Department of the Treasury Internal Revenue Service

632001 11-11-16

** PUBLIC DISCLOSURE COPY ** Return of Organization Exempt From Income Tax

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

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

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

Inspection

OMB No. 1545-0047

A I	For the	e 2016 calendar year, or tax year beginning $OCT 1$, 2016 and	ending S	EP 30, 2017	
В	Check if	C Name of organization		D Employer identific	cation number
	Addre	RESOURCES FOR THE FUTURE, INC.			
	Name	Doing business as		53-0	220900
E	Initial return Final return	1616 D CODEED NO	Room/suite	E Telephone number	r 328-5000
	termin			G Gross receipts \$	69,161,741.
	Amen			H(a) Is this a group re	
	Application	F Name and address of principal officer. TEXXI O DIVIEN		for subordinates	
	pendi	SAME AS C ABOVE		H(b) Are all subordinates in	cluded? Yes No
1	Tax-ex	empt status: X 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) c	or 527	If "No," attach a	list. (see instructions)
J	Websi	te: WWW.RFF.ORG		H(c) Group exemptio	
		organization: X Corporation	L Year	of formation: 1952 N	State of legal domicile; NY
Pa	art I	Summary			
a)	1	Briefly describe the organization's mission or most significant activities: <u>IMPRO</u>			
Activities & Governance		RESOURCE POLICY MAKING WORLDWIDE THRU SOC			
ř.	2	Check this box if the organization discontinued its operations or dispos	ed of more		
Š	3			3	20
ص ح	4	Number of independent voting members of the governing body (Part VI, line 1b)			19
es	5	Total number of individuals employed in calendar year 2016 (Part V, line 2a)			110
Σ	6	Total number of volunteers (estimate if necessary)			60 600
Act	7 a	Total unrelated business revenue from Part VIII, column (C), line 12		STATE OF THE PARTY	-62,688.
_	b	Net unrelated business taxable income from Form 990-T, line 34	·······································		-71,460.
	_	0 - 1 1 - 1		Prior Year 9,156,618.	7,660,068.
ne	8	Contributions and grants (Part VIII, line 1h)		9,130,010.	0.
Revenue	9	Program service revenue (Part VIII, line 2g)		1,779,338.	4,562,470.
Re	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		1,368,850.	636,509.
		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		12,304,806.	12,859,047.
_		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) Grants and similar amounts paid (Part IX, column (A), lines 1-3)		25,500.	50,065.
		Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
	45	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		9,323,916.	8,336,743.
Expenses	160	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0,330,743.
en	h	Total fundraising expenses (Part IX, column (D), line 25) 858, 21	11.		
X	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		5,109,015.	5,368,281.
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		14,458,431.	13,755,089.
		Revenue less expenses. Subtract line 18 from line 12	V/00/16/4/00	-2,153,625.	-896,042.
70%				ginning of Current Year	End of Year
Sets	20	Total assets (Part X, line 16)		66,754,970.	68,227,819.
ASS	21	Total liabilities (Part X, line 26)		7,859,688.	7,485,560.
Net		Net assets or fund balances. Subtract line 21 from line 20	******	58,895,282.	60,742,259.
Pa	art II	Signature Block			
Und	er pena	Ities of perjury, I declare that I have examined this return, including accompanying schedules	and stateme	nts, and to the best of my	knowledge and belief, it is
true	, correc	t, and complete. Declaration of preparer (other than officer) is based on all information of wh	ich preparer l	has any knowledge.	
Sig	n	Signature of officer		Date	
Her	е	TERRI O'BRIEN, VP FINANCE & ADMIN			
_		Type or print name and title	15	into I I	T DTIM
		Print/Type preparer's name Preparer's signature	2	Pate /2 (8 Check II sell-employed	PTIN
Paid		GREGORY M. PLOTTS, CPA			
	oarer	Firm's name ARONSON LLC		Firm's EIN ▶	37-1611326
use	Only	Firm's address ► 805 KING FARM BLVD, 3RD FLOOR ROCKVILLE, MD 20850		Dhana na 2 O	1-231-6200
Mar	the I	ROCKVILLE, MD 20050 RS discuss this return with the preparer shown above? (see instructions)		I Prione no. 30	X Yes No
AMERICA !	F 11 102 11	na criaculas una return with the preparet and will addice high details!	THE PARTY OF THE PARTY OF	*******************	TALLED IND

Par	t III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	RFF'S MISSION IS TO IMPROVE ENVIRONMENTAL, ENERGY, AND NATURAL
	RESOURCE DECISIONS THROUGH IMPARTIAL ECONOMIC RESEARCH AND POLICY
	ENGAGEMENT.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
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 \$ 9,637,627 • including grants of \$) (Revenue \$
	RFF'S RESEARCH EFFORT HAS TWO MAJOR PROGRAMS FOCUSED ON THE ECONOMICS
	AND POLICY OF: (I) ENERGY AND CLIMATE AND (II) LAND, WATER, AND NATURE.
	ENERGY AND CLIMATE PROGRAM FOCUSES ON WAYS TO REDUCE GREENHOUSE GAS
	EMISSIONS, ADVANCE A RELIABLE AND CLEAN ENERGY SYSTEM, AND ENSURE A
	HEALTHY ENVIRONMENT WHILE BALANCING THE NEED FOR ECONOMIC GROWTH.
	LAND, WATER, AND NATURE PROGRAM FOCUSES ON THE MANAGEMENT OF KEY LAND,
	WATER, AND MARINE RESOURCES THAT SUPPORT A THRIVING ECONOMY AND
	SOCIETY, WHILE ENSURING HEALTHY AND PRODUCTIVE NATURAL SYSTEMS AND
	BUILDING RESILIENCE IN A CHANGING CLIMATE.
4b	(Code:) (Expenses \$ 58,267 • including grants of \$
	ACADEMIC RELATIONS: AWARD SMALL GRANTS AND FELLOWSHIPS TO SCHOLARS FROM
	OTHER INSTITUTIONS TO ADVANCE THE STATE OF KNOWLEDGE IN THE
	ENVIRONMENTAL AND NATURAL RESOURCE SCIENCES.
4c	(Code:) (Expenses \$1,024,553. including grants of \$) (Revenue \$)
	COMMUNICATIONS: DISSEMINATION OF RESEARCH RESULTS IN THE FORM OF
	DISCUSSION PAPERS, RESOURCES MAGAZINE, RFF WEBSITE AND OTHER METHODS.
	ADVANCE RFF'S REPUTATION FOR INDEPENDENT RESEARCH AND NON PARTISAN
	POLICY THROUGH EXPANDED COMMUNICATIONS EFFORTS. RFF SCHOLARS HELP
	INFORM AND SHAPE PUBLIC DEBATE BY ISSUING DISCUSSION PAPERS, REPORTS
	AND PUBLISHING RESEARCH FINDINGS IN PEER-REVIEWED JOURNALS, AS WELL AS
	WORKING WITH REPORTERS AND APPEARING ON TELEVISION AND RADIO.
4d	Other program services (Describe in Schedule O.)
	(Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses ► 10,720,447.
	Form 990 (2016)

Form 990 (2016) RESOURCES FOR THE FUTURE, INC. Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1_	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6	Х	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	88		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	X	
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	X	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G. Part III	19		Х
		_	$\Omega\Omega\Omega$	

Form 990 (2016) RESOURCES FOR THE FUTURE, INC. Part IV Checklist of Required Schedules (continued)

			Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	X	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	X	
24a				
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
-	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or	200		
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes"			
	complete Schedule L, Part II	26		x
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial	20		
21	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
		27		x
20	of any of these persons? If "Yes," complete Schedule L, Part III	21		
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
_	instructions for applicable filing thresholds, conditions, and exceptions):	200		х
a	, , , , , , , , , , , , , , , , , , , ,	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	00-		_v
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			\
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			3,7
	If "Yes," complete Schedule N, Part I	31		<u> </u>
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		<u> </u>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		<u> </u>
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			l
	Part V, line 1	34		<u> </u>
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		<u> </u>
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	Х	
			aan	(2016)

Form 990 (2016) RESOURCES FOR THE FUTURE, INC. 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	<u></u> .		<u></u> .		
					Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	91			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and re	portab	le gaming			
	(gambling) winnings to prize winners?			1c	Х	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,					
	filed for the calendar year ending with or within the year covered by this return	2a	110			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return	ns?		2b		Х
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions	s)				
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?			За		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule	O		3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other a					
	financial account in a foreign country (such as a bank account, securities account, or other financial a	ccoun	t)?	4a	X	
b	If "Yes," enter the name of the foreign country: ▶ CAYMAN ISLANDS					
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Advanced Financial Advanced Financial Advanced Financial Advanced Financial Advanced Financial Advanced Financial Fin	ccount	s (FBAR).			
5а	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	ction?		5b		X
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	e orgai	nization solicit			
	any contributions that were not tax deductible as charitable contributions?			6a		_X_
b	If "Yes," did the organization include with every solicitation an express statement that such contribution	ons or	gifts			
	were not tax deductible?			6b		
7	Organizations that may receive deductible contributions under section 170(c).					
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and ser	vices p	rovided to the payor?	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	as requ	ired			
	to file Form 8282?			7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit co	ontract	?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra			7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo			7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization			7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained	by the)			77
	sponsoring organization have excess business holdings at any time during the year?			8		X
9	Sponsoring organizations maintaining donor advised funds.					77
	Did the sponsoring organization make any taxable distributions under section 4966?			9a		X
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9b		Х
10	Section 501(c)(7) organizations. Enter:	امدا				
	Initiation fees and capital contributions included on Part VIII, line 12	10a				
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	Section 501(c)(12) organizations. Enter:	445				
	Gross income from members or shareholders Gross income from other sources (Do not not amounts due or paid to other sources against	11a				
D	Gross income from other sources (Do not net amounts due or paid to other sources against	146				
120	amounts due or received from them.) Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	10/13	,	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	1041 /		ıza		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	IZU				
	In the conservation that the conservation of t			13a		
а	Note. See the instructions for additional information the organization must report on Schedule O.			ioa		
h	Enter the amount of reserves the organization is required to maintain by the states in which the					
J	organization is licensed to issue qualified health plans	13b				
c	Enter the amount of reserves on hand	13c				
	Did the organization receive any payments for indoor tanning services during the tax year?			14a		Х
	If "Yes," has it filed a Form 720 to report these payments? If "No." provide an explanation in Schedule	 - 0		14b		
	, provide an explanation in occidents	, ,			990	(2016)

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

	Check if Schedule O contains a response or note to any line in this Part VI					X
Sec	tion A. Governing Body and Management					
					Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	2)		
	If there are material differences in voting rights among members of the governing body, or if the governing					
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.					
b	Enter the number of voting members included in line 1a, above, who are independent	1b	1:	9		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	with	any other			
	officer, director, trustee, or key employee?			2		Х
3	Did the organization delegate control over management duties customarily performed by or under the					
	of officers, directors, or trustees, or key employees to a management company or other person?			3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 9			4		х
5	Did the organization become aware during the year of a significant diversion of the organization's ass			5		X
6	Did the organization have members or stockholders?			6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or ap			•		
7 4	more members of the governing body?			7a		x
h	Are any governance decisions of the organization reserved to (or subject to approval by) members, st			14		
b			•	7b		X
	persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year			76		125
8	The governing body?	,	3-	8a	Х	
a				8b	X	
ь	• • • • • • • • • • • • • • • • • • • •			OD	22	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be rear			9		x
Sec	organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9		
<u> </u>	tion B. Policies (This Section B requests information about policies not required by the Internal Re	venue	Code.)		V	L N.
40-	Did the amonimation have lead shoutons by another or affiliates 0			40-	Yes	No X
	Did the organization have local chapters, branches, or affiliates?			10a		
D	If "Yes," did the organization have written policies and procedures governing the activities of such ch	•		401		
44-				10b	Х	_
	Has the organization provided a complete copy of this Form 990 to all members of its governing body	у ретоі	re filling the form?	11a	Α_	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.				₹ 7	
12a	, ,		m:0	12a	X	_
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise			12b		_
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? # "Y	,		1.0	х	
40	in Schedule O how this was done			12c	X	_
13	Did the organization have a written whistleblower policy?			13	X	_
14	Did the organization have a written document retention and destruction policy?			14	Λ	
15	Did the process for determining compensation of the following persons include a review and approva		dependent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?				37	
	The organization's CEO, Executive Director, or top management official			15a	X	
b	Other officers or key employees of the organization			15b	Х	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		•••			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangen	nent w	rith a		37	
_	taxable entity during the year?			16a	X	
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate	-	•			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ	iizatior	ı's		37	
800	exempt status with respect to such arrangements?			16b	X	
	tion C. Disclosure					
17	List the states with which a copy of this Form 990 is required to be filed NJ, NY	. (6	F04 () (2)			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T	(Secti	on 501(c)(3)s only)	availabl	е	
	for public inspection. Indicate how you made these available. Check all that apply.					
	X Own website Another's website X Upon request Other (explain		,			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, cor	nflict o	f interest policy, an	d financ	ial	
	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 boo	oks an	d records:			
	TERRI O'BRIEN - 202-328-5000					
	1616 P STREET, NW, WASHINGTON, DC 20036					

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

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

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

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

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

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

(A) Name and Title	(B) Average			(C Pos	C) ition			(D) Reportable	(E) Reportable	(F) Estimated
	hours per week	box	, unle	ss per	son i	s both or/trus	n an	compensation from	compensation from related	amount of other
	(list any hours for related organizations below line)	Individual trustee or director	In stitutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) RICHARD G NEWELL	35.00	.,		37				127 552	0	0.0
PRESIDENT	0.04	Х	_	Х				137,553.	0.	90.
(2) RICHARD SCHMALENSEE CHAIR	0.94	X		х				0.	0.	0.
(3) LINDA J FISHER	1.01	Λ		Δ				0.	0.	.
VICE CHAIR	1.01	Х		х				0.	0.	0.
(4) VICKI A BAILEY	0.34									
DIRECTOR		Х						0.	0.	0.
(5) ANTHONY BERNHARDT	0.49									
DIRECTOR		Х						0.	0.	0.
(6) TRUDY ANN CAMERON	0.21									
DIRECTOR		Х						0.	0.	0.
(7) C BOYDEN GRAY	0.14									
DIRECTOR		Х						0.	0.	0.
(8) DAVID G HAWKINS	0.27									
DIRECTOR		Х						0.	0.	0.
(9) PETER R KAGAN	0.53	1								
DIRECTOR		Х						0.	0.	0.
(10) SALLY KATZEN	0.37	l								
DIRECTOR		Х						0.	0.	0.
(11) RUBEN KRAIEM	0.51	ļ								_
DIRECTOR	1 2 2 5	Х						0.	0.	0.
(12) ELAINE DORWARD-KING	0.26								•	•
DIRECTOR	0.20	Х						0.	0.	0.
(13) BOB LITTERMAN	0.38	3,7							0	0
DIRECTOR	0.15	Х	_					0.	0.	0.
(14) HENRY SCHACHT	0.15	v							0.	^
DIRECTOR	0.19	Х						0.	0.	0.
(15) JAMES ASSELSTINE DIRECTOR	10.19	Х						0.	0.	0.
(16) DANIEL ESTY	0.13	Λ						0.	0.	
DIRECTOR	0.13	Х						0.	0.	0.
(17) WILHELM MERCK	0.19	^	\vdash					0.	0.	<u></u>
DIRECTOR	J • ± J	х						0.	0.	0.
632007 11-11-16							<u> </u>		J •	Form 990 (2016)

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Part VII Section A Officers Directors Trus	J 1 011 11.	_							33 0220	J C C T ago =		
Section A. Onicers, Directors, Trustees, Rey Employees, and Highest Compensated Employees (continued)												
(A)	(B)				C)			(D)	(E)	(F)		
Name and title	Average	(do	Position (do not check more than one				nne	Reportable	Reportable	Estimated		
	hours per	box	, unles	ss per	rson i	s both	n an	compensation	compensation	amount of		
	week		cer an	d a d	irecto	r/trus	tee)	from	from related	other		
	(list any	ndividual trustee or director						the	organizations	compensation		
	hours for	or dir	au			ted		organization	(W-2/1099-MISC)	from the		
	related	stee (ruste			Suec		(W-2/1099-MISC)		organization		
	organizations	al tru	nstitutional trustee		Key employee	Highest compensated employee				and related		
	below	ividu	it uti	Officer	emp	hest	Former			organizations		
	line)	lu	lns	90	Key	e Eig	For					
(18) ROBERT N STAVINS	0.13											
DIRECTOR		Х						0.	0.	0.		
(19) SUE TIERNEY	0.10											
DIRECTOR		Х						0.	0.	0.		
(20) MARK R TERCEK	0.19											
DIRECTOR		Х						0.	0.	0.		
(21) TERRI O'BRIEN	35.00											
VP-FINANCE & ADMIN				Х				237,024.	0.	40,284.		
(22) LAUREL LEE HARVEY	35.00											
VP-DEV & CORP SECRETARY (TERMINATED				Х				219,766.	0.	50,858.		
(23) ALAN J KRUPNICK	35.00											
SENIOR FELLOW						X		228,377.	0.	52,277.		
(24) RAYMOND J KOPP	35.00											
VP ENERGY AND CLIMATE						X		206,529.	0.	63,226.		
(25) KAREN PALMER	35.00											
RESEARCH DIR/SNR FELLOW						X		198,471.	0.	66,824.		
(26) DENNIS BURTRAW	35.00											
SENIOR FELLOW						X		190,840.	0.	62,568.		
1b Sub-total							ightharpoons	1,418,560.	0.	336,127.		
c Total from continuation sheets to Part V	329,681.	0.	66,876.									
d Total (add lines 1b and 1c)							<u> </u>	1,748,241.	0.	403,003.		
2 Total number of individuals (including but r	ot limited to th	ose	liste	d ab	ove) wh	o re	ceived more than \$100,	000 of reportable			

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

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

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

Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person

5 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
LEGACY GIFT SERVICES, LLC		
4607 GREENE PL NW, WASHINGTON, DC 20007	CONSULTING	176,346.
KEVIN RENNERT		
4713 COLORADO AVE NW, WASHINGTON, DC 20011	CONSULTING	160,750.
DANIEL SHAWHAN, 1415 FLORIDA AVENUE, NW		
APT 201, WASHINGTON, DC 20009	CONSULTING	116,481.
ISAACSON MILLER, INC		
263 SUMMER STREET, BOSTON, MA 02210	CONSULTING	102,675.
LEONARD SHABMAN		
1600 NORTH OAK ST 1620, ARLINGTON, VA 22209	CONSULTING	102,140.
2 Total number of independent contractors (including but not limited to those listed		
\$100,000 of compensation from the organization > 5		
SEE PART VII SECTION A CONTINUATION SHE	ETS	Form 990 (2016)

SEE PART VII, SECTION A CONTINUATION SHEETS

Form 990 RESOURCES	FOR TH	E	FU	TU	RE	,	IN	C.	53-022	0900
Part VII Section A. Officers, Directors, Tru	stees, Key En	nplo	yee	s, ar	nd H	lighe	est (Compensated Employe	es (continued)	
(A) Name and title	(B) Average hours	Pos			(C) Position all that apply)			(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	per week (list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(27) MARGARET WALLS INTERIM VP-LAND,WATER & NATURE	35.00					Х		199,852.	0.	33,818
(28) MOLLY MACAULEY FORMER VP-RESEARCH & SNR FELLOW	35.00						Х	129,829.	0.	33,058
									•	
Fotal to Part VII, Section A, line 1c								329,681.		66,876

Form 990 (2016) Part VIII RESOURCES FOR THE FUTURE, INC. Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (A) Total revenue

						TotalTevenue	exempt function revenue	business revenue	from tax under sections 512 - 514
ts ts	1	а	Federated campaigns	1a					
ran			Membership dues						
G,		С	Fundraising events	1c					
Contributions, Gifts, Grants and Other Similar Amounts			Related organizations						
s, G mila			Government grants (contribut		2,862,345.				
Sil			All other contributions, gifts, gran						
outi	similar amounts not included above 1f 4,797,723.								
i i		g	Noncash contributions included in lines	· · · · · · · · · · · · · · · · · · ·					
Cor			Total. Add lines 1a-1f			7,660,068.			
					Business Code				
ø	2	а							
, vic									
Ser									
am eve		d							
Program Service Revenue		е							
Pro			All other program service reve	enue					
			Total. Add lines 2a-2f						
	3		Investment income (including						
			other similar amounts)	•	•	1,560,270.		-63,462.	1,623,732.
	4		Income from investment of tax						
	5		Royalties						
			•	(i) Real	(ii) Personal				
	6	а	Gross rents	1,556,559.					
		b	Less: rental expenses						
			Rental income or (loss)						
			N			635,735.			635,735.
			Gross amount from sales of	(i) Securities	(ii) Other				
			assets other than inventory	58,384,070.					
		b	Less: cost or other basis						
			and sales expenses	55,381,870.					
		С	Gain or (loss)	3,002,200.					
		d	Net gain or (loss)			3,002,200.			3,002,200.
•			Gross income from fundraising						
nue			including \$	of					
Revenue			contributions reported on line	1c). See					
			Part IV, line 18	а					
Other		b	Less: direct expenses						
0		С	Net income or (loss) from fund	draising events	<u></u>				
	9	а	Gross income from gaming ac	ctivities. See					
			Part IV, line 19	а					
		b	Less: direct expenses	b					
		С	Net income or (loss) from gam	ning activities	<u>,</u>				
	10	а	Gross sales of inventory, less	returns					
			and allowances	а					
		b	Less: cost of goods sold	b					
		С	Net income or (loss) from sale	s of inventory	<u></u>				
			Miscellaneous Revenu	е	Business Code				
	11	а	TELEPHONE CENTER		310000	774.		774.	
		b							
		С							
		d	All other revenue						
		е	Total. Add lines 11a-11d			774.			
	12		Total revenue. See instructions.		•	12,859,047.	0.	-62,688.	5,261,667.

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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 (C) Management and general expenses (**D**)
Fundraising (A) Do not include amounts reported on lines 6b. Program service expenses Total expenses 7b, 8b, 9b, and 10b of Part VIII. expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 Grants and other assistance to domestic 50,065. 50,065. individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, 685,575. 30,883. 429,472. 225,220. trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 6,280,780. 5,058,280. 947,523. 274,977. Other salaries and wages 7 Pension plan accruals and contributions (include 719,308. 717,582. -31,218. 32,944. section 401(k) and 403(b) employer contributions) <u>3,320.</u> 7,114.215,577. 205,143. Other employee benefits 9 435,503. 387,327. 13,899. 34,277. 10 Payroll taxes 11 Fees for services (non-employees): <u>553,5</u>53. 266,056. 125,662. 161,835. Management 3,000. 2,725. 5,725. Legal 52,213. 52,213. Accounting Lobbying Professional fundraising services. See Part IV, line 17 267,704. 267,704. Investment management fees Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.) 2,038. 10,051. 8,013. Advertising and promotion 12 99,771. 19,060. 80,701. 10. 13 Office expenses 122,888. 67,700. 44,089. 11,099. Information technology 14 Royalties 15 505,835. 99,301. 648,000. 42,864. 16 Occupancy 163,903. 109,838. 35,195. 18,870. 17 Travel Payments of travel or entertainment expenses 18 for any federal, state, or local public officials 254,585. 173,290. 58,559. 22,736. Conferences, conventions, and meetings 19 107,587. 107,587. 20 Payments to affiliates 21 142,235. 613,248. 471,013. Depreciation, depletion, and amortization 22 70,880. 33,664. 37,216. 23 Other expenses. Itemize expenses not covered 24 above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) 1,538,322. 1,464,072. 64,250. 10,000. CONSULTANTS SUBCONTRACTS 503,770. 503,770. 201,919. 130,047. 59,301. OTHER EXPENSES 12,571. 105,839. 102,422. 535. d PRINTING & PUBLICATIONS 2,882. 48,323. 44.071. 3.440. 812. e All other expenses 13,755,089. 10,720,447. 2,176,431. 858,211. Total functional expenses. Add lines 1 through 24e 25 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)

Par	t X	Balance Sheet					
		Check if Schedule O contains a response or note	to an	y line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			505,310.	1	394,629.
	2	Savings and temporary cash investments			6,481,119.	2	11,061,667.
	3	Pledges and grants receivable, net			4,698,152.	3	3,758,378.
	4	Accounts receivable, net		482.	4	1,596.	
	5	Loans and other receivables from current and for				,	
		trustees, key employees, and highest compensa					
		Part II of Schedule L		5			
	6	Loans and other receivables from other disqualif					
		section 4958(f)(1)), persons described in section	•	,			
		employers and sponsoring organizations of section					
		employees' beneficiary organizations (see instr).		·		6	
Assets	7	Notes and loans receivable, net				7	
Ass	8	Inventories for sale or use				8	
	9				35,953.	9	2,680
		Land, buildings, and equipment: cost or other	 I I		3373331	3	27000
	iva	basis. Complete Part VI of Schedule D	100	14 063 960.			
	h	Less: accumulated depreciation	10a	6,838,095.	7,449,318.	10c	7,225,865.
				35,134,441.	11	23,505,892	
	11	Investments - publicly traded securities			11,977,635.	12	21,908,505
	12	Investments - other securities. See Part IV, line 1	11,911,033.	13	21,900,303		
	13	Investments - program-related. See Part IV, line 1					
	14	Intangible assets	·····	472,560.	14 15	368,607	
	15	Other assets. See Part IV, line 11			66,754,970.	16	68,227,819
	16	Total assets. Add lines 1 through 15 (must equa			2,934,056.	17	2,678,454
	17	Accounts payable and accrued expenses		19,126.	18	31,968	
	18	Grants payable	43,325.	19	96,322		
	19	Deferred revenue			4,605,000.	20	4,310,000
	20	Tax-exempt bond liabilities			4,003,000.		4,310,000
	21	Escrow or custodial account liability. Complete F				21	
es	22	Loans and other payables to current and former					
ij∣		key employees, highest compensated employees				-00	
Liabilities				··.···.		22	
_	23	Secured mortgages and notes payable to unrela		· · · · · · · · · · · · · · · · · · ·		23	
	24	Unsecured notes and loans payable to unrelated				24	
	25	Other liabilities (including federal income tax, pay					
		parties, and other liabilities not included on lines	17-24)	. Complete Part X of	258,181.		260 016
	00	Schedule D			7,859,688.	25	368,816. 7,485,560.
	26	Total liabilities. Add lines 17 through 25			7,033,000.	26	7,405,500
		Organizations that follow SFAS 117 (ASC 958)		k nere 🚩 🔼 and			
Ses	07	complete lines 27 through 29, and lines 33 and			47,233,605.	27	49,933,822.
anc	27	Unrestricted net assets Temporarily restricted net assets	5,172,270.	28	4,319,030.		
Bal	28				6,489,407.	_ <u></u>	6,489,407.
nd	29)) abaali basa N	0,400,407.	29	0,400,407.
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (AS	s), check here				
s or	00	and complete lines 30 through 34.			00		
set	30	Capital stock or trust principal, or current funds			30		
As	31	Paid-in or capital surplus, or land, building, or eq				31	
Ę	32	Retained earnings, endowment, accumulated inc			58,895,282.	32	60,742,259.
-	33	Total net assets or fund balances				33	
	34	Total liabilities and net assets/fund balances			66,754,970.	34	68,227,819

Pa	T XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI		<u></u>			
1	Total revenue (must equal Part VIII, column (A), line 12)	1		<u>, 85</u>		
2	Total expenses (must equal Part IX, column (A), line 25)	2		, 75!		
3	Revenue less expenses. Subtract line 2 from line 1	3		-89	5,0	<u>42.</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	58	, 89!	5,2	<u>82.</u>
5	Net unrealized gains (losses) on investments	5	2	,74	3,0	19.
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain in Schedule O)	9				0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,					
	column (B))	10	60	,74	2,2	59.
Pa	t XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					
					Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		_			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Э.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		_ X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a				
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?			2b	Х	
	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:					
	X Separate basis Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,				
	review, or compilation of its financial statements and selection of an independent accountant?			2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche					
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin					
	Act and OMB Circular A-133?			За	Х	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ed audit	····			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits			3b	Х	
				Form	990	(2016)

632012 11-11-16

SCHEDULE A

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support

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

➤ Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2016

Open to Public Inspection

Employer identification number Name of the organization RESOURCES FOR THE FUTURE, 53-0220900 Reason for Public Charity Status (All organizations must complete this part.) See instructions Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) Is the organization listed in your governing document? (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other (described on lines 1-10 organization support (see instructions) support (see instructions) No above (see instructions))

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.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	9291814.	7060166.	9762611.	9756618.	7660068.	43531277.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	9291814.	7060166.	9762611.	9756618.	7660068.	43531277.
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						3267344.
6	Public support. Subtract line 5 from line 4.						40263933.
	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
	Amounts from line 4	9291814.	7060166.	9762611.	9756618.	7660068.	43531277.
	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources	3893609.	3449632.	3663037.	3407216.	3116829.	17530323.
9	Net income from unrelated business						
_	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						-
	or loss from the sale of capital						
	assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						61061600.
	Gross receipts from related activities,	etc. (see instruction	ins)			12	10-00-000
	First five years. If the Form 990 is for	•	,				
	organization, check this box and stor	-			•		
Sec	ction C. Computation of Publi	c Support Per	centage				<u> </u>
14	Public support percentage for 2016 (I	ine 6, column (f) di	vided by line 11, c	olumn (f))		14	65.94 %
	Public support percentage from 2015					15	65.87 %
	33 1/3% support test - 2016. If the o					ore, check this bo	ox and
	stop here. The organization qualifies						
b	33 1/3% support test - 2015. If the o						
	and stop here. The organization qual	ifies as a publicly s	upported organiza	ation			>
17a	10% -facts-and-circumstances test						
	and if the organization meets the "fac	ts-and-circumstand	es" test, check th	is box and stop h	ere. Explain in Pa	rt VI how the orga	nization
	meets the "facts-and-circumstances"			-	· · · · · · · · · · · · · · · · · · ·	-	
b	10% -facts-and-circumstances test						
	more, and if the organization meets the	-					
	organization meets the "facts-and-circ		·				▶ □
18	Private foundation. If the organization			•	,		s
	<u>,</u>		,				0 or 990-EZ) 2016

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.)

Sec	ction A. Public Support		,				
Cale	ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions,						
	merchandise sold or services per-						
	formed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
7 <i>a</i>	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received						
	from other than disqualified persons that exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6.)						
Sec	ction B. Total Support		1	Γ	T	T	1
	ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources						
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b				1		ļ
11	Net income from unrelated business activities not included in line 10b,						
	whether or not the business is						
	regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital						
	assets (Explain in Part VI.)						
	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is for	· ·		•	•		·
0-	check this box and stop here						>
	etion C. Computation of Publi					145	
	Public support percentage for 2016 (li					15	<u>%</u>
	Public support percentage from 2015					16	%
	ction D. Computation of Inves			no 10 column (6)		17	0.4
	Investment income percentage for 20					17	%
	Investment income percentage from 2					18	7 is not
198	33 1/3% support tests - 2016. If the						.
L	more than 33 1/3%, check this box an 33 1/3% support tests - 2015. If the						
i.	line 18 is not more than 33 1/3%, che						
20	Private foundation If the organization						

Part IV | Supporting Organizations

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

Section A. All Supporting Organizations

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

	Yes	No
4		
1		
2		
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За		
3b		
20		
3c		
4a		
4b		
10		
4c		
5a		
5b		
5c		
6		
_		
7		
8		
9a		
9b		
90		
9c		
10a		
10b		<u> </u>

Par	T IV Supporting Organizations (continued)			
	· · · · ·		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
c	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
	_		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			l
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			l
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
	Г		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			l
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			l
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations			
	Г		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			l
	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?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how	_		
2	the organization maintained a close and continuous working relationship with the supported organization(s). By reason of the relationship described in (2), did the organization's supported organizations have a	2		
3	significant voice in the organization's investment policies and in directing the use of the organization's			l
				l
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's	3		
Sec	supported organizations played in this regard. tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. <i>Complete line 3 below.</i>			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instru-	ctions).		
2	Activities Test. Answer (a) and (b) below.	,	Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			l
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
_	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
_	trustees of each of the supported organizations? <i>Provide details in Part VI.</i>	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	01		
	of its supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard.	3b		

Pai	Type III Non-Functionally Integrated 509(a)(3) Supporting	ng Organi	zations				
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 of the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI.)							
	other Type III non-functionally integrated supporting organizations must co	omplete Sec	tions A through E.				
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)			
1	Net short-term capital gain	1					
2	Recoveries of prior-year distributions	2					
3	Other gross income (see instructions)	3					
4	Add lines 1 through 3	4					
5	Depreciation and depletion	5					
6	Portion of operating expenses paid or incurred for production or						
	collection of gross income or for management, conservation, or						
	maintenance of property held for production of income (see instructions)	6					
7	Other expenses (see instructions)	7					
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8					
Sect	ion 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):						
а	Average monthly value of securities	1a					
b	Average monthly cash balances	1b					
С	Fair market value of other non-exempt-use assets	1c					
d	Total (add lines 1a, 1b, and 1c)	1d					
е	Discount claimed for blockage or other						
	factors (explain in detail in Part VI):						
2	Acquisition indebtedness applicable to non-exempt-use assets	2					
_3	Subtract line 2 from line 1d	3					
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,						
	see instructions)	4					
_5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5					
6	Multiply line 5 by .035	6					
7	Recoveries of prior-year distributions	7					
8	Minimum Asset Amount (add line 7 to line 6)	8					
Sect	ion C - Distributable Amount			Current Year			
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1					
2	Enter 85% of line 1	2					
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3					
4	Enter greater of line 2 or line 3	4					
5	Income tax imposed in prior year	5					
6	Distributable Amount. Subtract line 5 from line 4, unless subject to						
	emergency temporary reduction (see instructions)	6					
7	Check here if the current year is the organization's first as a non-functiona	lly integrated	d Type III supporting orga	nization (see			
	instructions).						

Schedule A (Form 990 or 990-EZ) 2016

Par	^ব V │ Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	nizations _(continued)	
Secti	ion D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exe			
2	Amounts paid to perform activity that directly furthers exemp			
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose			
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions			
7	Total annual distributions. Add lines 1 through 6			
8	Distributions to attentive supported organizations to which the	ne organization is responsive		
	(provide details in Part VI). See instructions			
9	Distributable amount for 2016 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
		(i)	(ii)	(iii)
		Excess Distributions	Underdistributions	Distributable
secti	ion E - Distribution Allocations (see instructions)		Pre-2016	Amount for 2016
1	Distributable amount for 2016 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2016 (reason-			
	able cause required- explain in Part VI). See instructions			
3	Excess distributions carryover, if any, to 2016:			
а				
b				
С	From 2013			
d	From 2014			
е	From 2015			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2016 distributable amount			
i	Carryover from 2011 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2016 from Section D,			
	line 7: \$			
а	Applied to underdistributions of prior years			
b	Applied to 2016 distributable amount			
С	Remainder. Subtract lines 4a and 4b from 4			
5	Remaining underdistributions for years prior to 2016, 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 2016. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions			
7	Excess distributions carryover to 2017. Add lines 3j			
	and 4c			
8	Breakdown of line 7:			
а				
b	Excess from 2013			
С	Excess from 2014			
d	Excess from 2015			
е	Excess from 2016			

Schedule A (Form 990 or 990-EZ) 2016

SCHEDULE D (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Financial Statements

► 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.

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

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

RESOURCES FOR THE FUTURE, INC.

Employer identification number 53-0220900

Par	t I Organizations Maintaining Donor Advised	l Funds or Other Similar Funds	or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, line	e 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	4	
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)	5,000.	
4	Aggregate value at end of year	172,114.	
5	Did the organization inform all donors and donor advisors in w	-	
	are the organization's property, subject to the organization's e		
6	Did the organization inform all grantees, donors, and donor ad	dvisors in writing that grant funds can be u	used only
	for charitable purposes and not for the benefit of the donor or	donor advisor, or for any other purpose of	
Da			
Par			Part IV, line 7.
1	Purpose(s) of conservation easements held by the organizatio		
	Preservation of land for public use (e.g., recreation or ed		orically important land area
	Protection of natural habitat	Preservation of a cert	ified historic structure
_	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualific	ed conservation contribution in the form of	
	day of the tax year.		Held at the End of the Tax Year
а			
b			
С	Number of conservation easements on a certified historic stru		
d	Number of conservation easements included in (c) acquired af		
_	listed in the National Register		2d
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or terminated by the	organization during the tax
4	year ▶ Number of states where property subject to conservation ease	oment is legated	
5	Does the organization have a written policy regarding the perior		
3	violations, and enforcement of the conservation easements it		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, h		
Ū	The state of	ianaming of violations, and emoroting cons	orvation casements during the year
7	Amount of expenses incurred in monitoring, inspecting, handli	ing of violations, and enforcing conservat	ion easements during the year
-	▶ \$	g or moralione, and emercing concernat	ion cacomonic daming and year
8	Does each conservation easement reported on line 2(d) above	e satisfy the requirements of section 170(h	n)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports conservatio		
	include, if applicable, the text of the footnote to the organization	on's financial statements that describes t	he organization's accounting for
	conservation easements.		
Par	t III Organizations Maintaining Collections of	Art, Historical Treasures, or Otl	her Similar Assets.
	Complete if the organization answered "Yes" on Form	990, Part IV, line 8.	
1a	If the organization elected, as permitted under SFAS 116 (ASC	C 958), not to report in its revenue statem	ent and balance sheet works of art,
	historical treasures, or other similar assets held for public exhi	ibition, education, or research in furtheran	nce of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that describ	es these items.	
b	If the organization elected, as permitted under SFAS 116 (ASC	C 958), to report in its revenue statement	and balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, ed	ucation, or research in furtherance of pub	lic service, provide the following amounts
	relating to these items:		
	(i) Revenue included on Form 990, Part VIII, line 1		> \$
			L A
2	If the organization received or held works of art, historical trea	sures, or other similar assets for financial	
	the following amounts required to be reported under SFAS 11	6 (ASC 958) relating to these items:	
а	Revenue included on Form 990, Part VIII, line 1		> \$
b	Assets included in Form 990, Part X		

632051 08-29-16

Schedule D (Form 990) 2016

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

Schedule D (Form 990) 2016

7,225,865.

e Other

d Equipment

Total. Add lines 1a through 1e. (Column (d) must equal Form 990. Part X, column (B), line 10c.)

	OR THE FUTU	RE, INC.	53-0220900 Page 3
Part VII Investments - Other Securities.		line 44h One Farm 000 Back	W. Para do
Complete if the organization answered "Yes' (a) Description of security or category (including name of security)	(b) Book value		x, line 12. ion: Cost or end-of-year market value
(A) = 1	(b) Book value	(C) Method of Valuat	ion. Cost of end-or-year market value
(1) Financial derivatives			
(2) Closely-held equity interests			
(3) Other (A) HEDGE FUNDS	21,878,15	A END-OE-VEAU	R MARKET VALUE
(B) PRIVATE PLACEMENT	30,35		R MARKET VALUE
	30,33	DIAD OF THAT	C IMMINII VALOII
(C) (D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	21,908,50	5.	
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		ion: Cost or end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			
Complete if the organization answered "Yes"		line 11d. See Form 990, Part	
(a) Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
<u>(7)</u>			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities.	ne 15.)	······	>
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		100 = 00	
(2) LIABILITIES UNDER SPLIT-I		196,702.	
(3) GIFT FUNDS HELD FOR OTHER	.S	172,114.	
(4)			
(5)			

Schedule D (Form 990) 2016

(6) (7) (8)

Sche	edule D (Form 990) 2016 RESOURCES FOR THE FUTURE,	INC.		53-	0220900 Page
Par	rt XI Reconciliation of Revenue per Audited Financial Stateme		n Revenue per Re	eturn.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a	a.			
1	Total revenue, gains, and other support per audited financial statements			1	16,255,186
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	1 1	0 = 40 040		
а	Net unrealized gains (losses) on investments	2 a	2,743,019.	4	
b	Donated services and use of facilities			_	
С	Recoveries of prior year grants	2c		4	
d		2d			0 540 040
е	Add lines 2a through 2d			2e	2,743,019
3	Subtract line 2e from line 1			3	13,512,167
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1 1	065 504		
а	Investment expenses not included on Form 990, Part VIII, line 7b		267,704.		
b	Other (Describe in Part XIII.)	4b	-920,824.		550 400
С				4c	-653,120
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I, line 12.)	1 - 14/	u. P	5	12,859,047
Pa	rt XII Reconciliation of Expenses per Audited Financial Statem		th Expenses per	Retur	n.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a			1	1 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4
1	Total expenses and losses per audited financial statements			1	14,408,209
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 1			
а	Donated services and use of facilities			4	
b	Prior year adjustments			_	
С	Other losses		222	_	
d	, , , , , , , , , , , , , , , , , , , ,		920,824.		222 224
е	Add lines 2a through 2d			2e	920,824
3	Subtract line 2e from line 1			3	13,487,385
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1 1	065 504		
	Investment expenses not included on Form 990, Part VIII, line 7b	—	267,704.	4	
b	Other (Describe in Part XIII.)	4b			0.55 504
С	Add lines 4a and 4b			4c	267,704
5 Pai	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) rt XIII Supplemental Information.			5	13,755,089
		+ IV / II: 1	h and Oh. Dart V. line	4. David	V. line O. Dest VI
	ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Par 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any add			4; Part	x, line 2; Part XI,
PAF	RT V, LINE 4:				
ENI	DOWMENT FUNDS				
ENI	DOWMENT FUNDS ARE USED TO SUPPORT VARIOUS	ACTIVI	ITIES AND PF	ROJE	CTS AS
DES	SIGNATED BY THE BOARD OF DIRECTORS AND APP	LICABI	LE LAWS AND	ARE	SUBJECT
TO	DONOR INTENT.				
PAI	RT X, LINE 2:				
	NANCIAL STATEMENT FOOTNOTE REGARDING FIN 4	8 (ASC	740)		
	F EVALUATES UNCERTAINTY IN INCOME TAX POSI				

MORE-LIKELY-THAN-NOT RECOGNITION STANDARD. IF THAT THRESHOLD IS MET, THE

TAX POSITION IS THEN MEASURED AT THE LARGEST AMOUNT THAT IS GREATER THAN

50% LIKELY OF BEING REALIZED UPON ULTIMATE SETTLEMENT. AS OF SEPTEMBER 30,

632054 08-29-16

Schedule D (Form 990) 2016

SCHEDULE F (Form 990)

Department of the Treasury Internal Revenue Service

Statement of Activities Outside the United States

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

➤ Attach to Form 990.

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

OMB No. 1545-0047 Inspection

Name of the organization

Employer identification number

2 F.	SOURCES FOR T	יסווייון או	TNC		-	3-022090	0
	rt I General Infor	mation on A	ctivities Out	side the United States. Comple	te if the organizat	tion answered "V	es" on
	Form 990, Part IV			2	organiza	aon anowordu T	JJ 011
1			maintain record	ds to substantiate the amount of its gra	nts and other ass	istance,	
				the selection criteria used to award the			Yes No
2	For grantmakers. Desc United States.	ribe in Part V the	e organization's	procedures for monitoring the use of its	grants and other	assistance outsi	de the
3	Activities per Region. (TI	he following Part	I, line 3 table ca	an be duplicated if additional space is n	eeded.)		
	(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, pro- gram services, investments, grants to recipients located in the region)	(e) If activity is a progra describe sp of service(s)	m service, ecific type	(f) Total expenditures for and investments in the region
	TRAL AMERICA AND CARIBBEAN			INVESTMENT IN PARTNERSHIPS	INVESTMENT SE	RVICES	0.
3 a	Sub-total	0	0				0.
	Total from continuation						
	sheets to Part I	0	0				0.
С	Totals (add lines 3a						
	and 3b)	0	0				0.

632071 09-21-16

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

Schedule F (Form 990) 2016

recipient wno received more than \$5,000. Part il 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)			
			ecognized as charities by the 501(c)(3) equivalency letter		recognized as tax-ex						
3 Enter total number of											

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

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.							
Part III can be duplica (a) Type of grant or assistar	ated if additional space is neede	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes	X No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to 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; do not file with Form 990)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations (see Instructions for Form 5471)	X 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)	X 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)	X 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; do not file with Form 990)	Yes	X No

Schedule F (Form 990) 2016

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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

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

➤ Attach to Form 990.

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

OMB No. 1545-0047

2016

Open to Public Inspection

Employer identification number

Schedule I (Form 990) (2016)

RESOURCES	53-0220900										
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 assi	stance, and the selection					
criteria used to award the grants or assi	criteria used to award the grants or assistance?										
2 Describe in Part IV the organization's pr											
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.											
Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance				
2 Enter total number of section 501(c)(3) a 3 Enter total number of other organization	•	-	e line 1 table				\				

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

(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
SEARCH GRANTS - DISSERTATION AWARDS PROGRAM	4	50,065 .	0.		
		,			
art IV Supplemental Information. Provide the information re	equired in Part I, lin	e 2; Part III, column	ı (b); and any other ac	Iditional information.	
ART I, LINE 2:					
CHEDULE I, PART I, LINE 2					
RANT FUNDS ARE EXPENDED TO INDIVI	DUALS IN	THE U.S FO	OR USE IN T	HE U.S AND	
FF MONITORS REPORTS OF THE USE OF					
					_

SCHEDULE J (Form 990)

Compensation Information

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

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Department of the Treasury

Internal Revenue Service

RESOURCES FOR THE FUTURE, INC.

Employer identification number 53-0220900

Pa	art I Questions Regarding Compensation			
			Yes	No
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.			
	First-class or charter travel			l
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as, maid, chauffeur, chef)			l
				l
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		<u> </u>
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?	2		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	X Compensation committee Written employment contract			
	Independent compensation consultant X Compensation survey or study			
	Form 990 of other organizations X Approval by the board or compensation committee			
				l
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:			
а	Receive a severance payment or change-of-control payment?	4a		X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
	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:	-		Х
	The organization?	5a		X
D	Any related organization?	5b		$\stackrel{\Delta}{\vdash}$
6	If "Yes" on line 5a or 5b, describe in Part III.			l
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			l
_	contingent on the net earnings of:	6-		Х
	The organization?	6a		X
D	Any related organization?	6b		
7	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	7		Х
0	not described on lines 5 and 6? If "Yes," describe in Part III	7		Λ
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			Х
0	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in	9		
	Regulations section 53.4958-6(c)?	9		i

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

Schedule J (Form 990) 2016

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.

		(B) Breakdown of	W-2 and/or 1099-MIS	SC compensation	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	berients	(B)(i)-(D)	in column (B) reported as deferred on prior Form 990
(1) TERRI O'BRIEN	(i)	222,024.	15,000.	0.	34,344.	5,940.	277,308.	0.
VP-FINANCE & ADMIN	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) LAUREL LEE HARVEY	(i)	204,766.	15,000.	0.	31,637.	19,221.	270,624.	0.
VP-DEV & CORP SECRETARY (TERMINATED	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) ALAN J KRUPNICK	(i)	228,377.	0.	0.	46,640.	5,637.	280,654.	0.
SENIOR FELLOW	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) RAYMOND J KOPP	(i)	206,529.	0.	0.	44,330.	18,896.	269,755.	0.
VP ENERGY AND CLIMATE	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) KAREN PALMER	(i)	188,471.	10,000.	0.	39,606.	27,218.	265,295.	0.
RESEARCH DIR/SNR FELLOW	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) DENNIS BURTRAW	(i)	190,840.	0.	0.	39,785.	22,783.	253,408.	0.
SENIOR FELLOW	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) MARGARET WALLS	(i)	199,852.	0.	0.	27,923.	5,895.	233,670.	0.
INTERIM VP-LAND, WATER & NATURE	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) MOLLY MACAULEY	(i)	129,829.	0.	0.	28,431.	4,627.	162,887.	0.
FORMER VP-RESEARCH & SNR FELLOW	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III Supplemental Information
Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

SCHEDULE O

(Form 990 or 990-EZ)

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

2016
Open to Public Inspection

Name of the organization

RESOURCES FOR THE FUTURE, INC.

Employer identification number 53-0220900

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

FORM 990 REVIEW PROCESS

THE FORM 990 IS REVIEWED BY THE CFO AND CEO AND MADE AVAILABLE TO THE ENTIRE BOARD PRIOR TO THE SUBMISSION TO THE IRS.

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

CONFLICT OF INTEREST POLICY

ANNUALLY, THE BOARD OF DIRECTORS IS REQUIRED TO COMPLETE A CONFLICT OF INTEREST DISCLOSURE FORM.

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

OFFICER COMPENSATION DETERMINATION PROCESS

DECIDES THE PRESIDENT'S COMPENSATION, BASED ON A RECOMMENDATION FROM THE

EXECUTIVE COMMITTEE; (B) THE EXECUTIVE COMMITTEE DECIDES ALL OTHER

OFFICERS' COMPENSATION, BASED ON A RECOMMENDATION FROM THE PRESIDENT. THE

INTERMEDIATE SANCTIONS RULES REQUIRE THAT ALL PROPERTY TRANSFERS BE AT

FAIR MARKET VALUE. PER IRS REGULATIONS, COMPENSATION IS PRESUMED A PROPERTY

TRANSFER AND IS PRESUMED TO BE AT FMV IF:(1) THE COMPENSATION AGREEMENT OR

TERMS OF THE TRANSFER ARE APPROVED IN ADVANCE, BY AN AUTHORIZED BODY OF THE

EXEMPT ORGANIZATION, COMPOSED ENTIRELY OF INDIVIDUALS WITHOUT A CONFLICT OF

INTEREST; (2) THE BOARD OR COMMITTEE OBTAINED AND RELIED UPON APPROPRIATE

DATA AS TO COMPARABILITY IN MAKING ITS DETERMINATION; AND (3) THE BOARD OR

COMMITTEE ADEQUATELY DOCUMENTED THE BASIS FOR ITS DETERMINATION,

CONCURRENTLY WITH MAKING THE DECISION. REFERRING THE THREE CRITERIA ABOVE

IN THE RFF CONTEXT: (1) SALARY AGREEMENTS ARE APPROVED IN ADVANCE BY THE

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

Schedule O (Form 990 or 990-EZ) (2016)

632211 08-25-16

RESOURCES FOR THE FUTURE, INC.	53-0220900
BOARD OR THE EXECUTIVE COMMITTEE AND NO INTERESTED PARTIES	ARE INVOLVED IN
SETTING THEM. (2) WE SUBSCRIBE TO A NUMBER OF SURVEYS THAT	LOOK AT
NONPROFIT ORGANIZATIONS AND RESEARCH ORGANIZATIONS IN WASH	INGTON AND
NATIONWIDE. THEY PROVIDE GOOD INFORMATION AND CAN BE RELIE	D ON TO JUDGE
COMPARABILITY. PERIODICALLY RFF WILL ENGAGE A COMPENSATION	CONSULTANT TO
CONDUCT AN INDEPENDENT ANALYSIS. (3) WE PREPARE MINUTES OF	ALL EXECUTIVE
COMMITTEE MEETINGS WHICH REFLECT SALARY DECISIONS. MATERIA	LS USED BY THE
COMMITTEE TO DETERMINE COMPARABILITY GOES INTO THE PERSONE	L FILES FOR THE
INDIVIDUALS INVOLVED.	
FORM 990, PART VI, SECTION C, LINE 19:	
CERTAIN DOCUMENTS AVAILABLE TO THE PUBLIC	
RFF MAKES ITS GOVERNING DOCUMENTS AVAILABLE TO THE PUBLIC	UPON REQUEST.
RFF'S FINANCIAL STATEMENTS AND TAX RETURNS ARE POSTED ON O	THER NON-PROFIT
WEBSITES THAT COLLECT AND POST NON-PROFIT INFORMATION.	