COMMITTEE ON NATURAL RESOURCES

Disclosure Form As required by and provided for in House Rule XI, clause 2(g) and the Rules of the Committee on Natural Resources

U.S. House Subcommittee on Energy and Mineral Resources Oversight Hearing on Abandoned Mined Lands: Innovative Solutions for Restoring the Environment, Improving Safety and Creating Jobs

* * * * *

For Witnesses Representing Organizations:

- 1. Name: Lauren Pagel
- 2. Name of Organization(s) You are Representing at the Hearing: Earthworks
- 3. Business Address: 1612 K Street NW Suite 808 Washington, DC 20006
- 4. Business Email Address: [Information redacted for privacy]
- 5. Business Phone Number: [Information redacted for privacy]

Name/Organization: Lauren Pagel/Earthworks

Title/Date of Hearing: U.S. House Subcommittee on Energy and Mineral Resources Oversight Hearing on Abandoned Mined Lands: Innovative Solutions for Restoring the Environment, Improving Safety and Creating Jobs

a. Any training or educational certificates, diplomas or degrees or other educational experiences that are relevant to your qualifications to testify on or knowledge of the subject matter of the hearing.

I received a bachelor's degree in political science from Vassar College in 2000.

b. Any professional licenses, certifications, or affiliations held that are relevant to your qualifications to testify on or knowledge of the subject matter of the hearing.

I serve on the steering committee of the Western Mining Action Network, an association of communities, individuals and organizations that seeks to foster and support a strong network that protects communities, land, water, air, and wildlife by reforming mining practices and holding government and corporations accountable.

c. Any employment, occupation, ownership in a firm or business, or work-related experiences that relate to your qualifications to testify on or knowledge of the subject matter of the hearing.

I have been working with communities impacted by hardrock mining issues, including abandoned mine land concerns, for the past 9 years.

d. Any federal grants or contracts (including subgrants or subcontracts) from the <u>Department of the Interior</u> (<u>and /or other agencies invited</u>) that you have received in the current year and previous four years, including the source and the amount of each grant or contract.

NA

e. A list of all lawsuits or petitions filed by you against the federal government in the current year and the previous four years, giving the name of the lawsuit or petition, the subject matter of the lawsuit or petition, and the federal statutes under which the lawsuits or petitions were filed.

NA

f. Any other information you wish to convey that might aid the Members of the Committee to better understand the context of your testimony.

Name/Organization: Lauren Pagel/Earthworks

Title/Date of Hearing: U.S. House Subcommittee on Energy and Mineral Resources Oversight Hearing on Abandoned Mined Lands: Innovative Solutions for Restoring the Environment, Improving Safety and Creating Jobs

In addition, for witnesses representing organizations:

g. Any offices, elected positions, or representational capacity held in the organization(s) on whose behalf you are testifying.

I am currently employed as the Policy Director for Earthworks and am testifying on their behalf.

h. Any federal grants or contracts (including subgrants or subcontracts) from the <u>Department of the Interior</u> (<u>and /or other agencies invited</u>) that were received in the current year and previous four years by the organization(s) you represent at this hearing, including the source and amount of each grant or contract for each of the organization(s).

NA

i. A list of all lawsuits or petitions filed by the organization(s) you represent at the hearing against the federal government in the current year and the previous four years, giving the name of the lawsuit or petition, the subject matter of the lawsuit or petition, and the federal statutes under which the lawsuits or petitions were filed for each of the organization(s).

BLM Climate Change Litigation (NEPA, FLPMA):

Earthworks' Oil and Gas Accountability Project, represented by the Western Environmental Law Center (Taos office), filed complaints in federal courts in New Mexico and Montana in December 2008 to compel the Bureau of Land Management (BLM) to consider, analyze, and/or mitigate the global warming impacts of greenhouse gases when issuing oil and gas leases on federal lands

HD Mountains (federal - NEPA, CAA, ESA):

Earthworks' Oil and Gas Accountability Project, represented by Earthjustice, is attempting to protect roadless forest, wilderness areas, air quality and communities from coalbed methane development.

Upper Missouri River Breaks National Monument (federal – NEPA, FLPMA, NHPA): Earthworks' Oil and Gas Accountability Project, represented by Earthjustice, filed suit with the intent of protecting this important treasured place from oil and gas development.

Rock Creek Mine (federal - NEPA, ESA, FLPMA, CAA, CWA, WA):

Case 1: This case sought review, under the Endangered Species Act and Administrative Procedures Act, of a U.S. Fish and Wildlife Service (USFWS) Biological Opinion for the proposed Rock Creek Mine in Northwestern Montana that will push a critically endangered grizzly bear population close to the brink of extinction and could eliminate one of the Upper Columbia River basin's few remaining bull trout strongholds.

Case 2: Earthworks has filed a complaint in Federal District Court against USFS for unlawful approval of the Rock Creek Mine, challenging its legality under NEPA, ESA, FLPMA, CAA, CWA and the Wilderness Act.

Department of the Interior/Department of Agriculture Millsite/Claim Validity (1872 Mining Law/FLPMA): In October of 2009, Earthworks joined High Country Citizens Alliance, Save the Scenic Santa Ritas, Great

Basin Resource Watch and Western Shoshone Defense Project in an 1872 Mining Law-related lawsuit against the Department of the Interior. This lawsuit challenges both the 10-24-03 millsite regulation (which adopted the Secretary/Deputy Solicitor's legal opinion issued on 10-7-03) and the 12-4-08 Interim Final Rule, which was issued in response to Judge Kennedy's decision in the MPC v. Norton case. This lawsuit is intended to require Fair Market Value for lands not covered by valid mining claims and limit the amount of public lands that can be used to dump mining waste.

j. A list of any countries from which the organization(s) you represent at the hearing have received foreign donations and the total amount of donations received from each country, for the current year and the previous four years, by each organization.

NA

k. For tax-exempt organizations and non-profit organizations, copies of the three most recent public IRS Form 990s (including Form 990-PF, Form 990-N, and Form 990-EZ) for each of the organization(s) you represent at the hearing (not including any contributor names and addresses or any information withheld from public inspection by the Secretary of the Treasury under 26 U.S.C. 6104)).

2008 990 can be found here: http://www.earthworksaction.org/pubs/FY2008EARTHWORKS%20990.pdf
2009 990 can be found here: http://www.earthworksaction.org/pubs/Earthworks-FY2010-990.pdf
2010 990 can be found here: http://www.earthworksaction.org/pubs/Earthworks-FY2010-990.pdf

Form **990**

Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047 2010

Open to Public Inspection

Department of the Treasury Internal Revenue Service

► The organization may have to use a copy of this return to satisfy state reporting requirements.

<u>A</u>	For the	2010 calen	dar year, or tax year b	eginning		, 2010, and endin	a		
В	Check if a	applicable:	-			, , , , , , , , , , , , , , , , , , , ,		mployer Ide	entification Number
	Addr	ess change	EARTHWORKS					52 - 155	
	Nam	e change	1612 K STREET	, NW #808		* 12		elephone nu	
	_	ıl return	WASHINGTON, D	C 20006			1		
		inated					·	202-88	7-1872
	H								
	\vdash	nded return	E Manne and the C					ross receipt	
	Appli	ication pending	F Name and address of pr				H(a) Is this a group		
_	·		SAME AS C ABO			·	H(b) Are all affiliat If 'No,' attach		
<u></u>			X 501(c)(3) 501(c		.) 4947	(a)(1) or 527			
<u>J</u>			W.EARTHWORKSAC				H(c) Group exemp	tion number	<u>▶</u> *
K	Form of		X Corporation Trust	Association Othe	r►	L Year of Format	ion: 1988	M State of	of legal domicile: DC
Pa	art I	Summar							
	1 B	riefly descril	be the organization's r	mission or most signific	ant activitie	es: THE CORPO	ORATION I	S ORGA	NIZED
9	1 1	<u>XCTN2TA</u>	<u> ELY FOR CHARIT</u>	<u>'ABLE_AND_EDUCA</u>	TIONAL	PURPOSES.	MORE SPEC	TETCA	LLY THE
ä	_A	CIIATIT	ES_QF_THE_CORE	ORATION_SHALL_	INCLUDE	BUT NOT BE	LIMITED	TO: PI	ROTECTING
ern	1 1	OWMONT	LES <u>AND</u> THE EN	VIROMENT_FROM	THE IMP	ACTS OF DES	TRUCTIVE	MINER	AT. DEVELOPMENT
Ó	Z C	neck this bo	x 🟲 📗 if the organiz	ration discontinued its	operations	or disposed of mo	re than 25% o	fits net a	essets.
જ	5 IVI	umber of vo	ting members of the g	overning body (Part VI	. line 1a)			3	9
es	4 N	umber of inc	dependent voting men	bers of the governing	body (Part	VI, line 1b)		4	9
Χ̈́	5 To	otal number	of individuals employe	ed in calendar year 201	0 (Part V,	line 2a)		<u> 5 </u>	17
Activities & Governance	72 To	otal upralata	of volunteers (estimated business for	e if necessary)	· · · · · · · · · · · · · · · · · · ·	• • • • • • • • • • • • • • • • • • • •		6	0
•	h	nai uilielale et uproleted	business revenue ir	om Part VIII, column ((J), line 12.			<u>7.</u> 8	<u> </u>
	D 140	st uniterated	business taxable inco	me from Form 990-T, I	ine 34	• • • • • • • • • • • • • • • • • • •			ļ
	8 Co	ontributions	and grants (Part VIII	line at 1 lax			Prior Y		Current Year
e n	9 Pr	naram servi	ice revenue (Part VIII)	line 1h)line 2g)		• • • • • • • • • • • • • • • • • • • •	1,39	2,832.	2,246,024.
Revenue	10 In	vestment in	come (Part VIII) colum	nn (A), lines 3, 4, and 7		• • • • • • • • • • • • • • • • • • • •		0.41	
Re	11 Ot	her revenue	Part VIII column (A), lines 5, 6d, 8c, 9c, 1	'a) Oo ood 11.			241.	2,574.
	12 To	ital revenue	- add lines 8 through	11 (must equal Part V	/III column	(A) line 12)	1 42	5,584.	59,187.
	13 Gr	ants and sir	milar amounts paid (P	art IX, column (A), line	c 1 2\	(A), IIIIe 12)		8,657.	
	14 Be	nefits naid	to or for members (Pe	art IX, column (A), line	s 1-0)	••••••	14	8,900.	140,065.
	15 Sa	darios otho	r componention and	art IX, Column (A), line	4)				
S S	10 D		compensation, emp	oyee benefits (Part IX,	column (A)), lines 5-10)	89	5 <u>,485.</u>	986,888.
Š				X, column (A), line 11e					
Expenses				column (D), line 25)					
"	17 Ot	her expense	es (Part IX, column (A), lines 11a-11d, 11f-24	lf)		41	9,631.	669,196.
j	18 To	tal expense	s. Add lines 13-17 (mi	ust equal Part IX, colur	nn (A). line	25)		4,016.	1,796,149.
	19 Re	venue less	expenses. Subtract lir	ne 18 from line 12				5,359.	511,636.
5 8							Beginning of Cu		End of Year
lange	20 To	tal assets (F	Part X, line 16)					4,061.	899, 215.
Net Assets Fund Baland	21 To	tal liabilities		******************				$\frac{1}{4}$, 139.	77,657.
25 1	22 Ne	t assets or	fund halances Subtra	ct line 21 from line 20.					
Pa		Signature		et inte 21 from title 20.		(30:	9,922.	821,558.
							··	· · · · · · · · · · · · · · · · · · ·	
com	olete. Decla	ration of prepar	er (other than officer) is base	s return, including accompany d on all information of which p	ing schedules a reparer has an	and statements, and to the standard state of the state of	ne best of my know	ledge and b	elief, it is true, correct, and
								· · · · · ·	<u> </u>
Sig	n ·	Signature	of officer				Date		
Hei			•						
		Type or p	orint name and title.						
		Print/Tyne no	reparer's name	Preparer's signature		Data	Charle	;, ,	TIM .
Pai	Ч	1	D. AUKAMP, CPA	· rehards a altitature		Date	Check		PTIN 00734000
	parer	Firm's name		AMD & DUODEO DI		· · · · · · · · · · · · · · · · · · ·	self-employ		00734909
Use	Only		DOTT 17 (171, 7 (0))	AMP & RHODES, PL			Firm's EIN		1972062
	y	rimis addre	SS 4437 BROOKFIELD	CORPORATE DR #205 C	HANTILLY	VA 20151	Phone no.	(70	3) 631-8940
	H 100	-Carre D. 1		···					
viay	tne IRS	aiscuss this	return with the prepa	rer shown above? (see	instruction	ns),			. Yes No
зΑА	\ For Pa	perwork Re	duction Act Notice, so	ee the separate instruc	tions	TEE A	01131 10/01/10		Farm 000 (0010)

Forn	n 990 (2010)	EARTHWORKS	52-1557765	F	age 2
Pai		ement of Program Service Accomplishments			
		k if Schedule O contains a response to any question in this Part III			. X
1	SEE SCHE	ibe the organization's mission: DULE 0			
2		nization undertake any significant program services during the year which were not listed on 990-EZ?		X	No
	If 'Yes,' desc	cribe these new services on Schedule O.	_	_	
3		nization cease conducting, or make significant changes in how it conducts, any program serv	vices? Yes	X	No
4		cribe these changes on Schedule O.		501	
	and 501(c)(4	exempt purpose achievements for each of the organization's three largest program services organizations and section 4947(a)(1) trusts are required to report the amount of grants and not revenue, if any, for each program service reported.	by expenses. Section allocations to others	n 501(i s, the t	c)(3) otal
4 8	OIL AND TO PROTE DEVELOPM PRACTICE TO CHANG	GAS ACCOUNTABILITY PROJECT - WORKING WITH TRIBAL, URBAN AS ECT THEIR HOMES AND THE ENVIRONMENT FROM THE IMPACTS OF OT MENT. THIS INCLUDES ADVOCATING FOR STRONGER REFORMS AND B	L AND GAS ETTER INDUSTRY NIZING IN OUR . OGAP COORD	Y EFF(DRT
4b	US POLICIES RESOURCE ANALYSIS AND COMM COVERAGE	Y REFORM PROGRAMS - PROGRAMS TO RESEARCH, DEVELOP, PUBLIC TO PROTECT COMMUNITIES AND THE ENVIRONMENT IN REGARD TO M	MINING AND NAT LYSIS, POLICY FAILERS, INSUF AWARENESS AND	TURAI RERS,	
			·		
A -	(Codo:	720 220 · L · · · · · · · ·	<u>.</u>		
4c	PUBLICIZ TO MININ PUBLICAT EDUCATIO MEDIA AW ELECTED CONDUCTI	(Revenues \$ 220,238. including grants of \$) (Revenues \$ 220,238. including \$ 220,238. including \$ 220,238. including \$ 220,238. including \$ 220,238. includes \$ 220,2	EARCH, DEVELOR RONMENT IN RE ESEARCH, OUTREACH AND MUNITIES, PROM DING REGULATOR ED COMMUNITIES HNICAL AND ECO	GARL OTIN S AN	IG ID
4 d	Other program	m services. (Describe in Schedule O.) SEE SCHEDULE O			
		\$ 119,493. including grants of \$) (Revenue \$	·)	
		m service expenses ► 1,556,546.			

Form 990 (2010) EARTHWORKS Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions)	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3	Х	
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II	4	Х	
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		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where 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		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III.	8		х
9	Did the organization report an amount in Part X, line 21; 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 term, permanent, or quasi-endowments? It '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.			
	a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI.	11 a	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? <i>If 'Yes,' complete Schedule D, Part VII</i>	11 b		Х
	c Did the organization report an amount for investments— program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII.	11 c		Х
	d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX	11 d		Х
	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e		X
	f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X	11 f		Х
	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII.	12a	Х	
	b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional</i>	12b		X
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		X
	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		<u>X</u>
	b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? <i>If 'Yes,' complete Schedule F, Parts I and IV</i>	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If 'Yes,' complete Schedule F, Parts II and IV</i>	15		Х
16	individuals located outside the United States? 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 (see instructions)	17		Х
18	lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18		Х
	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
20	a Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H	20		X
	b If 'Yes' to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20 b		

Form 990 (2010) EARTHWORKS

Part IV Checklist of Required Schedules (continued)

		Τ		
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21	х	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III.	22		Х
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J.</i>	23		X
24	a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No,'go to line 25	24a		Х
1	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	c 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		
25	a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		Х
	b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I	25b		Х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If 'Yes,' complete Schedule L, Part III.	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		X
	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		Х
•	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		<u>X</u>
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If 'Yes,' complete Schedule M</i>	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1	34		Х
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		Χ
•	a 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			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2.	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If 'Yes,' complete Schedule R, Part VI</i>	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O.	38	Х	
3AA		Form	990 C	2010)

	.557765	Pag	e 5
Part V Statements Regarding Other IRS Filings and Tax Compliance		1	,
Check if Schedule O contains a response to any question in this Part V	<u></u>	T	
	HARMAN NO.	Yes N	lo
1 a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.	18		
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	0,		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable ga (gambling) winnings to prize winners?	ming <u>1c</u>	2	ζ
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	<u> 17</u>		7)
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)			
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?	За	7	<u> </u>
b If 'Yes' has it filed a Form 990-T for this year? <i>If 'No,' provide an explanation in Schedule Q</i>	3b		
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority or financial account in a foreign country (such as a bank account, securities account, or other financial account)?	ver, a 4a	2	ζ.
b If 'Yes,' enter the name of the foreign country: ▶			
See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	2	
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	Σ	ζ
c 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 organizat solicit any contributions that were not tax deductible?	tion 6a)	ζ
b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts not tax deductible?	· · · · · · · · · · · · · · · · · · ·		
7 Organizations that may receive deductible contributions under section 170(c).	l l		14. E
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		ζ
b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?			
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	to file		
Form 8282?	7c		ζ
d If 'Yes,' indicate the number of Forms 8282 filed during the year			
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	2	<u>`</u>

Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)			
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b If 'Yes' has it filed a Form 990-T for this year? <i>If 'No,' provide an explanation in Schedule Q</i>	3b		
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	L	Х
b If 'Yes,' enter the name of the foreign country: ►			
See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5с		
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a		Х
b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7 Organizations that may receive deductible contributions under section 170(c).			
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		х
b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7b		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		Х
d If 'Yes,' indicate the number of Forms 8282 filed during the year			
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 g		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9 Sponsoring organizations maintaining donor advised funds.		and the second	
a Did the organization make any taxable distributions under section 4966?	9a	thesespenic controls	
b Did the organization make a distribution to a donor, donor advisor, or related person?	9b		<u> </u>
10 Section 501(c)(7) organizations. Enter:	A		
a Initiation fees and capital contributions included on Part VIII, line 12			
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11 Section 501(c)(12) organizations. Enter:		1-100	
a Gross income from members or shareholders			
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
12 a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year			
13 Section 501(c)(29) qualified nonprofit health insurance issuers.			1.000
a Is the organization licensed to issue qualified health plans in more than one state?	13a		
Note. See the instructions for additional information the organization must report on Schedule O.			
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
c Enter the amount of reserves on hand			
14a Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b If 'Yes,' has it filed a Form 720 to report these payments? <i>If 'No,' provide an explanation in Schedule Q.</i>	14b		
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Form 990 (2010) EARTHWORKS 52-1557765 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 to any question in this Part VI..... Section A. Governing Body and Management No Yes **1a** Enter the number of voting members of the governing body at the end of the tax year..... **b** Enter the number of voting members included in line 1a, above, who are independent 1h 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?... Х 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?...... 3 Did the organization make any significant changes to its governing documents 4 X since the prior Form 990 was filed?.... Did the organization become aware during the year of a significant diversion of the organization's assets? Χ Х Does the organization have members or stockholders?.... 6 7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?.... **b** Are any decisions of the governing body subject to approval by members, stockholders, or other persons?...... Х Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body?..... Х 8a **b** Each committee with authority to act on behalf of the governing body?... Χ 8b Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O..... Х Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No Х **10a** Does the organization have local chapters, branches, or affiliates?..... 10 a b If 'Yes,' does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?..... 10b 11a Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?.... 11 a Х b Describe in Schedule O the process, if any, used by the organization to review this Form 990. SEE SCHEDULE O 12a Does the organization have a written conflict of interest policy? If 'No,' go to line 13...... Х 12a b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise 12b Χ c Does the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Х 120 X 13 Does the organization have a written whistleblower policy?..... 13 14 Does the organization have a written document retention and destruction policy?..... Х Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official....... 15 a X X **b** Other officers of key employees of the organization..... 15 b If 'Yes' to line 15a or 15b, describe the process in Schedule O. (See instructions.) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a Х 16 a taxable entity during the year?..... b If 'Yes,' has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?.. 16b Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ► NONE Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply. X Another's website Own website |X| Upon request

- Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. SEÉ SCHEDUĽE O
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization:
- ►EARTHWORKS 1612 K STREET, NW SUITE 808 WASHINGTON DC 20006 202-887-1872

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

Check if Schedule O contains a response to any question in this Part VII.

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

- 1 a 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)	(B)		, u 0,	(((D)	(E)	(F)
Name and title	Average	Posi	ition (check	all t	hat app		Reportable compensation from	Reportable compensation from	Estimated amount of other
	hours per week (describe hours for related organiza- tions in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount or other compensation from the organization and related organizations
(1) JENNIFER KRILL		<u> </u>				Δ.				
BOARD MEMBER	40	Х		х				79,508.	0.	0.
(2) KARIN SHELDON			-	**				737000.	Ü.	<u> </u>
BOARD MEMBER	1	X						0.	0.	0.
(3) GLENN MILLER		<u> </u>								
VICE CHAIRMAN	1.5	Х		Х				0.	0.	0.
(4) KERRY ANDERSON										
CO-CHAIRMAN	· 3	X		X				0.	0.	0.
(5) MICHAEL CONROY										
CO-CHAIRMAN	3	X		Х				0.	0.	0.
(6) GLORIA FLORA								_	_	_
BOARD MEMBER	1	X						0.	0.	0.
_(7)_JAY_HALFON		<u>,,</u>		٠,,				_		•
SEC/TREASURER	2	X		Х				0.	0.	0.
(8) BILL MCNEILL BOARD MEMBER	1	Х						0.	0.	0.
(9) WILMA SUBRA BOARD MEMBER	1	х						0.	0.	0.
(10)										
(11)										
(12)										
(13)										
(14)										
(15)										
(16)										
(17)										
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Part VII Section A. Officers, Directors, Trus	tees, P	(ey	Em	plo	ye	es,	<u>anç</u>	d Highest Con	pensated Emp	loyees (cont)
(A)	(B)	, i			(D)	(E)	(F)			
Name and title	Average hours per week (describe hours for			Officer			Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization
	per week (describe hours for related organi- zations in Sch O)	al truste	onal trustee		employee	Highest compensate employee				and related organizations
	Scho)	O	tee			sated				
(18)										
(19)										·
(20)								·		
(21)										
							_			
(23)									· · · · · · · · · · · · · · · · · · ·	
(24)										
(25)										
(26)								<u>.</u>		
(27)										
(28)										
(29)										
1 b Sub-total							>	79,508.	0.	0.
c Total from continuation sheets to Part VII, Section d Total (add lines 1b and 1c)							▶	0. 79,508.	<u> </u>	0. 0.
Total number of individuals (including but not limite from the organization 0										
										Yes No
3 Did the organization list any former officer, director on line 1a? If 'Yes,' complete Schedule J for such is	or trust <i>ndividua</i>	ee, I I	key	emp	loye	e, o	r hi	ghest compensat	ed employee	. 3 X
4 For any individual listed on line 1a, is the sum of re the organization and related organizations greater t such individual	han \$15	0,00	0? .	lf 'Y	es' a	comp	olete	e Schedule J for		4 X
5 Did any person listed on line 1a receive or accrue of for services rendered to the organization? <i>If 'Yes,'</i> or	ompens	atio	n fro	om a	anv i	unrel	late	d organization or	individual	
Section B. Independent Contractors										
 Complete this table for your five highest compensation from the organization. 	ed inde	pend	dent	con	itrac	tors	tha	t received more t	han \$100,000 of	
(A) Name and business addres	s							Description ((C) Compensation
							\exists			
2 Total number of independent contractors (including \$100,000 in compensation from the organization >		limi	ted	to th	nose	liste	ed a	bove) who receiv	ed more than	

Pa	irt V	III Statement of Revenue	Nevertaggara			1	T
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
S S	1 8	Federated campaigns	1 a				
NAN L	ŧ	Membership dues	1 b	建设度等级的 企业	ALC: ALC: ALC: ALC: ALC: ALC: ALC: ALC:		
P. S.		Fundraising events	1 c				
E A	(1 d			1000	
S,G	۱ ,		1 e			emeana 2 2 2 2 2 2	
S S	١,	· · · · · · · · · · · · · · · · · · ·					
BE	'	All other contributions, gifts, grants, and similar amounts not included above	lf 2,246,024.		Harry Asia Cal	Service Control of the Control of th	
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	١,	Noncash contributions included in Ins 1a-1f:		Control of the second		10 (11) The state of the state	
§₹	;	Total. Add lines 1a-1f		2,246,024.			
	 	Total Add lates 14 11	Business Code	2,240,024.		Company of the Compan	
PROGRAM SERVICE REVENUE	2:			66.6UP		2000 C	
Ě	- :		-				
CEI)					
Z.							
SE	`	!	_			<u> </u>	
RA	•	,	-				
ဝို့		All other program service revenue.			E in the second	**Township are Arabinations	T I The Company of th
4	2	Total. Add lines 2a-2f					A Part of the Part
	3		nds, interest and	0 574			
	_	other similar amounts)					2,574.
	4	Income from investment of tax-exer	•	· · · · · · · · · · · · · · · · · · ·			
;	5	Royalties		The state of the s			
	_	(i) Real	(ii) Personal		Andreas Andreas (1997)		The State of the S
	l	Gross Rents					
	ı	Less: rental expenses.					
	ı	Rental income or (loss)		MARKET STATE OF THE STATE OF			1,47
	d	Net rental income or (loss)	<u></u>				
	7 a	Gross amount from sales of (i) Securitie	s (ii) Other				100 mm (170 mm)
		assets other than inventory					
	h	Less: cost or other basis		- E2442		THE PART OF STREET	
	~	and sales expenses			The state of the state of the		
	c	: Gain or (loss)					
		Net gain or (loss)				N. S.	
ш		Gross income from fundraising ever				Paris Salata	
EN		(not including. \$	_			Part of the Part of the	
Æ		of contributions reported on line 1c)	i i		577	April 4 The Life	
OTHER REVEN		See Part IV, line 18					22 July 25 12
Ħ		Less: direct expenses			2. 据4的 13. 金宝。		
_	С	Net income or (loss) from fundraising	g events				
	9 a	Gross income from gaming activities See Part IV, line 19	5. . a				
	b	Less: direct expenses	. b		and the state of t		
	С	Net income or (loss) from gaming a	ctivities	and after the part of the contract of the cont	Annual Control of Cont		
		Gross sales of inventory, less return	,				
	IVa	and allowances	. a	The Control of the Co			
	b	Less: cost of goods sold					Jane - Inches
	!	Net income or (loss) from sales of in	····				
		Miscellaneous Revenue	Business Code	allande de la	777 (6.20.20)		
	11 a	MISCELLANEOUS		59,187.			59,187.
	h				- 4		00,10,.
	,		1				
	ل اد	All other revenue			<u> </u>		
		Total. Add lines 11a-11d		E0 107			
				59,187.			C1 7C1
	12	Total revenue. See instructions		2,307,785.	0.	0.	61,761.

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) but are not required to complete columns (B), (C), and (D).

	(A) (B) (C) (D)								
Do 6b,	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	Fundraising expenses				
1	and organizations in the U.S. See Part IV, line 21	140,065.	140,065.						
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22								
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16		·	報告 (1995年) (
4									
5	Compensation of current officers, directors, trustees, and key employees	79,508.	58,041.	16,697.	4,770.				
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.,	0.	0.				
7	Other salaries and wages	696,697.	594,048.	20,915.	81,734.				
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)		20,115.	1,552.	2,336.				
9	Other employee benefits	127,959.	112,127.	5,093.	10,739.				
10	Payroll taxes	58,721.	49,084.	4,485.	5,152.				
11	Fees for services (non-employees):								
č	Management								
t	Legal								
	Accounting								
	Lobbying								
	Professional fundraising services. See Part IV, line 17								
	Investment management fees	156,047.	120 176	10 151	4 720				
12	g Other Advertising and promotion	49,285.	139,176. 46,513.	12,151. 410.	4,720. 2,362.				
13	Office expenses	12,971.	10,861.	1,245.	865.				
14	Information technology	12,3/1.	10,001.	1,243.	003.				
15	Royalties.								
16	Occupancy	73,184.	64,964.	3,040.	5,180.				
17	Travel	122,863.	116,648.	327.	5,888.				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				<u> </u>				
	Conferences, conventions, and meetings Interest	80,125.	69,245.	296.	10,584.				
21	Payments to affiliates								
22	Depreciation, depletion, and amortization	6,450.	5,443.	504.	503.				
23	Insurance	3,543.	2,724.	806.	13.				
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24f. If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O.).		STATE OF STA						
	PRINTING AND PUBLICATIONS	47,066.	30,223.	585.	16,258.				
	TELECOMMUNICATIONS	44,304.	38,489.	1,583.	4,232.				
	LIST RENTAL	30,000.	30,000.	1,303.	4,232.				
	POSTAGE AND SHIPPING	15,906.	6,270.	415.	9,221.				
	EQUIPMENT RENTAL/MAINT	6,958.	5,539.	729.	690.				
	All other expenses	20,494.	16,971.	1,713.	1,810.				
	Total functional expenses. Add lines 1 through 24f	1,796,149.	1,556,546.	72,546.	167,057.				
	Joint costs. Check here ☐ if following SOP 98-2 (ASC 958-720). Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.								
BAA					Form 990 (2010)				

Pa	rt X	Balance Sheet					
					(A) Beginning of year		(B) End of year
	1	Cash — non-interest-bearing				1	
	2	Savings and temporary cash investments			337,107.	2	761,680.
	3	Pledges and grants receivable, net				3	108,794.
	4	Accounts receivable, net		7		4	
	5	Receivables from current and former officers, director and highest compensated employees. Complete Part	rs, trus II of S	stees, key employees,		5	
٨	6	Receivables from other disqualified persons (as defin persons described in section 4958(c)(3)(B), and contraponsoring organizations of section 501(c)(9) volunta organizations (see instructions).	der section 4958(f)(1)), g employers and bloyees' beneficiary		6		
Š	7	Notes and loans receivable, net			7		
ASSETS	8	Inventories for sale or use				8	
Ś	9	Prepaid expenses and deferred charges	<i>.</i>		14,527.	9	22,545.
	10 a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a	80,065.		i i	
	b	Less: accumulated depreciation	10 b	73,869.	6,547.	10 c	6,196.
	11	Investments — publicly traded securities				11	
	12	Investments - other securities. See Part IV, line 11.			12		
	13	Investments - program-related. See Part IV, line 11.			13		
	14	Intangible assets			14		
	15	Other assets. See Part IV, line 11		F		15	
	16	Total assets. Add lines 1 through 15 (must equal line	34)	<u></u>	364,061.	16	899,215.
	17	Accounts payable and accrued expenses				17	77,657.
	18	Grants payable		18			
	19	Deferred revenue				19	
Ļ	20	Tax-exempt bond liabilities		[20	
B	21	Escrow or custodial account liability. Complete Part	IV of S	chedule D		21	
L T I	22	Payables to current and former officers, directors, tru highest compensated employees, and disqualified pe of Schedule L	stees, rsons.	key employees, Complete Part II	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	22	
E S	23	Secured mortgages and notes payable to unrelated the	nird pa	rties		23	
	24	Unsecured notes and loans payable to unrelated third	l partie	es		24	
	25	Other liabilities. Complete Part X of Schedule D				25	
	26	Total liabilities. Add lines 17 through 25			54,139.	26	77,657.
N E		Organizations that follow SFAS 117, check here ▶					
Ť		27 through 29 and lines 33 and 34.					
Ą	27	Unrestricted net assets			-2,578.	27	-40,782.
ASSETS	28	Temporarily restricted net assets			312,500.	28	862,340.
	29	Permanently restricted net assets				29	
O R F.		Organizations that do not follow SFAS 117, check he lines 30 through 34.	ere 🟲	and complete			
FUZD	30	Capital stock or trust principal, or current funds				30	
	31	Paid-in or capital surplus, or land, building, or equipm			· ·	31	
Ļ	32	Retained earnings, endowment, accumulated income		f		32	
野女 しくえいほの	33	Total net assets or fund balances		T	309,922.	33	821,558.
Ē	34	Total liabilities and net assets/fund balances		1	364,061.	34	899,215.
<u> </u>					· · · · · · · · · · · · · · · · · · ·		Form 990 (2010)

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Part XI Reconciliation of Net Assets	-		,	
Check if Schedule O contains a response to any question in this Part XI				
			·····	
1 Total revenue (must equal Part VIII, column (A), line 12)	1	2,30	7,785.	
2 Total expenses (must equal Part IX, column (A), line 25)		1,79	6,149.	
3 Revenue less expenses. Subtract line 2 from line 1		511,63		
4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		9,922.	
5 Other changes in net assets or fund balances (explain in Schedule O)	5		0.	
6 Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B)).	6	82	1,558.	
Part XII Financial Statements and Reporting				
Check if Schedule O contains a response to any question in this Part XII				
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 O.		-	Yes No	
2a Were the organization's financial statements compiled or reviewed by an independent accountant?		. 2a	X	
b Were the organization's financial statements audited by an independent accountant?			X	
c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversi review, or compilation of its financial statements and selection of an independent accountant?	ght of the audit,	. 2c	х	
If the organization changed either its oversight process or selection process during the tax year, expla in Schedule O.	in			
d If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year we separate basis, consolidated basis, or both:	ere issued on a			
X Separate basis Consolidated basis Both consolidated and separate basis				
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth Audit Act and OMB Circular A-133?	in the Single	. 3a	x	

b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

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3b

Form 990 (2010)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Total

Public Charity Status and Public Support

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

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number Name of the organization EARTHWORKS 52-1557765 Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) 1 A church, convention of churches or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 5 170(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). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described 7 X in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 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 9 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.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the purposes of one or 11 more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h. Type III - Other Type II Type III — Functionally integrated By checking this box. I certify that the organization is not controlled directly or indirectly by one or more disgualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). If the organization received a written determination from the IRS that is a Type I, Type II or Type III supporting organization, check this box... Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? g No Yes A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) (i) 11 g (i) below, the governing body of the supported organization?..... A family member of a person described in (i) above?..... 11 g (ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above?..... 11 g (iii) h Provide the following information about the supported organization(s) (v) Did you notify the organization in column (i) of your support? (i) Name of supported organization (iii) Type of organization (described on lines 1-9 above or IRC section (see instructions)) (iv) Is the organization in column (i) listed in (ii) EIN (vi) Is the (vii) Amount of support organization in column (i) organized in the U.S.? your governing document? Yes No Yes No Yes No (A) (B) (C) (D) (E)

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

Schedule A (Form 990 or 990-EZ) 2010

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.)

Se	ction A. Public Support							
beg	endar year (or fiscal year inning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total	
1	Gifts, grants, contributions, and membership fees received. (Do not include 'unusual grants.')	1,885,031.	1,785,477.	1,644,846.	1,392,832.	2,246,024.	8,954,210.	
	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf						0.	
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0.	
4 5	Total. Add lines 1 through 3 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)	1,885,031.	1,785,477.	1,644,846.	1,392,832.	2,246,024.	8,954,210.	
	Public support. Subtract line 5 from line 4						8,954,210.	
Sec	tion B. Total Support							
Cale beg	endar year (or fiscal year nning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total	
7	Amounts from line 4	1,885,031.	1,785,477.	1,644,846.	1,392,832.	2,246,024.	8,954,210.	
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources.	8,885.	24,448.	515.	241.	2,574.	36,663.	
9	Net income from unrelated business activities, whether or not the business is regularly carried on						0.	
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						0.	
11	Total support. Add lines 7 through 10						8,990,873.	
12	Gross receipts from related activ	ities, etc (see ins	tructions)			12	0.	
	First five years. If the Form 990 organization, check this box and	stop nere	<u></u>	d, third, fourth, o	r fifth tax year as	a section 501(c)(3)	
	tion C. Computation of Pub	olic Support P	ercentage					
	Public support percentage for 20 Public support percentage from 2						99.6% 99.5%	
16 a	33-1/3% support test – 2010. If t and stop here. The organization	he organization d qualifies as a pub	id not check the b	oox on line 13, an ganization	d the line 14 is 33	3-1/3% or more, c		
k	b 33-1/3% support test — 2009. If the organization did not check a box on line 13 or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization.							
17 a	10%-facts-and-circumstances ter or more, and if the organization r the organization meets the 'facts	neets the tacts a	nd-circumstances	'test chack this	hav and ctan hav	a Evalain in Dart	IV/ how	
	or more, and if the organization rorganization meets the 'facts-and	neets the 'facts-a I-circumstances'	nd-circumstances test. The organiza	test, check this ation qualifies as	box and stop her a publicly support	e. Explain in Part ted organization	IV how the ►	
	Private foundation. If the organiz	zation did not che	ck a box on line 1	3, 16a, 16b, 17a,				
3AA					Sch	nedule A (Form 99	0 or 990-FZ) 2010	

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

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

							
Sec	tion A. Public Support	·	,		Ţ		
Caler 1	dar year (or fiscal yr beginning in) Gifts, grants, contributions and membership fees received. (Do not include any 'unusual grants.')	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513.						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons						
ł	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.).						·
	tion B. Total Support						
	dar year (or fiscal yr beginning in)►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
10 a	Amounts from line 6						
11	Add lines 10a and 10b Net income from unrelated business activities not included in line 10b,						
	whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
	Total support. (Add Ins 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 organization, check this box and	is for the organiz	ation's first, secor	nd, third, fourth, o	r fifth tax year as	a section 501(c)(3)	▶□
	tion C. Computation of Pul						
15	Public support percentage for 20	110 (line 8, colum	n (f) divided by lir	ne 13, column (f)).			િ
	Public support percentage from 2						ૄ
	tion D. Computation of Inv			~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~			
	Investment income percentage for	•					%
	Investment income percentage f						8 d line 17
	33-1/3% support tests – 2010. If is not more than 33-1/3%, check	this box and sto	p here. The organ	nization qualifies a	s a publicly supp	orted organization.	
) 33-1/3% SUDDOM TESTS — 2009: 11	the organization	did not check a h	ox on line 14 or li	ine 19a. and line	16 is more than 33-	1/3%, and
	33-1/3% support tests – 2009. If line 18 is not more than 33-1/3%	, check this box a	and stop here. Th	e organization qua	alifies as a public	ly supported organi	1/3%, and zation ►

Scriedule F	4 (Form 990 or 990-	-EZ) 2010 EART	HWOKKS			52-155//	65 Page
Part IV	Supplemental Part II, line 17: (See instructio	Information. Co a or 17b; and Pa ns).	emplete this pa art III, line 12. <i>i</i>	rt to provide th Also complete	ne explanations this part for any	required by Pa / additional info	rt II, line 10; ormation.
			· ·				
					·		
							
							·
							
			· — — — — — —				
	· 						
			·				

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047

2010

Name of the organization		Employer identification number
EARTHWORKS		52-1557765
Organization type (check one):		
Filers of:	Section:	
Form 990 or 990-EZ	\overline{X} 501(c)($\underline{3}$) (enter number) organizati	
	4947(a)(1) nonexempt charitable trust no 527 political organization	of treated as a private foundation
Form 990-PF	501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust tre	eated as a private foundation
	501(c)(3) taxable private foundation	
Check if your organization is cover Note. Only a section 501(c)(7), (8)	red by the General Rule or a Special Rule . , or (10) organization can check boxes for both the Genera	al Rule and a Special Rule. See instructions.
General Rule		
For an organization filing Form contributor. (Complete Parts I	990, 990-EZ, or 990-PF that received, during the year, \$5 and II.)	,000 or more (in money or property) from any one
Special Rules		
509(a)(1) and $1/0(b)(1)(A)(vi)$.	ration filing Form 990 or 990-EZ, that met the 33-1/3% sup and received from any one contributor, during the year, a rm 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Comp	contribution of the greater of (1) \$5,000 or
aggregate contributions of more	(10) organization filing Form 990 or 990-EZ, that received e than \$1,000 for use <i>exclusively</i> for religious, charitable, sidren or animals. Complete Parts I, II, and III.	from any one contributor, during the year, scientific, literary, or educational purposes, or
contributions for use <i>exclusivel</i> If this box is checked, enter he	(10) organization filing Form 990 or 990-EZ, that received by for religious, charitable, etc, purposes, but these contribute the total contributions that were received during the year of the parts unless the General Rule applies to this organi.	utions did not aggregate to more than \$1,000.
religious, charitable, etc, contri	butions of \$5,000 or more during the year	> \$
Caution: An organization that is no 990-PF) but it must answer 'No' or 990-PF, to certify that it does not no	ot covered by the General Rule and/or the Special Rules don Part IV, line 2 of their Form 990, or check the box on line meet the filing requirements of Schedule B (Form 990, 990).	pes not file Schedule B (Form 990, 990-EZ, or H of its Form 990-EZ, or on line 2 of its Form EZ, or 990-PF).
BAA For Paperwork Reduction A 990EZ, or 990-PF.	ct Notice, see the Instructions for Form 990,	Schedule B (Form 990, 990-EZ, or 990-PF) (2010)

Page 1 of 2
Employer identification number

of Part I

52-1557765 EARTHWORKS

Part I	Contributors (see instructions.)		
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	WILBURFORCE FOUNDATION 3601 FREMONT AVE N # 304 SEATTLE, WA 98103	\$ 50,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
2	TRUE NORTH FOUNDATION 664 A FREEMEN LANE #332 GRASS VALLEY, CA 94129	\$ 190,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
3	GOLDMAN FUND 211 LINCOLN BLVD SAN FRANCISCO, CA 94129	\$ 225,000.	Person X Payroli Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
_4	OVERBROOK FOUNDATION 122 E 42ND STREET NEW YORK, NY 10017	\$ 50,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
5	GORDON & BETTY MOORE FOUNDATION 1661 PAGE MILL RD PALTO ALTO, CA 94304	\$ 567,246.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
6	TIDES FOUNDATION THE PRSIDIO, PO BOX 29903 SAN FRANCISCO, CA 94129	\$ 65,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)

Page 2

of Part I

EARTHWORKS

of 2 Employer identification number

52-1557765

Part I	Contributors (see instructions.)		
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
7	EDUCATIONAL FOUNDATION OF AMERICA 35 CHURCH LANE WESTPORT, CT 06800	\$ <u>135,000.</u>	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
8	PARK FOUNDATION PO BOX 550 ITHACA, NY 14851	\$85,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(C) Aggregate contributions	(d) Type of contribution
9	DAVID & LUCILE PACKARD FOUNDATION 300 SECOND STREET LOS ALTOS, CA 94022	\$ 240,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		Aggregate	, , ,
Number	Name, address, and ZIP + 4 NEW YORK COMMUNITY TRUST 909 THIRD AVE	Aggregate contributions -	Person X Payroll Noncash (Complete Part II if there
10 (a)	Name, address, and ZIP + 4 NEW YORK COMMUNITY TRUST 909 THIRD AVE NEW YORK, NY 10022 (b)	\$75,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
10 (a) Number	Name, address, and ZIP + 4 NEW YORK COMMUNITY TRUST 909 THIRD AVE NEW YORK, NY 10022 (b) Name, address, and ZIP + 4 WILLIAM PENN FOUNDATION TWO LOGAN SQ 100 N. 18TH ST	Aggregate contributions \$75,000. (c) Aggregate contributions	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.) (d) Type of contribution Person X Payroll Noncash (Complete Part II if there

Page 1

of Part II

Name of organization

EARTHWORKS

Employer identification number

of 1

52-1557765

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	N/A		
			:
ŀ		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
į		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
			
		\$	
(0)	<i>R</i> ₂	(5)	(4)
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
}			
			
		\$	
(0)	/6\	(a)	(4)
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
			
		\$	
(2)		/-	(-I)
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
}			
	·		
		\$	
BAA		 	

Name of organization

Employer identification number

EARTHWO	ORKS			52-155776	55	
Part III	<i>Exclusively</i> religious, charitable, e organizations aggregating more the	nan \$1,000 for the year.Co	mplete cols (a	a) through (e) and the follow) ing line entry.	
	For organizations completing Part III, enter contributions of \$1,000 or less for the year.	total of exclusively religious, ch (Enter this information once. S	naritable, etc <mark>,</mark> See instruction	ns.) ▶\$	N/A	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how g		
	N/A					
	Transferee's name, addres	(e) Transfer of gift ss, and ZIP + 4	Rela	itionship of transferor to tra	nsferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how g	ift is held	
*					•	
	Transferee's name, addres	Relationship of transferor to transferee				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how g	ift is held	
	Transferee's name, addres	(e) Transfer of gift s, and ZIP + 4	Rela	tionship of transferor to tra	nsferee	
(a) No. from Part I	(b) Purpose of gift			(d) Description of how g	ift is held	
	(e) Transfer of gift Transferee's name, address, and ZIP + 4			Relationship of transferor to transferee		

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

2010

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

► Complete if the organization is described below.

Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

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

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

• Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.

•	Section 527 organizations: Co	omplete Part I-A only.				
If th	e organization answered 'Yes	s,' to Form 990, Part IV, line 4, or Form 990	-EZ, Part VI, line 47 (Lobbying Activities), th	nen	
•	Section 501(c)(3) organization	ns that have filed Form 5768 (election under	er section 501(h)): Co	mplete Part II-A. Do no	t complete Part II-E	3.
•		ns that have NOT filed Form 5768 (election				
If th	e organization answered 'Yes	s,' to Form 990, Part IV, line 5 (Proxy Tax)	or Form 990-EZ. Part	V. line 35a (Proxy Tax)	. then	
•	Section 501(c)(4), (5), or (6)	organizations: Complete Part III.		·,	,	
	e of organization			Employer identific	ation number	
ΕA	RTHWORKS			52-155776	55	
		rganization is exempt under secti	on 501(c) or is a			
		organization's direct and indirect political			<u> </u>	
		·····			:	
Pa	rt I-B Complete if the o	rganization is exempt under secti	on 501(c)(3).			
1	Enter the amount of any exc	cise tax incurred by the organization under	section 4955		3	0
2		cise tax incurred by organization managers				0
3		a section 4955 tax, did it file Form 4720 for				No
4		·				No
	b If 'Yes,' describe in Part IV.				L. 103	,,,,
		rganization is exempt under secti	on 501(c) . excen	t section 501(c)(3)	_	
1		pended by the filing organization for section				
2	Enter the amount of the filin function activities	g organization's funds contributed to other	organizations for sec	ction 527 exempt		
3	Total exempt function exper	nditures. Add lines 1 and 2. Enter here and	on Form 1120-POL	·		-
4		e Form 1120-POL for this year?				
5						No
5	organization made payments amount of political contribution segregated fund or a political contribution.	and employer identification number (EIN) s. For each organization listed, enter the a ions received that were promptly and direc al action committee (PAC). If additional spa	of all section 527 pol mount paid from the tly delivered to a sep ace is needed, provid	itical organizations to w filing organization's fun- arate political organizat e information in Part IV	which the filing ds. Also enter the ion, such as a sepa '.	ırat
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter-0	(e) Amount of political contributions received	ા and
				If none, enter-0	promptly and directly delivered to a separa political organization	/ te
				*	political organization If none, enter -0-	J.
<u></u>						
(1)					_	
(2)						
(3)						
		·	77 //		:	
(4)						
(5)		r				

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

(6)

Schedule C (Form 990 or 990-EZ) 2010

52-1557765 Schedule C (Form 990 or 990-EZ) 2010 EARTHWORKS Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)). Check if the filing organization belongs to an affiliated group. Check if the filing organization checked box A and 'limited control' provisions apply. В (a) Filing organization's totals (b) Affiliated group totals **Limits on Lobbying Expenditures** (The term 'expenditures' means amounts paid or incurred.) 1,047 1a Total lobbying expenditures to influence public opinion (grass roots lobbying)...... **b** Total lobbying expenditures to influence a legislative body (direct lobbying)..... 16,259 17,306 0. c Total lobbying expenditures (add lines 1a and 1b)..... **d** Other exempt purpose expenditures..... 17,306 0. e Total exempt purpose expenditures (add lines 1c and 1d)....... f Lobbying nontaxable amount. Enter the amount from the following table in 3,461 both columns If the amount on line 1e, column (a) or (b) is: The lobbying nontaxable amount is: Not over \$500,000 20% of the amount on line 1e. Over \$500,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000. Over \$1,000,000 but not over \$1,500,000 \$175,000 plus 10% of the excess over \$1,000,000. Over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000. Over \$17,000,000 \$1,000,000. g Grassroots nontaxable amount (enter 25% of line 1f)..... 865. 0. 0. 182. **h** Subtract line 1g from line 1a. If zero or less, enter -0-.... i Subtract line 1f from line 1c. If zero or less, enter -0-..... 13,845. 0. j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?. Yes X No 4-Year Averaging Period Under Section 501(h)
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f.) Lobbying Expenditures During 4-Year Averaging Period

		g Expenditures During	4- fear Averaging Peri	oa	
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) Total
2a Lobbying non-taxable amount	243,716.	5,293.	7,067.	3,461.	259,537.
b Lobbying ceiling amount (150% of line 2a, column (e))					389,306.
c Total lobbying expenditures	82,202.	26,467.	35,337.	17,306.	161,312.
d Grassroots nontaxable amount	60,929.	1,323.	1,767.	865.	64,884.
e Grassroots ceiling amount (150% of line 2d, column (e))					97,326.
f Grassroots lobbying expenditures	16,570.	9,062.	1,081.	1,047.	27,760.

BAA

Schedule C (Form 990 or 990-EZ) 2010

	(;	a)		(b)	
	Yes	No		Amo	unt	
			1			
During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			2 MPA 22			
a Volunteers?			100	2.5		
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					. 637	4.4
c Media advertisements?					ompad goodsenhoos.	23.00 March 200
d Mailings to members, legislators, or the public?						
e Publications, or published or broadcast statements?						-
f Grants to other organizations for lobbying purposes?				· · · · · · · · · · · · · · · · · · ·		
g Direct contact with legislators, their staffs, government officials, or a legislative body?						
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?						
i Other activities? If 'Yes,' describe in Part IV				••••	·	
i Total. Add lines 1c through 1i						
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?						
b If 'Yes,' enter the amount of any tax incurred under section 4912	All control of the second					
c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912						
					* 15 L L M	Control of
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?						F (44)
section 501(c)(6).	C)(S)	, Or				
		***************************************			Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?			L	1		<u> </u>
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?				2		
3 Did the organization agree to carryover lobbying and political expenditures from the prior year?	,	· · · · · ·		3		
Part III-B Complete if the organization is exempt under section 501(c)(4), section 501	(c)(5)	, or	_			
section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered 'No' OR if Pa is answered 'Yes.'	rt III- <i>i</i>	A, lin	ie 3			
1 Dues, assessments and similar amounts from members		1	···			
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).						
a Current year		2a				
b Carryover from last year		2b				
c Total		2 c				
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3				
- 195. 195. 195. 197. 197. 197. 197. 197. 197. 197. 197						
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political actions and political actions are applied to the carryover to the reasonable estimate of nondeductible lobbying and political actions.	ical I					
expenditure next year?		4				
5 Taxable amount of lobbying and political expenditures (see instructions)	<u></u>	5				
	ıd Part	: II-B,	line 1i.			
Complete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; ar Also, complete this part for any additional information.						

Schedule C (Form 990 or 990-EZ) 2010 EARTHWORKS	52-155//65	Page 4
Part IV Supplemental Information (continued)		······································
Fart 1 Supplemental information (continued)		
(4)、 1、 1、 1、 1、 1、 1、 1、 1、 1、 1、 1、 1、 1、		

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Supplemental Financial Statements

 Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11, or 12.
 ► Attach to Form 990.
 ► See separate instructions. OMB No. 1545-0047

2010

Open to Public Inspection

Employer identification number

EARTHWORKS 52-1557765 Part | Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered 'Yes' to Form 990, Part IV, line 6. (b) Funds and other accounts (a) Donor advised funds Total number at end of year..... 2 Aggregate contributions to (during year)..... 3 Aggregate grants from (during year)...... Aggregate value at end of year..... Did the organization inform all donors and donor advisors in writing that the assets held in donor advised No funds are the organization's property, subject to the organization's exclusive legal control?... Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?..... No Part II Conservation Easements. Complete if the organization answered 'Yes' to Form 990, Part IV 1 Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Preservation of a certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year a Total number of conservation easements..... 2a **b** Total acreage restricted by conservation easements 2b c Number of conservation easements on a certified historic structure included in (a)...... d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register..... Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year > Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?..... No Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year **►**\$ In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered 'Yes' to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items. **b** If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenues included in Form 990, Part VIII, line 1..... (ii) Assets included in Form 990, Part X..... If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

a Revenues included in Form 990, Part VIII, line 1.....

b Assets included in Form 990, Part X.....

▶\$

Part III Organizations Maintai	ning Collecti	ons of Art, H	istorica	al Treasures, or	Other Similar Ass	ets (contil	<u>านea) </u>
3 Using the organization's acquisiti items (check all that apply):	on, accession, a	nd other records	s, check a	any of the following	that are a significant u	se of its coll	ection
a Public exhibition		d L	oan or ex	change programs			
b Scholarly research		e	ther				
c Preservation for future gener							
4 Provide a description of the organ Part XIV.		·				se in	
5 During the year, did the organiza assets to be sold to raise funds r	ather than to be	maintained as p	art of the	e organization's col	lection?	Yes	No
Part IV Escrow and Custodia 9, or reported an amount	I Arrangemer unt on Form \S	ts. Complete 990, Part X, I	if orgaine 21.	ınization answei	red 'Yes' to Form 9	90, Part I\ 	/, line
1a Is the organization an agent, trus included on Form 990, Part X?	tee, custodian, d	or other intermed	diary for	contributions or oth	er assets not	Yes	No
b If 'Yes,' explain the arrangement	in Part XIV and	complete the fo	llowing ta	able:	<u> </u>	A	
. De signion halance						Amount	
c Beginning balance							
d Additions during the year						······	
e Distributions during the year							·····
f Ending balance							
2a Did the organization include an a		990, Part X, line	217			Yes	∐No
b If 'Yes,' explain the arrangement				rad Waal ta Fari	m 000 Dort IV line	10	
Part V Endowment Funds. Co				1			Anna baali
1 - Decimal and decimal haloure	(a) Current year	(b) Prio	r year	(c) Two years back	(d) Three years back	(e) Four ye	ars Dack
1 a Beginning of year balance						4.00	25 (10 HZ 11 10)
b Contributions	*****					March 1980	
c Net investment earnings, gains, and losses							
d Grants or scholarships							
e Other expenditures for facilities and programs							
f Administrative expenses							
g End of year balance							
2 Provide the estimated percentage	e of the year end	balance held a	s:				
a Board designated or quasi-endow	/ment ►	%					
b Permanent endowment ▶	%						
c Term endowment ►	[%]						
3a Are there endowment funds not i organization by:	n the possessior	of the organiza	ition that	are held and admir	nistered for the	Yes	No
(i) unrelated organizations						3a(i)	110
(ii). related organizations						3a(ii)	+
b If 'Yes' to 3a(ii), are the related of							
4 Describe in Part XIV the intended	-					30	
Part VI Land, Buildings, and I							
Description of investment		Cost or other ba		Cost or other	(c) Accumulated	(d) Book	value
Description of investment	(a)	(investment)	1313	basis (other)	depreciation	(a) Dook	value
1a Land		•					
b Buildings							
c Leasehold improvements							
d Equipment		80,06	5.		73,869.		6,196.
e Other							
Total. Add lines 1a through 1e (Column		Form 990, Part	X, colun	nn (B), line 10(c).).			6,196.
RΔΔ						ule D (Form	990) 2010

Part VII Investments-Other Securities. See Fo	orm 990, Part X, Ii	ne 12. N/A	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valua Cost or end-of-year ma	tion: rket value
(1) Financial derivatives			
(2) Closely-held equity interests	-		
(3) Other			
(A)			
(B)			
<u>(C)</u>			
(D)	·		
(E)			
(F)			H
(G) (H)	·		
(1)			
Total. (Column (b) must equal Form 990 Part X, column (B) line 12.)			The Control of Control of Control
Part VIII Investments—Program Related. (See F	orm 990. Part X.	line 13) N/A	
(a) Description of investment type	(b) Book value	(c) Method of valua	tion:
		Cost or end-of-year ma	ket value
(1)			
(2)			
(3)			
(4) (5)			
(3)	· · · · · · · · · · · · · · · · · · ·		
(6)			
<u>(7)</u> (8)			
(9)			
(10)			
• • • • • • • • • • • • • • • • • • • •	ine 15) N/A		
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.). Part IX Other Assets. (See Form 990, Part X,	ine 15) N/A		(b) Book value
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.). Part IX Other Assets. (See Form 990, Part X, (a) Des			(b) Book value
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.). Part IX Other Assets. (See Form 990, Part X, (a) Des (1)			(b) Book value
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets. (See Form 990, Part X, (a) Des (1) (2) (3)			(b) Book value
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.). Part IX Other Assets. (See Form 990, Part X, (a) Des (1) (2) (3) (4)			(b) Book value
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.). ▶ Part IX Other Assets. (See Form 990, Part X,			(b) Book value
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.). Part IX Other Assets. (See Form 990, Part X, (a) Des (1) (2) (3) (4) (5) (6)			(b) Book value
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.). Part IX Other Assets. (See Form 990, Part X, (a) Des (1) (2) (3) (4) (5) (6) (7)			(b) Book value
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Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets. (See Form 990, Part X, (a) Des (1) (2) (3) (4) (5) (6) (7) (8) (9) (10)	cription		(b) Book value
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) ▶ Part IX Other Assets. (See Form 990, Part X, (a) Des (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (B)	l, line 15)		(b) Book value
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.). Part IX Other Assets. (See Form 990, Part X, (a) Des (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (B) Part X Other Liabilities. (See Form 990, Part)	ription		(b) Book value
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.). Part IX Other Assets. (See Form 990, Part X, (a) Des (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (B) Part X Other Liabilities. (See Form 990, Part X, column (B) Description of liability	l, line 15)		(b) Book value
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.). Part IX Other Assets. (See Form 990, Part X, (a) Des (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column(B) Part X Other Liabilities. (See Form 990, Part X, column(B) (a) Description of liability (1) Federal income taxes	ription		(b) Book value
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Total. (Column (b) must equal Form 990, Part X, column (B) line 13.). Part IX Other Assets. (See Form 990, Part X, (a) Des (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column(B) Part X Other Liabilities. (See Form 990, Part X (a) Description of liability (1) Federal income taxes (2) (3) (4) (5) (6) (7) (8)	ription		(b) Book value
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets. (See Form 990, Part X, (a) Des (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column(B) Part X Other Liabilities. (See Form 990, Part X) (a) Description of liability (1) Federal income taxes (2) (3) (4) (5) (6) (7) (8) (9)	ription		(b) Book value

2. FIN 48 (ASC 740) Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740).

Pai	t XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements	
1	Total revenue (Form 990, Part VIII,column (A), line 12)	2,307,785.
2	Total expenses (Form 990, Part IX, column (A), line 25)	1,796,149.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	511,636.
4	Net unrealized gains (losses) on investments	
5	Donated services and use of facilities	
6	Investment expenses	
7	Prior period adjustments	
8	Other (Describe in Part XIV)	
9	Total adjustments (net). Add lines 4 through 8	
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	511,636.
Pai	TXII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return	
1	Total revenue, gains, and other support per audited financial statements	2,307,785.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	
	Net unrealized gains on investments	
I	Donated services and use of facilities	
	Recoveries of prior year grants	
	Other (Describe in Part XIV)	
(Add lines 2a through 2d	
3	Subtract line 2e from line 1	2,307,785.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	
;	Investments expenses not included on Form 990, Part VIII, line 7b	
	Other (Describe in Part XIV.)	
	Add lines 4a and 4b	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	2,307,785.
Pa	t XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Retur	n
1	Total expenses and losses per audited financial statements	1,796,149.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	
;	a Donated services and use of facilities	
	Prior year adjustments	
	COther losses 2c	
	d Other (Describe in Part XIV.)	
	e Add lines 2a through 2d	
3	Subtract line 2e from line 1	1,796,149.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	
-	a Investments expenses not included on Form 990, Part VIII, line 7b	
	b Other (Describe in Part XIV.)	
	c Add lines 4a and 4b	
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	1,796,149.
	REXIV Supplemental Information	
Con Part any	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1 v, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this padditional information.	b and 2b; art to provide
	,	

Schedule D (Form 990) 2010 EARTHWORKS	52-1557765	Page 5
Schedule D (Form 990) 2010 EARTHWORKS Part XIV Supplemental Information (continued)		
	- 	
		

SCHEDULE I

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

OMB No. 1545-0047

Open to Public Inspection

201

Department of the Treasury Internal Revenue Service

Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 21 or 22. ► Attatch to Form 990.

2 (h) Purpose of grant or assistance **Employer identification number** Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. X Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered 'Yes' 52-1557765 (g) Description of non-cash assistance 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? (f) Method of valuation (book, FMV, appraisal, other) ö Ö o o 0 0 0 (e) Amount of non-cash assistance Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. (d) Amount of cash grant 18,000 33,000 18,000 18,000 18,000 18,000 10,000 Part II can be duplicated if additional space is needed.... (c) IRC section if applicable Part I General Information on Grants and Assistance (b) EIN - 128 N. 6TH STREET, P.O. GRAND JUNCTION, CO 8150 (3) POWDER RIVER BASIN RESO (4) SAN JUAN CITIZENS ALLIA P.O. BOX 2461 DURANGO, CO 81302 —— 220 S. 27TH STREET, SUI BILLINGS, MT 59101 WESTERN COLORADO CONGRE WYOMING OUTDOOR COUNCIL 262 LINCOLN STREET (6) WESTERN MINING ACTION 1 (a) Name and address of organization <u>P.O. BOX 349</u> LYONS, CO 80540 F.O. BOX 409 LAME DEER, MT 59043 NORTHERN PLAINS RC SHERIDAN, WY 82801 LANDER, WY 82520 or government (1) NATIVE ACTION Name of the organization EARTHWORKS

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Enter total number of other organizations	BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990.
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EARTHWORKS Schedule I (Form 990) 2010

Page 2 Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 22.

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
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TEEA3902L 10/29/10

Schedule I (Form 990) 2010

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No. 1545-0047 2010

Department of the Treasury Internal Revenue Service Name of the organization

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.

Open to Public Inspection

Employer identification number

EARTHWORKS [52-1557765
FORM 990, PART III, LINE 1 - ORGANIZATION MISSION
THE CORPORATION IS ORGANIZED EXCLUSIVELY FOR CHARITABLE AND EDUCATIONAL PURPOSES.
MORE SPECIFICALLY, THE ACTIVITIES OF THE CORPORATION SHALL INCLUDE BUT NOT BE
LIMITED TO: PROTECTING COMMUNITIES AND THE ENVIROMENT FROM THE IMPACTS OF
DESTRUCTIVE MINERAL DEVELOPMENT IN THE US AND WORLDWIDE, BY WORKING WITH COMMUNITIES
AND_GRASSROOTS_GROUPS_TO_REFORM_GOVERNMENTAL_POLICIES,_IMPROVE_COPORATE_PRACTICES,
AND INFLUENCE INVESTMENT DECISIONS. THE CORPORATION SHALL WORK TO ENCOURAGE
CONSERVATION, RECYCLING, RESPONSIBLE MATERIALS POLICIES, FUEL EFFICIENCY, AND
RENEWABLE ENERGY SOURCES. THE CORPORATION SHALL EXPOSE THE HEALTH, ENVIRONMENTAL,
ECONOMIC, SOCIAL AND CULTURAL IMPACTS OF IRRESPONSIBLE MINERAL DEVELOPMENT THROUGH
WORK INFORMED BY SOUND SCIENCE, AND ACHIEVED THROUGH, BUT NOT LIMITED TO PUBLIC
EDUCATION, RESEARCH, LITIGATION AND ADVOCACY.
FORM 990, PART III, LINE 4D - OTHER PROGRAM SERVICES DESCRIPTION
EARTHWORKS PARTNERSHIP PROGRAMS - EARTHWORKS PROVIDES BACK-OFFICE SERVICES
(INCLUDING PAYROLL, ACCOUNTING, AND ADMINISTRATION), A LEGAL FRAMEWORK, AND CAPACITY
BUILDING SUPPORT TO A VARIETY OF SMALL PROGRAMS (SINGLE STAFF, OR VOLUNTEER ONLY
ORGANIZATIONS) THAT SHARE OUR MISSION OF PROTECTING COMMUNITIES AND THE ENVIRONMENT
FROM THE NEGATIVE IMPACTS OF MINERAL DEVELOPMENT. IN 2008 EARTHWORKS SERVED AS THE
FISCAL SPONSOR OF THE FOLLOWING PROJECTS:
ETHICAL METALSMITHS: THIS PROJECT SEEKS TO STIMULATE DEMAND AND SUPPLY FOR
RESPONSIBLY SOURCED MATERIALS FOR METALSMITHS AND JEWELERS.
COMMON GROUND UNITED: THIS PROJECT PROVIDES A PLATFORM ALLOWING DIVERSE
ORGANIZATIONS, FROM LOCAL TO NATIONAL, TO EXPRESS A UNITED VOICE CONCERNING THE
PROTECTION OF OUR WATER, CULTURAL, ECOLOGICAL, AND ECONOMIC RESOURCES AND THE HEALTH

AND REPORTS.

Name of the organization EARTHWORKS	Employer identification number 52–1557765
	100//00
FORM 990, PART III, LINE 4D - OTHER PROGRAM SERVICES DESCRIPTION	·
ADVOCACY TECHNOLOGY/TOOL (CAPACITY BUILDING) - INVESTMENT GEARE	D TOWARD IMPROVING
OUTREACH, RESEARCH AND ADVOCACY CAPACITY THROUGH EXPENDITURES C	N TECHNOLOGY, DATA
MANAGEMENT, ELECTRONIC TOOLS, MEMBERSHIP, AND CAPACITY TO REACH	COMMUNITIES.
RESEARCH AND INFORMATION PROVIDED TO THE PUBLIC AND MEBERS IN T	HE FORM OF MAILINGS,
FACT SHEETS, ELECTRONIC (EMAIL) UPDATES AND ALERTS, NEWSLETTERS	, AND RESPONSES TO
DIRECT INQUIRIES.	
FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS	
A DRAFT COPY OF THE 990 WAS RECEIVED AND PROVIDED TO THE BOARD	MEMBERS FOR REVEIW
BEFORE COMPLETION AND FILING.	
FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AV	AILABLE
THE GOVERNING DOCUMENTS, POLICIES AND FINANCIAL STATEMETNS ARE	MADE AVAILABLE TO
INTERESTED PARTIES UPON REQUEST.	
	·
	·

Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

Department of t Internal Revenu	he Treasury le Service	► File a	separate appli	cation for each return.		
• If you ar	re filing for an	Automatic 3-Month Extension,	complete only	Part I and check this box		► 🗓
• If you ar	re filing for an	Additional (Not Automatic) 3-M	lonth Extension	n, complete only Part II (on page 2 of t	his form).	
Do not com	plete Part II un	aless you have already been gra	anted an autom	atic 3-month extension on a previously	filed Form 8868.	
corporation request an Associated electronic fi	required to file extension of tir With Certain Po Iling of this forn	Form 990-T), or an additional ne to file any of the forms listed ersonal Benefit Contracts, which no visit www.irs.gov/efile and cli	(not automatic) d in Part I or Pa h must be sent ick on <i>e-file for</i>		lectronically file Form 88	ransfers
				nit original (no copies needed).		
A corporation	on required to f	ile Form 990-T and requesting	an automatic 6	-month extension — check this box and	I complete Part I only	▶ 📗
All other co income tax		luding 1120-C filers), partnershi	ips, REMICS, a	nd trusts must use Form 7004 to reque	st an extension of time	to file
	Name of exempt	organization			Employer identification num	nber
Type or print	EARTHWOR	eks			52-1557765	
File by the		and room or suite number. If a P.O. box, s	see instructions.	- Company - Comp		
due date for filing your	1612 K S	TREET, NW #808				
return. See instructions.		st office, state, and ZIP code. For a foreign	address, see instru	ctions.		
	WASHINGT	ON, DC 20006				
Enter the R Application		the return that this application	is for (file a sep	Application for each return)		01 Return Code
Form 990			01	Form 990-T (corporation)		07
Form 990-E	3L		02	Form 1041-A		08
Form 990-E	Z		03	Form 4720		09
Form 990-F	PF		04	Form 5227		10
Form 990-T	(section 401(a	a) or 408(a) trust)	05	Form 6069		11
Form 990-T	(trust other th	an above)	06	Form 8870		12
Telepho	ne No. ► <u>202</u>		FAX N			
				e United States, check this box		▶ 📋
				Exemption Number (GEN)		
check t	his box. 🟲 📗	. If it is for part of the group, c	check this box .	and attach a list with the names	and EINs of all membe	rs

If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)	. If this is	for the w	hole group,	
check this box. ► . If it is for part of the group, check this box . ► and attach a list with the name	s and EIN	s of all r	nembers	
the extension is for.				
I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until <u>8/15</u> , 20 <u>11</u> , to file the exempt organization return for the organization named about The extension is for the organization's return for:				
► X calendar year 20 10 or				
 X calendar year 20 10 or tax year beginning, 20, and ending, 20 				
	Final retu	n		
3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	(0.
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated payments made. Include any prior year overpayment allowed as a credit	tax 3b	\$, .	Ο.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	(ο.

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

BAA For Paperwork Reduction Act Notice, see Instructions.

0.

Form **990**

Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047 2009

Department of the Treasury Internal Revenue Service

► The organization may have to use a copy of this return to satisfy state reporting requirements.

Open to Public Inspection

_			The organization may have to use a copy of	and return to satisfy state report	ing requirements.	- Marin	建设设施,通过设施的设施的。
_	For t	he 2009 calendar year	r, or tax year beginning an 1	, 2009, and endin	g Dec?	31	, 7009
В	Check	if applicable:	C		D Emplo	yer Iden	tification Number
	A	ddress change Please us	I EARTHWORKS		52-	1557	765
	N.	ame change or print or type.	1012 V 21KEE1, NM #808		E Teleph		
	In	itial return See specific	WASHINGTON, DC 20006		202	-887	-1872
	Те	ermination Instruc-				-	2072
	\vdash	mended return	II.		G Gross	receinte	\$ 1,438,657.
	\vdash	TO SOUTH OF THE SO	and address of principal officer:		H(a) Is this a group retu		
		The second of th	AS C ABOVE		H(b) Are all affiliates inc		Yes No
ī	Tax	e-exempt status X 50		47(a)(1) or 527	If 'No,' attach a list	(see ins	structions)
j			THWORKSACTION.ORG		W \ 0		
K		of organization: X Corpo		L Year of Format	H(c) Group exemption n		
-	art I	Summary	Tation Trust Association Other	L Year of Format	on: 1900 IVI :	State of I	legal domicile: DC
-		Briefly describe the or	rganization's mission or most significant	activities: TUD CODDO	DATTON TO C	DCAN	ITZED
41	1	EXCLUSIVELY FO	OR <u>CHARITABLE AND EDUCATI</u>	MAI DIDDOCE	NUDE CDECTE	KGAN	TA TATE
Activities & Governance		ACTIVITIES OF	THE CORPORATION SHALL INC	TITLE BUT NOT DE	TIMITED TO	DD(DECETAC
Пa		COMMUNITIES A	ND THE ENVIROMENT FROM THE	MDA TO OF DEC	TATELLATION MAN		TECT TIRE
ove	2	Check this box ►	if the organization discontinued its energy	ations or disposed of mor	e than 25% of its	accets	P TABLA BYPAR GREWAT —
Ü	3	Number of voting mer	nbers of the governing body (Part Vi lin	1a)		3	. 9
S	4	Number of independer	nt voting members of the governing body	(Part VI, line 1b)		4	9
)ţį	5	Total number of emplo	oyees (Part V, line 2a)			5	0
cti	6	Total number of volun	teers (estimate if necessary)			6	0
4	1 4	Total gross unrelated	business revenue from Part VIII, column	(C), line 12		7a	0.
	b	Net unrelated busines	s taxable income from Form 990-T, line	34		7b	0.
					Prior Year		Current Year
e			nts (Part VIII, line 1h)		1,644,8	46.	1,392,832.
enc	9 1	Program service rever	nue (Part VIII, line 2g)				
Revenue	10	Investment income (P	art VIII, column (A), lines 3, 4, and 7d)		5	15.	241.
-			III, column (A), lines 5, 6d, 8c, 9c, 10c, a		39,4	37.	45,584.
			ines 8 through 11 (must equal Part VIII, o		1,684,7	98.	1,438,657.
			ounts paid (Part IX, column (A), lines 1-				148,900.
			members (Part IX, column (A), line 4)				
9			nsation, employee benefits (Part IX, colu		1,114,1	80.	895,485.
nse	16a F	Professional fundraisir	ng fees (Part IX, column (A), line 11e)				
Expenses	b	Total fundraising expe	nses (Part IX, column (D), line 25) ▶	96,481.			
Ш			IX, column (A), lines 11a-11d, 11f-24f)		723,1	60	419,631.
			nes 13-17 (must equal Part IX, column (1,837,3		1,464,016.
	19 F	Revenue less expense	s. Subtract line 18 from line 12	y mio 20)	-152,5		-25,359.
88			Service with the month with the territory				
lanc	20 7	Total assets (Part X Ti	ne 16)		Beginning of Ye		End of Year
A Ba	21 1		, line 26)		36,1		364,061. 54,139.
Net Assets or Fund Balances	22 N			and the state of the state of the state of the state of			
	rt II	Signature Bloc	ances. Subtract line 21 from line 20		335,2	81.	309,922.
1.4	II VIII TEE						2007 17 02 17 18 18 18
		true, correct, and complete.	I declare that I have examined this return, including ac Declaration of preparer (other than officer) is based of	companying schedules and staten in all information of which prepare	nents, and to the best of r has any knowledge.	my know	wledge and belief, it is
Sig	ın	► \ (In	1,110.		10110	2011)
Hei		Signature of officer	44/0		Date Date	wil	/
	1.00	► lenniterV	rill Executive Direct		Date		
		Type or print name and	Tille.	JY			
	-		Sant P	Date		1 Pro	narer's identifying number
Pai	id	Af Af	196	Date	Check if self-	(see	parer's identifying number e instructions)
Pre		Preparer's signature MTCI	UNEI D MILLAMD CDA		employed ►	Ш,,,	/3
	rer's	MICI	HAEL D AUKAMP, CPA			N/	A
Js	е	voure if colf.	HAM, AUKAMP & RHODES, PLC	III OUTER OOF			
On	ly	employed), > 443	7 BROOKFIELD CORPORATE DRI	VE, SUITE 205	EIN ► N/		
		ZIP + 4 CHAI	NTILLY, VA 20151-1645			(703	
Иay	the IR	S discuss this return v	with the preparer shown above? (see inst	ructions)			X Yes No

_	990 (20		EARTH										į	52-15	5776	55	- 3	Page 2
Pai	t III			of Program		e Accor	nplish	ments	3									
1				anization's m	nission:													
	2FF 2	CHEI	DULE_O_															
2	Did the	organ	nization un	dertake any	significan	t program	services	s during	the yea	r which	were no	ot listed	on the	orior	200			
																Yes	X	No
•				new services			a di Carri	52.05.45					- A.W. ob T. W				[V]	
3				ase conductions changes on S			ant char	nges in	how it c	onducts	, any pr	ogram	services	<i>[</i>		Yes	X	No
4							the ora	anizatio	n's three	larnest	t progra	m serv	ices by e	xnense	s Sec	tion 5	01(c)(3)
•	and 501	(c)(4)	organizat	rpose achieve ions and sec , if any, for e	tion 4947	(a)(1) trus	sts are re	equired	to repor	t the an	nount of	grants	and allo	cations	to oth	ners, t	ne tota	al
	expense	s, an	a revenue	ii ariy, for e	acti progr	am servic	e report	eu.										
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4c	(Code:	10) (Ex	penses \$	18	1,615.	includi	ing gran	nts of \$	5) (Rever	nue Ś)
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				ROMOTE P													RD	
	TO MIN	NING	G AND N	ATURAL R	ESOURC	CES INT	ERNAT	'IONA	LLY.	THIS	INCL	UDES	RESEA	RCH,		3.7.	T31	
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																	=	
-																		
4d	Other pro	gram	services	(Describe in	Schedule	O.)	Ç	SEE S	CHEDU	LE O				_				_
	(Expense			196,66				\$) (Re	venue	\$)	
				xpenses >		1,225	3 13 23 23 24											

	artive personner of frequired contentions		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	Х	
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II	4	Х	
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If 'Yes,' complete Schedule C, Part III.	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where 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		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21; 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				Х
11	Is the organization's answer to any of the following questions 'Yes'? If so, complete Schedule D, Parts VI, VIII, IX, or X as applicable.	11	Х	entern.
	• Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI.			
	• Did the organization report an amount for investments— other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII.			
	 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. 			
	 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 Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X 			
	• 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? If 'Yes,' complete Schedule D, Part X			
12	Did the organization obtain separate, independent audited financial statement for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII.	12	х	
12	AWas the organization included in consolidated, independent audited financial statement for the tax year? If 'Yes,' completing Schedule D, Parts XI, XII, and XIII is optional			V III
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		X
14:	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
- 1	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If 'Yes,' complete Schedule F, Part I	14b		Х
	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Part II.	15		X
	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If 'Yes,' complete Schedule F, Part III.	16		X
	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		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II.	18		X
	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. Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H	19 20		X X
20	ond the organization operate one of more nospitals: If Tes, complete ocheque II	20		

Form 990 (2009) EARTHWORKS

Part IV Checklist of Required Schedules (continued)

	(communication)	_		
21	Did the experiention and the description of the des		Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21	Х	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III.	22		Х
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete Schedule J.	23		Х
24		23		- 1
	a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No,'go to line 25.	24a		Х
	b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	c 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		
25	a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		Х
	b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990 EZ? If 'Yes,' complete Schedule L, Part I.	25b		Х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection comittee member, or to a person related to such an individual? If 'Yes,' complete Schedule L, Part III.	27		Х
28	Was the organization a party to a business transation with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):	В.	1	110
4	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		X
ı	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV.	28b		Х
(An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1	34		Х
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35		Х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Х	

ВАА

Form 990 (2009) EARTHWORKS 52-15577	65	F	Page
Part V Statements Regarding Other IRS Filings and Tax Compliance			
1a Enter the number reported in Box 3 of form 1096, Annual Summary and Transmittal of U.S.		Yes	No
	0		
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	0	(1)	W
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		17.6
2 a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
2b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		I.O.O.
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)	11		1
3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		Х
b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule Q			
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Х
b If 'Yes,' enter the name of the foreign country: ►		dwarf.	Williams.
See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		194	
5a 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?	5b		X
c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5 c		
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a		Х
b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were no deductible?			
7 Organizations that may receive deductible contributions under section 170(c).	0.0		100
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X
b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7b		- 11
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		Х
d If 'Yes,' indicate the number of Forms 8282 filed during the year.	139	(1)	
e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 e		Х
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		
8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9 Sponsoring organizations maintaining donor advised funds.	0	1000	EHI
a Did the organization make any taxable distributions under section 4966?	9a	0 50000 I	
b Did the organization make any distribution to a donor, donor advisor, or related person?	9b		
10 Section 501(c)(7) organizations. Enter:	0.5	1000	NAT MA
a Initiation fees and capital contributions included on Part VIII, line 12	100		
b Gross Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	300		
11 Section 501(c)(12) organizations. Enter:	13.00	1,87	
a Gross income from other members or shareholders	Yelly		
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			8
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		Sall
b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year			554

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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.

				Yes	No
1	a Enter the number of voting members of the governing body	1a 9		200	
	b Enter the number of voting members that are independent	1b			100
2	Did any officer, director, trustee, or key employee have a family relationship or a business re officer, director, trustee or key employee?	elationship with any other	2		X
3	Did the organization delegate control over management duties customarily performed by or of officers, directors or trustees, or key employees to a management company or other personal company or other personal company.	under the direct supervision	3		Х
4	Did the organization make any significant changes to its organizational documents		4		X
	since the prior Form 990 was filed?			1	
5	Did the organization become aware during the year of a material diversion of the organizatio		5		X
6	Does the organization have members or stockholders?		6	Х	
7	Does the organization have members, stockholders, or other persons who may elect one or upon governing body?	more members of the	7a	11	Х
1	Are any decisions of the governing body subject to approval by members, stockholders, or of		7b		X
				125	
8	Did the organization contemporaneously document the meetings held or written actions under the following:	ertaken during the year by		4.7	
ä	The governing body?		8a	Х	
ł	Each committee with authority to act on behalf of the governing body?		8b		X
9	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who can organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O	nnot be reached at the	9		Х
	tion B. Policies (This Section B requests information about policies not i			_	- 11
	enue Code.)	oquirou oj tilo ilitorila.			
30.00				Yes	No
10 a	Does the organization have local chapters, branches, or affiliates?		10a		X
	If 'Yes,' does the organization have written policies and procedures governing the activities of and branches to ensure their operations are consistent with those of the organization?	f such chapters, affiliates.	10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body to		11	Х	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990			200	77
	Does the organization have a written conflict of interest policy? <i>If 'No,' go to line 13</i>		12a	Х	
	Are officers, directors or trustees, and key employees required to disclose annually interests to conflicts?	that could give rise	12b		Х
	Does the organization regularly and consistently monitor and enforce compliance with the pol				
	Schedule O how this is done		12c		X
13	Does the organization have a written whistleblower policy?	*************	13		X
14	Does the organization have a written document retention and destruction policy?		14		X
15	Did the process for determining compensation of the following persons include a review and persons, comparability data, and contemporaneous substantiation of the deliberation and dec	approval by independent sision?			
	The organization's CEO, Executive Director, or top management official		15a		X
b	Other officers of key employees of the organization	***********	15b		X
	If 'Yes' to line 15a or 15b, describe the process in Schedule O. (See instructions.)		10.00	7-16	
16 a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar entity during the year?	arrangement with a taxable	16a		X
b	If 'Yes,' has the organization adopted a written policy or procedure requiring the organization in joint venture arrangements under applicable federal tax law, and taken steps to safeguard status with respect to such arrangements?	to evaluate its participation the organization's exempt	16b		
ec	tion C. Disclosures		100	_	
	List the states with which a convert this Form 000 is required to be filed MONE		_		
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, an inspection. Indicate how you make these available. Check all that apply. X Own website Another's website Upon request		-		
19	Describe in Schedule O whether (and if so, how) the organization makes its governing docum statements available to the public. SEE SCHEDULE O	ents, conflict of interest poli	cy, an	d finar	ncial
20	State the name, physical address, and telephone number of the person who possesses the be	ooks and records of the orga			
•	EARTHWORKS 1612 K STREET, NW SUITE 808 WASHINGTON DC 2000	6 202-88/-18/2			

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Form 990 (2009)

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

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 organizations's tax year. Use Schedule J-2 if additional space is needed.
- 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. See instructions for definition of 'key employees.'
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

(A) Name and Title	(B) Average hours		ition	(chec	c) k all	that app		(D) Reportable compensation from	(E) Reportable compensation from	(F) Estimated amount of other
	per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
DR. KARIN SHELDON		7.5				-				
CHAIRMAN	2	X		X				0.	0.	0
GLENN MILLER VICE CHAIRMAN	1.5	Х		Х				0.	0.	0
KERRY ANDERSON BOARD MEMBER	1	Х						0.	0.	0
MICHAEL CONROY BOARD MEMBER	1	Х						0.	0.	0
GLORIA_FLORA_ BOARD MEMBER	1	Х						0.	0.	0
JAY HALFON SEC/TREASURER	2	Х		Х				0.	0.	0
BILL MCNEILL BOARD MEMBER	1	Х						0.	0.	0
WILMA_SUBRA BOARD MEMBER	1	Х						0.	0.	0
KIMBERLEE DINN INTERIM EX DIR	40			х	Х			81,199.	0.	3,250
										, , , , , , , , , , , , , , , , , , , ,
			1							
									1	

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Part VII Section A. Officers, Directors, Trus	tees, k	(ey	En	npl	oye	ees	, an	d Highest Con	npensated En	iployees (cont.)
(A)	(B)	A D-3: (-110.0)								(F)
Name and Title	hours per week		_	Officer	Key employee	employee	1	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
1 b Total							>	81,199.	0.	3,250.
 Total number of individuals (including but not limited from the organization ▶ 0 	to those	e lis	ted	abo	ve)	who	rec	eived more than \$	\$100,000 in repor	table compensation
 3 Did the organization list any former officer, director on line 1a? If 'Yes,' complete Schedule J for such in. 4 For any individual listed on line 1a, is the sum of rep the organization and related organizations greater th individual. 5 Did any person listed on line 1a receive or accrue co 	dividual oortable an \$150	com ,000	pen)? <i>If</i>	sati Ye	on a	and omp	othe	er compensation fr Schedule J for su	om uch	Yes No
rendered to the organization? If 'Yes,' complete Scho	edule J	for s	uch	per	rson			organization for	services	. 5 X
Complete this table for your five highest compensate compensation from the organization.	d indepe	ende	ent d	cont	ract	ors	that	received more that	an \$100,000 of	
(A) Name and business address								(B) Description of	Services	(C) Compensation
2 Total number of independent contractors (including b \$100,000 in compensation from the organization ► (mite	d to	tho	se	liste	d ab	ove) who received	d more than	

	Statement of Revenue	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
TIS	1a Federated campaigns 1a	建 对于1000年度。	· 有一个意味		
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOLINES	b Membership dues				
LS, G	c Fundraising events				
GIFI	d Related organizations 1d				
SIM.	e Government grants (contributions) 1e	4			
E A	f All other contributions, gifts, grants, and similar amounts not included above 1 f 1,392,832.				
TRIB	similar amounts not included above If 1,392,832.				15
AND	g Noncash contribus included in lns 1a-1f: \$	1 200 020			
	h Total. Add lines 1a-1f	1,392,832			
PROGRAM SERVICE REVENUE	2a	(0)、登入的(5) (7) ((2019) (7)		(1) 在最后的1000 (1) 在最后的1000 (1)	
RE	b				
/ICE	c				
SER	d				
AM	e				
OGR	f All other program service revenue				
PR	g Total. Add lines 2a-2f				
	3 Investment income (including dividends, interest and				
	other similar amounts)	241.			241.
	4 Income from investment of tax-exempt bond proceeds				
	5 Royalties.	Tati Value stress that states	I racesta established	W	
	(i) Real (ii) Personal				
	b Less: rental expenses.				
	c Rental income or (loss)				
	d Net rental income or (loss)		# Syantan & St.	5.17-57	
	(i) Societies (i) Other				1111 - 1111 - 1111 - 1111 - 1111 - 1111 - 1111 - 1111 - 1111 - 1111 - 1111 - 1111 - 1111 - 1111 - 1111 - 1111 -
	7 a Gross amount from sales of assets other than inventory.				
	b Less: cost or other basis and sales expenses				
	c Gain or (loss)				
	d Net gain or (loss)▶	There is a second	MANAGED CONTRACTOR	1 28 00100 NG 1005 (AND	
핆	8a Gross income from fundraising events (not including. \$				
VEN	of contributions reported on line 1c).				
OTHER REVEN	See Part IV, line 18 a				
물	b Less: direct expenses b		Mark the second		
0	c Net income or (loss) from fundraising events	TO 614 NO. 10 TO 34 BOSE	PARTON AND AND AND AND AND AND AND AND AND AN	OAVALSTOLL TELESTRESSES	Maria cate a paper and
	9a Gross income from gaming activities. See Part IV, line 19 a				
	b Less: direct expenses b				
	c Net income or (loss) from gaming activities	DATE OF THE STREET, ST	WARRANT AND THE RESIDENCE		end the desire at the 1800 of
	10 a Gross sales of inventory, less returns and allowances a				
	b Less: cost of goods sold b				
	c Net income or (loss) from sales of inventory	CANADA CANADA DINANZI	A THE PARK HE WAS A SECOND	7.00至65年1月,从前至省5世	
	Miscellaneous Revenue Business Code			是是是不同的	
1	11a MISCELLANEOUS	45,584.	The state of the s	The state of the s	45,584.
	b				
	С				
	d All other revenue				
	e Total. Add lines 11a-11d ▶	45,584.			
	2 Total revenue. See instructions ▶	1,438,657.	0.	0.	45,825.

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) but are not required to complete column	ns (B), (C), and (D),	
------------------------------------------------------------------------------------------	-----------------------	--

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	148,900.	148,900.		
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22.	110,300.	140,500.		
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				10.271104
5 Compensation of current officers, directors, trustees, and key employees	84,449.	10,978.	48,136.	25,335
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0
7 Other salaries and wages	587,918.	550,602.	12,160.	25,156
Pension plan contributions (include section 401(k) and section 403(b) employer contributions).	22.015			
9 Other employee benefits	23,915.	19,468.	2,436.	2,011.
	142,289.	118,982.	12,670.	10,637.
	56,914.	46,958.	5,464.	4,492.
11 Fees for services (non-employees)				
a Management	11 460	44 144		
b Legal	11,468.	11,468.		
c Accounting	9,325.		9,325.	
d Lobbying.	40			
e Prof fundraising svcs. See Part IV, In 17	130		A TOWNS OF THE SECOND	
f Investment management fees				
g Other	72,423.	60,186.	5,887.	6,350.
12 Advertising and promotion	10,479.	9,449.	573.	457.
13 Office expenses	14,347.	10,707.	2,977.	663.
14 Information technology				
15 Royalties				
16 Occupancy	75,413.	63,430.	6,594.	5,389.
17 Travel	63,220.	55,666.	6,250.	1,304.
Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	15,352.	12,798.	1,531.	1,023.
20 Interest		22/1301	1,331.	1,025.
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	10,277.	8,489.	525.	1,263.
23 Insurance	3,779.	1,665.	1,919.	195.
24 Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.).			1/513.	195.
a_TELECOMMUNICATIONS	39,680.	34,580.	3,543.	1,557.
b PRINTING AND PUBLICATIONS	37,133.	28,752.	1,017.	7,364.
c VIDEO AND PHOTO	16,886.	16,886.	1,017.	1,304.
d EMPLOYEE RECRUITING	13,970.	10,000.	13,970.	
e POSTAGE AND SHIPPING	8,459.	5,820.	2,111.	528.
f All other expenses	17,420.	9,728.	4,935.	2,757.
25 Total functional expenses. Add lines 1 through 24f	1,464,016.	1,225,512.	142,023.	96,481.
SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.		, ==, 322.	2 22 7 0 2 3 1	70, 401.
AA				Form 990 (2009)

Part X Balance Sheet

					(A) Beginning of year		(B) End of year
	1					1	
	2	Savings and temporary cash investments			173,787	. 2	337,10
	3	Pledges and grants receivable, net			165,000		5,88
	4	Accounts receivable, net				4	
	5	Receivables from current and former officers, directo and highest compensated employees. Complete Part	rs, trustees	s, key employees, dule L		5	
d	6	Receivables from other disqualified persons (as defin	ed under s	section 4958(f)(1))	Av. When the	11977	
		and persons described in section 4958(c)(3)(B). Com	plete Part	II of Schedule L		6	L ISHEVIN II SI E IN
	7	Notes and loans receivable, net				7	
	8	Inventories for sale or use		***********		8	
	9	Prepaid expenses and deferred charges			17,248.	9	14,52
	10 a	a Land, buildings, and equipment: cost or other basis.	10a	86,624.		1333	
		Complete Part VI of Schedule D				1800	
ľ	Ł	Less: accumulated depreciation	10 b	80,077.	15,366.	10 c	6,54
1	11	Investments – publicly-traded securities			20,000.	11	0,34
H	12	Investments - other securities. See Part IV, line 11				12	
	13	Investments - program-related. See Part IV, line 11.			13		
Ŀ	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11		15			
	16	Total assets. Add lines 1 through 15 (must equal line	34)		371,401.	16	364,06
	17	Accounts payable and accrued expenses		a da statement de service	36,120.	17	54,13
h	18	Grants payable	30/120.	18	34,13		
	19	Deferred revenue		19			
	20	Tax-exempt bond liabilities		20			
3	21	Escrow or custodial account liability. Complete Part IV	lule D		21		
	22	Payables to current and former officers, directors, trus highest compensated employees, and disqualified per-			Contact Van		
		of Schedule L				22	W 1 1 1 1 1 1 1 2 1 1 2 1 2 1 2 1 2 1 2
3	23	Secured mortgages and notes payable to unrelated th		23			
1	24	Unsecured notes and loans payable to unrelated third		24			
1	25	Other liabilities. Complete Part X of Schedule D		25			
2	26	Total liabilities. Add lines 17 through 25			36,120.	26	54,139
		Organizations that follow SFAS 117, check here ▶	X and co	mplete lines		Next as	42.17.20.10.10.10.10.10.10.10.10.10.10.10.10.10
		27 through 29 and lines 33 and 34.					
2	27	Unrestricted net assets			170,281.	27	-2,578
2	28	Temporarily restricted net assets			165,000.	28	312,500
	29	Permanently restricted net assets			100,000.	29	312,300
		Organizations that do not follow SFAS 117, check her lines 30 through 34.					
7		Capital stock or trust principal, or current funds		No.	A control of the last of the	200	
	31	Paid-in or capital surplus, or land, building, and equipm	nont final			30	
						31	
	33	Retained earnings, endowment, accumulated income, of	or other fur	nas	225 225	32	000
	34	Total net assets or fund balances			335,281.	33	309,922
4	-	Total liabilities and net assets/fund balances			371,401.	34	364,061

			Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other	: 1		TEN.
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.			3 17
2	a Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		Х
ł	b Were the organization's financial statements audited by an independent accountant?	2b	Х	
(c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?			
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.) v	1,11
C	If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both:			
	X Separate basis Consolidated basis Both consolidated and separate basis	0,000		
3 a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		Х
b	olf 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		

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Form 990 (2009)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Total

Public Charity Status and Public Support

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

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization Employer identification number **EARTHWORKS** 52-1557765 Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) A church, convention of churches or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) 3 A hospital or 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 4 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 5 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described 7 in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An organization that normally receives: (1) more than 33-1/3 % of its support from contributions, membership fees, and gross receipts 9 An order ligative that formally receives. (1) findle than 33-173 % or its support from continuously, membership lees, 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.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the purposes of one or 11 more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h. Type III - Functionally integrated C Type III- Other By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section If the organization received a written determination from the IRS that is a Type I, Type II or Type III supporting organization, check this box. Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? g Yes No a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) (i) below, the governing body of the supported organization?.... 11 g (i) a family member of a person described in (i) above?..... 11 g (ii) (iii) a 35% controlled entity of a person described in (i) or (ii) above?..... 11 g (iii) Provide the following information about the supported organizations (i) Name of Supported Organization (ii) EIN (iii) Type of organization (described on lines 1-9 above or IRC section (see instructions)) (v) Did you notify the organization in col. (i) of your support? (iv) Is the organization in col. (vi) Is the (vii) Amount of Support organization in col. (i) organized in the U.S.? (i) listed in your Yes No Yes No Yes No

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

Schedule A (Form 990 or 990-EZ) 2009

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.)

S	ection A. Public Support						
Ca	elendar year (or fiscal year ginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
	1 Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants.').	1,556,382.	1,885,031	. 1,785,477.	1 644 846	1 392 832	8,264,568
	2 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf.				1,011,010.	1,332,032.	0,204,308
•	The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge						
4	Total. Add lines 1-through 3	1,556,382.	1,885,031.	1,785,477.	1.644.846	1 392 832	0. 8,264,568.
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)				1,011,010.	1,352,032.	0.
6	Public support. Subtract line 5 from line 4						
Se	ction B. Total Support		2222 1 2 2 1 1 1 2 1 2	ALC: NO INTO SERVICE	(1.5) (2.1)		8,264,568.
Cal beg	endar year (or fiscal year inning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7	Amounts from line 4	1,556,382.	1,885,031.	1,785,477.	1,644,846.	1,392,832.	8,264,568.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources.	4,184.	8,885.	24,448.	515.	241.	
9	business activities, whether or not the business is regularly carried on.		3,200.	21,440.	313.	241.	38,273.
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						0.
	Total support. Add lines 7 through 10		1426. 1427.			An an Andrews	8,302,841.
12	Gross receipts from related activi	ties, etc. (see inst	ructions)		************	12	0.
	First five years. If the Form 990 is organization, check this box and stion C. Computation of Bulb	stop here		d, third, fourth, o	r fifth tax year as	a section 501(c)(1
Sec	don C. Computation of Pub	iic Support Pe	ercentage				
14	Public support percentage for 200	9 (line 6, column	(f) divided by line	e 11, column (f)		14	99.5%
	Public support percentage from 2						99.5%
16 a	33-1/3 support test $-$ 2009. If the and stop here. The organization of	organization did r Jualifies as a publ	not check the box icly supported org	on line 13, and	the line 14 is 33-1	/3 % or more, ch	eck this box ► [X]
b	33-1/3 support test — 2008. If the and stop here. The organization q	organization did r	not check a how o	n line 12 or 16e	and line 15 to 22	1/00/	
	10%-facts-and-circumstances tes or more, and if the organization meets the 'facts-attention meets attention meets	and-circumstances	s' test. The organ	nization qualifies	ox and stop here as a publicly supp	. Explain in Part I orted organization	V how n ▶ □
	10%-facts-and-circumstances tes or more, and if the organization morganization meets the 'facts-and-	circumstances' te	est. The organiza	test, cneck this b ation qualifies as a	ox and stop here , a publicly support	. Explain in Part I' ed organization	V how the ►
AA	Private foundation. If the organiza	ation did not check	k a box on line, 1	3, 16a, 16b, 17a,		or the same and all the control of the control of the	
77					Sche	dule A (Form 990	or 990-EZ) 2009

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

(Complete only if you checked the box on line 9 of Part I.) Section A. Public Support Calendar year (or fiscal yr beginning in) ► (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants.')... Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a activity that is related to the organization's tax-exempt purpose. Gross receipts from activities that are not an unrelated trade or business under section 513. Tax revenues levied for the organization's benefit and either paid to or expended on its behalf.... The value of services or facilities furnished by a governmental unit to the organization without charge . . 6 Total. Add lines 1 through 5... 7a Amounts included on lines 1, 2, 3 received from disqualified **b** Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the amount on line 13 for the 8 Public support (Subtract line 7c from line 6.).. Section B. Total Support Calendar year (or fiscal yr beginning in) (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total 9 Amounts from line 6..... 10 a Gross income from interest. dividends, payments received on securities loans, rents, royalties and income form similar sources..... **b** Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975... c Add lines 10a and 10b...... Net income from unrelated business activities not included inline 10b. whether or not the business is regularly carried on. . . . Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) 13 Total support. (add Ins 9, 10c, 11, and 12.) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here..... Section C. Computation of Public Support Percentage 15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f))...... 15 % 16 Public support percentage from 2008 Schedule A, Part III, line 15 16 % Section D. Computation of Investment Income Percentage Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f))..... 17 % Investment income percentage from 2008 Schedule A, Part III, line 17....... % 19 a 33-1/3 support tests - 2009. If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization....... b 33-1/3 support tests - 2008. If the organization did not check a box on line 14 or 19a, and line 16 is more than 33-1/3%, and line 18 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization...... Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions.

Schedule	A (Form 990 or 990	-EZ) 2009	EARTHWORKS			52-1557765	Page 4
Part IV	Supplemental	Information of 17by	on. Complete this	s part to provide	e the explanatio	ns required by Part I Il information. See in	l, line 10;
-	r art ii, iiiic 17	a 01 170, 8	and rart m, mie	12. FTOVIGE arry	otrier additiona	ii iiiomation. See in	structions.
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Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service Name of the organization **Schedule of Contributors**

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

OMB No. 1545-0047

2009

Name of the organization		Employer identification number
EARTHWORKS		52-1557765
Organization type (check one):		02 1007700
Filers of:	Section:	
Form 990 or 990-EZ	X 501(c)(_3_) (enter number) organization	n
	4947(a)(1) nonexempt charitable trust not	
	527 political organization	as a private foundation
Form 990-PF	501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treat	ted as a private foundation
	501(c)(3) taxable private foundation	,
General Rule — For an organization filing Form contributor. (Complete Parts I as Special Rules — Special Rules — Special Rules — Special Rules —	red by the General Rule or a Special Rule . I, or (10) organization can check boxes for both the General I 1990, 990-EZ, or 990-PF that received, during the year, \$5,00 and II.) ation filing Form 990 or 990-EZ, that met the 33-1/3% supposived from any one contributor, during the year, a contribution of the YIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and	00 or more (in money or property) from any one rt test of the regulations under sections
For a section 501(c)(7), (8), or aggregate contributions of more	(10) organization filing Form 990 or 990-EZ, that received from the strain \$1,000 for use exclusively for religious, charitable, scient or animals. Complete Parts I, II, and III.	om and an a sightly to the state of
For a section 501(c)(7), (8), or contributions for use <i>exclusively</i> this box is checked, enter here	(10) organization filing Form 990 or 990-EZ, that received fro y for religious, charitable, etc, purposes, but these contribution the total contributions that were received during the year for of the parts unless the General Rule applies to this organizat	ons did not aggregate to more than \$1,000. If
religious, charitable, etc, contrib	outions of \$5,000 or more during the year	
	t covered by the General Rule and/or the Special Rules does Part IV, line 2 of their Form 990, or check the box on line H neet the filing requirements of Schedule B (Form 990, 990-EZ	
BAA For Privacy Act and Paperwood Form 990, 990FZ or 990-PF	ork Reduction Act Notice, see the Instructions	Schedule B (Form 990, 990-EZ, or 990-PF) (2009)

Schedule B (Form 990, 990-EZ, or 990-PF) (2009)	
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Page 1

of 2

of Part I

Employer identification number

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EAF	RTH	WOR	(S	

52-1557765

(a) Numbe	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
.1	WILBURFORCE 3601 FREMONT AVE N # 304 SEATTLE, WA 98103	 \$50,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
2	TRUE NORTH FOUNDATION 664 A FREEMEN LANE #332 GRASS VALLEY, CA 94129	 \$ 165,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
3	GOLDMAN FUND 211 LINCOLN BLVD SAN FRANCISCO, CA 94129	 \$225,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
_4	U.U. VEATCH 48 SHELTER ROCK ROAD MANHASSET, NY 11030	- - \$35,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
5	GORDON & BETTY MOORE FOUNDATION 1661 PAGE MILL RD PALTO ALTO, CA 94304	- _\$200,373.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
	TIDES FOUNDATION THE PRSIDIO, PO BOX 29903 SAN FRANCISCO, CA 94129	_ _\$ <u>115,000.</u> _	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)

Schedule B (Form 990, 990-EZ, or 990-PF) (2009)	Schedule	В	(Form	990,	990-EZ,	or 990-PF)	(2009)
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of Part I

Name of organization

Page 2 of 2
Employer identification number

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52-1557765

Parti	Contributors (see instructions.)		
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
7	EDUCATIONAL FOUNDATION OF AMERICA 35 CHURCH LANE WESTPORT, CT 06800	_ _\$67,500.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
8	PARK FOUNDATION PO BOX 550 ITHACA, NY 14851	\$70,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
9	ALASKA CONSERVATION FOUNDATION 441 WEST 5TH AVE, SUITE 402 ANCHORAGE, AK 99501	\$56,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
	DAVID & LUCILE PACKARD FOUNDATION 300 SECOND STREET LOS ALTOS, CA 94022	\$240,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
	·	\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
-		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)

Page 1

of 1

of Part II

Employer identification number 52-1557765

EARTHWORKS

Part II Noncash Property (see instructions.)

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	N/A		
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) Io. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$\$	
(a) o. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$\$	
(a) o. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
A		Ÿ	

For organizations com contributions of \$1,000		tc, individual contributions an \$1,000 for the year.(Com total of <i>exclusively</i> religious, chari (Enter this information once — se (c) Use of gift	Page 1 of 1 of Part II Employer identification number 52-1557765 to section 501(c)(7), (8), or (10) plete cols (a) through (e) and the following line entry. itable, etc, e instructions.)
Part III Exclusively religion organizations agg For organizations common contributions of \$1,000 (a) (b)	pleting Part III, enter or less for the year.	total of exclusively religious, chari (Enter this information once – se (c)	to section 501(c)(7), (8), or (10)
For organizations ago contributions of \$1,000 (a)	pleting Part III, enter or less for the year.	total of exclusively religious, chari (Enter this information once – se (c)	
(a) (b) No. from Purpose	of gift	(Enter this information once — se (c)	e instructions.) \$ N/.
No. from Purpose	of gift	(c)	7.10
Part I		Ose of gift	(d) Description of how gift is held
N/A			
Transi	eree's name, address	(e) Transfer of gift s, and ZIP + 4	Relationship of transferor to transferee
(a) (b)		(2)	
No. from Purpose		(c) Use of gift	(d) Description of how gift is held
Transfe	eree's name, address	(e) Transfer of gift , and ZIP + 4	Relationship of transferor to transferee
(a) (b) No. from Purpose of Part I	of gift	(c) Use of gift	(d) Description of how gift is held
Transfe	ree's name, address,	(e) Transfer of gift and ZIP + 4	Relationship of transferor to transferee
(2)			
(a) (b) No. from Purpose o	f gift	(c) Use of gift	(d) Description of how gift is held
Transfer	ee's name, address, a	(e) Transfer of gift and ZIP + 4	Relationship of transferor to transferee
BAA			

of Part III

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

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

► Complete if the organization is described below.

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

OMB No. 1545-0047 2009

> Open to Public Inspection

Department of the Treasury Internal Revenue Service

 Section 501(c)(3) organizations: complete Parts I-A and B. Do not complete Part I-C. • Section 501(c) (other than section 501(c)(3)) organizations: complete Parts I-A and C below. Do not complete Part I-B. Section 527 organizations: complete Part I-A only. If the organization answered 'Yes,' to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B. • Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A. If the organization answered 'Yes,' to Form 990, Part IV, line 5 (Proxy Tax), then Section 501(c)(4), (5), or (6) organizations: Complete Part III. Employer identification number **EARTHWORKS** 52-1557765 Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization. Provide a description of the organization's direct and indirect political campaign activities in Part IV. 2 Political expenditures..... 3 Volunteer hours Part I-B | Complete if the organization is exempt under section 501(c)(3). 0. 2 Enter the amount of any excise tax incurred by organization managers under section 4955...... ▶ \$ 0. 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year?.... Yes No 4a Was a correction made?..... Yes No b If 'Yes,' describe in Part IV. Part I-C | Complete if the organization is exempt under section 501(c), except section 501(c)(3). 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities. ▶ \$ Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities.... Total of exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b..... Did the filing organization file Form 1120-POL for this year?.... Yes Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which payments were made. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV. (a) Name (d) Amount paid from filing organization's funds.
If none, enter-0-. (b) Address (c) EIN (e) Amount of political contributions received an promptly and directly delivered to a separate political organization. If none, enter -0-.

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

Schedule C (Form 990 or 990-EZ) 2009

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Schedule C (Form 990 or 990-EZ) 200				52-1557	7765 Page
Part II-A Complete if t section 501(l	the organizatior h)).	n is exempt under sec	tion 501(c)(3) and	filed Form 5768 (el	ection under
		ngs to an affiliated group.			
		cked box A and 'limited con	trol' provisions apply.		
(The term '	Limits on Lobbyin expenditures' mea	g Expenditures — ns amounts paid or incurre	d.)	(a) Filing organization's totals	(b) Affiliated group totals
1 a Total lobbying expenditu	res to influence pul	olic opinion (grass roots lob	bying)	1,081.	
b Total lobbying expenditu	res to influence a le	egislative body (direct lobby	ring)	34,256.	
c Total lobbying expenditu		35,337.	0		
e Total exempt purpose ex	penditures (add lin	es 1c and 1d)	**********	35,337.	0
f Lobbying nontaxable ame both columns.	ount. Enter the amo	ount from the following tabl	e in	7,067.	
If the amount on line 1e, colu	mn (a) or (b) is: T	he lobbying nontaxable an	nount is:	Market Marie	
Not over \$500,000	2	20% of the amount on line 1e.			
Over \$500,000 but not over \$1,0	00,000	\$100,000 plus 15% of the excess or	ver \$500,000.		
Over \$1,000,000 but not over \$1,		\$175,000 plus 10% of the excess or			
Over \$1,500,000 but not over \$1;	7,000,000	\$225,000 plus 5% of the excess over	er \$1,500,000.		
Over \$17,000,000		\$1,000,000.			
g Grassroots nontaxable ar				1,767.	0.
h Subtract line 1g from line				0.	0.
i Subtract line 1f from line			The state of the s	28,270.	0.
j If there is an amount other	er than zero on eith	er line 1h or line 1i, did the	organization file Form	4720 reporting	
section 4911 tax for this y	year <i>?</i>				Yes X No
(Some	4- organizations that	Year Averaging Period Un	der Section 501(h)	unlata all of the five	
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	columns	made a section 501(h) election below. See the instruction	s for lines 2a through 2	2f.)	
	Lobby	ing Expenditures During 4-	Year Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(4) 2000	
0-1-11			(5) 2555	(d) 2009	(e) Total
2 a Lobbying non-taxable amount	230,672	. 243,716.	5,293.	7,067.	(e) Total
	230,672	. 243,716.			486,748.
amount	230,672 16,297		5,293.	7,067.	486,748. 730,122.
b Lobbying ceiling amount (150% of line 2a, column (e))		. 82,202.			486,748. 730,122. 160,303.
b Lobbying ceiling amount (150% of line 2a, column (e)) c Total lobbying expenditures	16,297	. 82,202.	5,293. 26,467.	7,067. 35,337.	486,748. 730,122. 160,303. 121,687.
amount b Lobbying ceiling amount (150% of line 2a, column (e)) c Total lobbying expenditures d Grassroots nontaxable amount	16,297	. 82,202.	5,293. 26,467.	7,067. 35,337.	486,748.

Did the organization agree to carryover lobbying and political expenditures from the prior year? The complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) If BOTH Part III-A, questions 1 and 2 are answered 'No' OR if Part III-A, line 3 is answered 'Yes.' Dues, assessments and similar amounts from members. Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year. Carryover from last year. C		(2	a)	(b)
a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to older organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Railies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? l Other activities? If 'Yes,' describe in Part IV. l Total, Add lines 1c through 1i. 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b If 'Yes,' enter the amount of any tax incurred under section 4912 c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912 ct If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912 ct If Yes, enter the amount of any tax incurred by organization managers under section 4912 ct If Yes, enter the amount of any tax incurred by organization managers under section 4912 ct If Yes, enter the amount of any tax incurred by organization managers under section 4912 ct If Yes, enter the amount of any tax incurred by organization managers under section 4912 ct If Yes, enter the amount of any tax incurred by organization managers under section 501(c)(4), section 501(c)(5), or section 501(c) dt the fitting organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization make only in-house lobbying and political expenditures from the prior year? 2 Did the organization age to carryover lobbying and political expenditures from the prior year? 3 Tax III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) 1 Dues, assessments and similar amounts from members. 1 Dues, assessments and similar amounts from members. 2 Describent 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses		Yes	No	Amount
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?. c Media advertisements?. d Mailings to members, legislators, or the public?. d Mailings to members, legislators or browing outproses? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? If Yes, describe in Part IV. j Total. Add lines 1c through 1i. 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?. b If Yes, enter the amount of any tax incurred under section 4912 c If Yes, enter the amount of any tax incurred by organization managers under section 4912 ct If Yes, enter the amount of any tax incurred by organization managers under section 4912 dIf the filing organization incurred a section 4912 tax, did it lie Form 4720 for this year? art III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(4) Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying and political expenditures from the prior year? 3 Did the organization agree to carryover lobbying and political expenditures from the prior year? 3 Tat III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(7),	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?. c Media advertisements?. d Mailings to members, legislators, or the public?. d Mailings to members, legislators or browing outproses? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? If Yes, describe in Part IV. j Total. Add lines 1c through 1i. 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?. b If Yes, enter the amount of any tax incurred under section 4912 c If Yes, enter the amount of any tax incurred by organization managers under section 4912 ct If Yes, enter the amount of any tax incurred by organization managers under section 4912 dIf the filing organization incurred a section 4912 tax, did it lie Form 4720 for this year? art III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(4) Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying and political expenditures from the prior year? 3 Did the organization agree to carryover lobbying and political expenditures from the prior year? 3 Tat III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(7),	a Volunteers?	1-2	SEATED	
d Mailings to members, legislators, or the public? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? If Yes,' describe in Part IV. j Total. Add lines 1c through 1i az Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b If Yes,' enter the amount of any tax incurred under section 4912 c If Yes,' enter the amount of any tax incurred by organization managers under section 4912. c If Yes,' enter the amount of any tax incurred by organization managers under section 4912. dIf the filling organization incurred a section 4912 tax, did it file Form 4720 for this year? were substantially all (90% or more) dues received nondeductible by members? Were substantially all (90% or more) dues received nondeductible by members? Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization make only in-house lobbying and political expenditures from the prior year? Did the Organization are to carryover lobbying and political expenditures from the prior year? Dues, assessments and similar amounts from members C Total Dues, assessments and similar amounts from members Dues, assessments an	b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
e Publications, or published or broadcast statements? Grants to other organizations for lobbying purposes? Grants to other organizations, seminars, conventions, speeches, lectures, or any similar means? Grants to other organizations, seminars, conventions, speeches, lectures, or any similar means? Grants to other organization in part IV. Total. Add lines 1c through 1i Can bit the activities in line 1 cause the organization to be not described in section 501(c)(3)? Free; enter the amount of any tax incurred under section 4912. Gif Yes, enter the amount of any tax incurred under section 4912. Grant Hil-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(2) Were substantially all (90% or more) dues received nondeductible by members? Were substantially all (90% or more) dues received nondeductible by members? Were substantially all (90% or more) dues received nondeductible by members? Were substantially all (90% or more) dues received nondeductible by members? Were substantially all (90% or more) dues received nondeductible by members? Were substantially all (90% or more) dues received nondeductible by members? Were substantially all (90% or more) dues received nondeductible by members? Were substantially all (90% or more) dues received nondeductible by members? Were substantially all (90% or more) dues received nondeductible by members? Social for organization argue to carryover lobbying and political expenditures from the prior year? Section 162(e) dues due to the vertice of the organization and political expenditures (do not include amounts of political expenditures of political expenditures (do not include amounts of political expenditures of political expenditures (do not include amounts of the excess does the organization agree to carryover to the reasona	d Mailings to members, legislators, or the public?			
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Part IV Supplemental Information (continued)	52-1557765	Page 4
Tartiv Supplemental information (continued)		
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SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Supplemental Financial Statements

► Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11, or 12. ► Attach to Form 990. ► See separate instructions OMB No. 1545-0047

Open to Public Inspection

EARTHWORKS

Employer Identification number

				52-1557765
Pa	rt I Organizations Maintaining Donor	Advised Funds or Other Similar Fund	ds or A	counts Complete if
	the organization answered 'Yes' to	Form 990, Part IV, line 6.		
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year			
2	Aggregate contributions to (during year)			
3	Aggregate grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor funds are the organization's property, subject to	advisors in writing that the assets held in do the organization's exclusive legal control?	nor advis	ed Yes No
6	Did the organization inform all grantees, donors used only for charitable purposes and not for the purpose conferring impermissible private benefit	and donor advisors in writing that grant fund be benefit of the donor or donor advisor or for ??	s may be any other	
Pa	rt II Conservation Easements Complete	e if the organization answered 'Yes' t	o Form	990, Part IV, line 7.
2	Purpose(s) of conservation easements held by the Preservation of land for public use (e.g., reconstruction of natural habitat Preservation of open space Complete lines 2a through 2d if the organization last day of the tax year.	reation or pleasure) Preservation of Preservation of	f certified	rically important land area historic structure of a conservation easement on the
	ade ady of the tax your			Held at the End of the Year
	Total number of conservation easements		. 2a	neid at the Life of the Teal
	Total acreage restricted by conservation easeme			
	: Number of conservation easements on a certified			
	Number of conservation easements included in (그는 생활이 되는 것으로 되어서 하는 사이들이 가지 않는데 사람들이 가지만 하게 되어 하게 하게 하게 되어 있다.		
	Number of conservation easements modified, tra			organization during the toy
3	year ►	risterred, released, extinguished, or terminate	ed by the	organization during the tax
4	Number of states where property subject to cons	ervation easement is located ▶		
_				
5	Does the organization have a written policy regard and enforcement of the conservation easement i	ding the periodic monitoring, inspection, hand t holds?	dling of vi	olations, Yes No
6	Staff and volunteer hours devoted to monitoring,			
-	during the year ►			
7	Amount of expenses incurred in monitoring, insp during the year ▶	ecting, and enforcing conservation easements	\$	
		4.0	0.0	
8	Does each conservation easement reported on li 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?	ne 2(d) above satisfy the requirements of sec	tion	Yes No
9	In Part XIV, describe how the organization reports or include, if applicable, the text of the footnote to the conservation easements.	nservation easements in its revenue and expens he organization's financial statements that de	e statemer scribes th	at and halance sheet and
Par	t III Organizations Maintaining Collecti	ons of Art. Historical Treasures or (Other Si	milar Assets
3	Complete if the organization answe	red 'Yes' to Form 990, Part IV, line 8		milai Assets
1 a	If the organization elected, as permitted under SI treasures, or other similar assets held for public the text of the footnote to its financial statements	exhibition, education, or research in furtheran	nt and bal ce of pub	ance sheet works of art, historica lic service, provide, in Part XIV,
b	If the organization elected, as permitted under SI treasures, or other similar assets held for public amounts relating to these items:	FAS 116, to report in its revenue statement a	nd balanc ce of publ	e sheet works of art, historical lic service, provide the following
	(i) Revenues included in Form 990, Part VIII, lin	e 1		▶\$
	(ii) Assets included in Form 990, Part X			
2	If the organization received or held works of art, amounts required to be reported under SFAS 116	nistorical treasures, or other similar assets for		
a	Revenues included in Form 990, Part VIII, line 1.			> \$
h	Assets included in Form 990, Part X			►\$

3 Using the organization's acquisition accession and other records, check any of the following that are items (check all that apply): a Public exhibition d Loan or exchange programs				
		0	onecti	ion
u i Loan di exchange montant				
b Scholarly research e Other				
c Preservation for future generations				
4 Provide a description of the organization's collections and explain how they further the organization's Part XIV.	's exempt purpos	e in		
5 During the year, did the organization solicit or receive donations of art, historical treasures, or other	similar			
assets to be sold to raise funds rather than to be maintained as part of the organization's collection'	?	Yes		No
Part IV Escrow and Custodial Arrangements Complete if organization answered 'Ye 9, or reported an amount on Form 990, Part X, line 21.	es' to Form 99	0, Part	IV,	line
1a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assessincluded on Form 990, Part X?	ets not	Yes	Г	No
b If 'Yes,' explain the arrangement in Part XIV and complete the following table:				
District Control of the Control of t	A	Amount		
c Beginning balance.	С			
d Additions during the year	d			
e Distributions during the year	е			
f Ending balance.	f			
2a Did the organization include an amount on Form 990, Part X, line 21?		Yes		No
b If 'Yes,' explain the arrangement in Part XIV.				311111
Part V Endowment Funds Complete if organization answered 'Yes' to Form 990, Par	t IV, line 10.			
(a) Current year (b) Prior year (c) Two years back (d)) Three years back	(e) Fou	r years	back
1 a Beginning of year balance		100	1. 10	
b Contributions		0000/444	1	
c Net Investment earnings, gains, and losses				
d Grants or scholarships		Timber 1		17
e Other expenditures for facilities and programs			1	×
f Administrative expenses				
g End of year balance	TO STATE OF STATE OF		(3) (3)	
2 Provide the estimated percentage of the year end balance held as:		4 1 - # 11 - E		
a Board designated or quasi-endowment ► %				
b Permanent endowment ► %				
c Term endowment ► %				
3a Are there endowment funds not in the possession of the organization that are held and administered organization by:	for the	1		
(i) unrelated organizations	T.		es	No
(ii). related organizations.	Control of the Contro	Ba(i)	-	
b If 'Yes' to 3a(ii), are the related organizations listed as required on Schedule R?		a(ii)		
4 Describe in Part XIV the intended uses of the organization's endowment funds.		3b		
Part VI Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10	1		_	
Description of the state of the				
(4) 555, 61 61161	cumulated reciation	(d) Bool	k Valu	ıe
1a Land) is a second			
b Buildings.				
c Leasehold improvements				_
d Equipment	80,077.		6 5	17
e Other	30,011.		0,5	547.
otal. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).)			6 5	17
AA	Schedule	D /5	_	47.

	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(a) Description of security or category (including name of security) Financial derivatives		Cost of end-of-year market value
Closely-held equity interests		
Other		
	-	
Total. (Column (b) must equal Form 990 Part X, col. (B) line 12.)		
Part VIII Investments-Program Related (See		ne 13) N/A
(a) Description of investment type	(b) Book value	(c) Method of valuation
		Cost or end-of-year market value
Total. (Column (b) must equal Form 990, Part X, Col. (B) line 13.)		The same of the sa
Dort IV Other Accete (Car Farms COO D. L.V.		
rail in Juiner Assets (See Form 990, Part X,	line 15) N/A	
· · · · · · · · · · · · · · · · · · ·		(b) Book value
	line 15) N/A escription	(b) Book value
		(b) Book value
(a) De	escription	(b) Book value
(a) Do	escription	(b) Book value
(a) Do otal. (Column (b) must equal Form 990, Part X, col.(B), I Part X Other Liabilities (See Form 990, Part	line 15)X, line 25)	
otal. (Column (b) must equal Form 990, Part X, col.(B), I Part X Other Liabilities (See Form 990, Part (a) Description of Liability	escription	
otal. (Column (b) must equal Form 990, Part X, col.(B), I Part X Other Liabilities (See Form 990, Part (a) Description of Liability	line 15)X, line 25)	
otal. (Column (b) must equal Form 990, Part X, col.(B), I Part X Other Liabilities (See Form 990, Part (a) Description of Liability	line 15)X, line 25)	
otal. (Column (b) must equal Form 990, Part X, col.(B), I Part X Other Liabilities (See Form 990, Part (a) Description of Liability	line 15)X, line 25)	
otal. (Column (b) must equal Form 990, Part X, col.(B), I Part X Other Liabilities (See Form 990, Part (a) Description of Liability	line 15)X, line 25)	
otal. (Column (b) must equal Form 990, Part X, col.(B), I Part X Other Liabilities (See Form 990, Part (a) Description of Liability	line 15)X, line 25)	
otal. (Column (b) must equal Form 990, Part X, col.(B), I Part X Other Liabilities (See Form 990, Part (a) Description of Liability	line 15)X, line 25)	
(a) Description of Liability	line 15)X, line 25)	
otal. (Column (b) must equal Form 990, Part X, col.(B), I Part X Other Liabilities (See Form 990, Part (a) Description of Liability	line 15)X, line 25)	
(a) Description of Liability	line 15)X, line 25)	
(a) Do otal. (Column (b) must equal Form 990, Part X, col.(B), I Part X Other Liabilities (See Form 990, Part	line 15)X, line 25)	
otal. (Column (b) must equal Form 990, Part X, col.(B), I Part X Other Liabilities (See Form 990, Part (a) Description of Liability	line 15)X, line 25)	

^{2.} FIN 48 Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48.

Pa	↑ XI Reconciliation of Change in Net Assets from Form 990 to Financial Statemer	its	
1	Total revenue (Form 990, Part VIII,column (A), line 12)		1,438,657.
2	Total expenses (Form 990, Part IX, column (A), line 25)		1,464,016.
3	Excess or (deficit) for the year. Subtract line 2 from line 1		-25,359.
4	Net unrealized gains (losses) on investments		
5	Donated services and use of facilities		
6	Investment expenses		
7	Prior period adjustments		
8	Other (Describe in Part XIV)		
9	Total adjustments (net). Add lines 4 through 8		
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9		-25,359.
Par	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue p	er Return	20,000.
1	Total revenue, gains, and other support per audited financial statements.		1,438,657.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains on investments	13.33	
	Donated services and use of facilities	10.14	
	Recoveries of prior year grants	(4)	
	Other (Describe in Part XIV).	100	
	Add lines 2a through 2d.	2e	
	Subtract line 2e from line 1		1,438,657.
	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		1,430,037.
	Investments expenses not included on Form 990, Part VIII, line 7b	100	
	Other (Describe in Part XIV).	-	
	Add lines 4a and 4b	- 40	
	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.).		1 420 657
Par	XIII Reconciliation of Expenses per Audited Financial Statements With Expenses	nov Potuve	1,438,657.
	Total expenses and losses per audited financial statements		
	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1	1,464,016.
	그리고 그렇게 되었는 다양이 아버지 그리는 아무지 아무지 않았다. 아이들 살아가면 어느리는 아이들에 가지 않아 아니는 아이들이 살아 보는 것이 없는데 그는데 그는데 그렇게 되었다.	1.30.7	
	그렇게 있는데 하다는데 사용하다 하다 하다 보다 보다 보다 되었다면 하다 하다 하나	-	
	Other (Describe in Part XIV)	No.	
	Add lines 2a through 2d.		1 101 010
	Subtract line 2e from line 1.	3	1,464,016.
	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
	Investments expenses not included on Form 990, Part VIII, line 7b		
	Other (Describe in Part XIV)		
-	Add lines 4a and 4b	4c	
5	Total expenses. Add lines 3 and 4c (This must equal Form 990, Part I, line 18.)	5	1,464,016.
Part	XIV Supplemental Information		
Comp ine 4 nform	lete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Pa Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete thation.	rt IV, lines 1b is part to prov	and 2b; Part V, ride any additional
		HESSES.	

Schedule D (Form 990) 2009	EARTHWORKS	52-1557765	Page 5
Part XIV Supplementa	Information (continued)		
200000000000			
			Medie
			25363
444046131313132			
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~~~~~~~ <del>~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~</del>			

# SCHEDULE I (Form 990)

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

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

Attatch to Form 990.

2009

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

52-1557765

Department of the Treasury Internal Revenue Service Name of the organization

Part I General Information on Grants and Assistance EARTHWORKS

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered 'Yes' to Form X Yes 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Part IV and Schedule I-1 (Form 990) if additional space is needed.

(h) Purpose of grant or assistance **A** (g) Description of non-cash assistance (f) Method of valuation (book, FMV, appraisal, other) 0 0 0 0 0 0 0 (e) Amount of non-cash assistance (d) Amount of cash grant 22,500 19,000 9,000 9,000 9,000 9,000 9,000 53,400 (c) IRC section if applicable (P) EIN 441 WEST FIFTH AVENUE, SUITE 402 CENTER FOR SCIENCE IN PUBLIC PAR POWDER RIVER BASIN RESOURCE COUN 128 N. 6TH STREET, P.O. BOX 1931 ALASKA CONSERVATION FOUNDATION 325 PACIFIC AVENUE, 3RD FLOOR 1 (a) Name and address of organization 220 S. 27TH STREET, SUITE A SAN JUAN CITIZENS ALLIANCE WESTERN COLORADO CONGRESS 224 NORTH CHURCH AVENUE GRAND JUNCTION, CO 81502 SAN FRANCISCO, CA 94111 ANCHORAGE, AR 99501 LAME DEER, MT 59043 NORTHERN PLAINS RC BILLINGS, MT 59101 SHERIDAN, WY 82801 BOZEMAN, MT 59715 RESOURCE MEDIA DURANGO, CO 81302 934 NORTH MAIN NATIVE ACTION P.O. BOX 2461 P.O. BOX 409

2 Enter total number of section 501(c)(3) and government organizations. 3 Enter total number of other organizations..

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

TEEA3901L 02/10/10

Schedule I (Form 990) 2009

Page 2 Grants and Other Assistance to Individuals in the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 22. Use Part IV and Schedule I-1 (Form 990) if additional space is needed. (f) Description of non-cash assistance Part IV | Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. 52-1557765 (e) Method of valuation (book, FMV, appraisal, other) (d) Amount of non-cash assistance (c) Amount of cash grant (b) Number of recipients EARTHWORKS (a) Type of grant or assistance Schedule I (Form 990) 2009 Part III

BAA

Schedule I (Form 990) 2009

SCHEDULE I-1 (Form 990) Department of the Treasury Internal Revenue Service Name of the organization

OMB No. 1545-0047

Continuation Sheet for Schedule I (Form 990)

► Attach to Form 990 to list additional information for Schedule I (Form 990), Part II and Part III.

2009

1000

Open to Public Inspection

(h) Purpose of grant or assistance Employer identification number (Form 990), Part II.) (g) Description of non-cash assistance 52-1557765 Part | Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule | (f) Method of valuation (book, FMV, appraisal, other) (e) Amount of non-cash assistance (d) Amount of cash grant 9,000 (c) IRC section if applicable (b) EIN (a) Name and address of organization or government WYOMING OUTDOOR COUNCIL 262 LINCOLN STREET LANDER, WY 82520 EARTHWORKS

Schedule I-1 (Form 990) 2009

# SCHEDULE O (Form 990)

## **Supplemental Information to Form 990**

OMB No. 1545-0047

2009

Department of the Treasury Internal Revenue Service

Name of the organization

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

► Attach to Form 990.

Open to Public Inspection

Employer identification number

EARTHWORKS	52-1557765
FORM 990, PART III, LINE 1 - ORGANIZATION MISSION	AARARARARARARARARARARARARARARARARARARA
THE CORPORATION IS ORGANIZED EXCLUSIVELY FOR CHARITA	BLE AND EDUCATIONAL PURPOSES.
MORE SPECIFICALLY, THE ACTIVITIES OF THE CORPORATION	SHALL INCLUDE BUT NOT BE
LIMITED TO: PROTECTING COMMUNITIES AND THE ENVIROMEN	T FROM THE IMPACTS OF
DESTRUCTIVE MINERAL DEVELOPMENT IN THE US AND WORLDW	IDE, BY WORKING WITH COMMUNITIES
AND GRASSROOTS GROUPS TO REFORM GOVERNMENTAL POLICIE	S, IMPROVE COPORATE PRACTICES,
AND INFLUENCE INVESTMENT DECISIONS. THE CORPORATION	SHALL WORK TO ENCOURAGE
CONSERVATION, RECYCLING, RESPONSIBLE MATERIALS POLIC	IES, FUEL EFFICIENCY, AND
RENEWABLE ENERGY SOURCES. THE CORPORATION SHALL EXP	OSE THE HEALTH, ENVIRONMENTAL,
ECONOMIC, SOCIAL AND CULTURAL IMPACTS OF IRRESPONSIB	LE_MINERAL_DEVELOPMENT_THROUGH
WORK_INFORMED_BY_SOUND_SCIENCE, AND ACHIEVED_THROUGH	, BUT NOT LIMITED TO PUBLIC
EDUCATION, RESEARCH, LITIGATION AND ADVOCACY	
FORM 990, PART III, LINE 4D - OTHER PROGRAM SERVICES DESC	CRIPTION
EARTHWORKS_PARTNERSHIP_PROGRAMSEARTHWORKS_PROVIDE	S BACK-OFFICE SERVICES
(INCLUDING PAYROLL, ACCOUNTING, AND ADMINISTRATION),	A LEGAL FRAMEWORK, AND CAPACITY
BUILDING SUPPORT TO A VARIETY OF SMALL PROGRAMS (SING	GLE STAFF, OR VOLUNTEER ONLY
ORGANIZATIONS) THAT SHARE OUR MISSION OF PROTECTING	COMMUNITIES AND THE ENVIRONMENT
FROM THE NEGATIVE IMPACTS OF MINERAL DEVELOPMENT. I	N 2008 EARTHWORKS SERVED AS THE
FISCAL SPONSOR OF THE FOLLOWING PROJECTS:	
ETHICAL METALSMITHS: THIS PROJECT SEEKS TO STIMULATI	E DEMAND AND SUPPLY FOR
RESPONSIBLY SOURCED MATERIALS FOR METALSMITHS AND JET	WELERS.
COMMON GROUND UNITED: THIS PROJECT PROVIDES A PLATFO	ORM_ALLOWING_DIVERSE
ORGANIZATIONS, FROM LOCAL TO NATIONAL, TO EXPRESS A C	UNITED VOICE CONCERNING THE
PROTECTION OF OUR WATER CULTURAL FOOLOGICAL AND FO	CONOMIC RESOURCES AND THE HEALTH

Employer identification number

EARTHWORKS	52-1557765
FORM 990, PART III, LINE 4D - OTHER PROGRAM SERVICES DESCRIPTION (CC	
DEVELOPMENTS.	
ALASKANS FOR RESPONSIBLE MINING: A VOLUNTARY ASSOCIATION OF NO	N-GOVERNMENTAL
ORGANIZATIONS WORKING TOGETHER TO RAISE PUBLIC AWARENESS OF THE	IMPACTS OF THE
EXTRACTIVE INDUSTRY TO ALASKA'S WATERSHEDS, WILDLIFE, FISHERIES	, COMMUNITIES AND
PUBLIC HEALTH; AND TO REFORM ALASKA'S INADEQUATE MINING LAWS.	
ARIZONA MINING COALITION: THIS PROJECT SEEKS TO RAISE PUBLIC A	WARENESS AND PROTECT
INDIGENOUS SACRED SITES AND RECREATIONAL AREAS IN THE STATE OF	ARIZONA_FROM
IRRESPONSIBLE MINERAL DEVELOPMENT.	
THE NEXT BEST WEST: THIS PROJECT IS CREATING A FEATURE-LENGTH	DOCUMENTARY FILM THAT
WILL EXPLORE OUR RELATIONSHIP TO THE LANDSCAPE OF THE AMERICAN	WEST. THE FILM WILL
SHOW HOW OUR INTERPRETATION OF PROGRESS HAS SHAPED THE SINGULAR	
AMERICAN WEST, AND HOW A NEW UNDERSTANDING OF PROGRESS MAY BE O	UR BEST HOPE FOR A
BRIGHT AND HEALTHY FUTURE.	
DIRITO MEMBER INFORMATION -	
PUBLIC MEMBER INFORMATION -	
MEDIA/COMMUNICATIONS - WEBSITE, NEWSLETTER AND OTHER METHODS TO	PROMOTE AND
PUBLICIZE THE WORK OF EARTHWORKS AND ITS ALLIES, INCLUDING PUBL	IC OPINION RESEARCH.
RESEARCH/PUBLICATIONS - ANALYSIS OF POLICY PROPSALS, DEVELOPMEN	I OF POLICY
PROPOSALS, RESEARCH INTO IMPACTS OF MINING IN THE FORM OF FACT	SHEETS, ISSUE PAPERS
AND REPORTS.	

Name of the organization  EARTHWORKS	Employer identification number 52–1557765
FORM 990, PART III, LINE 4D - OTHER PROGRAM SERVICES DESCRIPTION	ON (CONTINUED)
ADVOCACY TECHNOLOGY/TOOL (CAPACITY BUILDING) - INVESTMENT	
OUTREACH, RESEARCH AND ADVOCACY CAPACITY THROUGH EXPENDIT	JRES ON TECHNOLOGY, DATA
MANAGEMENT, ELECTRONIC TOOLS, MEMBERSHIP, AND CAPACITY TO	REACH COMMUNITIES.
RESEARCH AND INFORMATION PROVIDED TO THE PUBLIC AND MEBERS	
FACT SHEETS, ELECTRONIC (EMAIL) UPDATES AND ALERTS, NEWSLE	ETTERS, AND RESPONSES TO
DIRECT_INQUIRIES	
FORM 990, PART VI, LINE 11 - FORM 990 REVIEW PROCESS	
A DRAFT COPY OF THE 990 WAS RECEIVED AND PROVIDED TO THE E	BOARD MEMBERS FOR REVEIW
BEFORE COMPLETION AND FILING.	
FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLIC	CLY AVAILABLE
THE GOVERNING DOCUMENTS, POLICIES AND FINANCIAL STATEMETHS	S ARE MADE AVAILABLE TO
INTERESTED PARTIES UPON REQUEST.	

### Form **8868** (Rev April 2009)

Application for Extension of Time To File an Exempt Organization Return

Department of the Treasury Internal Revenue Service

► File a separate application for each return.

OMB No. 1545-1709

internal Revenue	SELVICE		- TV
<ul><li>If you ar</li></ul>	e filing for an Automatic 3-Mo	nth Extension, complete only Part I and check this box	► <u>X</u>
<ul><li>If you ar</li></ul>	e filing for an Additional (Not	Automatic) 3-Month Extension, complete only Part II(	on page 2 of this form).
Do not com,	<i>plete Part II unless</i> you have a	lready been granted an automatic 3-month extension o	n a previously filed Form 8868.
Part I	Automatic 3-Month Exte	ension of Time. Only submit original (no copi	es needed).
		and requesting an automatic 6-month extension — chec	
All other cor income tax i		ers), partnerships, REMICS, and trusts must use Form	7004 to request an extension of time to file
the additiona	al (not automatic) 3-month ext	n electronically file Form 8868 if you want a 3-month a ration required to file Form 990-T). However, you canno ension or (2) you file Forms 990-BL, 6069, or 8870, gro fully completed and signed page 2 (Part II) of Form 88 on e-file for Charities & Nonprofits.	utomatic extension of time to file one of the of file Form 8868 electronically if (1) you want up returns, or a composite or consolidated 68. For more details on the electronic filing of
	Name of Exempt Organization		Employer identification number
Type or			
print	EARTHWORKS		52-1557765
File by the	Number, street, and room or suite num	ber. If a P.O. box, see instructions.	
due date for filing your return. See	1612 K STREET, NW	#808	
instructions.	City, town or post office, state, and ZIF	code. For a foreign address, see instructions.	
	WASHINGTON, DC 200	06	
Check type	of return to be filed (file a sep	arate application for each return):	
X Form 99		Form 990-T (corporation)	Form 4720
Form 99		Form 990-T (section 401(a) or 408(a) trust)	Form 5227
Form 99		Form 990-T (trust other than above)	Form 6069
Form 99		Form 1041-A	Form 8870
<ul><li>If the org</li><li>If this is check th</li></ul>	panization does not have an of for a Group Return, enter the is box . ▶ ☐ . If it is for part	FAX No. ►  fice or place of business in the United States, check th organization's four digit Group Exemption Number (GEI of the group, check this box. ► ☐ and attach a list with the contraction of the group, check this box.	s box
the exter	nsion will cover.		and the of time
until _ The ex ► X	8/15, 2010, to tension is for the organization	, 20, and ending, 20	named above.
2 - 16 this .	application is far Form 990.RI	, 990-PF, 990-T, 4720, or 6069, enter the tentative tax,	less any 3a \$ 0.
			The state of the s
b If this a made.	application is for Form 990-PF Include any prior year overpay	or 990-T, enter any refundable credits and estimated to Iment allowed as a credit	3b \$ 0,
deposi See in	t with FTD coupon or, it requir	ne 3a. Include your payment with this form, or, if requined, by using EFTPS (Electronic Federal Tax Payment S	3c \$ 0.
payment ins	tructions.	ronic fund withdrawal with this Form 8868, see Form 84	
BAA For Pr	ivacy Act and Paperwork Red	uction Act Notice, see instructions.	Form 8868 (Rev. 4-2009)

# Form **990**

Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047 2008

Open to Public Inspection

Department of the Treasury Internal Revenue Service ► The organization may have to use a copy of this return to satisfy state reporting requirements. For the 2008 calendar year, or tax year beginning , 2008, and ending

В	Check	if applicable:				D Employer Ide	ntification Number
	Ac	ddress change	Please use IRS label	EARTHWORKS		52-155	7765
	Na	ame change	or print or type.	1612 K STREET, NW #808	1 1	E Telephone nu	mber
	Ini	itial return	See specific	WASHINGTON, DC 20006		202-88	7-1872
	Te	ermination	Instruc- tions.				
	An	mended return				G Gross receipts	\$ 1,684,798.
	Ap	plication pending	F Name a	nd address of principal officer:		group return for a	
			SAME A	AS C ABOVE	the second of th	ffiliates included?	Yes No
	Tax	-exempt statu	s X 501	(c) (3 ) ◀ (insert no.) 4947(a)(1) or 527	If 'No,' at	tach a list. (see in	nstructions) — — —
J	Wel	osite: ► WW	W.EART	HWORKSACTION.ORG	H(c) Group ex	emption number	<b>•</b>
K	Туре	of organization:	X Corpora	tion Trust Association Other ► L Year of Formal			legal domicile: DC
Pa	art l	Summa				1337.3339.33	regar commoner 20
	1	Briefly descri	be the org	anization's mission or most significant activities: THE CORP	ORATION	TS ORGA	NTZED
v		EXCLUSIV	ELY FO	R CHARITABLE AND EDUCATIONAL PURPOSES.	MORE SP	ECIFICAL	LY, THE
anc		ACTIVITI	ES_OF_	THE CORPORATION SHALL INCLUDE BUT NOT BE	LIMITE	D TO: PR	OTECTING
егл		COMMUNIT	IES AN	D THE ENVIROMENT FROM THE IMPACTS OF DES	TRUCTIV	E_MINERA	L_DEVELOPMENT
300		Check this bo	x ► _ i	f the organization discontinued its operations or disposed of mo	ore than 25%	% of its asset	S.
Activities & Governance	3	Number of vo	ting mem	pers of the governing body (Part VI, line 1a)		3	9
ies				voting members of the governing body (Part VI, line 1b)			10
ivit	6	Total number	of volunte	eers (estimate if necessary).		5	15
Ac				usiness revenue from Part VIII, line 12, column (C)			0.
	b	Net unrelated	business	taxable income from Form 990-T, line 34	*********	7b	0.
14	4.00					or Year	Current Year
	8 (	Contributions	and grant	s (Part VIII, line 1h)		485,248.	1,644,846.
une	1000			s (Part VIII, line 1h)		100,210.	1,044,040.
Revenue	10 1	nvestment in	come (Pai	t VIII, column (A), lines 3, 4, and 7d)		24,448.	515.
ŭ	11 (	Other revenue	(Part VII	I, column (A), lines 5, 61, 80, 90, 10c, and 11e)		20,924.	39,437.
				es 8 through 11 (must aqual Part VIII, column (A), line 12)		530,620.	1,684,798.
	13 (	Grants and sin	milar amo	unts paid (Part X column (A), lines 1-3)		241,739.	T T T T T T T
	14 E	Benefits paid	to or for n	nembers (Part IX, column (A), line 4)		1000	
Ø	15 5	Salaries, othe	r compens	sation, employee benefits (Part IX, column (A), lines 5-10)		949,069.	1,114,180.
Expenses	16a F	Professional for	undraising	fees (Part IX, column (A), line 11e)			
thei				ses (Part IX, column (D), line 25) - 194, 952.	100		
ŵ	1 3 4 4 4			G, column (A), lines 11a-11d, 11f-24f)		683,505.	723,160.
Ш				es 13-17 (must equal Part IX, column (A), line 25)		374,313.	1,837,340.
				Subtract line 18 from line 12		343,693.	-152,542.
80	10	tevenue jess	скрепаса	Cubitact line 10 from line 12	The second second		
ances	20 T	otal accots (F	Part Y line	e 16)		ng of Year 572,718.	End of Year
Ba Ba		함께 없었다. 전경하는 원래의 기계적인	A CONTRACTOR OF STREET	ine 26)	-	84,895.	371,401. 36,120.
Fund Balar				nces. Subtract line 21 from line 20.	,		
	rt II	Signatu			4	187,823.	335,281.
u	1.0						The Wilson C
		true, correct, and	d complete. D	declare that I have examined this return, including accompanying schedules and state declaration of preparer (other than officer) is based on all information of which prepare	ments, and to the er has any know	he best of my kno wledge.	wledge and belief, it is
ig	ın	<b>▶</b> ¥.	1.0	0. 0'	17	Isalas	
ler		Signature of	officer		Date	1-110	
		► V \	2.100	Dinn Dir. Finance, Open	1	1 4	1
		Type or prin	t name and t	tle. Dinn Dir. Finance, Open	ration	2 4 00	evelopment
		December A		Date Che	eck if	Preparer's ider	atifying number
Pai	id	Preparer's signature	MICHAEL	D. AUKAMP, CPA	ployed >	(see instruction	
	parer's	1 11111 0 1101110 1	or yours	DUNHAM, AUKAMP & RHODES, PLC	EIN	<b>&gt;</b>	
Use	e Only	if self-employed address, and	ed), ZIP + 4	4437 BROOKFIELD CORPORATE DRIVE, SUITE 205 CHANTILLY, VA 2015		no. ► (703)	631-8940
Ma	v the I						. X Yes No
	1000			Reduction Act Notice, see the separate instructions.			Form 990 (2008)

For	n <b>990</b> (2	(8009	EARTHWORKS		52-1	557765		Page 2
Pa	rt III	Sta	tement of Program Service A	ccomplishments (see instr	ructions)			
1			ibe the organization's mission:					
	SEE	SCHE	DULE O					
2	Did the	e orga	nization undertake any significant pro	gram services during the year wh	ich were not listed on the prior			
	Form 9	990 or	990-EZ?	***********************		Yes	X	No
			ribe these new services on Schedule					
3			nization cease conducting, or make s	ignificant changes in how it condu	cts, any program services?	Yes	X	No
4			ribe these changes on Schedule O.	ash of the assessmention's three level	and program continue by symm	an Castian I	=01/0	(2)
4	and 50	01(c)(4	exempt purpose achievements for e ) organizations and section 4947(a)(	l) trusts are required to report the	amount of grants and allocatio	ns to others,	the total	al
	expens	ses, a	nd revenue, if any, for each program	service reported.				
		99/9752	GRANES	Male a service of the control				_
4			(Expenses \$ 523,					)
			Y REFORM PROGRAMS - PRO TO PROTECT COMMUNITIES					
	RESO			RCH, PUBLICATIONS, IN			KAL	
			, LEGAL ACTION, OUTREAC				RS.	
			UNITIES, SUPPORT TO AFF				1.5/_	
			, AND EDUCATING DECISION				LS.	
	THE	FOCU	S OF THIS PROGRAM IS BO	TH ON STATE AND FEDER	AL POLICIES.			
	10.1	EAWSE.	******** A 0.64	560				
41	Code:	DNAT	(Expenses \$ 264, IONAL POLICY AND MARKET	DEFORM DROCDAMS - DR	OCDAMS TO DESEABLE			)
			E AND PROMOTE POLICIES				ARD	
			G AND NATURAL RESOURCES					
			IONS, INFORMATION ANALY					
			NS OF THE PUBLIC AND CO					
			ARENESS AND COVERAGE, A				AND	
			OFFICIALS. THIS INCLUD					
			NG SITE VISITS, AND PRO . THIS ALSO INCLUDES P				OWIC	
	HINYT	1213	. Inis Also Includes F	ROGRAMS TO INCREASE C	OKLOWIE WCCOOMINDII	<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>		
40	: (Code:	NE CO	) (Expenses \$522,	392. including grants of \$	) (Revenue	Ś		)
			GAS ACCOUNTABILITY PROJ				ITIE	S
			CT THEIR HOMES AND THE					
			ENT. THIS INCLUDES ADV					
			S. WE UTILIZE MEDIA, P					
			E THE WAY OIL AND GAS D					
			PROGRAM AREAS: PUBLIC					
	REFO	<u> </u>						
				ann aanna				
4 d			n services. (Describe in Schedule O.)					
10	(Expens		\$ $214,094$ . including a service expenses $\triangleright$ \$ 1	grants of \$ 52.4 0.79 (Must equal Part I)	) (Revenue \$		)	
46	i otal pi	ograf	T Service exhelises > A T	JET, OTJ. (Musi Equal 1 all 17	, Line 20, coluini (D).)			

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		2	Χ	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I.	3		Х
4		4	Χ	
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If 'Yes,' complete Schedule C, Part III.	5		
6		6	ĬŢ,	Х
7		7	VI	Х
8		8	ij	X
9		9	į,	Х
10	Did the organization hold assets in term, permanent, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10		X
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If 'Yes,' complete Schedule D, Parts VI, VIII, IX, or X as applicable	11	х	
12		12	Х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13	71	X
	a Did the organization maintain an office, employees, or agents outside of the U.S.?	14a	re i	X
	b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,	0 4 1		4
	business, and program service activities outside the U.S.? If 'Yes,' complete Schedule F, Part I	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Part II.	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If 'Yes,' complete Schedule F, Part III.	16		X
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If 'Yes,' complete Schedule G, Part I	17	00 00	X
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III	19		<u>X</u>
20	Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H	20		X
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and IL	21		X
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III.	22		<u>X</u>
23	Did the organization answer 'Yes' to Part VII, Section A, questions 3, 4, or 5? If 'Yes,' complete Schedule J.	23		X
24 a	a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, and that was issued after December 31, 2002? If 'Yes,' answer questions 24b-24d and complete Schedule K. If 'No, 'go to question 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	- 1	
(	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		
C	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		Х
Ł	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If 'Yes,' complete Schedule L, Part I.	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II	26	4	X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If 'Yes,' complete Schedule L, Part III.	27		Х
14.14		1221		

BAA

Page 4

Form 990 (2008)

#### Part IV Checklist of Required Schedules (continued) Yes No During the tax year, did any person who is a current or former officer, director, trustee, or key employee: 28 a Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? If 'Yes,' complete Schedule L, Part IV. 28a X b Have a family member who had a direct or indirect business relationship with the organization? If 'Yes,' complete Schedule L, Part IV. X 28b c Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If 'Yes,' complete Schedule L, Part IV..... 28c X X Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M..... 29 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation 30 X contributions? If 'Yes,' complete Schedule M..... 31 X Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part 1...... Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II . . . . 32 X 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 X Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, X 34 Is any related organization a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2. 35 X 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 36 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is 37 treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI.....

1a Enter the number reported in Box 3 of form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable.	3	Yes	1
THE SECTION OF STREET OF STREET OF STREET OF STREET	2	150	1
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c		
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	116	71	M
2b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2 b	Х	
<b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> this return. (see instructions)	5		1
3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		
b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule Q	3 b		T
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		
b If 'Yes,' enter the name of the foreign country: ▶	1000	100	X
See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
<b>5a</b> Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a		
<b>b</b> Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		
c If 'Yes,' to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5с		
6 a Did the organization solicit any contributions that were not tax deductible?	6a	Œ	
<b>b</b> If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were no deductible?	t 6b		
7 Organizations that may receive deductible contributions under section 170(c).	178		
a Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?	7a		
b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7b		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		
d If 'Yes,' indicate the number of Forms 8282 filed during the year	-	100	V
e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal	Jane 1	1	F
benefit contract?	7 e		-
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7 g	-	_
h For all contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h	elismy.	g
8 Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8	Javis.	
9 Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.		1110	V
a Did the organization make any taxable distributions under section 4966?	9a		
<b>b</b> Did the organization make any distribution to a donor, donor advisor, or related person?	9b		
0 Section 501(c)(7) organizations. Enter:	100	100	
a Initiation fees and capital contributions included on Part VIII, line 12 10a		1737	
b Gross Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b		33.30	
1 Section 501(c)(12) organizations. Enter:			
a Gross income from other members or shareholders		V 1	
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)		183	
2a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	I	

Part VI Governance, Management and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

Se	ction A.	Governing Body and Management			
	For each	'Yes' response to lines 2-7b below, and for a 'No' response to lines 8 or 9b below, describe the circumstances, is, or changes in Schedule O. See instructions.	70.50	Yes	No
1	A STATE OF THE STA	e number of voting members of the governing body	Ship		8
ď		e number of voting members that are independent			
2	! Did any	officer, director, trustee, or key employee have a family relationship or a business relationship with any other	•		Х
3		irector, trustee or key employee?	2		
			3	V	X
4		rganization make any significant changes to its organizational documents prior Form 990 was filed?SEE .SCH .O	4	Х	
5		rganization become aware during the year of a material diversion of the organization's assets?	5		Х
6		organization have members or stockholders?	6	Х	
		organization have members, stockholders, or other persons who may elect one or more members of the			
'	governing	g body?	7a		X
	<b>b</b> Are any o	decisions of the governing body subject to approval by members, stockholders, or other persons?	7 b		X
8	Did the o	rganization contemporaneously document the meetings held or written actions undertaken during the year by	MY		
	a The gove	rning body?	8a		X
	b Each con	nmittee with authority to act on behalf of the governing body?	8b		X
9	a Does the	organization have local chapters, branches, or affiliates?	9a	- 1	X
	b If 'Yes,' o	loes the organization have written policies and procedures governing the activities of such chapters, affiliates, ches to ensure their operations are consistent with those of the organization?	9 b		
		py of the Form 990 provided to the organization's governing body before it was filed? All organizations must in Schedule O the process, if any, the organization uses to review the Form 990. SEE .SCHEDULE.O	10	Х	
11	Is there a organizat	ny officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the ion's mailing address? <i>If</i> 'Yes,' provide the names and addresses in Schedule O	11		X
Se	ction B.	Policies			
				Yes	No
		organization have a written conflict of interest policy? If 'No,' go to line 13	12 a	Х	_
	to conflic	ers, directors or trustees, and key employees required to disclose annually interests that could give rise ts?	12b		Х
	c Does the Schedule	organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in O how this is done	12 c		Х
13	Does the	organization have a written whistleblower policy?	13		X
14	Does the	organization have a written document retention and destruction policy?	14		X
15	Did the propersions,	rocess for determining compensation of the following persons include a review and approval by independent comparability data, and contemporaneous substantiation of the deliberation and decision:			
	a The organ	nization's CEO, Executive Director, or top management official?	15 a		X
	<b>b</b> Other offi	cers of key employees of the organization?	15b		X
	Describe	the process in Schedule O. (see instructions)		100	
16	a Did the or entity dur	ganization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable ing the year?	16a		X
	b If 'Yes,' h	as the organization adopted a written policy or procedure requiring the organization to evaluate its participation inture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt		Air I	
	status wit	h respect to such arrangements?	16b		
_		Disclosures			
17		ates with which a copy of this Form 990 is required to be filed $ ightharpoonup$ SEE_SCHEDULE_O			
18	Section 6 inspection	104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) ava . Indicate how you make these available. Check all that apply.	ailable	e for p	ublic
		website Another's website Upon request			
	statement	in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policis available to the public.			ncial
		name, physical address, and telephone number of the person who possesses the books and records of the organion of the organic of the	nizatio	on: 	
AA	Va		orm !	990 (2	(8002

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

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

1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed.

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- 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) or more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

(A)	(B) (c) Average Position (check all that apply)							(D)	(E)	(F)
Name and Title	Average hours per week	or director	Institutional trustee	Officer	Mey employee	Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
STEPHEN D'ESPOSITO	34 6 64	7 - 6								
PRESIDENT & CEO	35			X	Ш		1	110,855.	0.	0
DR. KARIN SHELDON CHAIRMAN	2			Х				0.	0.	0
GLENN MILLER VICE CHAIRMAN	1.5			Х				0.	0.	0
KERRY ANDERSON BOARD MEMBER	1	Х						0.	0.	0
MICHAEL CONROY BOARD MEMBER	1	Х	I		d			0.	0.	0
GLORIA FLORA BOARD MEMBER	1	X						0.	0.	0
JAY HALFON SEC/TREASURER	2	X		Х			i	0.	0.	0
BILL MCNEILL BOARD MEMBER	1	Х	Ē		ĥ			0.	0.	0
WILMA SUBRA BOARD MEMBER	1	Х						0.	0.	0
KIMBERLEE SMITH-DINN DIR OPS & DEV	35					Х		72,500.	0.	3,625
GWEN LACHELT OGAP PROG DIR	35					Х		70,000.	0.	3,500
ALAN SEPTOFF RESEARCH & IT	35					Х		57,000.	0.	2,850
LAUREN_PAGELLEGISLATIVE DIR	35					Х		51,000.	0.	2,550
PAYAL SAMPAT INTL MINING DIR	35					Х		65,445.	0.	3,272

Part VII   Section A. Officers, Directors, Trus (A)					c)	03,	uii	(D)	(E)		(F)	,,,,
Name and Title	Average hours		tion (	(checl	k all	lhat a		Reportable	Reportable compensation from	200	Estimate	ed
	per week	individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	o	nount of compensal from the rganizati and relat rganization	tion e ion ted
	17									<u> </u>		
	3.7		La la							ME.		
						M						
			1									
	1											
				I								
					P							
											-94	
1 b Total	ho rece	ived	mo	re t	han		00,00	426,800.	0. ompensation from	l the	15,	<u> 197 .</u>
		l o			Č.			<b>6</b> . T = 2. T	1 m 200 m	19700	Yes	No
3 Did the organization list any former officer, director on line 1a? If 'Yes,' complete Schedule J for such in	dividua									. 3	A CONTRACTOR	Х
4 For any individual listed on line 1a, is the sum of rep the organization and related organizations greater th individual.	nan \$150	0,000	iper 0? [:	f 'Ye	es' c	and comp	otne	Schedule J for s	rom uch	. 4		X
5 Did any person listed on line 1a receive or accrue corendered to the organization? If 'Yes,' complete Sch	mpens edule J	ation for s	fro such	m a	ny ι rsor	unre 1	lated	d organization for	services	. 5		Х
Section B. Independent Contractors  1 Complete this table for your five highest compensate	ad inder	and	ent	con	trac	tore	that	received more th	an \$100,000 of			
compensation from the organization.	ed indep	Jenu	ent		liac	1013	triat					_
Name and business address	5						4	(B) Description of	Services	Compe	(C) ensatio	n
Total number of independent contractors (including to the contractors)	hose in	1) w	vho	rece	oive	d m	ore t	han \$100,000 in	001	100		N/Op

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
SIFTS, GRANTS AR AMOUNTS	1 a Federated campaigns     1 a       b Membership dues     1 b       c Fundraising events     1 c       d Related organizations     1 d				
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	e Government grants (contributions) 1e  f All other contributions, gifts, grants, and similar amounts not included above 1f 1,644,846.  g Noncash contribus included in Ins 1a-1f: \$  h Total. Add lines 1a-1f.				
3	h Total. Add lines 1a-1f	1,644,846.			
PROGRAM SERVICE REVENUE	b c d e f All other program service revenue				
P.	g Total. Add lines 2a-2f▶				Mark Control
	<ul> <li>Investment income (including dividends, interest and other similar amounts).</li> <li>Income from investment of tax-exempt bond proceeds</li> </ul>	515.			515.
	5 Royalties		Por such a reveal and the	A CONTRACT DESCRIPTION AND ADVENCED	
	6a Gross Rents  b Less: rental expenses.  c Rental income or (loss)  d Net rental income or (loss)				
	7 a Gross amount from sales of assets other than inventory (i) Securities (ii) Other				
	b Less: cost or other basis and sales expenses				
OTHER REVENUE	8a Gross income from fundraising events (not including. \$				
	9a Gross income from gaming activities. See Part IV, line 19				
1	c Net income or (loss) from gaming activities  • 0 a Gross sales of inventory, less returns and allowances a				
	b Less: cost of goods sold b  c Net income or (loss) from sales of inventory  Miscellaneous Revenue  Business Code				
1	1a MISCELLANEOUS b c	39,437.	HEROTAL AND THE STATE OF	DECEMBER OF SECTION	39,437.
• [	d All other revenue		Magazia europeanue e	90.40 Sept. 2012 34 (84 Cares	Name of the latest and the latest an
1	e Total. Add lines 11a-11d	39,437.	0		39.952

Page 10

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	<b>(B)</b> Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2			III.		
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4					
5	Compensation of current officers, directors, trustees, and key employees	110,855.	95,613.	2,217.	13,025
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7	Other salaries and wages	794,905.	653,057.	62,240.	79,608
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions).	26,106.	21,230.	1,856.	3,020
9	Other employee benefits	114,134.	95,452.	7,068.	11,614
10	Payroll taxes	68,180.	56,396.	4,544.	7,240.
11					
	a Management				
- 1	<b>o</b> Legal	34,315.	34,315.		
	Accounting	9,295.		9,295.	
	d Lobbying				
	Prof fundraising svcs. See Part IV, In 17				
	Investment management fees				
	g Other	58,136.	58,136.		
12	Advertising and promotion	10,081.	9,950.	58.	73.
13	Office expenses	18,720.	14,523.	3,273.	924.
14	Information technology				
15	Royalties				
16	Occupancy	82,137.	71,274.	4,238.	6,625.
17 18	Payments of travel or entertainment expenses for any federal, state, or local public officials	119,827.	111,483.	688.	7,656.
19	Conferences, conventions, and meetings	42,174.	40,795.	1,019.	360.
20	Interest	966.		966.	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	12,965.	10,544.	940.	1,481.
23	Insurance	4,823.	2,307.	2,412.	104.
24	Other expenses, Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
	GRANTS & ASSISTANCE	108,183.	108,183.		
	PRINTING AND PUBLICATIONS	87,581.	55,692.	358.	31,531.
	TELECOMMUNICATIONS	43,723.	37,270.	3,804.	2,649.
	POSTAGE AND SHIPPING	36,699.	15,086.	2,042.	19,571.
	VIDEO AND PHOTO	11,622.	11,622.		
	All other expenses	41,913.	21,151.	11,291.	9,471.
	Total functional expenses. Add lines 1 through 24f	1,837,340.	1,524,079.	118,309.	194,952.
26	Joint Costs. Check here ► if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				Form <b>990</b> (2008

				(A) Beginning of year		End (	<b>B)</b> of yea	ır
1 1	Cash – non-interest-bearing			463.	1			
2	Savings and temporary cash investments			242,280.	2	_ 1	.73,	787
3	Pledges and grants receivable, net			265,839.	3		.65,	
4	Accounts receivable, net				4			
5	Receivables from current and former officers, director or other related parties. Complete Part II of Schedule		and the first that an effect and a standard free for the		5			
6	Receivables from other disqualified persons (as defin-				WWW RD	1000		9974
	and persons described in section 4958(c)(3)(B). Com				6			
A 7	Notes and loans receivable, net		A STATE OF THE PERSON AS A PARTY OF THE PERSON		7			
S 8	Inventories for sale or use				8			
S 7 8 T 9	Prepaid expenses and deferred charges			26,910.	9		17,	248
	Land, buildings, and equipment: cost basis				1800			FNT a
	Less: accumulated depreciation. Complete Part VI of							
	Schedule D	1 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	69,800.	23,979.	10 c		15,	366
11	Investments — publicly-traded securities			13,247.	11			
12	Investments – other securities. See Part IV, line 11.				12			
13	Investments – program-related. See Part IV, line 11.				13			
14	Intangible assets				14			
15	Other assets. See Part IV, line 11		and the state of t		15			
16	Total assets. Add lines 1 through 15 (must equal line			572,718.	16	3	71,	401
17	Accounts payable and accrued expenses			41,228.	17		36,	
18	Grants payable				18			774
19	Deferred revenue				19			
1 20	Tax-exempt bond liabilities				20			
A 21	Escrow account liability. Complete Part IV of Schedule	_		21				
22	Payables to current and former officers, directors, trushighest compensated employees, and disqualified per							
Ţ	of Schedule L				22			
23	Secured mortgages and notes payable to unrelated th			43,667.	23			
24	Unsecured notes and loans payable				24			
25	Other liabilities. Complete Part X of Schedule D				25			
26	Total liabilities. Add lines 17 through 25			84,895.	26		36,3	120
N	Organizations that follow SFAS 117, check here ▶	X and c	complete lines		1000	American .	15-	1235
P F	27 through 29 and lines 33 and 34.							
å 27	Unrestricted net assets			46,984.	27	1	70,2	281.
27 28 28	Temporarily restricted net assets			440,839.	28	1	65,0	000
29	Permanently restricted net assets				29			
R F	Organizations that do not follow SFAS 117, check he lines 30 through 34.	re ►	and complete					ovil)
5 30	Capital stock or trust principal, or current funds				30			
	Paid-in or capital surplus, or land, building, and equip				31			
32	Retained earnings, endowment, accumulated income,				32			
31 32 33 34	Total net assets or fund balances			487,823.	33	3	35,2	281
34	Total liabilities and net assets/fund balances			572,718.	34		71,4	
Part XI		3.1.1.1.1.1.1		3727723.	01			
75.5		. 20 7				Fig. 10	Yes	No
	counting method used to prepare the Form 990:			Other			Total Control	
	re the organization's financial statements compiled or r							X
	re the organization's financial statements audited by ar						X	7 10.0
	(es' to 2a or 2b, does the organization have a committe iew, or compilation of its financial statements and selec-					. 2c	X	
3a As	a result of a federal award, was the organization requir dit Act and OMB Circular A-133?	ed to und	dergo an audit or aud	lits as set forth in the	Single	. 3a	17.3	Х
	/es,' did the organization undergo the required audit or							- 11
AA	100, and the organization undergo the required dutit of	audito:.					990 (	(2008

# SCHEDULE A (Form 990 or 990-EZ)

**Public Charity Status and Public Support** 

To be completed by all section 501 (c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

2008

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

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

Employer identification number

EAF	HT	WORKS							52-1	55776	5													
ar	t I	Reason for Pu	ıblic Charity Sta	tus (All organizations	s must	comple	ete this	s part.	) (see	instruc	tions)													
he i	orga	nization is not a pr	ivate foundation bec	ause it is: (Please check	only one	organiz	ation.)																	
1		A church, convent	ion of churches or a	ssociation of churches de	scribed i	n sectio	n 170(b)	)(1)(A)(i	).															
2		A school described	d in section 170(b)(1	)(A)(ii). (Attach Schedule	E.)																			
3		A hospital or coop	erative hospital serv	ice organization described	d in sect	ion 170(	b)(1)(A)	(iii). (A	ttach Sc	hedule H	l.)													
4		A medical researc	h organization opera	ited in conjunction with a	hospital	describe	ed in se	ction 17	70(b)(1)(	A)(iii). Er	nter the ho	spital'	S											
		name, city, and st	ate:																					
5		170(b)(1)(A)(iv). (	Complete Part II.)	fit of a college or universi					rnmenta	il unit de	scribed in	sectio	n											
7	X	An organization th		r governmental unit desc a substantial part of its s Part II.)					it or fron	n the ger	neral public	c desc	ribed											
8	Ш	A community trust	described in section	n 170(b)(1)(A)(vi). (Comple	ete Part	II.)																		
9		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.)																						
10		An organization or	ganized and operate	ed exclusively to test for p	ublic sat	ety. See	section	1 509(a)	(4). (se	e instruc	tions)													
11		An organization or more publicly supp describes the type	ganized and operate orted organizations of supporting organ	ed exclusively for the bene described in section 509 nization and complete line	efit of, to (a)(1) or es 11e th	perform section rough 1	the fur 509(a)(: 1h.	nctions 2). See	of, or ca section	rry out th <b>509(a)(3</b>	ne purpose ). Check t	s of o	ne or k that											
		a Type I	<b>b</b> Type I	I c ∏ Type I	II – Fun	ctionally	integra	ted		d	Type III-	Other												
е		By checking this be than foundation made 509(a)(2).	ox, I certify that the anagers and other th	organization is not contronan one or more publicly s	lled dire supporte	ctly or in d organi	directly zations	by one describ	or more ed in sec	disqualiction 509	fied perso (a)(1) or s	ns oth ection	ner											
f		If the organization	received a written d	etermination from the IRS	S that is	a Type I	Type I	or Typ	e III sup	porting o	organizatio	n,	. Е											
g		Since August 17, 2	006, has the organiz	zation accepted any gift of	or contrib	oution fro	om any	of the f	ollowing	persons	?													
												Yes	No											
	6	(i) a person who	directly or indirectly overning body of the	controls, either alone or supported organization?.	togethe	r with pe	rsons d	escribe	d in (ii) a	and (iii)	11 g (i)													
				scribed in (i) above?																				
				on described in (i) or (ii) a							311													
h		점을 하면 되었다면 하는데 하는데 이번에 되었다.	뭐야요? 다음 병에는 자연 유리를 되었다.	the organizations the org							119 (11)													
			(ii) EIN	(iii) Type of organization		3 7 7 7 7		ou notify	(vi) I	s the	(vii) Amoun	t of Sun	nort											
	.,,	Name of Supported Organization	(i) Zii	(described on lines 1-9 above or IRC section (see instructions))	organiza (i) liste	organization in col. (i) listed in your governing		organization in col. (i) listed in your governing		organization in col. t		organization in col. (i) listed in your governing		organization in col. (i) listed in your governing	rganization in col. the (i) listed in your governing	in col. the organ your col.		the organiz	(v) Did you notify the organization in col. (i) of your support?	organizati (i) organiz U.S	on in col.	(vii) Amoun	t or oup	port
					Yes	No	Yes	No	Yes	No														
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Schedule A (Form 990 or 990-EZ) 2008 EARTHWORKS 52-1557765

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

Se	ction A. Public Support	ked the box on lin	e 5, 7, or 8 of Pa	rt 1.)			
Cal	endar year (or fiscal year inning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1		1,073,714.	1,556,382.	1,885,031.	1,785,477.	1,644,846.	7,945,450.
2	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf						0.
	The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge				-014		0.
4	Total. Add lines 1-3	1,073,714.	1,556,382.	1,885,031.	1,785,477.	1,644,846.	7,945,450.
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)						0.
6	Public support. Subtract line 5 from line 4						7,945,450.
Sec	tion B. Total Support						
Cale	ndar year (or fiscal year nning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7	Amounts from line 4	1,073,714.	1,556,382.	1,885,031.	1,785,477.	1,644,846.	7,945,450.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources.	1,505.	4,184.	8,885.	24,448.	515.	39,537.
9	Net income form unrelated business activities, whether or not the business is regularly carried on.					1 1 7 1	0.
10	Other income. Do not include gain or loss form the sale of capital assets (Explain in Part IV.)				_	4-	0.
11	Total support. Add lines 7 through 10						7,984,987.
12	Gross receipts from related activ	rities, etc. (see in	structions)				0.
13	First five years. If the Form 990 organization, check this box and	is for the organiz stop here	ation's first, seco	nd, third, fourth,	or fifth tax year a	s a section 501(c)	(3)
	tion C. Computation of Pul						
	Public support percentage for 20 Public support percentage for 20						99.5 % 99.7 %
16 a	33-1/3 support test — 2008. If the and stop here. The organization	e organization did qualifies as a pul	not check the boolicly supported o	ox on line 13, and	the line 14 is 33	-1/3 % or more, ch	neck this box
ł	33-1/3 support test — 2007. If the and stop here. The organization	e organization did	not check a box	on line 13, or 16a	a, and line 15 is 3	3-1/3% or more, c	heck this box
17 a	10%-facts-and-circumstances te or more, and if the organization the organization meets the 'facts	meets the 'facts-a	and-circumstance:	s' test, check this	box and stop her	re. Explain in Part	IV how
	10%-facts-and-circumstances te or more, and if the organization organization meets the 'facts-and	meets the 'facts-a d-circumstances'	and-circumstance: test. The organi	s' test, check this zation qualifies as	box and <b>stop he</b> a publicly suppo	r <b>e.</b> Explain in Part rted organization.	IV how the ▶
	Private foundation. If the organization	zation did not che	ck a box on line,	13, 16a, 16b, 17a			CHICK WINNESS ACTIONS OF WARRY
BAA					Sc	hedule A (Form 99	90 or 990-EZ) 2008

# Schedule A (Form 990 or 990-EZ) 2008 EARTHWORKS Part III Support Schedule for Organizations Described in Section 509(a)(2)

Calendar year (or fiscal yr beginning in)►	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e) 20	08	(f) Total
1 Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants.')		EX.	12			Ž.	
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a activity that is related to the organization's tax-exempt purpose.							
3 Gross receipts from activities that are not an unrelated trade or business under section 513.				NET T		<b>F</b>	
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf.							
5 The value of services or facilities furnished by a governmental unit to the organization without charge							
7a Amounts included on lines 1, 2, 3 received from disqualified persons.  b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000.							
c Add lines 7a and 7b							
8 Public support (Subtract line 7c from line 6.)		Administration of	Sale Pene		THE STATE OF THE S	ALCOHOL:	
Section B. Total Support				CALL CONTRACTOR	1		
Calendar year (or fiscal yr beginning in)	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	<b>(e)</b> 200	08	(f) Total
9 Amounts from line 6			10000		1, 1,4	4 3	
10 a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources			4				
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975			Ī				
c Add lines 10a and 10b							
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.).			1 - 3		1		
<ul> <li>Total support. (add Ins 9, 10c, 11, and 12.)</li> <li>First five years. If the Form 990 is organization, check this box and st</li> </ul>	for the organiz	ation's first, seco	nd, third, fourth,	or fifth tax year as	a section	501(c)(3	) •[
Section C. Computation of Publi							
15 Public support percentage for 2008			ne 13, column (f))	)		15	%
16 Public support percentage from 20	07 Schedule A	Part IV-A, line 2	?7g			16	%
Section D. Computation of Inves							
17 Investment income percentage for	2008 (line 10c	column (f) divide	ed by line 13, colu	ımn (f))		17	%
18 Investment income percentage from						18	9
19 a 33-1/3 support tests – 2008. If the org more than 33-1/3%, check this box	and stop here	<ul> <li>The organizatio</li> </ul>	n qualifies as a pi	ublicly supported o	rganization		<b>-</b> [
b 33-1/3 support tests – 2007. If the is not more than 33-1/3%, check the	organization d	id not check a bo <b>p here.</b> The organ	x on line 14 or 19 nization qualifies a	a, and line 16 is mas a publicly suppo	ore than 3 orted organ	3-1/3%, ization	and line 18
20 Private foundation. If the organization							

Schedule	<b>A</b> (Form 990 or	990-EZ) 20	008 EA	ARTHWOR	RKS					52-15	57765		Page 4
Part IV	Supplemer Part II, line	ntal Infor	mation.	Comple	ete this	part to pro	vide the	explanat	on requ	ired by	Part II,	line 10;	1
	r art II, IIIIc	, 174 01 1	70, 011	art III,	11110 12	I Tovide a	rry otrici	additiona	THIOTH	ation, (s	1130	detions	,
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EV:Y								3777		977	<b>TEST</b>		1565
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### Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

### **Schedule of Contributors**

► Attach to Form 990, 990-EZ and 990-PF ► See separate instructions. OMB No. 1545-0047

2008

Name of the organization		Employer identification number
EARTHWORKS		52-1557765
Organization type (check one):		
Filers of:	Section:	
Form 990 or 990-EZ	X 501(c)( $3$ ) (enter number) organization	
	4947(a)(1) nonexempt charitable trust not tre	ated as a private foundation
	527 political organization	
Form 990-PF	501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated	as a private foundation
	501(c)(3) taxable private foundation	
Contributor. (Complete Parts I and I  Special Rules —		
509(a)(1)/170(b)(1)(A)(vi) and received to	n filing Form 990, or Form 990-EZ, that met the 33-1/3% su from any one contributor, during the year, a contribution of the gr 1h or 2% of the amount on Form 990-EZ, line 1. Complete	reater of (1) \$5,000 or (2) 2% of the
	organization filing Form 990, or Form 990-EZ, that receive	
aggregate contributions or bequests	s of more than \$1,000 for use <i>exclusively</i> for religious, char lty to children or animals. Complete Parts I, II, and III.	ritable, scientific, literary, or educational
some contributions for use <i>exclusive</i> \$1,000. (If this box is checked, ente etc, purpose. Do not complete any of	organization filing Form 990, or Form 990-EZ, that receive ely for religious, charitable, etc, purposes, but these contriber here the total contributions that were received during the of the Parts unless the <b>General Rule</b> applies to this organization.	butions did not aggregate to more than exclusively religious, charitable, zation because it received nonexclusively
religious, charitable, etc, contributio	ns of \$5,000 or more during the year.)	× · · · · · · · · · · · · · · · · · · ·
990-PF) but they must answer 'No' on F	ered by the General Rule and/or the Special Rules do not Part IV, line 2 of their Form 990, or check the box in the he lo not meet the filing requirements of Schedule B (Form 99	eading of their Form 990-EZ, or on line 2 of

BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. These instructions will be issued separately.

Schedule B (Form 990, 990-EZ, or 990-PF) (2008)

of Part I

EARTHWORKS

Page 1 of 2
Employer identification number

52-1557765

Part I	Contributors (see instructions.)		
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1_	WYSS FOUNDATION  1601 CONNECTICTU AVE, NW  WASHINGTON, DC 20009	\$75,000.	Person X Payroll  Noncash  (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
2	WILBURFORCE  3601 FREMONT AVE N # 304  SEATTLE, WA 98103	\$275,000.	Person X Payroll  Noncash  (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
3	NOYES FOUNDATION  6 EAST 39TH STREET, 12TH FLOOR  NEW YORK, NY 10016	\$300,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
_4	NATIONAL ENVIRONMENTAL TRUST  1025 F STREET, NW, 9TH FLOOR  WASHINGTON, DC 20004	\$50,000. -	Person X Payroll Noncash  (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
5	TRUE NORTH FOUNDATION  664 A FREEMEN LANE #332  GRASS VALLEY, CA 94129	\$190,000.	Person X Payroll Noncash  (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
6	OVERBROOK  122 E 42ND STREET  NEW YORK, NY 10017	\$50,000.	Person X Payroll Noncash  (Complete Part II if there is a noncash contribution.)

Schedule B (Form 990, 990-EZ, or 990-PF) (2008)

Page 2 of 2
Employer identification number

of Part I

EARTHWORKS 52-1557765

Part I	Contributors (see instructions.)		
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
7	U.U. VEATCH  48 SHELTER ROCK ROAD  MANHASSET, NY 11030	\$ <u>35,000.</u>	Person X Payroll Noncash  (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
8	GORDON & BETTY MOORE FOUNDATION  1661 PAGE MILL RD  PALTO ALTO, CA 94304	 \$\$294,748.	Person X Payroll
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
9	WALLACE GLOBAL  1900 M ST NW SUITE 250  WASHINGTON, DC 20036	 \$50,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		 \$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		 \$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		 \$	Person Payroll Noncash  (Complete Part II if there is a noncash contribution.)

Page

of 1

of Part II

Name of organization

**EARTHWORKS** 

Employer identification number 52-1557765

Part II Noncash Property (see instructions.) (d) Date received (b) Description of noncash property given (a) No. from Part I (c) FMV (or estimate) (see instructions) N/A (d) Date received (a) No. from Part I (b)
Description of noncash property given (c) FMV (or estimate) (see instructions) (d) Date received (b)
Description of noncash property given (c) FMV (or estimate) (see instructions) (a) No. from Part I (d) Date received (b)
Description of noncash property given (c) FMV (or estimate) (see instructions) (a) No. from Part I (b)
Description of noncash property given (c) FMV (or estimate) (see instructions) (d) Date received (a) No. from Part I (d) Date received (b)
Description of noncash property given (c) FMV (or estimate) (see instructions) (a) No. from Part I

of Part III

Name of organization

Employer identification number

		52-1557765			
Exclusively religious, charitable, et	tc, individual contributions to	section 501(c)(7), (8), or (10)			
For organizations completing Part III, enter contributions of \$1,000 or less for the year.	시 : [1] [1] [1] [1] [1] [1] [1] [1] [1] [1]	ole, etc, nstructions.)▶\$ N/A			
(b) Purpose of gift	(c) Use of gift	(d)  Description of how gift is held			
N/A					
Transferee's name, address	(e) Transfer of gift s, and ZIP + 4	Relationship of transferor to transferee			
(b) Purpose of gift	(c) Use of gift	(d)  Description of how gift is held			
(e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee					
(b) Purpose of gift	(c) Use of gift	(d)  Description of how gift is held			
Transferee's name, address	(e) Transfer of gift , and ZIP + 4	Relationship of transferor to transferee			
(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
Transferee's name, address	(e) Transfer of gift , and ZIP + 4	Relationship of transferor to transferee			
	organizations aggregating more the For organizations completing Part III, enter contributions of \$1,000 or less for the year.  (b) Purpose of gift  N/A  Transferee's name, address  Transferee's name, address  (b) Purpose of gift  Transferee's name, address  Transferee's name, address  (b) Purpose of gift	organizations aggregating more than \$1,000 for the year. (Comple For organizations completing Part III, enter total of exclusively religious, charital contributions of \$1,000 or less for the year. (Enter this information once — see in the year.)  (b) (c) (c) (d) (d) (d) (e) (e) (e) (e) (e) (formation once — see in the year.  (e) Transfere of gift (formation once — see in the year.)  (b) (e) Transfer of gift (formation once — see in the year.)  (b) (formation once — see in the year.)  (c) (formation once — see in the year.)  (d) (formation once — see in the year.)  (e) Transfer of gift (formation once — see in the year.)  (formation once — see in the year.  (g) Transfer of gift (formation once — see in the year.)  (g) Transfer of gift (formation once — see in the year.)  (g) Transfer of gift (formation once — see in the year.)  (g) Transfer of gift (formation once — see in the year.)  (g) Transfer of gift (formation once — see in the year.)  (g) Transfer of gift (formation once — see in the year.)  (g) Transfer of gift (formation once — see in the year.)  (g) Transfer of gift (formation once — see in the year.)  (g) Transfer of gift (formation once — see in the year.)  (g) Transfer of gift (formation once — see in the year.  (g) Transfer of gift (formation once — see in the year.  (g) Transfer of gift (formation once — see in the year.  (g) Transfer of gift (formation once — see in the year.  (g) Transfer of gift (formation once — see in the year.  (g) Transfer of gift (formation once — see in the year.  (g) Transfer of gift (formation once — see in the year.  (g) Transfer of gift (formation once — see in the year.  (g) Transfer of gift (formation once — see in the year.  (g) Transfer of gift (formation once — see in the year.  (g) Transfer of gift (formation once — see in the year.  (g) Transfer of gift (formation once — year.  (g			

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

### Political Campaign and Lobbying Activities

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

To be completed by organizations described below.

► Attach to Form 990 or Form 990-EZ.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

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

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

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

	rant II-A.				
		s,' to Form 990, Part IV, line 5 (Proxy Tax),	hen		
	e of organization	organizations: Complete Part III.		Employer identific	ation number
	RTHWORKS			52-155776	
Pa	ort I-A To be completed	by all organizations exempt under	section 501(c		
	See the instruction	ons for Schedule C for details.	200	,	, and a second
1	Provide a description of the	organization's direct and indirect political c	ampaign activities	in Part IV.	7
	rt I-B To be completed	by all organizations exempt under ons for Schedule C for details.			
1	Enter the amount of any ex	cise tax incurred by the organization under	section 4955		
2	Enter the amount of any ex	cise tax incurred by organization managers	under section 495	5▶\$	
3	If the organization incurred	a section 4955 tax, did it file Form 4720 for	this year?		Yes X No
4	a Was a correction made?				Yes No
	b If 'Yes,' describe in Part IV.				
Pa	rt I-C To be completed See the instruction	by all organizations exempt under ons for Schedule C for details.	section 501(c	), except section 501	(c)(3).
1	Enter the amount directly ex	xpended by the filing organization for section	n 527 exempt fund	ction activities ▶ \$	
2		ng organization's funds contributed to other			
3	Form 1120-POL, line 17b	exempt function expenditures. Add lines 1 a		▶\$	
4		le Form 1120-POL for this year?			
5	received and promptly and o	and employer identification number (EIN) of id and indicate if the amount was paid from directly delivered to a separate political orga nal space is needed, provide information in	nization, such as	political organizations to wation's funds or were polition a separate segregated fur	hich payments were cal contributions id or a political action
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's own internal funds. If none, enter-0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization.  If none, enter -0
		C_12			

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

Schedule C (Form 990 or 990-EZ) 2008

52-1557765 Schedule C (Form 990 or 990-EZ) 2008 EARTHWORKS Page 2 Part II-A To be completed by organizations exempt under section 501(c)(3) that filed Form 5768 (election under section 501(h)). See the instructions for Schedule C for details. if the filing organization belongs to an affiliated group. Check В if the filing organization checked box A and 'limited control' provisions apply Check Limits on Lobbying Expenditures (a) Filing organization's totals (b) Affiliated group totals (The term 'expenditures' means amounts paid or incurred.) 9,062 1 a Total lobbying expenditures to influence public opinion (grass roots lobbying) . . . . . . . . . b Total lobbying expenditures to influence a legislative body (direct lobbying)..... 17,405 0. c Total lobbying expenditures (add lines 1a and 1b) ...... 26,467 d Other exempt purpose expenditures ...... e Total exempt purpose expenditures (add lines 1c and 1d)...... 26,467 0. f Lobbying nontaxable amount. Enter the amount from the following table in 5,293 both columns. If the amount on line 1e, column (a) or (b) is: The lobbying nontaxable amount is: Not over \$500,000 20% of the amount on line 1e. Over \$500,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000. \$175,000 plus 10% of the excess over \$1,000,000. Over \$1,000,000 but not over \$1,500,000 Over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000. Over \$17,000,000 g Grassroots nontaxable amount (enter 25% of line 1f) ...... 1,323 0. 7,739 0. h Subtract line 1g from line 1a. Enter -0- if line g is more than line a . . . . 21,174. 0. If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?....

4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f.)

	Lobbying E	Expenditures During 4-	Year Averaging Perio	d	
Calendar year (or fiscal year beginning in)	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	(e) Total
2a Lobbying non-taxable amount	238,076.	230,672.	243,716.	5,293.	717,757.
b Lobbying ceiling amount (150% of line 2a, column (e))					1,076,636.
c Total lobbying expenditures	18,226.	16,297.	82,202.	26,467.	143,192.
d Grassroots non-taxable amount	59,519.	57,668.	60,929.	1,323.	179,439.
e Grassroots ceiling amount (150% of line 2d, column (e))					269,159.
f Grassroots lobbying expenditures	376.	11,425.	16,570.	9,062.	37,433.

BAA

Schedule C (Form 990 or 990-EZ) 2008

Part II-B To be completed by organizations exempt under section 501(c)(3) that have NOT filed Form 5768 (election under section 501(h)). See the instructions for Schedule C for details.

	(a)		) (b)		
	Yes	No	А	mount	
During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:  a Volunteers?					inst it.
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
c Media advertisements?					
d Mailings to members, legislators, or the public?		-24			
e Publications, or published or broadcast statements?					
f Grants to other organizations for lobbying purposes?		100	1		
g Direct contact with legislators, their staffs, government officials, or a legislative body?					
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means?					
i Other activities? If 'Yes,' describe in Part IV					
j Total lines 1c through 1i					Law S
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
<b>b</b> If 'Yes,' enter the amount of any tax incurred under section 4912	1000				_
c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912	(May	Entry.		2 1 2 1	
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					h.
Part III-A To be completed by all organizations exempt under section 501(c)(4), section 501(c)(6). See the instructions for Schedule C for details.	n 50	1(c)(5	), or se	ction	
301(e)(o). Ode the matractions for deficación o for details.				Yes	N
1 Were substantially all (90% or more) dues received nondeductible by members?			1		
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?					
3 Did the organization agree to carryover lobbying and political expenditures from the prior year?					
Part III-B To be completed by all organizations exempt under section 501(c)(4), section	n 50	1(c)(5	), or se	ction	
501(c)(6) if BOTH Part III-A, questions 1 and 2 are answered 'No' OR if Part III	-A, c	quest	on 3 is		
answered 'Yes.' See Schedule C Instructions for details.			De 1. C.		
1 Dues, assessments and similar amounts from members	.,	1			
2 Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		di.			
a Current year		2a			
<b>b</b> Carryover from last year		2b			
c Total		2c			
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3			
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess	- 41	100			
does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and politic	al	100			
expenditure next year?		4			
5 Taxable amount of lobbying and political expenditures (line 2c total minus 3 and 4)		5			
Part IV Supplemental Information					
omplete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; and lso, complete this part for any additional information.	Part	II-B, li	ne 1i.		
iso, complete this part for any additional information.					

Schedule C (Form 990 or 990-EZ) 2008 EAR'L'HWORKS	52-1557765	Page 4
Part IV Supplemental Information (continued)		
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### SCHEDULE D (Form 990)

**Supplemental Financial Statements** 

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization Attach to Form 990. To be completed by organizations that answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11, or 12.

Open to Public Inspection

FARTHWORKS

Employer Identification number

	RTHWORKS		52-1557765
Pa	rt I Organizations Maintaining Donor A the organization answered 'Yes' to	Advised Funds or Other Similar Fu	nds or Accounts Complete if
1 2 3	Total number at end of year	(a) Donor advised funds	(b) Funds and other accounts
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor funds are the organization's property, subject to	the organization's exclusive legal control?.	Yes No
6	Did the organization inform all grantees, donors, used only for charitable purposes and not for the impermissible private benefit??		Yes   No
Pai	t II   Conservation Easements Complete	e if the organization answered 'Yes'	to Form 990, Part IV, line 7.
	Purpose(s) of conservation easements held by the Preservation of land for public use (e.g., reconstruction of natural habitat Preservation of open space  Complete lines 2a-2d if the organization held a construction of the preservation held a construction of the preservation held a construction of the preservation of the preservation held a construction of the preservation held a construction of the preservation of the pres	reation or pleasure) Preservation Preservation	of an historically important land area of certified historic structure m of a conservation easement on the last day
	of the tax year.		Held at the End of the Year
3 3 4 5 6 7 8	Total number of conservation easements  Total acreage restricted by conservation easemed. Number of conservation easements on a certified Number of conservation easements included in (Number of conservation easements modified, trayear   Number of states where property subject to conservation have a written policy regarenforcement of the conservation easement it holds Staff or volunteer hours devoted to monitoring, in Amount of expenses incurred in monitoring, insp. Does each conservation easement reported on lift 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?	ants d historic structure included in (a) c) acquired after 8/17/06 unsferred, released, extinguished, or terminal ervation easement is located rding the periodic monitoring, inspection, vide? unspecting, and enforcing easements during fecting, and enforcing easements during the fine 2(d) above satisfy the requirements of so conservation easements in its revenue and expectine organization's financial statements that	2c 2d ated by the organization during the taxable  olations, and Yes No the year ► e year ►\$  ection Yes No nse statement, and balance sheet, and describes the organization's accounting for
Par	t III Organizations Maintaining Collect Complete if the organization answe	ions of Art, Historical Treasures, o ered 'Yes' to Form 990, Part IV, line	r Other Similar Assets 8.
1 a	If the organization elected, as permitted under S treasures, or other similar assets held for public the text of the footnote to its financial statements	exhibition, education, or research in further	nent and balance sheet works of art, historical ance of public service, provide, in Part XIV,
b	If the organization elected, as permitted under S treasures, or other similar assets held for public amounts relating to these items:	exhibition, education, or research in further	ance of public service, provide the following
	(i) Revenues included in Form 990, Part VIII, lin		
	(ii) Assets included in Form 990, Part X		
2	If the organization received or held works of art, amounts required to be reported under SFAS 110	historical treasures, or other similar assets 5 relating to these items:	for financial gain, provide the following
	Revenues included in Form 990, Part VIII, line 1. Assets included in Form 990, Part X		
D	Assets included in Form 990, Part X		**************************************

Schedule D (Form 990) 2008 EART				52-155		Page 2
Part III Organizations Mainta	ining Collection	ns of Art, Histo	orical Treasures, o	or Other Similar Ass	sets (con	tinued)
3 Using the organization's accessi that apply):	on and other record				lection item	is (check all
a Public exhibition			or exchange programs			
b Scholarly research	2.2.7	e Other				
c Preservation for future gene						
4 Provide a description of the organization of						
5 During the year, did the organiza assets to be sold to raise funds	rather than to be m	e donations of ar aintained as part o	t, nistorical treasures, of the organization's c	or other similar ollection?	Yes	No
Part IV Trust, Escrow and Cu IV, line 9, or reported	stodial Arrange	ments Comple	ete if organization			, Part
1a Is the organization an agent, true included on Form 990, Part X?	stee, custodian, or o	other intermediary	for contributions or of	ther assets not	Yes	No
b If 'Yes,' explain the arrangement						
					Amount	
c Beginning balance				1c		
d Additions during the year						
e Distributions during the year						
f Ending balance						
2a Did the organization include an a					Yes	No
b If 'Yes,' explain the arrangement	in Part XIV.					
Part V Endowment Funds Co	mplete if organi:	zation answere	ed 'Yes' to Form 9	90, Part IV, line 10.		
	(a) Current year	(b) Prior year	(c) Two years bad	ck (d) Three years back	(e) Four	years back
1 a Beginning of year balance						
<b>b</b> Contributions					1000	
c Investment earnings or losses				STATE OF THE PARTY		
d Grants or scholarships		TA MINISTER			A SUPERIOR	and a second
e Other expenditures for facilities and programs						
f Administrative expenses						ASSESSMENT OF THE PROPERTY OF
g End of year balance				N. A. Salama A. H. P. Barra	100	
2 Provide the estimated percentage	e of the year end ba	lance held as:				
a Board designated or quasi-endow	vment ►	8				
b Permanent endowment ▶	%					
c Term endowment ►						
3a Are there endowment funds not in organization by:	n the possession of	the organization t	hat are held and adm	inistered for the	Ye	es No
(i) unrelated organizations					3a(i)	
(ii). related organizations						
b If 'Yes' to 3a(ii), are the related o						3 ==
4 Describe in Part XIV the intended						
Part VI Investments-Land, Bu				. line 10.		
Description of investment	(a) Cos	st or other basis nvestment)	(b) Cost or other basis (other)	(c) Depreciation	(d) Book	( Value
1 a Land						
<b>b</b> Buildings						
c Leasehold improvements	the state of the s					
d Equipment		85,166.		69,800.	1	15,366.
<b>e</b> Other				12.00		
Total. Add lines 1a-1e (Column (d) sho		, Part X, column (	B), line 10(c).)		1	15,366.
ВАА			15000		ule <b>D</b> (Form	

Part VII Investments-Other Securities See Fo	rm 990, Part X, lir	ne 12. N/A
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation
		Cost or end-of-year market value
Financial derivatives and other financial products		
Closely-held equity interests		
Other	-	
		A-0
Total. (Column (b) should equal Form 990 Part X, col. (B) line 12.)		
Part VIII Investments-Program Related (See F	orm 990, Part X, I	ine 13) N/A
(a) Description of investment type	(b) Book value	(c) Method of valuation
		Cost or end-of-year market value
Total. Column (b)(should equal Form 990, Part X, Col. (B) line 13.)	15\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
Part IX Other Assets (See Form 990, Part X, Ii		425.1.1.
(a) Des	cription	(b) Book value
Total. Column (b) Total (should equal Form 990, Part X, col.	(B) line 15)	<b>•</b>
Part X Other Liabilities (See Form 990, Part X		
(a) Description of Liability	(b) Amount	
Federal Income Taxes	(4)	
Todalal Moonie Taxes		
	1	
Total. Column (b) Total (should equal Form 990, Part X, col. (B) line 25)		

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Stateme	nts	
1 Total revenue (Form 990, Part VIII,column (A), line 12)		1,684,798.
2 Total expenses (Form 990, Part IX, column (A), line 25)		1,837,340.
3 Excess or (deficit) for the year. Subtract line 2 from line 1		-152,542.
4 Net unrealized gains (losses) on investments		
5 Donated services and use of facilities		
6 Investment expenses		
7 Prior period adjustments		
8 Other (Describe in Part XIV).		
9 Total adjustments (net). Add lines 4-8		
10 Excess or (deficit) for the year per financial statements. Combine lines 3 and 9		-152,542.
Part XII   Reconciliation of Revenue per Audited Financial Statements With Revenue	per Return	
1 Total revenue, gains, and other support per audited financial statements	1	1,684,798.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a Net unrealized gains on investments	7330	
b Donated services and use of facilities	100	
c Recoveries of prior year grants		
d Other (Describe in Part XIV)	12.00	
e Add lines 2a through 2d		
3 Subtract line 2e from line 1	3	1,684,798.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a Investments expenses not included on Form 990, Part VIII, line 7b	3/1/2	
b Other (Describe in Part XIV)	1/07	
c Add lines 4a and 4b	4c	
5 Total revenue. Add lines 3 and 4c. (This should equal Form 990, Part I, line 12.)		1,684,798.
Part XIII   Reconciliation of Expenses per Audited Financial Statements With Expense	s per Return	
1 Total expenses and losses per audited financial statements	1	1,837,340.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a Donated services and use of facilities		
b Prior year adjustments	1000	
c Losses reported on Form 990, Part IX, line 25		
d Other (Describe in Part XIV)		
e Add lines 2a through 2d.	2e	411
3 Subtract line 2e from line 1	3	1,837,340.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a Investments expenses not included on Form 990, Part VIII, line 7b		
b Other (Describe in Part XIV)		
c Add lines 4a and 4b	4c	
5 Total expenses. Add lines 3 and 4c (This should equal Form 990, Part I, line 18.)	5	1,837,340.
c Add lines 4a and 4b.  5 Total expenses. Add lines 3 and 4c (This should equal Form 990, Part I, line 18.)  Part XIV Supplemental Information  Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Fline 4; Part X; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b.	Part IV, lines 1b	

Schedule <b>D</b> (Form 990) 2008	Page 5
Schedule D (Form 990) 2008  Part XIV   Supplemental Information (continued)	

# SCHEDULE O (Form 990)

## **Supplemental Information to Form 990**

OMB No. 1545-0047

2008

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

► Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

EARTHWORKS	52-1557765
FORM 990, PART III, LINE 1 - ORGANIZATION MISSION	
THE CORPORATION IS ORGANIZED EXCLUSIVELY FOR CHARITABLE AND EDI	UCATIONAL PURPOSES.
MORE SPECIFICALLY, THE ACTIVITIES OF THE CORPORATION SHALL INC.	LUDE BUT NOT BE
LIMITED TO: PROTECTING COMMUNITIES AND THE ENVIRONENT FROM THE	IMPACTS OF
DESTRUCTIVE MINERAL DEVELOPMENT IN THE US AND WORLDWIDE, BY WORDWID, BY WORLDWIDE, BY WORLDWIDE, BY WORLDWIDE, BY WORLDWIDE, BY	RKING WITH COMMUNITIES
AND GRASSROOTS GROUPS TO REFORM GOVERNMENTAL POLICIES, IMPROVE	COPORATE PRACTICES,
AND INFLUENCE INVESTMENT DECISIONS. THE CORPORATION SHALL WORK	K_TO_ENCOURAGE
CONSERVATION, RECYCLING, RESPONSIBLE MATERIALS POLICIES, FUEL E	EFFICIENCY, AND
RENEWABLE ENERGY SOURCES. THE CORPORATION SHALL EXPOSE THE HEA	ALTH, ENVIRONMENTAL,
ECONOMIC, SOCIAL AND CULTURAL IMPACTS OF IRRESPONSIBLE MINERAL	DEVELOPMENT THROUGH
WORK INFORMED BY SOUND SCIENCE, AND ACHIEVED THROUGH, BUT NOT I	LIMITED TO PUBLIC
EDUCATION, RESEARCH, LITIGATION AND ADVOCACY.	
FORM 990, PART III, LINE 4D - OTHER PROGRAM SERVICES DESCRIPTION	
PUBLIC MEMBER INFORMATION -	
MEDIA/COMMUNICATIONS - WEBSITE, NEWSLETTER AND OTHER METHODS TO	PROMOTE AND
PUBLICIZE THE WORK OF EARTHWORKS AND ITS ALLIES, INCLUDING PUBL	LIC OPINION RESEARCH.
RESEARCH/PUBLICATIONS - ANALYSIS OF POLICY PROPSALS, DEVELOPMEN	NT OF POLICY
PROPOSALS, RESEARCH INTO IMPACTS OF MINING IN THE FORM OF FACT	SHEETS, ISSUE PAPERS
AND_REPORTS.	
ADVOCACY_TECHNOLOGY/TOOL_(CAPACITY_BUILDING) - INVESTMENT_GEARE	ED TOWARD IMPROVING
OUTREACH, RESEARCH AND ADVOCACY CAPACITY THROUGH EXPENDITURES C	ON TECHNOLOGY, DATA
MANAGEMENT, ELECTRONIC TOOLS, MEMBERSHIP, AND CAPACITY TO REACH	COMMUNITIES.

Name of the organization  EARTHWORKS	Employer identification number 52-1557765
FORM 990, PART III, LINE 4D - OTHER PROGRAM SERVICES DESCRIPTION	(CONTINUED)
RESEARCH AND INFORMATION PROVIDED TO THE PUBLIC AND MEBERS IN	N THE FORM OF MAILINGS,
FACT SHEETS, ELECTRONIC (EMAIL) UPDATES AND ALERTS, NEWSLETT	ERS, AND RESPONSES TO
DIRECT INQUIRIES.	
EARTHWORKS PARTNERSHIP PROGRAMS - EARTHWORKS PROVIDES BACK-OF	FFICE SERVICES
(INCLUDING PAYROLL, ACCOUNTING, AND ADMINISTRATION), A LEGAL	FRAMEWORK, AND CAPACITY
BUILDING SUPPORT TO A VARIETY OF SMALL PROGRAMS (SINGLE STAFE	F, OR VOLUNTEER ONLY
ORGANIZATIONS) THAT SHARE OUR MISSION OF PROTECTING COMMUNIT	IES AND THE ENVIRONMENT
FROM THE NEGATIVE IMPACTS OF MINERAL DEVELOPMENT. IN 2008 EA	ARTHWORKS SERVED AS THE
FISCAL SPONSOR OF THE FOLLOWING PROJECTS:	
ETHICAL METALSMITHS: THIS PROJECT SEEKS TO STIMULATE DEMAND	AND SUPPLY FOR
RESPONSIBLY SOURCED MATERIALS FOR METALSMITHS AND JEWELERS.	
COMMON GROUND UNITED: THIS PROJECT PROVIDES A PLATFORM ALLOW	VING DIVERSE
ORGANIZATIONS, FROM LOCAL TO NATIONAL, TO EXPRESS A UNITED VO	DICE CONCERNING THE
PROTECTION OF OUR WATER, CULTURAL, ECOLOGICAL, AND ECONOMIC F	RESOURCES AND THE HEALTH
AND SAFETY OF OUR CITIZENS FROM THE ADVERSE IMPACTS OF ALL EX	KTRACTIVE RESOURCE
DEVELOPMENTS.	
ALASKANS FOR RESPONSIBLE MINING: A VOLUNTARY ASSOCIATION OF	NON-GOVERNMENTAL
ORGANIZATIONS WORKING TOGETHER TO RAISE PUBLIC AWARENESS OF T	THE IMPACTS OF THE
EXTRACTIVE INDUSTRY TO ALASKA'S WATERSHEDS, WILDLIFE, FISHERI	ES, COMMUNITIES AND
PUBLIC HEALTH; AND TO REFORM ALASKA'S INADEQUATE MINING LAWS	3
ARIZONA MINING COALITION: THIS PROJECT SEEKS TO RAISE PUBLIC	AWARENESS AND PROTECT

Name of the organization EARTHWORKS	Employer identification number 52-1557765
FORM 990, PART III, LINE 4D - OTHER PROGRAM SERVICES DESCRIPTION (CC	NTINUED)
INDIGENOUS SACRED SITES AND RECREATIONAL AREAS IN THE STATE OF	ARIZONA FROM
IRRESPONSIBLE MINERAL DEVELOPMENT.	
THE NEXT BEST WEST: THIS PROJECT IS CREATING A FEATURE-LENGTH	DOCUMENTARY FILM THAT
WILL EXPLORE OUR RELATIONSHIP TO THE LANDSCAPE OF THE AMERICAN	WEST. THE FILM WILL
SHOW HOW OUR INTERPRETATION OF PROGRESS HAS SHAPED THE SINGULAR	LANDSCAPE OF THE
AMERICAN WEST, AND HOW A NEW UNDERSTANDING OF PROGRESS MAY BE O	UR BEST HOPE FOR A
BRIGHT AND HEALTHY FUTURE.	
FORM 990, PART VI, LINE 4 - SIGNIFICANT CHANGES TO ORGANIZATIONAL DO	
AMENDED ARTICLES OF INCORPORATION TO UPDATE PROGRAMMATIC ACTIVI	TIES.
FORM 990, PART VI, LINE 10 - FORM 990 REVIEW PROCESS	
A DRAFT COPY OF THE 990 WAS RECEIVED AND PROVIDED TO THE TREASU	
COMPLETION AND FILING.	
FORM 990 , PART VI, LINE 17 - LIST OF STATES WHICH THIS RETURN IS FILED	
NY DC MD CA NM OR CT PA NJ WA IL AZ CO MT ID NV VA MN AK	

# Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No. 1545-1709

Department of the Treasury Internal Revenue Service

		nth Extension, complete only Part I and check this bo	
		Automatic) 3-Month Extension, complete only Part II (	
		Iready been granted an automatic 3-month extension of	
Part I	Automatic 3-Month Exte	ension of Time. Only submit original (no cop	es needed).
			THE CONTRACTOR DOLLARS AND
The state of the s		and requesting an automatic 6-month extension — chec	
income tax r	eturns.	ers), partnerships, REMICS, and trusts must use Form	
the additional	d below (6 months for a corporal (not automatic) 3-month extend you must submit the	n electronically file Form 8868 if you want a 3-month a ration required to file Form 990-T). However, you cann ension or (2) you file Forms 990-BL, 6069, or 8870, gro fully completed and signed page 2 (Part II) of Form 88 on e-file for Charities & Nonprofits.	ot file Form 8868 electronically if (1) you want
	Name of Exempt Organization		Employer identification number
Type or			
print	EARTHWORKS		52-1557765
File by the due date for	Number, street, and room or suite num	ber. If a P.O. box, see instructions.	
filing your	1612 K STREET, NW	#808	
return. See instructions.	City, town or post office, state, and ZIF	code. For a foreign address, see instructions.	
	WASHINGTON, DC 200	06	
Check type of		arate application for each return):	TATES FOR
X Form 990		Form 990-T (corporation)	Form 4720
Form 990		Form 990-T (section 401(a) or 408(a) trust)	Form 5227
Form 990		Form 990-T (trust other than above)	Form 6069
Form 990		Form 1041-A	Form 8870
If the org If this is the extent I request until	for a Group Return, enter the cases box. Factorial and a lifety is for part of the state of the	FAX No. Fax No	N) If this is for the whole group, th the names and EINs of all members
	calendar year 20 08 or		
<b>&gt;</b>	tax year beginning	, 20, and ending, 20	
	ax year is for less than 12 mor		
3a If this a nonrefu	pplication is for Form 990-BL, indable credits. See instruction	990-PF, 990-T, 4720, or 6069, enter the tentative tax,	less any 3a \$ 0.
b If this a made. I	pplication is for Form 990-PF nclude any prior year overpay	or 990-T, enter any refundable credits and estimated to ment allowed as a credit	x payments 3b \$ 0.
deposit	with FTD coupon or, if require	ne 3a. Include your payment with this form, or, if required, by using EFTPS (Electronic Federal Tax Payment S	ystem).
	ou are going to make an electr	onic fund withdrawal with this Form 8868, see Form 84	
		action Act Notice, see instructions.	Form 8868 (Rev. 4-2008)