD. ISC MONITORS BOTH MATERIAL AND FINANCIAL PROGRESS ON THE AWARDS THROUGH ACCOUNTING RECORDS, PROGRESS REPORTS AND SITE VISITS.

**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" on Form 990, Part IV, line 23.  
 ▶ Attach to Form 990.  
 ▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2021**

Open to Public Inspection

Name of the organization

**INSTITUTE FOR SUSTAINABLE COMMUNITIES**

Employer identification number

**22-3098727**

**Part I Questions Regarding Compensation**

**1a** Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- |  |  |
|--|--|
| <input type="checkbox"/> First-class or charter travel             | <input type="checkbox"/> Housing allowance or residence for personal use   |
| <input type="checkbox"/> Travel for companions                     | <input type="checkbox"/> Payments for business use of personal residence   |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees     |
| <input type="checkbox"/> Discretionary spending account            | <input type="checkbox"/> Personal services (such as 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 .....

**2** Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a? .....

**3** Indicate which, if any, of the following the 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.

- |  |   |
|--|---|
| <input type="checkbox"/> Compensation committee              | <input type="checkbox"/> Written employment contract                                |
| <input type="checkbox"/> Independent compensation consultant | <input type="checkbox"/> Compensation survey or study                               |
| <input type="checkbox"/> Form 990 of other organizations     | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

**4** During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment? .....
- b** Participate in or receive payment from a supplemental nonqualified retirement plan? .....
- c** Participate in or receive payment from an equity-based compensation arrangement? .....
- 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), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.**

**5** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization? .....
- b** Any related organization? .....
- If "Yes" on line 5a or 5b, describe in Part III.

**6** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization? .....
- b** Any related organization? .....
- If "Yes" on line 6a or 6b, describe in Part III.

**7** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III .....

**8** Were any amounts reported on 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 .....

**9** If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)? .....

	Yes	No
<b>1a</b>		
<b>1b</b>		
<b>2</b>		
<b>3</b>		
<b>4a</b>		X
<b>4b</b>		X
<b>4c</b>		X
<b>5a</b>		X
<b>5b</b>		X
<b>6a</b>		X
<b>6b</b>		X
<b>7</b>		X
<b>8</b>		X
<b>9</b>		

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

Schedule J (Form 990) 2021

**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 on 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 aren't 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.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) DEEOHN FERRIS PRESIDENT	(i)	234,351.	0.	0.	14,185.	8,010.	256,546.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) BRENT HABIG VP INT'L PROGRAMS UNTIL 12/21	(i)	150,672.	0.	0.	9,813.	18,397.	178,882.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) NICHOLAS STEVENS CHIEF OPERATING OFFICER	(i)	147,668.	0.	0.	9,355.	18,397.	175,420.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							





**SCHEDULE O  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

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

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

▶ Attach to Form 990 or Form 990-EZ.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2021**

Open to Public  
Inspection

Name of the organization

INSTITUTE FOR SUSTAINABLE COMMUNITIES

Employer identification number

22-3098727

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

A BETTER FUTURE SHAPED AND SHARED BY ALL.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

CHANGE MITIGATION AND RESILIENCE SOLUTIONS FOR THOSE MOST PROFOUNDLY  
IMPACTED BY THE GLOBAL CLIMATE CRISIS BY FORMING COLLABORATIVE,  
PEOPLE-FOCUSED PARTNERSHIPS. ISC'S MISSION IS TO HELP COMMUNITIES  
AROUND THE WORLD ADDRESS ENVIRONMENTAL, ECONOMIC AND SOCIAL CHALLENGES  
TO BUILD A BETTER FUTURE SHAPED AND SHARED BY ALL. ISC'S APPROACH TO  
ENGAGING COMMUNITIES AND BUILDING THE CAPACITY OF LOCAL ORGANIZATIONS  
TO SOLVE PROBLEMS IS CRITICAL TO ADDRESSING ISSUES SUCH AS  
ENVIRONMENTAL HEALTH AND CLIMATE CHANGE, WHERE CITIZEN COMMITMENT,  
BUSINESS ENGAGEMENT AND LOCAL LEADERSHIP ARE NEEDED TO HAVE THE MOST  
IMPACT.

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

ADDITION, 12 INSTITUTIONS WILL HAVE IMPROVED CAPACITY TO RESPOND TO  
CHINA'S 2060 CARBON NEUTRALITY PLEDGE AND ISC WILL DEMONSTRATE,  
DOCUMENT, AND DISSEMINATE A REPLICABLE MODEL FOR CLIMATE ACTION AND  
CARBON NEUTRALITY PLANNING THAT CAN INFORM AND MOBILIZE OTHER CHINESE  
CITIES TOWARD ACHIEVING CHINA'S NEUTRALITY GOAL.

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

IN 2020, ISC EXPANDED ITS USAID-FUNDED EHS+ CENTER TO LAUNCH THE  
MAHARASHTRA CLEAN AIR ACCELERATOR PROGRAM. THE PROGRAM BRINGS KEY

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

Schedule O (Form 990) 2021

132211 11-11-21

Name of the organization INSTITUTE FOR SUSTAINABLE COMMUNITIES	Employer identification number 22-3098727
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MUNICIPAL CORPORATIONS TOGETHER, SUPPORTING THE IMPLEMENTATION OF CITY ACTION PLANS. APART FROM ACTION PLANNING, TRAINING AND CAPACITY BUILDING MEASURES, ISC ALSO LEVERAGES ITS INDUSTRY ENGAGEMENT AND CLEAN TECH ADOPTION WORK TO REALIZE CO-BENEFITS ON AIR POLLUTION REDUCTION.

ISC INITIATED THE SUSTAINABLE COTTON ACCELERATOR PROJECT IN 2020, WITH SUPPORT FROM HSBC AND IN PARTNERSHIP WITH WWF. THE INITIATIVE WORKS WITH 250,000+ SMALL HOLDER AND WOMEN FARMERS IN MAHARASHTRA IN RURAL COMMUNITIES TO BECOME MORE RESILIENT TO CLIMATE AND WATER RELATED DISRUPTIONS. OUR CUTTING-EDGE RESEARCH HELPED MAP FUTURE CLIMATE-RELATED RISKS TO COTTON PRODUCTION IN MAHARASHTRA, INDIA.

IN 2020 AND 2021, ISC EXPANDED ITS WOMEN + WATER ALLIANCE (JOINTLY FUNDED BY GAP INC. AND USAID) TO REINFORCE THE INTERLINKAGES BETWEEN CLIMATE, COTTON, AND WATER AND ESTABLISHED ROADMAPS TO FOSTER GREATER UPSTREAM TEXTILE SUPPLIER SUSTAINABILITY. THE PROJECT ALSO SUPPORTED WOMEN ENTREPRENEURS AND TRAINED A COHORT IN THE PRODUCTION AND USE OF BIO-FERTILIZERS AND BIOPESTICIDES.

IN 2021, WITH FINANCIAL SUPPORT FROM THE CLIMATEWORKS FOUNDATION, ISC LAUNCHED THE SUSTAINABLE LIVELIHOODS MANUFACTURING PROGRAM TO STRENGTHEN THE CONNECTION BETWEEN THE ADOPTION OF CLEAN TECH IN FACTORIES AND NEW GREEN JOBS AND LIVELIHOOD OPPORTUNITIES. ISC ENGAGED WITH KEY MANUFACTURING CLUSTERS, VOCATIONAL TECHNICAL INSTITUTES, AND SKILLING EXPERTS TO ROLL OUT A COMBINATION OF CAPACITY BUILDING, APPRENTICESHIP, AND FACTORY ENGAGEMENT PROGRAMS.

ISC LAUNCHED THE ACCELERATING CLEAN, EQUITABLE MANUFACTURING PROGRAM IN

Name of the organization INSTITUTE FOR SUSTAINABLE COMMUNITIES	Employer identification number 22-3098727
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INDIA IN 2021 WITH FUNDING FROM THE MACARTHUR FOUNDATION. THE PROGRAM WAS CREATED TO HOLISTICALLY SUPPORT THE SUSTAINABLE DEVELOPMENT OF MICRO, SMALL AND MEDIUM ENTERPRISE (MSME) CLUSTERS IN INDIA BY 1) FACILITATING DECARBONIZATION AND ADOPTION OF CLEAN TECH IN THE MANUFACTURING SECTOR; 2) BUILDING A GENDER-EQUITABLE GREEN WORKFORCE; AND 3) DESIGNING AND DEVELOPING A SCALABLE ROADMAP TO ADVANCE A GENDER-EQUITABLE GREEN WORKFORCE AND CLEAN TECH DEPLOYMENT AT A SUBNATIONAL LEVEL. ACE WORKS WITH PARTNERS IN THE CHEMICAL, TEXTILE, AND AUTOMOBILE MSME SECTORS.

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

THE PARTNERSHIP FOR RESILIENT COMMUNITIES:

THE PARTNERSHIP FOR RESILIENT COMMUNITIES (PRC), ORIGINALLY LAUNCHED IN 2019 WITH FINANCIAL SUPPORT FROM THE JPB FOUNDATION, IS HELPING TO TRANSFORM THE NATIONAL URBAN CLIMATE RESILIENCE FIELD. PRC IS BUILDING THE CAPACITY OF 10 BLACK AND BROWN-LED COMMUNITY-BASED ORGANIZATIONS (CBOS) TO DEVELOP GREEN INFRASTRUCTURE USING CLEAN AND RENEWABLE ENERGY (LIKE SOLAR) TO STRENGTHEN THEIR COMMUNITY'S CAPABILITY TO BE LESS IMPACTED BY AND RECOVER FROM EXTREME WEATHER EVENTS AND NATURAL DISASTERS EXACERBATED BY CLIMATE CHANGE. ISC IS PROVIDING INFRASTRUCTURE TO EACH PARTICIPATING ORGANIZATION IN THIS INTENSIVE CAPACITY-BUILDING PROGRAM IN THE FORM OF TECHNICAL ASSISTANCE AND GRANT FUNDING. THE PROGRAM HAS CREATED A NATIONWIDE NETWORK THAT BUILDS INFLUENCE FOR PEOPLE OF COLOR-LED CBOS WHILE IMPROVING THE DESIGN AND IMPLEMENTATION OF LOCALLY-LED CLIMATE SOLUTIONS, POLICY APPROACHES, AND COMMUNITY EDUCATION AND ENGAGEMENT EFFORTS.

EXPENSES \$ 787,412. INCLUDING GRANTS OF \$ 230,000. REVENUE \$ 129,493.

Name of the organization	INSTITUTE FOR SUSTAINABLE COMMUNITIES	Employer identification number	22-3098727
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SOUTHEAST FLORIDA REGIONAL CLIMATE CHANGE COMPACT:

AS THE LONGEST-STANDING LONGEST STANDING US PROGRAM, ISC CONTINUES TO PROVIDE BACKBONE SUPPORT FOR THE SOUTHEAST FLORIDA REGIONAL CLIMATE CHANGE COMPACT (COMPACT), A PARTNERSHIP BETWEEN BROWARD, MIAMI-DADE, PALM BEACH, AND MONROE COUNTIES, TO WORK COLLABORATIVELY TO REDUCE REGIONAL GREENHOUSE GAS EMISSIONS, IMPLEMENT ADAPTATION STRATEGIES, AND BUILD CLIMATE RESILIENCE ACROSS THE SOUTHEAST FLORIDA REGION. IN 2021, ISC CONTINUED TO SUPPORT THE COMPACT THROUGH SECRETARIAT FUNCTIONS VIA SCHEDULING, PLANNING, AND FACILITATION OF MONTHLY MEETINGS, THREE WORKSHOPS RELATED TO CLIMATE EQUITY, VULNERABILITY ASSESSMENTS, AND EXTREME HEAT. IN ADDITION, ISC SUPPORTED THE SUCCESS OF THE 13TH ANNUAL VIRTUAL SUMMIT. LASTLY, ISC SUPPORTED THE UPDATE OF THE COMPACT'S CLIMATE INDICATORS RESOURCE AND LAUNCHED THE COMPACT CLIMATE ASSESSMENT TOOL (CCAT) ACROSS THE REGION.

EXPENSES \$ 392,905. INCLUDING GRANTS OF \$ 0. REVENUE \$ 586,881.

UPPER TEXAS GULF COAST REGIONAL RESILIENCE INITIATIVE:

THROUGHOUT 2021, ISC CONTINUED TO HELP COMMUNITIES AND CITIES INCREASE THEIR RESILIENCE THROUGH COMMUNITY-DRIVEN EFFORTS LED BY LOCAL LEADERS. IN TEXAS, THE UPPER TEXAS GULF COAST REGIONAL RESILIENCE INITIATIVE, ALSO FUNDED BY THE JPB FOUNDATION, ESTABLISHED GOALS TO PROVIDE EDUCATION AND TECHNICAL TRAINING TO COMMUNITY LEADERS TO SUPPORT LEADERSHIP AND ADVOCACY SKILL SETS. THESE INITIATIVES INCLUDED CLIMATE JUSTICE TRAINING FOR 277 PARTICIPANTS AND A 12-SESSION COMMUNITY ENVIRONMENTAL LEADERSHIP PROGRAM FOR 33 COMMUNITY LEADERS OFFERED BY

Name of the organization

INSTITUTE FOR SUSTAINABLE COMMUNITIES

Employer identification number

22-3098727

TEXAS SOUTHERN UNIVERSITY AND ACCREDITED BY THE SOUTHERN ASSOCIATION OF COLLEGES AND SCHOOLS

EXPENSES \$ 306,086. INCLUDING GRANTS OF \$ 171,282. REVENUE \$ 0.

OTHER PROGRAMS

EXPENSES \$ 1,043,735. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

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

THE FEDERAL FORM 990 IS PREPARED BY OUTSIDE ACCOUNTANTS AND THEN SENT TO ISC FOR REVIEW. THE GOVERNING BODY RECEIVES A COPY OF THE FINAL FEDERAL FORM 990 FOR REVIEW PRIOR TO FILING WITH THE INTERNAL REVENUE SERVICE.

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

ANNUALLY, THE STAFF AND THE BOARD OF DIRECTORS ARE ASKED TO REVIEW THE ISC CONFLICT OF INTEREST POLICY STATEMENT AND INDICATE COMPLIANCE WITH THE POLICY. IF A CONFLICT ARISES THE ISSUE MAY BE BROUGHT TO THE PRESIDENT. THE DECISION OF THE PRESIDENT IS FINAL UNLESS, IN THE OPINION OF EITHER PARTY, THE PRESIDENT'S DECISION IS CONSIDERED TO BE A MAJOR VIOLATION OF ISC'S POLICY. IF THE DECISION OF THE PRESIDENT IS CONSIDERED TO BE A MAJOR VIOLATION OF ESTABLISHED ISC POLICY BY ONE OF THE PARTIES, THE AGGRIEVED PARTY MAY APPEAL THE DECISION OF THE PRESIDENT BY SENDING A COMPLETE DESCRIPTION OF THE PROBLEM TO THE PRESIDENT AND TO THE CHAIRMAN OF THE ISC BOARD OF DIRECTORS. STAFF MEMBERS SHOULD BE CERTAIN THAT THE CONFLICT IS WELL DOCUMENTED AND REPRESENTS SIGNIFICANT AND SUBSTANTIVE DIFFERENCES WITH ESTABLISHED ISC POLICY.

APPEALING A DECISION OF THE PRESIDENT WILL NOT INTERFERE WITH DECISIONS OR PROCEDURES REGARDING TERMINATION OF EMPLOYMENT OR "INVOLUNTARY SEPARATION."

Name of the organization INSTITUTE FOR SUSTAINABLE COMMUNITIES	Employer identification number 22-3098727
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THE CHAIRMAN WILL CONSIDER THE APPEAL AND ISSUE FINDINGS AND A DECISION WITHIN SEVEN DAYS. THE CHAIRMAN'S DECISION ON WHETHER THE PRESIDENT VIOLATED ISC POLICY IS FINAL AND CANNOT BE APPEALED.

FORM 990, PART VI, SECTION B, LINE 15:

THE PRESIDENT'S COMPENSATION, AND ANY ADJUSTMENTS, IS ANNUALLY REVIEWED BY THE BOARD OF DIRECTORS. IN ADDITIONAL TO THE BOARD MEMBERS' EXPERIENCE, THIS REVIEW INCLUDES A REVIEW OF COMPENSATION LEVELS FROM COMPARABLE ORGANIZATIONS THROUGH THE USE OF SURVEY DATA FROM PROFESSIONAL ORGANIZATIONS. THE DECISION IS RECORDED IN THE BOARD OF DIRECTOR'S MINUTES.

THE ISC MANAGEMENT TEAM PERIODICALLY REVIEWS THE COMPENSATION OF KEY STAFF MEMBERS AGAINST THAT PROVIDED TO COMPARABLE POSITIONS IN OTHER NGOS THROUGH THE USE OF SURVEY DATA FROM PROFESSIONAL ORGANIZATIONS.

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

ISC MAKES AVAILABLE, ON ITS WEBSITE EITHER DIRECTLY OR THROUGH APPROPRIATE LINKS, LISTS OF BOARD MEMBERS, STAFF, ORGANIZATION CONTACT INFORMATION, AUDITED FINANCIAL STATEMENTS, FEDERAL FORM 990 REPORTS AND ITS 501(C)(3) DESIGNATION. OTHER GOVERNING DOCUMENTS, INCLUDING CONFLICT OF INTEREST STATEMENTS, ARE AVAILABLE UPON REQUEST.

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

TECHNICAL PROGRAM SUPPORT:

PROGRAM SERVICE EXPENSES	1,196,456.
MANAGEMENT AND GENERAL EXPENSES	223,251.
FUNDRAISING EXPENSES	13,590.
TOTAL EXPENSES	1,433,297.

Name of the organization <b>INSTITUTE FOR SUSTAINABLE COMMUNITIES</b>	Employer identification number <b>22-3098727</b>
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**OTHER PROFESSIONAL FEES:**

<b>PROGRAM SERVICE EXPENSES</b>	<b>116,103.</b>
<b>MANAGEMENT AND GENERAL EXPENSES</b>	<b>50,043.</b>
<b>FUNDRAISING EXPENSES</b>	<b>608.</b>
<b>TOTAL EXPENSES</b>	<b>166,754.</b>
<b>TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A</b>	<b>1,600,051.</b>



**SCHEDULE R  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Related Organizations and Unrelated Partnerships**

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

▶ Attach to Form 990.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2021**

Open to Public Inspection

Name of the organization **INSTITUTE FOR SUSTAINABLE COMMUNITIES** Employer identification number **22-3098727**

**Part I Identification of Disregarded Entities.** Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
ISC ENTERPRISES, L3C - 38-3844778 535 STONE CUTTERS WAY MONTPELIER, VT 05602	FURTHER ISC MISSION	VERMONT			INSTITUTE FOR SUSTAINABLE COMMUNITIES

**Part II Identification of Related Tax-Exempt Organizations.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
ORGANIZATION FOR SUSTAINABLE COMMUNITIES 301 LALWANI ICON SAKORE NAGAR, PUNE, MAHARASHTRA, INDIA	DEVELOP ENVIRONMENT, HEALTH AND SAFETY CENTER	INDIA	501(C)(3)	LINE 7	INSTITUTE FOR SUSTAINABLE COMMUNITIES	X	

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

Schedule R (Form 990) 2021

SEE PART VII FOR CONTINUATIONS

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

**Part IV Identification of Related Organizations Taxable as a Corporation or Trust.** Complete if the organization answered "Yes" on 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	(c) 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	(i) Section 512(b)(13) controlled entity?	
								Yes	No
SUSTAINABLE COMMUNITIES INDIA PRIVATE LIMITED, 55 S/F, PANCHKUIAN ROAD, CONNAUGHT PLACE, NEW DELHI, INDIA 110001	FURTHER ISC MISSION	INDIA	ISC ENTERPRISES, L3C	C CORP	723,737.	102,389.	100%	X	

**Part V Transactions With Related Organizations.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

**Note:** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

**1** During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

	Yes	No
<b>a</b> Receipt of <b>(i)</b> interest, <b>(ii)</b> annuities, <b>(iii)</b> royalties, or <b>(iv)</b> rent from a controlled entity .....		X
<b>b</b> Gift, grant, or capital contribution to related organization(s) .....		X
<b>c</b> Gift, grant, or capital contribution from related organization(s) .....		X
<b>d</b> Loans or loan guarantees to or for related organization(s) .....		X
<b>e</b> Loans or loan guarantees by related organization(s) .....		X
<b>f</b> Dividends from related organization(s) .....		X
<b>g</b> Sale of assets to related organization(s) .....		X
<b>h</b> Purchase of assets from related organization(s) .....		X
<b>i</b> Exchange of assets with related organization(s) .....		X
<b>j</b> Lease of facilities, equipment, or other assets to related organization(s) .....		X
<b>k</b> Lease of facilities, equipment, or other assets from related organization(s) .....		X
<b>l</b> Performance of services or membership or fundraising solicitations for related organization(s) .....	X	
<b>m</b> Performance of services or membership or fundraising solicitations by related organization(s) .....		X
<b>n</b> Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) .....	X	
<b>o</b> Sharing of paid employees with related organization(s) .....	X	
<b>p</b> Reimbursement paid to related organization(s) for expenses .....	X	
<b>q</b> Reimbursement paid by related organization(s) for expenses .....		X
<b>r</b> Other transfer of cash or property to related organization(s) .....		X
<b>s</b> Other transfer of cash or property from related organization(s) .....		X

**2** If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

	(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				



**Part VII** Supplemental Information

Provide additional information for responses to questions on Schedule R. See instructions.

**PART II, IDENTIFICATION OF RELATED TAX-EXEMPT ORGANIZATIONS:**

**NAME AND ADDRESS OF RELATED ORGANIZATION:**

ORGANIZATION FOR SUSTAINABLE COMMUNITIES

301 LALWANI ICON

SAKORE NAGAR, PUNE, MAHARASHTRA, INDIA 411014

Form **5471**

**Information Return of U.S. Persons With Respect to Certain Foreign Corporations**

OMB No. 1545-0123

(Rev. December 2021)

▶ Go to [www.irs.gov/Form5471](http://www.irs.gov/Form5471) for instructions and the latest information.

Department of the Treasury  
Internal Revenue Service

Information furnished for the foreign corporation's annual accounting period (tax year required by section 898) (see instructions) beginning **APR 1, 2021**, and ending **MAR 31, 2022**

Attachment  
Sequence No. **121**

Name of person filing this return  <b>INSTITUTE FOR SUSTAINABLE COMMUNITIES</b> <small>Number, street, and room or suite no. (or P.O. box number if mail is not delivered to street address)</small> <b>535 STONE CUTTERS WAY</b> City or town, state, and ZIP code <b>MONTPELIER, VT 05602</b>	<b>A Identifying number</b> 22-3098727  <b>B Category of filer</b> (See instructions. Check applicable box(es).): 1a <input checked="" type="checkbox"/> 1b <input type="checkbox"/> 1c <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input checked="" type="checkbox"/> 5a <input checked="" type="checkbox"/> 5b <input type="checkbox"/> 5c <input type="checkbox"/>  <b>C Enter the total percentage of the foreign corporation's voting stock you owned at the end of its annual accounting period</b> <b>100.00</b> %
Filer's tax year beginning <b>OCT 1, 2021</b> , and ending <b>SEP 30, 2022</b>	

**D** Check box if this is a final Form 5471 for the foreign corporation

**E** Check if any excepted specified foreign financial assets are reported on this form (see instructions)

**F** Check the box if this Form 5471 has been completed using "Alternative Information" under Rev. Proc. 2019-40

**G** If the box on line F is checked, enter the corresponding code for "Alternative Information" (see instructions) ▶

**H** Person(s) on whose behalf this information return is filed:

(1) Name	(2) Address	(3) Identifying number	(4) Check applicable box(es)		
			Shareholder	Officer	Director

**Important:** Fill in all applicable lines and schedules. All information **must** be in English. All amounts **must** be stated in U.S. dollars unless otherwise indicated.

<b>1a</b> Name and address of foreign corporation  <b>SUSTAINABLE COMMUNITIES INDIA PRIVATE LIMITED</b> <b>55 S/F, PANCHKUIAN ROAD, CONNAUGHT PLACE</b> <b>NEW DELHI 110001</b> <b>INDIA</b>	<b>b(1)</b> Employer identification number, if any  <b>b(2)</b> Reference ID number (see instructions) <b>001</b>  <b>c</b> Country under whose laws incorporated <b>INDIA</b>			
<b>d</b> Date of incorporation <b>09/20/18</b>	<b>e</b> Principal place of business <b>INDIA</b>	<b>f</b> Principal business activity code number <b>813000</b>	<b>g</b> Principal business activity <b>FURTHER ISC MISSION</b>	<b>h</b> Functional currency code <b>INR</b>

**2** Provide the following information for the foreign corporation's accounting period stated above.

<b>a</b> Name, address, and identifying number of branch office or agent (if any) in the United States	<b>b</b> If a U.S. income tax return was filed, enter: <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%;"><b>(i)</b> Taxable income or (loss)</td> <td style="width:50%;"><b>(ii)</b> U.S. income tax paid (after all credits)</td> </tr> <tr> <td> </td> <td> </td> </tr> </table>	<b>(i)</b> Taxable income or (loss)	<b>(ii)</b> U.S. income tax paid (after all credits)		
<b>(i)</b> Taxable income or (loss)	<b>(ii)</b> U.S. income tax paid (after all credits)				

<b>c</b> Name and address of foreign corporation's statutory or resident agent in country of incorporation	<b>d</b> Name and address (including corporate department, if applicable) of person (or persons) with custody of the books and records of the foreign corporation, and the location of such books and records, if different  <b>DEBADIDEB DATTA</b> <b>1001A, HEMKUNT CHAMBERS, NEHRU PL.</b> <b>NEW DELHI 110019</b> <b>INDIA</b>
--	---

<b>Schedule A Stock of the Foreign Corporation</b>		
(a) Description of each class of stock	(b) Number of shares issued and outstanding	
	(i) Beginning of annual accounting period	(ii) End of annual accounting period
<b>COMMON</b>	<b>10,000</b>	<b>10,000</b>

LHA For Paperwork Reduction Act Notice, see instructions. Form **5471** (Rev. 12-2021)

Schedule B Shareholders of Foreign Corporation

Part I U.S. Shareholders of Foreign Corporation (see instructions)

Table with 5 columns: (a) Name, address, and identifying number of shareholder; (b) Description of each class of stock held by shareholder; (c) Number of shares held at beginning of annual accounting period; (d) Number of shares held at end of annual accounting period; (e) Pro rata share of Subpart F income (enter as a percentage). Includes entries for ISC ENTERPRISES, L3C and INSTITUTE FOR SUSTAINABLE COMMUNITIES.

Part II Direct Shareholders of Foreign Corporation (see instructions)

Table with 4 columns: (a) Name, address, and identifying number of shareholder. Also, include country of incorporation or formation, if applicable; (b) Description of each class of stock held by shareholder; (c) Number of shares held at beginning of annual accounting period; (d) Number of shares held at end of annual accounting period. Includes entries for ISC ENTERPRISES, L3C and INSTITUTE FOR SUSTAINABLE COMMUNITIES.

**Schedule C Income Statement**

**Important:** Report all information in functional currency in accordance with U.S. generally accepted accounting principles (GAAP). Also, report each amount in U.S. dollars translated from functional currency (using GAAP translation rules). However, if the functional currency is the U.S. dollar, complete only the U.S. Dollars column. See instructions for special rules for dollar approximate separate transactions method (DASTM) corporations.

		Functional Currency	U.S. Dollars	
<b>Income</b>	<b>1a</b> Gross receipts or sales .....	<b>1a</b> 53,749,330.	719,844.	
	<b>b</b> Returns and allowances .....	<b>1b</b>		
	<b>c</b> Subtract line 1b from line 1a .....	<b>1c</b> 53,749,330.	719,844.	
	<b>2</b> Cost of goods sold .....	<b>2</b>		
	<b>3</b> Gross profit (subtract line 2 from line 1c) .....	<b>3</b> 53,749,330.	719,844.	
	<b>4</b> Dividends .....	<b>4</b>		
	<b>5</b> Interest .....	<b>5</b>		
	<b>6a</b> Gross rents .....	<b>6a</b>		
	<b>b</b> Gross royalties and license fees .....	<b>6b</b>		
	<b>7</b> Net gain or (loss) on sale of capital assets .....	<b>7</b>		
<b>8a</b> Foreign currency transaction gain or loss - unrealized .....	<b>8a</b>			
	<b>b</b> Foreign currency transaction gain or loss - realized .....	<b>8b</b>		
<b>9</b> Other income (attach statement) .....	<b>9</b> SEE STATEMENT 1	290,691.	3,893.	
<b>10</b> Total income (add lines 3 through 9) .....	<b>10</b>	54,040,021.	723,737.	
<b>Deductions</b>	<b>11</b> Compensation not deducted elsewhere .....	<b>11</b>	24,618,018.	
	<b>12a</b> Rents .....	<b>12a</b>		
	<b>b</b> Royalties and license fees .....	<b>12b</b>		
	<b>13</b> Interest .....	<b>13</b>	110.	1.
	<b>14</b> Depreciation not deducted elsewhere .....	<b>14</b>	472,579.	6,329.
	<b>15</b> Depletion .....	<b>15</b>		
	<b>16</b> Taxes (exclude income tax expense (benefit)) .....	<b>16</b>		
	<b>17</b> Other deductions (attach statement - exclude income tax expense (benefit)) .....	<b>17</b> SEE STATEMENT 2	23,375,633.	313,061.
<b>18</b> Total deductions (add lines 11 through 17) .....	<b>18</b>	48,466,340.	649,091.	
<b>Net Income</b>	<b>19</b> Net income or (loss) before unusual or infrequently occurring items, and income tax expense (benefit) (subtract line 18 from line 10) .....	<b>19</b>	5,573,681.	
	<b>20</b> Unusual or infrequently occurring items .....	<b>20</b>		
	<b>21a</b> Income tax expense (benefit) - current .....	<b>21a</b>	1,552,935.	20,798.
	<b>b</b> Income tax expense (benefit) - deferred .....	<b>21b</b>	208,185.	2,788.
<b>22</b> Current year net income or (loss) per books (combine lines 19 through 21b) .....	<b>22</b>	3,812,561.	51,060.	
<b>Other Comprehensive Income</b>	<b>23a</b> Foreign currency translation adjustments .....	<b>23a</b>	-39,350.	
	<b>b</b> Other .....	<b>23b</b>		
	<b>c</b> Income tax expense (benefit) related to other comprehensive income .....	<b>23c</b>		
	<b>24</b> Other comprehensive income (loss), net of tax (line 23a plus line 23b less line 23c) .....	<b>24</b>	-39,350.	-527.

Form 5471 (Rev. 12-2021)



**Schedule F Balance Sheet**

**Important:** Report all amounts in U.S. dollars prepared and translated in accordance with U.S. GAAP. See instructions for an exception for DASTM corporations.

Assets		(a) Beginning of annual accounting period	(b) End of annual accounting period
1 Cash	1	29,062.	22,995.
2a Trade notes and accounts receivable	2a		24,777.
b Less allowance for bad debts	2b	( )	( )
3 Derivatives	3		
4 Inventories	4		
5 Other current assets (attach statement) <b>SEE STATEMENT 3</b>	5	8,381.	33,303.
6 Loans to shareholders and other related persons	6		
7 Investment in subsidiaries (attach statement)	7		
8 Other investments (attach statement)	8		
9a Buildings and other depreciable assets	9a	14,843.	17,750.
b Less accumulated depreciation	9b	( 5,624.)	( 11,674.)
10a Depletable assets	10a		
b Less accumulated depletion	10b	( )	( )
11 Land (net of any amortization)	11		
12 Intangible assets:			
a Goodwill	12a		
b Organization costs	12b		
c Patents, trademarks, and other intangible assets	12c		
d Less accumulated amortization for lines 12a, 12b, and 12c	12d	( )	( )
13 Other assets (attach statement) <b>SEE STATEMENT 4</b>	13	20,346.	15,238.
14 Total assets	14	67,008.	102,389.
Liabilities and Shareholders' Equity			
15 Accounts payable	15	3,736.	6,266.
16 Other current liabilities (attach statement) <b>SEE STATEMENT 5</b>	16	18,002.	14,027.
17 Derivatives	17		
18 Loans from shareholders and other related persons	18		
19 Other liabilities (attach statement) <b>SEE STATEMENT 6</b>	19	49,346.	35,685.
20 Capital stock:			
a Preferred stock	20a		
b Common stock	20b	1,367.	1,321.
21 Paid-in or capital surplus (attach reconciliation)	21		
22 Retained earnings	22	-5,443.	45,090.
23 Less cost of treasury stock	23	( )	( )
24 Total liabilities and shareholders' equity	24	67,008.	102,389.

**Schedule G Other Information**

	Yes	No
1 During the tax year, did the foreign corporation own at least a 10% interest, directly or indirectly, in any foreign partnership? If "Yes," see the instructions for required statement.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
2 During the tax year, did the foreign corporation own an interest in any trust?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
3 During the tax year, did the foreign corporation own any foreign entities that were disregarded as separate from their owner under Regulations sections 301.7701-2 and 301.7701-3 or did the foreign corporation own any foreign branches (see instructions)? If "Yes," you are generally required to attach Form 8858 for each entity or branch (see instructions).	<input type="checkbox"/>	<input checked="" type="checkbox"/>
4a During the tax year, did the filer pay or accrue any base erosion payment under section 59A(d) to the foreign corporation or did the filer have a base erosion tax benefit under section 59A(c)(2) with respect to a base erosion payment made or accrued to the foreign corporation (see instructions)? If "Yes," complete lines 4b and 4c.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
b Enter the total amount of the base erosion payments <span style="float: right;">▶ \$ _____</span>		
c Enter the total amount of the base erosion tax benefit <span style="float: right;">▶ \$ _____</span>		
5a During the tax year, did the foreign corporation pay or accrue any interest or royalty for which the deduction is not allowed under section 267A? If "Yes," complete line 5b.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
b Enter the total amount of the disallowed deductions (see instructions) <span style="float: right;">▶ \$ _____</span>		

FORM 5471

OTHER INCOME

STATEMENT 1

DESCRIPTION	FUNCTIONAL CURRENCY	EXCHANGE RATE	U.S. DOLLAR
OTHER INCOME	290,691.	74.668000	3,893.
TOTAL TO 5471, SCHEDULE C, LINE 9	290,691.		3,893.

FORM 5471

OTHER DEDUCTIONS

STATEMENT 2

DESCRIPTION	FUNCTIONAL CURRENCY	EXCHANGE RATE	U.S. DOLLAR
AUDIT FEES	230,001.	74.668000	3,080.
CONSULTANCY & TRAINING FEES	10,066,641.	74.668000	134,819.
CONVEYANCE	366,368.	74.668000	4,907.
DIRECTOR RENUMERATION	3,891,488.	74.668000	52,117.
DONATIONS	749,999.	74.668000	10,044.
EVENT EXPENSES	182,735.	74.668000	2,447.
INTERNSHIP	350,407.	74.668000	4,693.
LEAVE AND LICENSE	1,552,075.	74.668000	20,786.
LEGAL & PROFESSIONAL CHARGES	892,100.	74.668000	11,948.
MISCELLANEOUS	98,130.	74.668000	1,314.
OFFICE EXPENSE	426,258.	74.668000	5,709.
PENSION EXPENSES	406,381.	74.668000	5,443.
PRINTING & SUPPLIES	183,612.	74.668000	2,459.
PROJECT IMPLEMENTATION	1,245,732.	74.668000	16,684.
REPAIRS AND MAINTENANCE	88,994.	74.668000	1,192.
TELEPHONE & INTERNET EXPENSES	84,929.	74.668000	1,137.
TRAINING WORKSHOPS	630,693.	74.668000	8,447.
TRAVEL	1,885,844.	74.668000	25,256.
UTILITIES	43,246.	74.668000	579.
TOTAL TO 5471, SCHEDULE C, LINE 17	23,375,633.		313,061.

FORM 5471

OTHER CURRENT ASSETS

STATEMENT 3

DESCRIPTION	BEG. OF ANNUAL ACCOUNTING PERIOD	END OF ANNUAL ACCOUNTING PERIOD
SHORT-TERM LOANS AND ADVANCES	512.	1,091.
GST RECEIVABLE	3,983.	1,089.
INCOME TAX RECEIVABLE	3,717.	31,063.
ADVANCES TO EMPLOYEES	169.	60.
TOTAL TO 5471, PAGE 4, SCHEDULE F, LINE 5	<u>8,381.</u>	<u>33,303.</u>

FORM 5471

OTHER ASSETS

STATEMENT 4

DESCRIPTION	BEG. OF ANNUAL ACCOUNTING PERIOD	END OF ANNUAL ACCOUNTING PERIOD
DEFERRED TAX ASSET	13,773.	10,555.
SECURITY DEPOSITS	5,457.	2,958.
OTHER LOANS AND ADVANCES	1,116.	1,725.
TOTAL TO 5471, PAGE 4, SCHEDULE F, LINE 13	<u>20,346.</u>	<u>15,238.</u>

FORM 5471

OTHER CURRENT LIABILITIES

STATEMENT 5

DESCRIPTION	BEG. OF ANNUAL ACCOUNTING PERIOD	END OF ANNUAL ACCOUNTING PERIOD
STATUTORY DUES PAYABLE	9,298.	11,650.
OTHER PAYABLE	2,460.	2,377.
GOODS & SERVICES	6,244.	
TOTAL TO 5471, PAGE 4, SCHEDULE F, LINE 16	<u>18,002.</u>	<u>14,027.</u>

FORM 5471

OTHER LIABILITIES

STATEMENT 6

DESCRIPTION	BEG. OF ANNUAL ACCOUNTING PERIOD	END OF ANNUAL ACCOUNTING PERIOD
PROVISION FOR GRATUITY	49,346.	26,815.
PROVISION FOR LEAVE ENCASHMENT		8,870.
TOTAL TO 5471, PAGE 4, SCHEDULE F, LINE 19	49,346.	35,685.

**Schedule G** Other Information (continued)

	Yes	No
<b>6a</b> Is the filer of this Form 5471 claiming a foreign-derived intangible income deduction (under section 250) with respect to any amounts listed on Schedule M? ..... If "Yes," complete lines 6b, 6c, and 6d.		X
<b>b</b> Enter the amount of gross income derived from sales, leases, exchanges, or other dispositions (but not licenses) from transactions with the foreign corporation that the filer included in its computation of foreign-derived deduction eligible income (FDDEI) (see instructions) ..... ▶ \$ _____		
<b>c</b> Enter the amount of gross income derived from a license of property to the foreign corporation that the filer included in its computation of FDDEI (see instructions) ..... ▶ \$ _____		
<b>d</b> Enter the amount of gross income derived from services provided to the foreign corporation that the filer included in its computation of FDDEI (see instructions) ..... ▶ \$ _____		
<b>7</b> During the tax year, was the foreign corporation a participant in any cost-sharing arrangement? ..... If the answer to question 7 is "Yes," complete a separate Schedule G-1 for each cost sharing arrangement in which the foreign corporation was a participant during the tax year.		X
<b>8</b> From April 25, 2014, to December 31, 2017, did the foreign corporation purchase stock or securities of a shareholder of the foreign corporation for use in a triangular reorganization (within the meaning of Regulations section 1.358-6(b)(2))? .....		X
<b>9a</b> Did the foreign corporation receive any intangible property in a prior year or the current tax year for which the U.S. transferor is required to report a section 367(d) annual income inclusion for the tax year? ..... If "Yes," go to line 9b.		X
<b>b</b> Enter in functional currency the amount of the earnings and profits reduction pursuant to section 367(d) (2)(B) for the tax year ..... ▶ _____		
<b>10</b> During the tax year, was the foreign corporation an expatriated foreign subsidiary under Regulations section 1.7874-12(a)(9)? ..... If "Yes," see instructions and attach statement.		X
<b>11</b> During the tax year, did the foreign corporation participate in any reportable transaction as defined in Regulations section 1.6011-4? ..... If "Yes," attach Form(s) 8886 if required by Regulations section 1.6011-4(c)(3)(i)(G).		X
<b>12</b> During the tax year, did the foreign corporation pay or accrue any foreign tax that was disqualified for credit under section 901(m)? .....		X
<b>13</b> During the tax year, did the foreign corporation pay or accrue foreign taxes to which section 909 applies, or treat foreign taxes that were previously suspended under section 909 as no longer suspended? .....		X
<b>14</b> Did you answer "Yes" to any of the questions in the instructions for line 14? ..... If "Yes," enter the corresponding code(s) from the instructions and attach statement ▶ _____		X
<b>15</b> Does the foreign corporation have interest expense disallowed under section 163(j) (see instructions)? ..... If "Yes," enter the amount ..... ▶ \$ _____		X
<b>16</b> Does the foreign corporation have previously disallowed interest expense under section 163(j) carried forward to the current tax year (see instructions)? ..... If "Yes," enter the amount ..... ▶ \$ _____		X
<b>17a</b> Did any extraordinary reduction with respect to a controlling section 245A shareholder occur during the tax year (see instructions)? .....		X
<b>b</b> If the answer to question 17a is "Yes," was an election made to close the tax year such that no amount is treated as an extraordinary reduction amount or tiered extraordinary reduction amount (see instructions)? .....		
<b>18</b> Does the reporting corporation have any loan to or from the related party to which the safe-haven rate rules of Regulations section 1.482-2(a)(2)(iii)(B) are applicable, and for which the reporting corporation used a rate of interest within the safe-haven range of Regulations section 1.482-2(a)(2)(iii)(B)(1) (100% to 130% of the AFR for the relevant term)? .....		X
<b>19a</b> Did the reporting corporation make at least one distribution or acquisition (as defined by Regulations section 1.385-3) during the period including the tax year and the preceding three tax years, or, during the period beginning 36 months before the date of the respective distribution or acquisition and ending 36 months afterward, did the reporting corporation issue or refinance indebtedness owed to a related party? .....		X
<b>b</b> If the answer to question 19a is "Yes," provide the following. (1) The amount of such distribution(s) and acquisition(s) ..... ▶ \$ _____ (2) The amount of such related party indebtedness ..... ▶ \$ _____		

**Schedule I Summary of Shareholder's Income From Foreign Corporation**

If item H on page 1 is completed, a separate Schedule I must be filed for each Category 4, 5a, or 5b filer for whom reporting is furnished on this Form 5471. This Schedule I is being completed for:

Name of U.S. shareholder	Identifying number		
<b>1a</b> Section 964(e)(4) Subpart F dividend income from the sale of stock of a lower-tier foreign corporation (see instructions)		<b>1a</b>	
<b>b</b> Section 245A(e)(2) Subpart F income from hybrid dividends of tiered corporations (see instructions)		<b>1b</b>	
<b>c</b> Subpart F income from tiered extraordinary disposition amounts not eligible for subpart F exception under section 954(c)(6)		<b>1c</b>	
<b>d</b> Subpart F income from tiered extraordinary reduction amounts not eligible for subpart F exception under section 954(c)(6)		<b>1d</b>	
<b>e</b> Section 954(c) Subpart F Foreign Personal Holding Company Income (enter result from Worksheet A)		<b>1e</b>	
<b>f</b> Section 954(d) Subpart F Foreign Base Company Sales Income (enter result from Worksheet A)		<b>1f</b>	
<b>g</b> Section 954(e) Subpart F Foreign Base Company Services Income (enter result from Worksheet A)		<b>1g</b>	
<b>h</b> Other subpart F income (enter result from Worksheet A)		<b>1h</b>	
<b>2</b> Earnings invested in U.S. property (enter the result from Worksheet B)		<b>2</b>	
<b>3</b> Reserved for future use		<b>3</b>	
<b>4</b> Factoring income See instructions for reporting amounts on lines 1, 2, and 4 on your income tax return.		<b>4</b>	
<b>5a</b> Section 245A eligible dividends (see instructions)		<b>5a</b>	
<b>b</b> Extraordinary disposition amounts (see instructions)		<b>5b</b>	
<b>c</b> Extraordinary reduction amounts (see instructions)		<b>5c</b>	
<b>d</b> Section 245A(e) dividends (see instructions)		<b>5d</b>	
<b>e</b> Dividends not reported on line 5a, 5b, 5c, or 5d		<b>5e</b>	
<b>6</b> Exchange gain or (loss) on a distribution of previously taxed earnings and profits		<b>6</b>	

	Yes	No
<b>7a</b> Was any income of the foreign corporation blocked?		
<b>b</b> Did any such income become unblocked during the tax year (see section 964(b))?		
If the answer to either question is "Yes," attach an explanation.		
<b>8a</b> Did this U.S. shareholder have an extraordinary disposition (ED) account with respect to the foreign corporation at any time during the tax year (see instructions)?		<b>X</b>
<b>b</b> If the answer to question 8a is "Yes," enter the U.S. shareholder's ED account balance at the beginning of the CFC year \$ _____ and at the end of the tax year \$ _____. Provide an attachment detailing any changes from the beginning to the ending balances.		
<b>c</b> Enter the CFC's aggregate ED account balance with respect to all U.S. shareholders at the beginning of the CFC year \$ _____ and at the end of the tax year \$ _____. Provide an attachment detailing any changes from the beginning to the ending balances.		
<b>9</b> Enter the sum of the hybrid deduction accounts with respect to stock of the foreign corporation (see instructions) \$ _____		

**SCHEDULE J  
(Form 5471)**

(Rev. December 2020)  
Department of the Treasury  
Internal Revenue Service

**Accumulated Earnings & Profits (E&P) of Controlled Foreign Corporation**

▶ **Attach to Form 5471.**

OMB No. 1545-0123

▶ **Go to [www.irs.gov/Form5471](http://www.irs.gov/Form5471) for instructions and the latest information.**

Name of person filing Form 5471

Identifying number

**INSTITUTE FOR SUSTAINABLE COMMUNITIES**

**22-3098727**

Name of foreign corporation

EIN (if any)

Reference ID number

**SUSTAINABLE COMMUNITIES INDIA PRIVATE LIMITED**

**001**

**a** Separate Category (Enter code - see instructions.) ..... ▶ **GEN**

**b** If code 901j is entered on line a, enter the country code for the sanctioned country (see instructions) ..... ▶

**Part I Accumulated E&P of Controlled Foreign Corporation**

Check the box if person filing return does not have all U.S. shareholders' information to complete an amount in column (e) (see instructions).

**Important:** Enter amounts in functional currency.

		(a) Post-2017 E&P Not Previously Taxed (post-2017 section 959(c)(3) balance)	(b) Post-1986 Undistributed Earnings (post-1986 and pre-2018 section 959(c)(3) balance)	(c) Pre-1987 E&P Not Previously Taxed (pre-1987 section 959(c)(3) balance)	(d) Hovering Deficit and Deduction for Suspended Taxes	(e) Previously Taxed E&P (see instructions)	
						(i) Reclassified section 965(a) PTEP	(ii) Reclassified section 965(b) PTEP
<b>1a</b>	Balance at beginning of year (as reported on prior year Schedule J) .....						
<b>b</b>	Beginning balance adjustments (attach statement) .....						
<b>c</b>	Adjusted beginning balance (combine lines 1a and 1b) .....						
<b>2a</b>	Reduction for taxes unsuspending under anti-splitter rules						
<b>b</b>	Disallowed deduction for taxes suspended under anti-splitter rules .....						
<b>3</b>	Current year E&P (or deficit in E&P) (enter amount from applicable line 5c of Schedule H) .....						
<b>4</b>	E&P attributable to distributions of previously taxed E&P from lower-tier foreign corporation .....						
<b>5a</b>	E&P carried over in nonrecognition transaction .....						
<b>b</b>	Reclassify deficit in E&P as hovering deficit after nonrecognition transaction .....						
<b>6</b>	Other adjustments (attach statement) .....						
<b>7</b>	Total current and accumulated E&P (combine lines 1c through 6) .....						
<b>8</b>	Amounts reclassified to section 959(c)(2) E&P from section 959(c)(3) E&P .....						
<b>9</b>	Actual distributions .....						
<b>10</b>	Amounts reclassified to section 959(c)(1) E&P from section 959(c)(2) E&P .....						
<b>11</b>	Amounts included as earnings invested in U.S. property and reclassified to section 959(c)(1) E&P (see instructions)						
<b>12</b>	Other adjustments (attach statement) .....						
<b>13</b>	Hovering deficit offset of undistributed post-transaction E&P (see instructions) .....						
<b>14</b>	Balance at beginning of next year (combine lines 7 through 13)						

**Part I Accumulated E&P of Controlled Foreign Corporation** *(continued)*

	<b>(e) Previously Taxed E&amp;P</b> (see instructions)				
	<b>(iii)</b> General section 959(c)(1) PTEP	<b>(iv)</b> Reclassified section 951A PTEP	<b>(v)</b> Reclassified section 245A(d) PTEP	<b>(vi)</b> Section 965(a) PTEP	<b>(vii)</b> Section 965(b) PTEP
1a					
b					
c					
2a					
b					
3					
4					
5a					
b					
6					
7					
8					
9					
10					
11					
12					
13					
14					

	<b>(e) Previously Taxed E&amp;P</b> (see instructions)			<b>(f)</b> Total Section 964(a) E&P (combine columns (a), (b), (c), and (e)(i) through (e)(x))
	<b>(viii)</b> Section 951A PTEP	<b>(ix)</b> Section 245A(d) PTEP	<b>(x)</b> Section 951(a)(1)(A) PTEP	
1a				
b				
c				
2a				
b				
3				
4				
5a				
b				
6				
7				
8				
9				
10				
11				
12				
13				
14				



**Part II Nonpreviously Taxed E&P Subject to Recapture as Subpart F Income (section 952(c)(2))**

**Important:** Enter amounts in functional currency.

<b>1</b>	Balance at beginning of year .....	▶	<b>1</b>	
<b>2</b>	Additions (amounts subject to future recapture) .....	▶	<b>2</b>	
<b>3</b>	Subtractions (amounts recaptured in current year) .....	▶	<b>3</b>	
<b>4</b>	Balance at end of year (combine lines 1 through 3) .....	▶	<b>4</b>	

Schedule J (Form 5471) (Rev. 12-2020)

**SCHEDULE M  
(Form 5471)**

(Rev. December 2021)  
Department of the Treasury  
Internal Revenue Service

**Transactions Between Controlled Foreign Corporation  
and Shareholders or Other Related Persons**

OMB No. 1545-0123

▶ Attach to Form 5471.

▶ Go to [www.irs.gov/Form5471](http://www.irs.gov/Form5471) for instructions and the latest information.

Name of person filing Form 5471 <b>INSTITUTE FOR SUSTAINABLE COMMUNITIES</b>	Identifying number <b>22-3098727</b>
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Name of foreign corporation <b>SUSTAINABLE COMMUNITIES INDIA PRI</b>	EIN (if any)	Reference ID number <b>001</b>
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**Important:** Complete a separate Schedule M for each controlled foreign corporation. Enter the totals for each type of transaction that occurred during the annual accounting period between the foreign corporation and the persons listed in columns (b) through (f). All amounts must be stated in U.S. dollars translated from functional currency at the average exchange rate for the foreign corporation's tax year. See instructions.

Enter the relevant functional currency and the exchange rate used throughout this schedule ▶ **INDIA, RUPEE** **74.668000**

(a) Transactions of foreign corporation	(b) U.S. person filing this return	(c) Any domestic corporation or partnership controlled by U.S. person filing this return	(d) Any other foreign corporation or partnership controlled by U.S. person filing this return	(e) 10% or more U.S. shareholder of controlled foreign corporation (other than the U.S. person filing this return)	(f) 10% or more U.S. shareholder of any corporation controlling the foreign corporation
1 Sales of stock in trade (inventory) ...					
2 Sales of tangible property other than stock in trade .....					
3 Sales of property rights (patents, trademarks, etc.) .....					
4 Platform contribution transaction payments received .....					
5 Cost sharing transaction payments received					
6 Compensation received for technical, managerial, engineering, construction, or like services .....					
7 Commissions received .....					
8 Rents, royalties, and license fees received ...					
9 Hybrid dividends received (see instr.) ...					
10 Dividends received (exclude hybrid dividends, deemed distributions under subpart F, and distributions of previously taxed income) .....					
11 Interest received .....					
12 Premiums received for insurance or reinsurance .....					
13 Loan guarantee fees received .....					
14 Other amounts received (att. statement)					
15 Add lines 1 through 14 .....					
16 Purchases of stock in trade (inventory)					
17 Purchases of tangible property other than stock in trade .....					
18 Purchases of property rights (patents, trademarks, etc.) .....					
19 Platform contribution transaction payments paid .....					
20 Cost sharing transaction payments paid					
21 Compensation paid for technical, managerial, engineering, construction, or like services .....					
22 Commissions paid .....					
23 Rents, royalties, and license fees paid					
24 Hybrid dividends paid (see instructions)					
25 Dividends paid (exclude hybrid dividends paid) .....					
26 Interest paid .....					
27 Premiums paid for insurance or reinsurance					
28 Loan guarantee fees paid .....					
29 Other amounts paid (attach statement)					
30 Add lines 16 through 29 .....					

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 5471.

Schedule M (Form 5471) (Rev. 12-2021)

Name of person filing Form 5471

Identifying number

**INSTITUTE FOR SUSTAINABLE COMMUNITIES**

**22-3098727**

(a) Transactions of foreign corporation	(b) U.S. person filing this return	(c) Any domestic corporation or partnership controlled by U.S. person filing this return	(d) Any other foreign corporation or partnership controlled by U.S. person filing this return	(e) 10% or more U.S. shareholder of controlled foreign corporation (other than the U.S. person filing this return)	(f) 10% or more U.S. shareholder of any corporation controlling the foreign corporation
31 Accounts Payable .....					
32 Amounts borrowed (enter the maximum loan balance during the year) - see instr.					
33 Accounts Receivable .....					
34 Amounts loaned (enter the maximum loan balance during the year) - see instr.					

Schedule M (Form 5471) (Rev. 12-2021)