${\color{blue} COMMITTEE\ ON\ NATURAL\ RESOURCES} \\ {\color{blue} 113^{th}\ Congress\ Disclosure\ Form} \\ As\ required\ by\ and\ provided\ for\ in\ House\ Rule\ XI,\ clause\ 2(g)\ and }$ the Rules of the Committee on Natural Resources

Subcommittee on Energy and Mineral Resources oversight hearing titled "Mining in America: The Administration's Use of Claim Maintenance Fees and Cleanup of Abandoned Mine Lands." June 13, 2013

| Fo | r In | dividuals: |
|----|------|---|
| 1. | Naı | me: |
| 2. | Ado | dress: |
| 3. | Em | ail Address: |
| 4. | Pho | one Number: |
| | | * * * * |
| Fo | r W | itnesses Representing Organizations: |
| | 1. | Name: Lauren Pagel |
| | 2. | Name of Organization(s) You are Representing at the Hearing: Earthworks |
| | 3. | Business Address: [Information redacted for privacy] |
| | 4. | Business Email Address: [Information redacted for privacy] |
| | 5. | Business Phone Number: [Information redacted for privacy] |

For all Witnesses

Name/Organization: Lauren Pagel/Earthworks

Title/Date of Hearing: Oversight hearing titled "Mining in America: The Administration's Use of Claim

Maintenance Fees and Cleanup of Abandoned Mine Lands." / June 13, 2013

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 previously served 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 for the past decade.

- 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.
- 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.
- f. A list of all federal lawsuits filed against you by the federal government in the current year and the previous four years, giving the name of the lawsuit, the subject matter of the lawsuit, and the federal statutes under which the lawsuits were filed.
- g. Any other information you wish to convey that might aid the Members of the Committee to better understand the context of your testimony.

Witnesses Representing Organizations

Name/Organization: <u>Lauren Pagel/Earthworks</u>

Title/Date of Hearing: Oversight hearing titled "Mining in America: The Administration's Use of Claim

Maintenance Fees and Cleanup of Abandoned Mine Lands." / June 13, 2013

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

I am the Policy Director at Earthworks.

- i. 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).
- j. 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.

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

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

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

| | Fort | the 2008 calen | dar year, | or tax year beginning | , 2008, and endi | ng | | | , | | |
|--------------------------------|--|--|-------------------------|---|--------------------------------------|----------------|---------------|-----------|--|------|--|
| В | Check | if applicable: | | | | | D Emplo | yer Ide | ntification Number | | |
| | A | ddress change | Please use IRS label | EARTHWORKS | | | 52- | -155 | 7765 | | |
| | Пи | lame change | or print or type. | 1612 K STREET, NW #808 | | 19 | E Teleph | | | _ | |
| | | nitial return | See specific | WASHINGTON, DC 20006 | | | | | 7-1872 | | |
| | | ermination | Instruc- tions. | | | | 202 | . 00 | 1 1072 | | |
| | | mended return | tions. | | | | C - | | . 1 (04 700 | | |
| | | - Contraction of the Contraction | E Name o | nd address of principal officer: | | U/a) la thia s | G Gross | | The same of the sa | - | |
| | L A | pplication pending | | 100001-1-00-004-100-00-00-0-0-00-0-00-0 | | H(a) Is this a | | | Hies Mi | | |
| - | | | 7-3 | AS C ABOVE | | | attach a list | | nstructions) Yes | No | |
| <u> </u> | | k-exempt statu | | | 947(a)(1) or 527 | | | | | | |
| <u>J</u> | | | | HWORKSACTION.ORG | Υ | H(c) Group e | | number | > | | |
| K | | e of organization: | | tion Trust Association Other▶ | L Year of Forma | tion: 1988 | M | State of | legal domicile: DC | | |
| P | art I | Summa | | | | | | | | | |
| | 1 | Briefly describ | e the org | anization's mission or most significant | activities: THE CORP | ORATIO | V IS C | ORGA | NIZED | | |
| e | DUCT HOTIVITY DOD CHARTES DID AND DRUGS BECOME | | | | | | | | | | |
| Governance | | ACTIVITIE | ES_QF_ | THE CORPORATION SHALL INC | CLUDE BUT NOT BE | E_LIMIT | ED_TO | :_PR | OTECTING | | |
| ern | | COMMUNIT | IES AN | D THE ENVIROMENT FROM THE | E IMPACTS OF DES | STRUCTI | VE_MI | NERA | L_DEVELOPMENT | | |
| VOK | 2 | Check this box | x ► i | f the organization discontinued its oper | ations or disposed of mo | ore than 25 | % of its | asset | S. | | |
| જ | 3 | Number of vot | ing meml | pers of the governing body (Part VI, lin | e 1a) | | | | | 9 | |
| Activities & | | | | voting members of the governing body | | | | 4 | | 0 | |
| VI | 5 | Total number | of employ | vees (Part V, line 2a) | | | | 5 | | 5 | |
| Act | | | | eers (estimate if necessary) | | | | 6 | | 0 | |
| | | | | usiness revenue from Part VIII, line 12, | | | | 7 a | 0 | | |
| | D | Net unrelated | business | taxable income from Form 990-T, line | 34 | | | 7 b | 0 | • | |
| | | 4 5 5 6 | | | | | ior Year | | Current Year | | |
| re | 8 | Contributions | and grant | s (Part VIII, line 1h) | | . 1, | 485,2 | 248. | 1,644,846 | | |
| Revenue | 9 | Program servi | ce revenu | te (Part VIII, line 2g) | | | | | | | |
| 3ev | 10 | investment inc | Joine (Fai | t viii, columni (A), lines 3, 4, and /d) | // | | 24,4 | | 515 | | |
| | 11 | Other revenue | (Part VII | l, column (A), lines 5, 66, 80 90, 10c, a | and 11e) | | 20,9 | | 39,437 | | |
| | | | | es 8 through 11 (must advail Part VIII, e | | | 530,6 | | 1,684,798 | | |
| | | | | unts paid (Part 🗶 column (A), lines 1- | | | 241,7 | 39. | | | |
| | | | | nembers (Part IX, column (A), line 4) | | | | | _ | | |
| Ø | 15 | Salaries, other | compens | sation, employee benefits (Part IX, colu | ımn (A), lines 5-10) | 949,069. | | | 1,114,180 | | |
| nse | 16a | 16a Professional fundraising fees (Part IX, column (A), line 11e) | | | | | | | | | |
| Expenses | Ь. | Total fundraisii | na expens | ses (Part IX, column (D), line 25) ► | 194.952 | | | | | 1000 | |
| ŵ | | | | (, column (A), lines 11a-11d, 11f-24f) | | | 683,5 | 722 160 | 40.0 | | |
| | | | | es 13-17 (must equal Part IX, column (| | | | | 723,160 | | |
| | | | | Subtract line 18 from line 12 | | | 874,3 | | 1,837,340 | _ | |
| L 60 | 13 1 | Revenue less e | expenses. | Subtract line 18 from line 12 | | | 343,6 | | -152,542 | | |
| Net Assets or Fund Balances | 00 | | | 1.0 | | Beginn | ing of Y | | End of Year | _ | |
| Bala | | | | e 16) | | | 572,7 | | 371,401. | | |
| let / | | | | ine 26) | | | 84,8 | | 36,120. | | |
| 150000 | | | | ices. Subtract line 21 from line 20 | | | 487,8 | 23. | 335,281. | | |
| Pa | rt II | Signatur | e Block | | | | | | | _ | |
| | | Under penalties of | of perjury, I o | declare that I have examined this return, including ac declaration of preparer (other than officer) is based o | companying schedules and state | ements, and to | the best of | my kno | wledge and belief, it is | | |
| | | 1 | · N | Collectivity is based of | in all illiointation of which prepar | er nas any kin | Jwieuge. | 1 | | | |
| Sig | | - Lin | head | er Du | | | 1129 | 00 | f | | |
| Hei | re | Signature of | officer | | | Date | | 20 - 27 | - T | | |
| | | Kimb | erlee | Dinn Dir. F. | mance One | retion | + 21 | 1) | velanment | | |
| | | Type or print | name and ti | tle. | | | | | v vp | | |
| _ | | Preparer's | | | | eck if | | | ntifying number | | |
| Pa | | signature | MICHAEI | D. AUKAMP, CPA | sel | ployed ▶ | (see ins | struction | s) | | |
| | eparer's | Time name (| | DUNHAM, AUKAMP & RHODES, PLO | | EIN | > | | | | |
| Us | e Only | if self-employed | | 4437 BROOKFIELD CORPORATE DRIVE, SUIT | TE 205 CHANTILLY, VA 2015 | Phone | no. ▶ (* | 703) | 631-8940 | | |
| Ma | v the | | | n with the preparer shown above? (| | | | | [] v. [] ii | | |
| | | | | Reduction Act Notice, see the separat | | | | | Form 990 (2008) | | |
| BK | | cy Act and Pa | perwork | Reduction Act Notice, see the separat | te instructions, | | | | rorm 330 (2008) | | |

| Forn | n 990 (2008) EARTHWORKS | 52-1557765 | Page 2 |
|------------|--|---|---------------|
| Pai | rt III Statement of Program Service Accomplishments (see instructions) | | |
| 1 | Briefly describe the organization's mission: SEE SCHEDULE 0 | | |
| | | | |
| | | | |
| 2 | Did the organization undertake any significant program services during the year which were not listed or Form 990 or 990-EZ? | | No |
| | If 'Yes,' describe these new services on Schedule O. | | _ |
| 3 | Did the organization cease conducting, or make significant changes in how it conducts, any program set If 'Yes,' describe these changes on Schedule O. | | |
| 4 | Describe the exempt purpose achievements for each of the organization's three largest program service and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants are expenses, and revenue, if any, for each program service reported. | s by expenses. Section 501(id allocations to others, the t | c)(3) otal |
| 4 a | US POLICY REFORM PROGRAMS - PROGRAMS TO RESEARCH, DEVELOP, PUBLIC POLICIES TO PROTECT COMMUNITIES AND THE ENVIRONMENT IN REGARD TO RESOURCES. THIS INCLUDES RESEARCH, PUBLICATIONS, INFORMATION AND ANALYSIS, LEGAL ACTION, OUTREACH AND EDUCATIONS OF THE PUBLIC, REAND COMMUNITIES, SUPPORT TO AFFECTED COMMUNITIES, PROMOTING MEDIA COVERAGE, AND EDUCATING DECISION MAKERS INCLUDING REGULATORS AND THE FOCUS OF THIS PROGRAM IS BOTH ON STATE AND FEDERAL POLICIES. | CIZE AND PROMOTE MINING AND NATURA ALYSIS, POLICY CTAILERS, INSURERS A AWARENESS AND ELECTED OFFICIALS | |
| 4b | (Code:) (Expenses \$264,562. including grants of \$) (INTERNATIONAL POLICY AND MARKET REFORM PROGRAMS - PROGRAMS TO RES | |) |
| | PUBLICIZE AND PROMOTE POLICIES TO PROTECT COMMUNITIES AND THE ENV TO MINING AND NATURAL RESOURCES INTERNATIONALLY. THIS INCLUDES R PUBLICATIONS, INFORMATION ANALYSIS, POLICY ANALYSIS, LEGAL ACTION EDUCATIONS OF THE PUBLIC AND COMMUNITIES, SUPPORT TO AFFECTED COMMEDIA AWARENESS AND COVERAGE, AND EDUCATING DECISION MAKERS INCLU ELECTED OFFICIALS. THIS INCLUDES CONDUCTING TRAININGS FOR AFFECT CONDUCTING SITE VISITS, AND PROVIDING INDEPENDENT SCIENTIFIC, TECANALYSIS. THIS ALSO INCLUDES PROGRAMS TO INCREASE CORPORATE ACCORPORATE ACCO | IRONMENT IN REGARD ESEARCH, JOUTREACH AND MUNITIES, PROMOTING DING REGULATORS AN ED COMMUNITIES, HNICAL AND ECONOMI | NG |
| | | | |
| | (Code:) (Expenses \$ | ND RURAL COMMUNITI L AND GAS ETTER INDUSTRY NIZING IN OUR EFFO . OGAP COORDINATE AND GOVERNMENTAL | DRT |
| <i>8</i> 1 | | | |
| | Other program services. (Describe in Schedule O.) SEE SCHEDULE O | | |
| | (Expenses \$ 214,094. including grants of \$) (Revenue \$ Total program service expenses ► \$ 1,524,079. (Must equal Part IX, Line 25, column (Expenses)) | | |
| | | | |

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 | X | |
| 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 | X | |
| 5 | | | | |
| J | reporting requirement and proxy tax? If 'Yes,' complete Schedule C, Part III. | 5 | | |
| 6 | Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If 'Yes,' complete Schedule D, Part 1</i> | 6 | | X |
| 7 | Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' complete Schedule D, Part II | 7 | | X |
| 8 | Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III. | 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? <i>If 'Yes,' complete Schedule D, Part IV.</i> | 9 | | X |
| 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, VII, VIII, IX, or X as applicable | 11 | Х | |
| 12 | Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII. | 12 | Х | |
| 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 U.S.? | 14a | | Χ |
| | b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, | | | 1 1 1011111 |
| | business, and program service activities outside the U.S.? If 'Yes,' complete Schedule F, Part I | 14b | | <u>X</u> |
| 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 | | <u>X</u> |
| 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 | | Χ |
| 17 | Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If 'Yes,' complete Schedule G, Part I | 17 | | X |
| | 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 | | _X_ |
| 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 | | <u>X</u> |
| 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 | | |
| | 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 | | X |
| k | 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 | | 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? <i>If 'Yes,' complete Schedule L, Part III.</i> | 27 | 1220 | Х |
| | | _ | | |

Part IV Checklist of Required Schedules (continued) Yes No 28 During the tax year, did any person who is a current or former officer, director, trustee, or key employee: 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 I..... 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, 35 35 Part V, line 2..... Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2..... 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...... BAA Form 990 (2008)

| Form 990 (2008) EARTHWORKS 52-155776 | 5 | F | age |
|---|-------|---------|--------|
| Part V Statements Regarding Other IRS Filings and Tax Compliance | | | |
| | | Yes | No |
| 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 | | | |
| b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable | | | |
| c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? | 1 c | | X |
| 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 | Х | |
| Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions) | | | |
| 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? <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 | | Х |
| b If 'Yes,' enter the name of the foreign country: ► | 4017 | | |
| See the instructions for exceptions and 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? | 5 a | | X |
| b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? | 5 b | | Χ |
| 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? | 5 c | | |
| 6a Did the organization solicit any contributions that were not tax deductible? | 6a | | X |
| b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not | | | |
| deductible? | 6b | | |
| 7 Organizations that may receive deductible contributions under section 170(c). | Nez | | |
| a Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75? | 7 a | | X |
| 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? | 7 c | | X |
| d If 'Yes,' indicate the number of Forms 8282 filed during the year | 70 | | Λ |
| e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal | | CHAIR ! | HOW! |
| benefit contract? | 7 e | | X |
| 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? | 7 g | | X |
| h For all contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? | 7h | | X |
| 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 | 1,000 | |
| 9 Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds. | | 1979 | |
| a Did the organization make any taxable distributions under section 4966? | 9a | | |
| b Did the organization make any distribution to a donor, donor advisor, or related person? | 9b | | |
| 10 Section 501(c)(7) organizations. Enter: | i ala | | |
| 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 | | 46 | |
| 11 Section 501(c)(12) organizations. Enter: | | | |
| a Gross income from other 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 12b | | | |
| BAA | orm | 990 (2 | (8002) |

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Form 990 (2008)

Form 990 (2008) EARTHWORKS 52-1557765 Page

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

| Se | ection A. Governing Boo | dy and Management | | | | |
|-----|--|---|--|----------|---------|----------|
| | For each 'Yes' response to li processes, or changes in Sci | lines 2-7b below, and for a 'No' response to lines 8 or 9b belov shedule O. See instructions. | w, describe the circumstances, | | Yes | No |
| 1 | a Enter the number of voting n | members of the governing body | . 1a | 9 | 7000 | 1111 |
| | b Enter the number of voting n | members that are independent | . 1b 10 | | | |
| 2 | 2 Did any officer, director, trus officer, director, trustee or ke | stee, or key employee have a family relationship or a business ey employee? | relationship with any other | 2 | | Х |
| 3 | | e control over management duties customarily performed by o ees, or key employees to a management company or other pe | | 3 | | Х |
| 4 | | ny significant changes to its organizational documents | 13011 | 4 | Х | |
| | | s filed?SEE .S.CH .O | A STREET, THE TRANSPORTER PAR STREET, | - | | |
| 5 | The state of the s | e aware during the year of a material diversion of the organiza | | 5 | | Х |
| 6 | | members or stockholders? | | 6 | Х | |
| 7 | | members, stockholders, or other persons who may elect one o | | 7a | | Х |
| | b Are any decisions of the gove | verning body subject to approval by members, stockholders, or | other persons? | 7b | | Х |
| 8 | | poraneously document the meetings held or written actions un | The state of the s | | | |
| | a The governing body? | | | 8 a | | X |
| | b Each committee with authorit | ty to act on behalf of the governing body? | | 8 b | | X |
| 9 | a Does the organization have lo | ocal chapters, branches, or affiliates? | | 9a | | X |
| | b If 'Yes,' does the organization and branches to ensure their | n have written policies and procedures governing the activities operations are consistent with those of the organization? | s of such chapters, affiliates, | 9 b | | |
| 10 | Was a copy of the Form 990 describe in Schedule O the p | provided to the organization's governing body before it was fil process, if any, the organization uses to review the Form 990. | ed? All organizations must SEE SCHEDULE O | 10 | Х | |
| 11 | Is there any officer, director of organization's mailing addres | or trustee, or key employee listed in Part VII, Section A, who case. If 'Yes,' provide the names and addresses in Schedule O. | cannot be reached at the | 11 | | X |
| Sec | ction B. Policies | | | | | |
| 12 | a Does the organization have a | a written conflict of interest policy? If 'No,' go to line 13 | | 12a | Yes | No |
| | b Are officers, directors or trust to conflicts? | tees, and key employees required to disclose annually interes | ts that could give rise | 12b | | Х |
| | Schedule O how this is done. | rly and consistently monitor and enforce compliance with the p | | 12 c | | Х |
| 13 | | a written whistleblower policy? | | 13 | | X |
| 14 | Does the organization have a | a written document retention and destruction policy? | | 14 | | X |
| 15 | Did the process for determining persons, comparability data, a | ing compensation of the following persons include a review an and contemporaneous substantiation of the deliberation and c | d approval by independent lecision: | | | |
| - | a The organization's CEO, Exec | cutive Director, or top management official? | | 15 a | | <u>X</u> |
| j | b Other officers of key employe | ees of the organization? | | 15 b | | X |
| | Describe the process in Sche | dule O. (see instructions) | | | | |
| | entity during the year? | n, contribute assets to, or participate in a joint venture or simila | | 16a | | X |
| | b If 'Yes,' has the organization in joint venture arrangements status with respect to such ar | adopted a written policy or procedure requiring the organizations under applicable federal tax law, and taken steps to safeguate rrangements? | on to evaluate its participation rd the organization's exempt | 16b | | |
| Sec | ction C. Disclosures | | | | | |
| _ | | opy of this Form 990 is required to be filed ► SEE SCHEDU | LE O | | | |
| 18 | Section 6104 requires an orgainspection. Indicate how you | anization to make its Forms 1023 (or 1024 if applicable), 990, make these available. Check all that apply. | and 990-T (501(c)(3)s only) av | /ailable | e for p | ublic |
| | X Own website | Another's website Upon request | | | | |
| 19 | Describe in Schedule O wheth statements available to the pu | her (and if so, how) the organization makes its governing docu ublic. | uments, conflict of interest poli | cy, an | d fina | ncial |
| | | lress, and telephone number of the person who possesses the STREET, NW SUITE 808 WASHINGTON DC 200 | | anizatio | on: | |

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.

Check this box if the organization did not compensate any officer, director, trustee, or key employee.

- 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) | | | (D) | (E) | (F) |
|----------------------|------------------------------|--------------------------------|-----------------------|---------|--------------|------------------------------|--------|-------------------------------------|--|--|
| Name and Title | Average hours per week | | | | _ | that app | | Reportable compensation from | Reportable compensation from | Estimated amount of other |
| | per week | Individual trustee or director | Institutional trustee | Officer | Key employee | Highest compensated employee | Former | the organization (W-2/1099-MISC) | related organizations (W-2/1099-MISC) | compensation from the organization and related organizations |
| STEPHEN D'ESPOSITO | | | | | | | | | | |
| PRESIDENT & CEO | 35 | | | X | | | | 110,855. | 0. | 0. |
| DR. KARIN SHELDON | | | | | | | | | | |
| CHAIRMAN | 2 | | | X | | | Š. | 0. | 0. | 0. |
| GLENN MILLER | | | | | | | | | | |
| VICE CHAIRMAN | 1.5 | | | X | | | | 0. | 0. | 0. |
| KERRY ANDERSON | | | | | | | | | | |
| BOARD MEMBER | 1 | X | | | | | | 0. | 0. | 0. |
| MICHAEL CONROY | | | | | | 11 = - | | | | |
| BOARD MEMBER | 11 | X | | | | | | 0. | 0. | 0. |
| GLORIA FLORA | | | 10 | | | | | | | |
| BOARD MEMBER | 1 | X | | | | | | 0. | 0. | 0. |
| JAY HALFON | | | | | | | | | | |
| SEC/TREASURER | 2 | X | | Χ | | | | 0. | 0. | 0. |
| BILL MCNEILL | | | | | | | | | | |
| BOARD MEMBER | 1 | X | | | | | | 0. | 0. | 0. |
| WILMA SUBRA | | | | | | | | | | |
| BOARD MEMBER | 1 | X | | | | | | 0. | 0. | 0. |
| KIMBERLEE SMITH-DINN | | | | | | | | | | |
| DIR OPS & DEV | 35 | | | | | X | | 72,500. | 0. | 3,625. |
| GWEN LACHELT | | | | | | | | | | |
| OGAP PROG DIR | 35 | | | | | X | | 70,000. | 0. | 3,500. |
| ALAN SEPTOFF | | | | | | | | | | |
| RESEARCH & IT | 35 | | | | | X | | 57,000. | 0. | 2,850. |
| LAUREN PAGEL | | | | | | | | | | |
| LEGISLATIVE DIR | 35 | | | | | X | | 51,000. | 0. | 2,550. |
| PAYAL SAMPAT | | | | | | | | | | |
| INTL MINING DIR | 35 | | | | | X | | 65,445. | 0. | 3,272. |
| | - | | | | | | | | | |
| | | | | | | | | | | |

| Part VII Section A. Officers, Directors, Trus | stees, k | (ey | En | ıplo | oye | es, | an | d Highest Cor | npensated Emp | loyee | s (cc | ont.) |
|--|--|------------------|-----------------------|---------|--------------|---------------------------------|-------------|---|--|--------------|---------------------------------------|---------|
| (A) | (B) | | | | c) | | | (D) | (E) | | (F) | |
| Name and Title | Average hours per week | | | | _ | _ | 1 | Reportable compensation from the organization | Reportable compensation from related organizations | am | Estimate ount of ompensat | other |
| | hours per week | direct | titutio | Officer | y emp | ploye | Former | (W-2/1099-MISC) | (W-2/1099-MISC) | 0 | from the rganization and relate | e on |
| | | al trustee or | Institutional trustee | | Key employee | Highest compensated employee | | | | | ganizatio | |
| | | tee | ustee | | | ensate | | | | | | |
| | | | | | | , a | | | | | | |
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| | | _ | - | | _ | | | | | | | |
| | | | | | | | | | | | | |
| 1 b Total | | | | | | | > | 426,800. | 0. | | 15,7 | 797. |
| 2 Total number of individuals (including those in 1a) | who rece | ived | mo | re t | han | \$10 | 00,00 | 00 in reportable co | ompensation from t | he | | |
| organization ► 1 | ************************************** | | | | | | | | | | Yes | No |
| 3 Did the organization list any former officer, director | or truste | e. k | ev e | emp | love | e. c | or hid | ghest compensate | d employee | | UANA. | |
| on line 1a? If 'Yes,' complete Schedule J for such i | ndividual | | | | | | | | | 3 | 188A W. D. | Х |
| 4 For any individual listed on line 1a, is the sum of re the organization and related organizations greater t | han \$15 | 0,00 | iper 0? I | f 'Ye | ion es' c | com | plete | er compensation to e Schedule J for s | rom uch | Maria. | | v |
| individual | | | | | | | | | | 4 | | X |
| rendered to the organization? If 'Yes,' complete Sc | nedule J | for s | such | pe | rsor | 1 | | ····· | | 5 | | X |
| Section B. Independent Contractors 1 Complete this table for your five highest compensal | ed inder | end | ent | con | trac | tors | tha | t received more th | nan \$100,000 of | | | |
| compensation from the organization. | | | | | | | | | | - | | |
| (A) Name and business addres | S | | | | | | | (B) Description o | f Services | Compe | C) ensatio | n |
| | | | | | | | | | | | | |
| | | | | | | | | ************ | | | | |
| | | | | | | | - | | | | | |
| | | | | | | | | | | | | |
| 2 Total number of independent contractors (including | those :- | 11. | uh a | ro | | d ~~ | ora | than \$100,000 :- | As U | o'y a descri | | |
| 2 Total number of independent contractors (including | mose in | 1) V | VIIO | rece | eive | u m | ore | шан ф100,000 IN | | | | |

| | | (A) Total revenue | (B) Related or exempt function revenue | (C) Unrelated business revenue | (D) Revenue excluded from tax under sections 512, 513, or 514 |
|--|--|---|--|--|--|
| FTS, GRANTS | b Membership dues. 1b c Fundraising events. 1c d Related organizations. 1d | | | | |
| 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 contribns included in Ins 1a-1f: \$ | | | | |
| | h Total. Add lines 1a-1f | 1,644,846. | | | |
| UE | Business Code | | | | |
| PROGRAM SERVICE REVENUE | 2a | | | | |
| ROG | f All other program service revenue | | 3.5 (2.10 to 1.00 a.C.) (1.00 to 1.00 | AND THE ART OF THE PARTY OF THE | 0.42 |
| | 3 Investment income (including dividends, interest and other similar amounts). 4 Income from investment of tax-exempt bond proceeds | | | 18.30.01.01.01.01.01.01.01.01.01 | 515. |
| | 5 Royalties | K samanan manan manan sama | | 1.000.000.000.000.000 | |
| | 6a Gross Rentsb Less: rental expenses. | | | | |
| | c Rental income or (loss) | | Olivinia Valendali | | |
| | d Net rental income or (loss) | | Towns of the Area trans | Turk turk ar value terana arak | TENTRO PER KANDELEWAYA |
| | 7 a Gross amount from sales of assets other than inventory (i) Securities (ii) Other | | | | |
| | b Less: cost or other basis and sales expenses | | | 12 - 12 - 12 - 12 - 13 - 13 - 13 - 13 - | |
| | d Net gain or (loss) | SECURITY AND SECURITY OF SECURITY OF SECURITY | Property of Comment of the Comment o | A 200 to the United States of the Australian S | Section of the sectio |
| OTHER REVENUE | 8a Gross income from fundraising events (not including. \$ | | | | |
| REVI | of contributions reported on line 1c). | | | | |
| HER | See Part IV, line 18 | | | | |
| P | c Net income or (loss) from fundraising events | ENTRACENERGETARISMENT | | | |
| | 9a Gross income from gaming activities. See Part IV, line 19 | | | | |
| | b Less: direct expenses b | | | | |
| | c Net income or (loss) from gaming activities ▶ | | | | |
| | 10 a Gross sales of inventory, less returns and allowances a | | | | |
| | b Less: cost of goods sold | | | | |
| } | c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code | | | A WALL DAY BUT DIRECTOR BUT | 19-1-12-20-20-20-20-20-20-20-20-20-20-20-20-20 |
| Ì | 11a MISCELLANEOUS | 39,437. | ACADEMIC PROPERTY. | | 39,437. |
| | b | | | | |
| | d All other revenue | 20 427 | | 3,403,37,57,43,37,20,4,23 | RENDERVALIZAÇÃO SACA |
| | C Totali Add lines Tra Tra | 39,437. | MATERIAL STREET | | |
| | 12 Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e | 1,684,798. | 0. | 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) 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 | | | | |
| 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 | | | | |
| 4 | Benefits paid to or for members | | | | |
| 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. |
| | Fees for services (non-employees) | | | | |
| | a Management | 04.045 | 24 215 | | |
| | Legal | 34,315. | 34,315. | 0.005 | |
| | Accounting | 9,295. | | 9,295. | |
| | Lobbying | | | | |
| | Prof fundraising svcs. See Part IV, In 17 | | | | |
| | Investment management fees | 58,136. | 58,136. | | |
| | g Other | 10,081. | 9,950. | 58. | 73. |
| 13 | Advertising and promotion Office expenses | 18,720. | 14,523. | 3,273. | 924. |
| 14 | Information technology | 10,720. | 14,525. | 3,213. | 724. |
| 15 | Royalties. | *************************************** | | | |
| 16 | Occupancy | 82,137. | 71,274. | 4,238. | 6,625. |
| 17 | Travel | 119,827. | 111,483. | 688. | 7,656. |
| 18 | Payments of travel or entertainment expenses for any federal, state, or local public officials | | , | | .,, |
| 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.). | | | | |
| a | 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 990 (2008) |

| | | | (A) Beginning of year | | End (| (B) of yea | ır | | |
|------------------|--------|--|--|-----------|------------|---------------|--------|--|--|
| - | 1 | Cash – non-interest-bearing. | 463. | 1 | | | | | |
| | 2 | Savings and temporary cash investments | | 2 | - | 173, | 787 | | |
| | 3 | Pledges and grants receivable, net | | 3 | | 165, | | | |
| | 4 | Accounts receivable, net | 200,000. | 4 | | 1007 | 000 | | |
| | 5 | The state of the s | | | | | | | |
| | ٦ | Receivables from current and former officers, directors, trustees, key employees, or other related parties. Complete Part II of Schedule L | | 5 | | | | | |
| | 6 | Receivables from other disqualified persons (as defined under section 4958(f)(1)) | | | | | | | |
| | | and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L | | 6 | | | | | |
| A S S E | 7 | Notes and loans receivable, net | | 7 | | | | | |
| E | 8 | Inventories for sale or use | | 8 | | | | | |
| T S | 9 | Prepaid expenses and deferred charges | 26,910. | 9 | | 17, | 248 | | |
| | 10 a | a Land, buildings, and equipment: cost basis 10a 85, 166. | | | | | | | |
| | | Less: accumulated depreciation. Complete Part VI of | | | | | | | |
| | | Schedule D | 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 | | 15 | | | | | |
| | 16 | Total assets. Add lines 1 through 15 (must equal line 34) | 572,718. | 16 | 3 | 71, | 401. | | |
| | 17 | Accounts payable and accrued expenses | 41,228. | 17 | | 36, | | | |
| | 18 | Grants payable | | 18 | | | | | |
| | 19 | | | | | | | | |
| Ļ | 20 | Tax-exempt bond liabilities | | 20 | | | | | |
| A B | 21 | 21 Escrow account liability. Complete Part IV of Schedule D | | | | | | | |
| Ī | 981297 | | | | | | | | |
| Ţ | | highest compensated employees, and disqualified persons. Complete Part II | | | | | | | |
| Ţ | | of Schedule L | | | | | | | |
| E S | 23 | Secured mortgages and notes payable to unrelated third parties | 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. | | |
| Й | | Organizations that follow SFAS 117, check here ► X and complete lines | | | | | | | |
| N E T | | 27 through 29 and lines 33 and 34. | | | | | | | |
| A | 27 | Unrestricted net assets | 46,984. | 27 | 1 | 70,2 | 281. | | |
| ASSET | 28 | Temporarily restricted net assets | 440,839. | 28 | 1 | 65,0 | 000. | | |
| Ś | 29 | Permanently restricted net assets | | 29 | | | | | |
| O R | | Organizations that do not follow SFAS 117, check here ► and complete | | Very 1044 | | | | | |
| E | | lines 30 through 34. | | | | | | | |
| PZC | 30 | Capital stock or trust principal, or current funds | 11.3VA | 30 | | | | | |
| | 31 | Paid-in or capital surplus, or land, building, and equipment fund | | 31 | | | | | |
| B女」女之いいの | 32 | Retained earnings, endowment, accumulated income, or other funds | | 32 | | | | | |
| ίχ | 33 | Total net assets or fund balances. | 487,823. | 33 | 3 | 35,2 | 281. | | |
| S | 34 | Total liabilities and net assets/fund balances | 572,718. | 34 | | 71,4 | | | |
| Pa | rt XI | | NAME OF TAXABLE PARTY OF TAXABLE PARTY OF TAXABLE PARTY. | | | | | | |
| | | | | | | Yes | No | | |
| 1 | Acc | counting method used to prepare the Form 990: \tag{X} Cash \tag{X} Accrual | Other | | 1333 | 1000 | | | |
| | | re the organization's financial statements compiled or reviewed by an independent a | | | 2a | CANADA CANADA | Х | | |
| | | re the organization's financial statements audited by an independent accountant? | | | 2b | X | | | |
| | c If " | Yes' to 2a or 2b, does the organization have a committee that assumes responsibility | for oversight of the a | udit. | | 25.000 | | | |
| | rev | iew, or compilation of its financial statements and selection of an independent accou | ıntant? | | 2 c | X | | | |
| 3 | | a result of a federal award, was the organization required to undergo an audit or audit and 1999 and 1999 are a second and 1999 are a second are a second and 1999 are a second are a second and 1999 are a second ar | | | | | 17 | | |
| | | dit Act and OMB Circular A-133? | | | 3a | | X | | |
| | | Yes,' did the organization undergo the required audit or audits? | | | 3b Form | 990 (| (2008) | | |
| BA | 4 | | | | i UIIII | 550 (| رد٥٥٥ | | |

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service **Public Charity Status and Public Support**

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

nonexempt charitable trusts.
► 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 Reason for Public Charity Status (All organizations must complete this part.) (see instructions) The organization is not a private foundation because it is: (Please check only one organization.) 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 cooperative hospital service organization described in section 170(b)(1)(A)(iii). (Attach Schedule H.) 4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: 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 in section 170(b)(1)(A)(vi). (Complete Part II.) X community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 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.) 9 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). (see instructions) 10 An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h. 11 Type II С Type III — Functionally integrated d 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 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 (i) a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?..... 11 g (i) a family member of a person described in (i) above?..... 11 g (ii) a 35% controlled entity of a person described in (i) or (ii) above?..... 11 g (iii) Provide the following information about the organizations the organization supports h (v) Did you notify the organization in col. (i) of your support? (i) Name of Supported (ii) EIN (iii) Type of organization (iv) Is the (vi) Is the (vii) Amount of Support (described on lines 1-9 above or IRC section (see instructions)) organization in col. (i) organized in the U.S.? Organization organization in col. (i) listed in your governing document? Yes No Yes Yes No No

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

Schedule A (Form 990 or 990-EZ) 2008

Schedule A (Form 990 or 990-EZ) 2008 EARTHWORKS 52-1557765 Page 2 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.) Section A. Public Support Calendar year (or fiscal year (f) Total (a) 2004 (b) 2005 (c) 2006 (d) 2007 (e) 2008 beginning in) Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants.')... 1,556,382. 1,885,031. 1,785,477. 7,945,450. 1,073,714. 1,644,846 Tax revenues levied for the organization's benefit and either paid to it or expended 0. on its behalf...... 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 0. the public without charge..... 1,073,714. 1,556,382. 1,885,031. 1,785,477. 7,945,450. Total, Add lines 1-3...... 1,644,846. 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. Public support. Subtract line 5 from line 4. 7,945,450. Section B. Total Support Calendar year (or fiscal year beginning in) ► (e) 2008 (a) 2004 (b) 2005 (c) 2006 (d) 2007 (f) Total 1,556,382. 1,073,714 1,885,031 1,785,477 1,644,846 7,945,450. Amounts from line 4...... Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form 1,505 4,184 8,885. 24,448 515 39,537. similar sources.... Net income form unrelated business activities, whether or not the business is regularly 0. carried on..... Other income. Do not include gain or loss form the sale of

| | capital assets (Explain in Part IV.) | | | | | | 0. | | | | | |
|-----|---|--|---------------------------------------|--|--|--|----------------|--|--|--|--|--|
| 11 | Total support. Add lines 7 through 10 | | | | | | 7,984,987. | | | | | |
| 12 | Gross receipts from related activ | vities, etc. (see ins | structions) | | | 12 | 0. | | | | | |
| 13 | 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. | | | | | | | | | | | |
| Sec | Section C. Computation of Public Support Percentage | | | | | | | | | | | |
| | Public support percentage for 20 | | | | | | 99.5% | | | | | |
| 15 | Public support percentage for 20 | 007 Schedule A, P | art IV-A, line 26f | | | 15 | 99.7 % | | | | | |
| 16 | 16a 33-1/3 support test — 2008. If the organization did not check the box on line 13, and the line 14 is 33-1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization. | | | | | | | | | | | |
| | b 33-1/3 support test — 2007. If the and stop here. The organization | e organization did qualifies as a pub | not check a box olicly supported o | on line 13, or 16arganization | a, and line 15 is 3 | 3-1/3% or more, | check this box | | | | | |
| 17 | a 10%-facts-and-circumstances to or more, and if the organization the organization meets the 'facts | meets the 'facts-a | and-circumstance | s' test, check this | box and stop he | r e. Explain in Par | t IV how | | | | | |
| | b 10%-facts-and-circumstances te or more, and if the organization organization meets the 'facts-and Private foundation. If the organi | meets the 'facts-a d-circumstances' | and-circumstance test. The organi | s' test, check this zation qualifies as | box and stop he s a publicly suppo | r e. Explain in Par orted organization | t IV how the | | | | | |
| 10 | riivate loulluation. Il tile organi | zation did not the | ch a box on line, | 10, 100, 100, 176 | a, or 170, check the | iis box and see ii | istructions | | | | | |

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.)

| Sec | ction A. Public Support | | | | | | | |
|----------|--|---|---|--|--|--|-----------|-------------|
| | ndar year (or fiscal yr beginning in)► | (a) 2004 | (b) 2005 | (c) 2006 | (d) 2007 | (e) 200 | 08 | (f) Total |
| 1 | Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants.') | | | | | | | |
| 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 | | | | | | | | |
| 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 1-5 | | | | | | | |
| | 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.) | | | | | | 102150 | |
| Sec | tion B. Total Support | | | | | | | |
| | ndar year (or fiscal yr beginning in) | (a) 2004 | (b) 2005 | (c) 2006 | (d) 2007 | (e) 200 | 8 | (f) Total |
| | Amounts from line 6 | | | | | | | |
| | Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources | | | | | | | |
| | Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 | | | | | | | |
| 11 | 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.) | | | | | | | |
| | Total support. (add Ins 9, 10c, 11, and 12.) First five years. If the Form 990 i organization, check this box and | s for the organiza | ation's first, secon | d, third, fourth, c | or fifth tax year as | a section 5 | 501(c)(3) | ▶□ |
| | tion C. Computation of Pub | | | | | | | |
| | Public support percentage for 200 | | | e 13. column (f)). | | | 15 | % |
| | Public support percentage from 2 | | | | | | 16 | % |
| | ion D. Computation of Inve | | | | | | | |
| | Investment income percentage fo | | | by line 13, colur | mn (f)) | | 17 | % |
| | Investment income percentage from | construction described and the ex- | Environmental serves beautiful to the | a tree and the second s | | Account to the second second | 18 | % |
| | | | | | | ATTENDED OF THE PARTY OF THE PA | | |
| 19a | 33-1/3 support tests – 2008. If the or more than 33-1/3%, check this bo | ganization did not o x and stop here. | cneck the box on II The organization | ne 14, and line 15 l qualifies as a bu | blicly supported or | ganization | / IS HOL | ▶ □ |
| 19a b | 33-1/3 support tests -2008 . If the ormore than 33-1/3%, check this bo 33-1/3 support tests -2007 . If this not more than 33-1/3%, check | ox and stop here. e organization did | The organization I not check a box | qualifies as a pull on line 14 or 19a | blicly supported or a, and line 16 is m | ganization ore than 33 | 3-1/3%, a | and line 18 |

| Schedule | A (Form 990 | or 990-E | Z) 2008 | EARI | HWORE | KS | | | | | | 52-1 | 557765 | | Page 4 |
|----------|---------------------|-----------|---------|-----------|-------------|---------|------------|-------------|--------|----------|-----------|-----------|----------|----------|--------|
| Part IV | Supplen Part II, li | nental Ir | or 17h | tion. Co | omplet | te this | part to | provide any | de the | explana | ition rec | uired by | Part II, | line 10; | ; |
| | 1 art II, II | 174 | 01 170, | , 01 1 41 | 1 (111, 11 | 110 12 | . 1 10 110 | ac arry | Otrici | addition | | Tiation. | 300 1113 | dactions | |
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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 | \overline{X} 501(c)($\underline{3}$) (enter number) organization | | | | |
| | 4947(a)(1) nonexempt charitable trust not treated as a | private foundation | | | |
| | 527 political organization | | | | |
| Form 990-PF | 501(c)(3) exempt private foundation | | | | |
| 7 51111 330 7 1 | 4947(a)(1) nonexempt charitable trust treated as a private | vate foundation | | | |
| | 501(c)(3) taxable private foundation | | | | |
| | | | | | |
| Check if your organization is covered by the General R boxes for both the General Rule and a Special R | tule or a Special Rule . (Note: Only a section 501(c)(7), (8), or (10) or Rule. See instructions.) | organization can check | | | |
| General Rule — For organizations filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. (Complete Parts I and II.) | | | | | |
| Special Rules — | | | | | |
| 509(a)(1)/170(b)(1)(A)(vi) and received from any | orm 990, or Form 990-EZ, that met the 33-1/3% support tes one contributor, during the year, a contribution of the greater of (1 % of the amount on Form 990-EZ, line 1. Complete Parts I |) \$5,000 or (2) 2% of the | | | |
| For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year aggregate contributions or bequests of more than \$1,000 for use <i>exclusively</i> for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III. | | | | | |
| For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year some contributions for use <i>exclusively</i> for religious, charitable, etc, purposes, but these contributions did not aggregate to more than \$1,000. (If this box is checked, enter here the total contributions that were received during the year for an <i>exclusively</i> religious, charitable etc, purpose. Do not complete any of the Parts unless the General Rule applies to this organization because it received nonexclusively | | | | | |
| religious, charitable, etc, contributions of \$5 | ,000 or more during the year.) | ▶\$ | | | |
| 990-PF) but they must answer 'No' on Part IV. I | the General Rule and/or the Special Rules do not file Scheine 2 of their Form 990, or check the box in the heading of eet the filing requirements of Schedule B (Form 990, 990-E | their Form 990-EZ, or on line 2 of | | | |

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

| Schedule B (Form 990, 990-EZ, or 990-PF) (200 | | | | | |
|---|-------------|--------|--------|------------|--------|
| | edule R (Fr | rm 990 | 990.F7 | or 990.PF) | (2008) |

of Part I

Name of organization

Page 1 of 2
Employer identification number

EARTHWORKS

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 | \$ <u>50,000.</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 |
| 5 | TRUE NORTH FOUNDATION 664 A FREEMEN LANE #332 GRASS VALLEY, CA 94129 | \$ <u>190,000</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 |
| | 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)

| Caladala | | / | nnn | 000 17 | or 990-PF) | 100000 |
|-----------|---|-------|-----|----------|------------|----------|
| Schedille | к | (Form | 990 | 9911-1-7 | or 990-PF | (211118) |
| | | | | | | |

Page 2

of 2

of Part I

Name of organization

EARTHWORKS

Employer identification number

| 52-15577 | hh |
|----------|----|

| 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 | \$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 |
| 8 | GORDON & BETTY MOORE FOUNDATION 1661 PAGE MILL RD PALTO ALTO, CA 94304 | \$294,748. | 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 | WALLACE GLOBAL 1900 M ST NW SUITE 250 WASHINGTON, DC 20036 | \$ <u>50,000</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 |
| | | \$ | 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.) | | |
|---------------------------|--|--|----------------------|
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | N/A | 1 | |
| | | _ | |
| | | \$\$ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | - | |
| | | 1 | |
| | | \$ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | | |
| | | - | |
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| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
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| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
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| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
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| BAA | Sched | L dule B (Form 990, 990-EZ | , or 990-PF) (2008) |

of 1

of Part III

Name of organization EARTHWORKS Employer identification number 52–1557765

| Part III | Exclusively religious, charitable, organizations aggregating more t | etc, individual contribution han \$1.000 for the vear. | ons to sect | ion 501(c)(7), (8), or (10) (a) through (e) and the following line entry.) |
|---------------------------|--|--|---------------------------------------|--|
| | For organizations completing Part III, enter contributions of \$1,000 or less for the year | r total of <i>exclusively</i> religious, c | haritable, etc | |
| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | | (d) Description of how gift is held |
| | N/A | | | |
| | | (e) Transfer of gift | | |
| | Transferee's name, addre | ss, and ZIP + 4 | Rel | ationship of transferor to transferee |
| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | | (d) Description of how gift is held |
| | | | | |
| | Transferee's name, addres | Rela | ationship of transferor to transferee | |
| | | | | |
| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | | (d) Description of how gift is held |
| | | | | |
| | Transferee's name, addres | Rela | ationship of transferor to transferee | |
| | | | | |
| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | | (d) Description of how gift is held |
| | | | | |
| | Transferee's name, addres | (e) Transfer of gift s, and ZIP + 4 | Rela | ationship of transferor to transferee |
| - | | | | |

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 2008

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

| | | s,' to Form 990, Part IV, line 5 (Proxy Tax), organizations: Complete Part III. | then | | | | |
|------|--|---|---|---|--|--|--|
| Name | of organization | | *************************************** | Employer identific | | | |
| EAL | RTHWORKS | | | 52-155776 | | | |
| Pai | To be completed See the instruction | by all organizations exempt unde ns for Schedule C for details. | r section 501(c) a | and section 527 or | ganizations. | | |
| | | organization's direct and indirect political | , , | | | | |
| | | | | | | | |
| Da | t I B To be completed | by all organizations exempt unde | r cootion E01(a)(| · · · · · · · · · · · · · · · · · · · | *************************************** | | |
| | See the instruction | ns for Schedule C for details. | | | | | |
| | | cise tax incurred by the organization under | | | | | |
| 2 | Enter the amount of any exc | cise tax incurred by organization managers | under section 4955. | ▶ \$ | | | |
| 3 | If the organization incurred a | a section 4955 tax, did it file Form 4720 for | this year? | | Yes X No | | |
| 48 | Was a correction made? | | | | Yes No | | |
| | If 'Yes,' describe in Part IV. | | | | | | |
| | | by all organizations exempt unde | r section 501(c) | excent section 501 | (c)(3) | | |
| | See the instruction | ns for Schedule C for details. | | | | | |
| 1 | Enter the amount directly ex | pended by the filing organization for section | on 527 exempt function | on activities 🟲 \$ | | | |
| 2 | Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities. | | | | | | |
| 3 | Total of direct and indirect e Form 1120-POL, line 17b | xempt function expenditures. Add lines 1 a | and 2 and enter here | and on ►\$ | | | |
| 4 | | | | | | | |
| 5 | State the names, addresses made. Enter the amount pai received and promptly and of | file Form 1120-POL for this year? | | | | | |
| | (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 | | |
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BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule C (Form 990 or 990-EZ) 2008

| Part II-A To be compunder section | oleted by organizat on 501(h)). See the | ions exempt unde instructions for So | r section 501(c)(3) chedule C for detai | that filed Form 576 | 8 (election |
|---|--|---|--|------------------------------------|---|
| A Check ► if the fili | ing organization belong | s to an affiliated group. | | | |
| | ing organization checke | | | | |
| (The term | Limits on Lobbying 'expenditures' means | Expenditures – amounts paid or incur | red.) | (a) Filing organization's totals | (b) Affiliated group totals |
| 1 a Total lobbying expendit | ures to influence public | opinion (grass roots lo | obbying) | 9,062. | |
| b Total lobbying expendit | ures to influence a legi | slative body (direct lob | bying) | 17,405. | *************************************** |
| c Total lobbying expendit | ures (add lines 1a and | 1b) | | 26,467. | 0. |
| d Other exempt purpose | expenditures | | | | |
| e Total exempt purpose e | expenditures (add lines | 1c and 1d) | | 26,467. | 0. |
| f Lobbying nontaxable ar both columns. | mount. Enter the amou | nt from the following ta | ble in | 5,293. | |
| If the amount on line 1e, col | lumn (a) or (b) is: The | lobbying nontaxable a | amount is: | | |
| Not over \$500,000 | 20% | of the amount on line 1e. | | | |
| Over \$500,000 but not over \$1 | 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 of | over \$1,000,000. | | |
| Over \$1,500,000 but not over \$ | \$17,000,000 \$225 | ,000 plus 5% of the excess or | ver \$1,500,000. | | |
| Over \$17,000,000 | \$1,00 | 00,000. | | | SACRATE FINE SECTION |
| g Grassroots nontaxable | amount (enter 25% of I | ine 1f) | | 1,323. | 0. |
| h Subtract line 1g from lin | ne 1a. Enter -0- if line | g is more than line a | | 7,739. | 0. |
| i Subtract line 1f from lin | e 1c. Enter -0- if line f | is more than line c | | 21,174. | 0. |
| j If there is an amount of section 4911 tax for this | | | | | Yes X No |
| (Som | e organizations that m | ear Averaging Period U ade a section 501(h) el elow. See the instructio | ection do not have to d | complete all of the five h 2f.) | |
| | Lobbyin | g Expenditures During | 4-Year Averaging Peri | od | |
| Calendar year (or fiscal | (a) 2005 | (b) 2006 | (c) 2007 | (d) 2008 | (e) Total |

| Lobbying Expenditures During 4-Year Averaging Period | | | | | | | |
|---|--|-----------------|-----------------|-----------------|------------|--|--|
| Calendar year (or fiscal year beginning in) | (a) 2005 | (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)) | ye y | | | | 269,159. | | |
| f Grassroots lobbying expenditures | 376. | 11,425. | 16,570. | 9,062. | 37,433. | | |

BAA

Schedule C (Form 990 or 990-EZ) 2008

| onodano o (1 on | 11 000 01 000 ELY 2000 ELLI 12111 OTTE 0 | | |
|-----------------|--|--------------|------|
| | To be completed by organizations exempt under section 501(c)(3) that have I | filed Form 5 | 5768 |
| | (election under section 501(h)). See the instructions for Schedule C for details | | |

| (election under section 301(ii)). See the instructions for Schedule C for detail | 1 | a) | (b) |
|---|------------------|---------|--|
| | Yes | No | Amount |
| 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? | | | |
| 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 other organizations for lobbying purposes? | | | |
| g Direct contact with legislators, their staffs, government officials, or a legislative body? | | | - 200-200-00-00-00-00-00-00-00-00-00-00-00 |
| 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 | | | |
| 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? | 59-57-07 | | |
| 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 | 24.50 | West. | evaluera esperante de la calcula com |
| d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? | 50 | 17. 77 | |
| 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. | on 50 | I(c)(5 |), or section |
| | | | Yes No |
| 1 Were substantially all (90% or more) dues received nondeductible by members? | | | 1 |
| 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? | | | |
| 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 501(c)(6) if BOTH Part III-A, questions 1 and 2 are answered 'No' OR if Part II answered 'Yes.' See Schedule C Instructions for details. | in 50 II-A, c | uesti |), or section ion 3 is |
| 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). | | | |
| a Current year | _ | 2a | |
| 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 | s | | |
| does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and politi | cal | 4 | |
| expenditure next year? | | 5 | |
| Part IV Supplemental Information | | | |
| complete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; and | d Part | II-R li | ne 1i |
| lso, complete this part for any additional information. | | | 110 11. |
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| Schedule C (F | orm 990 or 990-EZ) 2008 EARTHWORKS Supplemental Information (continued) | 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 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

Name of the organization

Employer Identification number

| EA | RTHWORKS | | | 52-1557765 | |
|---|--|--|--|--|-------------------|
| Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts Complete if the organization answered 'Yes' to Form 990, Part IV, line 6. | | | | | |
| | | (a) Donor advised f | unds | (b) Funds and other acc | ounts |
| 1 | Total number at end of year | (a) Borior davised i | anas | (b) Fullus and other dec | ourits |
| 1 | A SANDARAMAN ROLL ROLL ROLL ROLL ROLL ROLL ROLL ROL | | | | |
| 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 dor funds are the organization's property, subject | to the organization's exclusive | legal control? | Yes | No |
| 6 | Did the organization inform all grantees, dono used only for charitable purposes and not for timpermissible private benefit?? | rs, and donor advisors in writing the benefit of the donor or don | ng that grant funds ma or advisor or other | ay be Yes | No |
| Pa | rt II Conservation Easements Comple | ete if the organization and | swered 'Yes' to Fo | orm 990, Part IV, line | 7. |
| 1 | Purpose(s) of conservation easements held by | | | | |
| | Preservation of land for public use (e.g., re | | _ | historically important land a | area |
| | Protection of natural habitat | percentary or production, | _ | tified historic structure | |
| | Preservation of open space | L | | tilled motorie structure | |
| 2 | Complete lines 2a-2d if the organization held a | a qualified conservation contrib | aution in the form of a | conservation easement on | the last day |
| 2 | of the tax year. | | valion in the form of a | BEEGET | |
| | T. (.) | | 10-1 | Held at the End of | the rear |
| | a Total number of conservation easements | | | 2a | |
| | Total acreage restricted by conservation easer | | PROFESSIONAL SERVICES | 2 b | |
| | Number of conservation easements on a certif | | , , | 2c | |
| | d Number of conservation easements included in | | | 2 d | |
| 3 | Number of conservation easements modified, | transferred, released, extinguis | shed, or terminated by | y the organization during th | e taxable |
| | year ▶ | | | | |
| 4 | Number of states where property subject to co | | | | |
| 5 | Does the organization have a written policy recenforcement of the conservation easement it has been been assumed to the conservation of the conservation of the conservation easement it has been assumed to the conservation of t | nolds? | | ·····Yes | No |
| 6 | Staff or volunteer hours devoted to monitoring | , inspecting, and enforcing eas | sements during the ye | ear ► | |
| 7 | Amount of expenses incurred in monitoring, in | specting, and enforcing easem | nents during the year | ▶ \$ | |
| 8 | Does each conservation easement reported on 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)? | | | | No |
| 9 | In Part XIV, describe how the organization reports include, if applicable, the text of the footnote to conservation easements. | conservation easements in its re o the organization's financial s | evenue and expense sta tatements that describ | atement, and balance sheet, a bes the organization's acco | and unting for |
| Par | t III Organizations Maintaining Collec | ctions of Art. Historical T | reasures, or Oth | er Similar Assets | |
| | Complete if the organization ansv | vered 'Yes' to Form 990, | Part IV, line 8. | | |
| | If the organization elected, as permitted under treasures, or other similar assets held for publi the text of the footnote to its financial stateme | ic exhibition, education, or resents that describes these items. | earch in furtherance o | of public service, provide, in | Part XIV, |
| b | If the organization elected, as permitted under treasures, or other similar assets held for publi 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 ar amounts required to be reported under SFAS 1 | 116 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 Mainta | ining Collec | ctions of Ar | t, Historic | cal Treasures, o | r Other Similar A | .ssets (| contin | ued) |
|--|--|--|--------------------------------|--|--|--|-----------|------------------|
| 3 Using the organization's accessi that apply): | on and other re | ecords, check a | any of the fo | ollowing that are a s | ignificant use of its o | collection | items (| check all |
| a Public exhibition | | d | Loan or e | exchange programs | | | | |
| b Scholarly research | | e | Other | | | | | |
| c Preservation for future gene | rations | | _ | | | | | |
| 4 Provide a description of the organ Part XIV. | | ections and exp | lain how th | ey further the orgar | ization's exempt pur | pose in | | |
| 5 During the year, did the organiza assets to be sold to raise funds | ation solicit or r rather than to l | receive donatio be maintained a | ns of art, hi as part of th | istorical treasures, c ne organization's co | or other similar llection? | . \ \ Ye: | s | No |
| Part IV Trust, Escrow and Cu IV, line 9, or reported | ıstodial Arra an amount | angements on Form 990 | Complete O, Part X, | if organization line 21. | answered 'Yes' t | o Form | 990, F | art |
| 1a Is the organization an agent, trus included on Form 990, Part X?. | stee, custodian | , or other inter | mediary for | contributions or oth | ner assets not | . Yes | s | No |
| b If 'Yes,' explain the arrangement | | | | | | | | |
| | | | | | | Amoui | nt | |
| c Beginning balance | | | | | | | | |
| d Additions during the year | | | | | | | | |
| e Distributions during the year | | | | | | | | |
| f Ending balance | | | | | | | | |
| 2a Did the organization include an a | | n 990, Part X, | line 21? | | | . Yes | 5 | No |
| b If 'Yes,' explain the arrangement | | | | | | | | |
| Part V Endowment Funds Co | mplete if or | ganization a | nswered | 'Yes' to Form 99 | 0, Part IV, line 1 | 0 | | |
| | (a) Current y | ear (b) | Prior year | (c) Two years back | (d) Three years ba | ck (e) | Four yea | rs back |
| 1a Beginning of year balance | | | | | | | | |
| b Contributions | | | | | | 160 | All this | W. 3. 11. 3. 1 |
| c Investment earnings or losses | | | | | | | | |
| d Grants or scholarships | | | | | | | | |
| e Other expenditures for facilities and programs | | | | | | | | 100 |
| f Administrative expenses | | 25,000 | | | | | | 5218/053 |
| g End of year balance | | | | Mark September 1997 | | | \$2.A 486 | The transfer |
| 2 Provide the estimated percentage | | nd balance held | d as: | a. I.a. ii. dawa a a a a a a a a a a a a a a a a a | Carl Lagraches Carlos States Constitution (Constitution Constitution C | TAXABLE TAXABL | | 120,7770,1076,10 |
| a Board designated or quasi-endow | | | | | | | | |
| b Permanent endowment ► | | | | | | | | |
| c Term endowment ► | | | | | | | | |
| | | | | | | | | |
| 3a Are there endowment funds not in organization by: | n the possessi | on of the organ | ization that | are held and admir | nistered for the | | Yes | No |
| (i) unrelated organizations | | | | | | 3a(i) | | |
| (ii). related organizations | | | | | | , , | | |
| b If 'Yes' to 3a(ii), are the related o | | BELLEVICE RECORD BUSINESS TO THE STATE OF TH | | | | 3b | | |
| 4 Describe in Part XIV the intended | | | | | | 5,000 | | |
| Part VI Investments-Land, B | uildings, an | d Equipmen | t. See Fo | rm 990, Part X, | line 10. | | | |
| Description of investment | (8 | a) Cost or other (investment | | b) Cost or other basis (other) | (c) Depreciation | (d) l | Book Va | alue |
| 1a Land | | | | | | | | |
| b Buildings | | | | | | | | |
| c Leasehold improvements | | | | | | | | |
| d Equipment | | 85, | 166. | | 69,800 | | 15 | ,366. |
| e Other | a contract the second | | | | | | | |
| Total. Add lines 1a-1e (Column (d) sho | | 1 990. Part X. d | column (B) | line 10(c).) | | • | 15 | ,366. |
| BAA | 1,21,2 | | (-/) | | | edule D (F | | - |
| | | | | | 3011 | - / | | , |

| Part VII Investments—Other Securities See F (a) Description of security or category (including name of security) | (b) Book value | ne 12. N/A (c) Method of valuation Cost or end-of-year market value |
|---|----------------|--|
| Financial derivatives and other financial products | | |
| Closely-held equity interests | | |
| Other | - | |
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| Total. (Column (b) should equal Form 990 Part X, col. (B) line 12.) | 5 000 5 17 | 12) |
| Part VIII Investments—Program Related (See | | |
| (a) Description of investment type | (b) Book value | (c) Method of valuation Cost or end-of-year market value |
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| Total. Column (b)(should equal Form 990, Part X, Col. (B) line 13.) | | |
| Part IX Other Assets (See Form 990, Part X, | | THE CANADA STATE OF THE STATE O |
| (a) Do | escription | (b) Book value |
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| Total. Column (b) Total (should equal Form 990, Part X, co Part X Other Liabilities (See Form 990, Part | X, line 25) | |
| Part X Other Liabilities (See Form 990, Part (a) Description of Liability | | |
| Part X Other Liabilities (See Form 990, Part (a) Description of Liability | X, line 25) | |
| Part X Other Liabilities (See Form 990, Part | X, line 25) | |
| Part X Other Liabilities (See Form 990, Part (a) Description of Liability | X, line 25) | |
| Part X Other Liabilities (See Form 990, Part (a) Description of Liability | X, line 25) | |
| Part X Other Liabilities (See Form 990, Part (a) Description of Liability | X, line 25) | - |
| Part X Other Liabilities (See Form 990, Part (a) Description of Liability | X, line 25) | |
| Part X Other Liabilities (See Form 990, Part (a) Description of Liability | X, line 25) | |
| Part X Other Liabilities (See Form 990, Part (a) Description of Liability | X, line 25) | |
| Part X Other Liabilities (See Form 990, Part (a) Description of Liability | X, line 25) | |

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.

Page 4

| Pa | t XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements | | |
|--------|--|--|-----------------|
| 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 | STATE OF THE PARTY | |
| 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 | COUNTY OF THE PARTY OF THE PART | -152,542. |
| - | t XII Reconciliation of Revenue per Audited Financial Statements With Revenue per F | THE RESERVE OF THE PERSON NAMED IN COLUMN 1 | |
| 1 | Total revenue, gains, and other support per audited financial statements | | 1,684,798. |
| 2 | Amounts included on line 1 but not on Form 990, Part VIII, line 12: | 10.14 | |
| a | Net unrealized gains on investments | 0.00 | |
| | Donated services and use of facilities. 2b | | |
| | Recoveries of prior year grants | | |
| | Other (Describe in Part XIV) | | |
| | Add lines 2a through 2d. | . 2e | |
| 3 | Subtract line 2e from line 1. | | 1,684,798. |
| 4 | Amounts included on Form 990, Part VIII, line 12, but not on line 1: | 0.655 | 1,001,730. |
| ٦, | Investments expenses not included on Form 990, Part VIII, line 7b | | |
| | Other (Describe in Part XIV) | | |
| | Add lines 4a and 4b | . 4c | |
| | Total revenue. Add lines 3 and 4c. (This should equal Form 990, Part I, line 12.) | | 1,684,798. |
| | t XIII Reconciliation of Expenses per Audited Financial Statements With Expenses pe | | |
| | 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: | W. S. | 1,037,340. |
| | Donated services and use of facilities | 10000 | |
| | Prior year adjustments. 2b | - | |
| | Losses reported on Form 990, Part IX, line 25 | \exists | |
| | | - | |
| | | | |
| | Add lines 2a through 2d. | . 2e | 1 027 240 |
| | Subtract line 2e from line 1. | . 3 | 1,837,340. |
| | 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) | 20000 | |
| | Add lines 4a and 4b | | 1 007 040 |
| | Total expenses. Add lines 3 and 4c (This should equal Form 990, Part I, line 18.) | 5 | 1,837,340. |
| Par | t XIV Supplemental Information | | |
| Comp | 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 1b | and 2b; Part V, |
| line 4 | ; Part X; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. | | |
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| Schedule D (Form 990) 2008 | Page 5 |
|---|--------|
| Part XIV Supplemental Information (continued) | |
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SCHEDULE O (Form 990)

Name of the organization

Supplemental Information to Form 990

OMB No. 1545-0047

2008

Department of the Treasury Internal Revenue Service ► 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.

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 |
| PUBLIC MEMBER INFORMATION - |
| |
| MEDIA/COMMUNICATIONS - WEBSITE, NEWSLETTER AND OTHER METHODS TO PROMOTE AND |
| PUBLICIZE THE WORK OF EARTHWORKS AND ITS ALLIES, INCLUDING PUBLIC OPINION RESEARCH. |
| |
| RESEARCH/PUBLICATIONS - ANALYSIS OF POLICY PROPSALS, DEVELOPMENT OF POLICY |
| PROPOSALS, RESEARCH INTO IMPACTS OF MINING IN THE FORM OF FACT SHEETS, ISSUE PAPERS |
| AND REPORTS. |
| |
| ADVOCACY TECHNOLOGY/TOOL (CAPACITY BUILDING) - INVESTMENT GEARED TOWARD IMPROVING |
| OUTREACH, RESEARCH AND ADVOCACY CAPACITY THROUGH EXPENDITURES ON TECHNOLOGY, DATA |
| MANAGEMENT, ELECTRONIC TOOLS, MEMBERSHIP, AND CAPACITY TO REACH COMMUNITIES. |

| | Employer identification number 52–1557765 |
|--|--|
| FORM 990, PART III, LINE 4D - OTHER PROGRAM SERVICES DESCRIPTION (CO | NTINUED) |
| 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. | |
| | |
| EARTHWORKS PARTNERSHIP PROGRAMS - EARTHWORKS PROVIDES BACK-OFFIC | CE_SERVICES |
| (INCLUDING PAYROLL, ACCOUNTING, AND ADMINISTRATION), A LEGAL FRO | AMEWORK, 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 EARTS | HWORKS 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 | G DIVERSE |
| ORGANIZATIONS, FROM LOCAL TO NATIONAL, TO EXPRESS A UNITED VOICE | E CONCERNING THE |
| PROTECTION OF OUR WATER, CULTURAL, ECOLOGICAL, AND ECONOMIC RESC | OURCES AND THE HEALTH |
| AND SAFETY OF OUR CITIZENS FROM THE ADVERSE IMPACTS OF ALL EXTRA | ACTIVE RESOURCE |
| 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 AV | NARENESS AND PROTECT |
| | |

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

File a separate application for each return.

| | | filing for an Automatic 3-Mont | | | | | | | ► 🛛 |
|-------------------|--|--|---|--|-------------------------------------|--------------------------------|---------|------------------|---------------|
| | | filing for an Additional (Not Au | | | | | | | |
| | | <i>lete Part II unless</i> you have alre | | | | | | orm 8868. | |
| Par | till / | Automatic 3-Month Exten | sion of Time. (| Only submit origii | nal (no copies | s needed). | | | |
| | | | | | | | | | |
| | • | required to file Form 990-T and | | | | | | | - |
| | ther corp me tax re | porations (including 1120-C filers eturns. | s), partnerships, R | REMICS, and trusts m | nust use Form 70 | 004 to reques | t an e | xtension of | time to file |
| retur the a | ns noted additiona n 990-T | ling (e-file). Generally, you can below (6 months for a corporal l (not automatic) 3-month exten Instead, you must submit the fu it www.irs.gov/efile and click on | ion required to file sion or (2) you file Ilv completed and | e Form 990-T). Howe e Forms 990-BL, 6069 signed page 2 (Part | ver, you cannot 9 or 8870, group | tile Form 886 returns, or a | o8 elec | tronically if | (1) you want |
| 20 | | Name of Exempt Organization | | | | | Emplo | yer identificati | on number |
| Туре | | | | | | | | | |
| print | | EARTHWORKS | | | | | 52- | 1557765 | |
| File by due da | the | Number, street, and room or suite number | . If a P.O. box, see inst | ructions. | | | | | |
| filing y | our | 1612 K STREET, NW #8 | 308 | _ | 9 | | | | |
| instruc | | City, town or post office, state, and ZIP co | | ss, see instructions. | | | | | |
| | | WASHINGTON, DC 2000 | 5 | | | | | | |
| Chec | k type o | f return to be filed (file a separa | | each return): | | | | | |
| | orm 990 | | Form 990-T (co | | | Form 47 | 20 | | |
| HF | orm 990 | I-BL | Form 990-T (se | ection 401(a) or 408(| a) trust) | Form 522 | 27 | | |
| | orm 990 | The state of the s | Form 990-T (tr | ust other than above |) | Form 608 | 59 | | |
| | orm 990 | | Form 1041-A | | | Form 88 | 70 | | |
| T If | elephone f the orga f this is f heck this | No. ► 202-887-1872 anization does not have an office or a Group Return, enter the orgonomy. If it is for part of sion will cover. | e or place of busing panization's four d | ness in the United St igit Group Exemption | Number (GEN) | box | this is | for the who | ole group, |
| | | st an automatic 3-month (6 mon | ths for a corporation | on required to file Fo | rm 990-T) exten | sion of time | | | |
| | until _ | 8/15, 20_09, to file | the exempt organ | nization return for the | e organization na | amed above. | | | |
| | | ension is for the organization's | eturn for: | | | | | | |
| | X | calendar year 20 08 or | 20 | | 20 | | | | |
| | | tax year beginning | , 20, | and ending | 20 | | | | |
| 2 | If this ta | x year is for less than 12 month | ns, check reason: | Initial return | Final retu | rn C | hange | in accounti | ng period |
| | nonrefu | pplication is for Form 990-BL, 9 ndable credits. See instructions | | | | | 3a | \$ | 0. |
| b | If this a made. I | pplication is for Form 990-PF or nclude any prior year overpaym | 990-T, enter any ent allowed as a c | refundable credits an redit | nd estimated tax | payments | 3b | \$ | 0. |
| С | deposit | Due. Subtract line 3b from line with FTD coupon or, if required, ructions. | by using EFTPS | (Electronic Federal T | ax Payment Sys | tem). | 3c | \$ | 0. |
| | ion. If yo nent instr | u are going to make an electror uctions. | ic fund withdrawa | I with this Form 8868 | 3, see Form 8453 | EO and For | m 887 | 9-EO for | * |
| BAA | For Priv | vacy Act and Paperwork Reduct | ion Act Notice, se | e instructions. | | | | Form 8868 | (Rev. 4-2008) |

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,通过设施设施的设施 |
|--------------------------------|-------------|--|--|--|---|------------|---|
| _ | 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 | See nitial return specific | WASHINGTON, DC 20006 | | 202 | -887 | -1872 |
| | Те | ermination Instruc- | | | | - | 2072 |
| | \vdash | mended return | II. | | G Gross | receinte | \$ 1,438,657. |
| | \vdash | TO STATE OF THE ST | 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 | | 7 b | 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 | 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 | | | | |
| 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 year | r which | were no | ot listed | on the | orior | 200 | | | |
| | | | | | | | | | | | | | | | | Yes | X | No |
| • | | | | new services | | | a di Caro | 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. | | | | | | | | | | |
| | | train a | 0000AA | | | | | | | | | | 4.4 | | | | | 1.5 |
| 4 a | | | | xpenses \$_ | | | | | | | | | | | | AMITAT | TOTE |) |
| | | | | COUNTABI R HOMES | | | | | | | | | | | | MMOIN | TITE | 5 |
| | | | | THIS INC | | | | | | | | | | | | rpy | | |
| | PRACT | | | UTILIZE | | | | | | | | | | | | | FFOR | т |
| | | | | VAY OIL A | | | | | | | | | | | | | | |
| | | | | M AREAS | | | | | | | | | | | | | | |
| | REFOR | | | | | | | | | | | | | | | | | 777 |
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| | | | | | | | | | | | | | | | | | | |
| 4b | (Code: | 以謝 |) (E) | penses \$_ | 38 | 36,308. | includ | ing gran | nts of | \$ | | |) (Reve | nue \$ | 3 | | |) |
| | | | | M_PROGRA | | | | | | | | | | | | | | |
| | | | | TECT COM | | | | | | | | | | | | | RAL | |
| | | | | S_INCLUI | | | | | | | | | | | | | | |
| | ANALY | SIS | LEGAL | ACTION, | OUTRE | SACH AN | ND EDI | JCATI | ONS O | PROM | PUBL | TC, | RETAL | ERS, | TNE | URE | 35,_ | |
| | | | | , SUPPOR | | | | | | | | | | | | | | |
| | | | | DUCATING | | | | | | | | | | TED | OFFI | CIA | 72. | -4- |
| | TUE L | 0003 | S_OF_ID | 15 PROGR | CHM TO | воти с | N 21F | ALL A | ND EE | DEKAL | POLI | CIES | | | | | | -57 |
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| | | | | | | | 7 - 7 - | | | | | | | | | | 100000 | |
| 4c | (Code: | 10 |) (Ex | penses \$ | 18 | 1,615. | includi | ing gran | nts of \$ | 5 | | |) (Rever | nue Ś | | | |) |
| | | | | OLICY AN | | | | | | | | | | | | OP, | | |
| | | | | 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 | |
| | PUBLIC | CATI | CONS, I | NFORMATI | ON ANA | LYSIS, | POLI | CY A | NALYS | IS, L | EGAL | ACTI | ON, OU | ITREA | CH A | ND | | |
| | EDUCAT | TION | NS OF T | HE PUBLI | C_AND_ | COMMUN | ITIES | , SUI | PPORT | TO A | FFECT | ED_C | CNUMMC | TIES | , PR | COMO | ING | |
| | | | | AND COV | | | | | | | | | | | | | AND | |
| | | | | LS. THI | | | | | | | | | | | | | | |
| | | | | VISITS, | | | | | | | | | | | | CONC | MIC | |
| 1. | ANALYS | SIS. | THIS | ALSO_IN | CLUDES | PROGR | AMS_T | O INC | CREASI | CORI | PORAT | E AC | COUNTA | RITI | <u>T</u> Y | | | |
| | | | | | | | | | | | | | | | | | = | |
| - | | | | | | | | | | | | | | | | | | |
| 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 24 2 | | | | | | | | | | | |

| | 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 IT | 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 | | 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 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 | | X |
| 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 | |

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| 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 | | EAR. |
| 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? | 7e | | 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 a 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 | | | 250 | 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 | |
| | | | | | | | | | | , | |
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| | | | | | 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 | ployees (cont.) |
|---|----------------------------------|-------------|---------------------|------------|--------------|------------|-------------|---|---|--|
| (A) | (B) | | 1000 | | (c) | 10.1 | | (D) | (E) | (F) |
| Name and Title | Average hours per week | | _ | Officer | Key employee | employee | - | 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 |
| | | | | | | | | | | |
| | | | | | | | | | | |
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| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| 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. | | | | 151 |
| 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 as a second | 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 | | | | The second second |
| | 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 | PARTOCOL A CANADON SANSANINE | 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 CA | A THE PARK HE WAS A SECOND | 7,000000000000000000000000000000000000 | |
| | 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 | | | Maria de la companya | 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 | | 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 | | 21 | | | |
| | 22 | Payables to current and former officers, directors, trus highest compensated employees, and disqualified per- | omployoos | | | 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 | ird parties. | | | 23 | |
| 1 | 24 | Unsecured notes and loans payable to unrelated third | parties | | | 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. | | and complete | | | |
| 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 | 001 |
| | 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 | | THE P |
| | 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 | | |

BAA

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 SECURE | (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. | | | And 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 Pub. | stop here | | d, third, fourth, o | r fifth tax year as | a section 501(c)(| 1 |
| Sec | don C. Computation of Pub | inc 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. FTOVIDE ally | otrier additiona | ii iiiomation. See in | structions. |
| 42424 | | | | | | | |
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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) | |
|---|--|
|---|--|

Page 1

of 2

of Part I

Employer identification number

| ····· | 0, 0, | guinza | 1011 | |
|-------|-------|--------|------|--|
| 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) |
|---|----------|---|-------|------|---------|------------|--------|
|---|----------|---|-------|------|---------|------------|--------|

of Part I

Name of organization

Page 2 of 2
Employer identification number

| EA | DTL | TATO | RKS |
|-----|-----|------|-----|
| P.A | KIL | 1W() | KKS |

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) No. 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 | |

| vely religious, charitable, e tions aggregating more the zations completing Part III, enter ns of \$1,000 or less for the year. (b) Purpose of gift | | Page 1 of 1 of Part II Employer identification number 52-1557765 o section 501(c)(7), (8), or (10) ete cols (a) through (e) and the following line entry. able, etc, |
|--|---|--|
| zations aggregating more tr zations completing Part III, enter ns of \$1,000 or less for the year. (b) | | o section 501(c)(7), (8), or (10) |
| zations aggregating more tr zations completing Part III, enter ns of \$1,000 or less for the year. (b) | | |
| ns of \$1,000 or less for the year. (b) Purpose of gift | (Enter this information once – see | |
| (b) Purpose of gift | (a) | instructions.) |
| | Use of gift | (d) Description of how gift is held |
| | | |
| Transferee's name, addres: | (e) Transfer of gift s, and ZIP + 4 | Relationship of transferor to transferee |
| (h) | | |
| Purpose of gift | 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, | Transfer of gift | Relationship of transferor to transferee |
| | | |
| 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 |
| | | |
| | Purpose of gift (b) Purpose of gift Transferee's name, address (b) Purpose of gift Transferee's name, address, (b) Purpose of gift | Purpose of gift (e) Transferee's name, address, and ZIP + 4 (b) Purpose of gift (e) Transfer of gift (e) Transfer of gift (e) Transfer of gift Use of gift (f) Transferee's name, address, and ZIP + 4 (h) Purpose of gift (h) Transferee's name, address, and ZIP + 4 (h) Transferee's name, address, and ZIP + 4 |

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

BAA

| Schedule C (Form 990 or 990-EZ) 200 | | | | 52-1557 | 7765 Page |
|--|--|---|--|----------------------------------|--|
| Part II-A Complete if t section 501(l | the organizatioı 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 expenditures (add lines 1a and 1b) | | | 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: | Mark the Hat | |
| Not over \$500,000 | | 20% of the amount on line 1e. | | | |
| Over \$500,000 but not over \$1,0 | 00,000 | \$100,000 plus 15% of the excess of | ver \$500,000. | | |
| Over \$1,000,000 but not over \$1, | | \$175,000 plus 10% of the excess o | | | |
| 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 | /ear <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 | (d) 2009 | |
| On Labbuilder 1 | | | 0.000 | (4) 2003 | (e) Total |
| 2 a Lobbying non-taxable amount | 230,672 | . 243,716. | 5,293. | 7,067. | (e) Total |
| | 230,672 | . 243,716. | 5,293. | | 486,748. |
| amount | 230,672 16,297 | | | 7,067. | 486,748. 730,122. |
| b Lobbying ceiling amount (150% of line 2a, column (e)) | | . 82,202. | 5,293. 26,467. 1,323. | | 486,748. 730,122. 160,303. |
| b Lobbying ceiling amount (150% of line 2a, column (e)) c Total lobbying expenditures | 16,297 | . 82,202. | 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. | 26,467. | 7,067. 35,337. | |

| 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: a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements?, disalings to members, legislators, or the public? c Media advertisements?, disalings to members, legislators, or the public? c Media advertisements? I Grants to other organizations for lobbying purposes? I Grants to other organizations, seminars, conventions, speeches, lectures, or any similar means? I Other activities? If Yes, 'describe in Part IV. J Total. Add lines 1c through 11. 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? bif 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. c 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 if file Form 4/20 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) Were substantially all (90% or more) dues received nondeductible by members? 2 Did the organization grace to carryover lobbying appenditures of \$2,000 or less? 2 Did the organization agree to carryover lobbying appenditures of \$2,000 or less? 3 Did the organization agree to carryover lobbying appenditures of \$2,000 or less? 1 Dues, assessments and similar amounts from members. 1 Dues, assessments and similar amounts from members. 2 Did the organization agree to carryover to the reasonable expenditures (do not include amounts of political expension of the section 52(c) pon-deductible lobbying and political expension of the section 152(c) pon-deductible lobbying and political expension of the | | (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 other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? p Direct contact with legislators, their staffs, government officials, or a legislative body? p Direct contact with legislators, their staffs, government officials, or a legislative body? p Direct contact with legislators, their staffs, government officials, or a legislative body? p Direct contact with legislators in Part IV. j Total. Add lines 1c through 11. 2 Did the activities? If 'Yes,' describe in Part IV. j Total Add lines 1c through 11. a Did the contact the amount of any tax incurred under section 4912. d If the filing organization incurred a section 4912 tax, did it file 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) 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? Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c) BOTH Part III-A, questions 1 and 2 are answered 'No' O' O' if Part III-A, line 3 is answered 'Yes.' Dues, assessments and similar amounts from members Dues, assess | | Yes | No | Amount | |
| b Paid staff or management (include compensation in expenses reported on lines 1c through 1)? c Media advertisements? 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 j Total. Add lines 1c through 1i. 2 a 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 by organization managers under section 4912 of If Yes, enter the amount of any tax incurred by organization managers under section 4912 of If Yes, enter the amount of any tax incurred by organization managers under section 4912 art III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c) Were substantially all (90% or more) dues received nondeductible by members? 2 Did the organization agree to carryover lobbying expenditures of \$2,000 or less? 2 Did the organization agree to carryover lobbying and political expenditures from the prior year? art IIII-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c) if BOTH Part III-A, questions 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes.' 1 Dues, assessments and similar amounts from members | 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 1)? c Media advertisements? 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 j Total. Add lines 1c through 1i. 2 a 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 by organization managers under section 4912 of If Yes, enter the amount of any tax incurred by organization managers under section 4912 of If Yes, enter the amount of any tax incurred by organization managers under section 4912 art III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c) Were substantially all (90% or more) dues received nondeductible by members? 2 Did the organization agree to carryover lobbying expenditures of \$2,000 or less? 2 Did the organization agree to carryover lobbying and political expenditures from the prior year? art IIII-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c) if BOTH Part III-A, questions 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes.' 1 Dues, assessments and similar amounts from members | a Volunteers? | 100 | SERVES | | |
| d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? I 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 Ic through 1 i J Total. Add lines Ic through 1 i J Total. Add lines Ic through 1 i J Total and extivities in line 1 cause the organization to be not described in section 501(c)(3)? I I Yes,' enter the amount of any tax incurred under section 4912. d If the filing organization incurred a section 4912 tax, did it life Form 4720 for this year? I Were substantially all (90% or more) dues received nondeductible by members? I Were substantially all (90% or more) dues received nondeductible by members? I Use organization agree to carryover lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? I Dues, assessments and similar amounts from members Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenditures from the prior year. Did the organization agree to carryover from members. Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenditure with the section 527(f) tax was paid). Gurrent year. Decryover from last year. Cotal 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 expenditure of nondeductible lobbying and political expenditure of nondeductible lobbying and political expenditures (see instructions). 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 | b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? | | | | |
| e Publications, or published or broadcast statements? I 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 in line 1 cause the organization to be not described in section 501(c)(3)? b If 'Yes,' either 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. d If the filting organization incurred a section 4912 tax, did it file 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) 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 appenditures of \$2,000 or less? Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c) 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 Dues, assessments and similar amounts from members Dues, assessments and similar amounts from members Description 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenditures or which the section 527(f) tax was paid). Carrent year. Crotal Grayover from last year Crotal Grayover from last year Crotal From the amount of lobbying and political expenditures (do not include amounts of political expenditure next year). Crotal From the amount of lobbying and political expenditures (see instructions). Special political expenditure next year. From the excess of the excess of the reasonable estimate of nondeductible lobbying and political expe | d Mailings to members, legislators, or the public? | | | | |
| Girants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, Gemonstrations, 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? If Yes,' describe in Part IV. b If Yes,' enter the amount of any tax incurred by organization to be not described in section 501(c)(3)? b 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. d If the filing 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? 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 2 Did the organization agree to carryover lobbying and political expenditures from the prior year? 2 Did the organization agree to carryover lobbying and political expenditures from the prior year? 3 art III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c) if BOTH Part III-A, questions 1 and 2 are answered 'No' OR if Part III-A, line 3 is answered 'Yes.' 1 Dues, assessments and similar amounts from members 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). 2 a Current year. 2 a b Carryover from last year 2 a c Total. 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues. 3 a 1 If notices were sent and the amount on line 2c exceeds the amount on inodeductible lobbying and political expenditure next year? 4 Taxable amount of the byting and political expenditures (see instructions) 5 Taxable amount of the byting and political expenditures (see instructions) 5 Taxable manual of the byting and polit | e Publications or published or broadcast statements? | | | | |
| g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? l Other activities? If 'Yes,' describe in Part IV. J Total. Add lines 1c through II. J Total. Add lines 1c through II. J Total. Add lines 1c through II. 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. d If the filling organization incurred a section 4912 tax, did if life From 4720 for this year? art IIIA Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c) 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? art IIIB Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c) if BOTH Part IIIA, questions 1 and 2 are answered 'No' OR if Part IIIA, line 3 is answered 'Yes.' Dues, assessments and similar amounts from members. Dues, assessments and similar amounts from members. Dues, assessments and similar amounts from members. Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expensive for which the section 527() tax was paid). Complete from last year. Collaboration of the excess does 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 expenditure next year? It will be a provide the descriptions required for Part II-A, line 1; Part I-B, line 4; Part I-C, line 5; and Part II-B, line 1i. Taxable amount reported in section 6033(e)(1)(A) notices of nondeductible lobbying a | f Grants to other organizations for Johnving purposes? | | | | |
| h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities? If 'Yes,' describe in Part IV. Total. Add lines 1c through 1: | a Direct contact with legislators, their staffs, government officials, or a legislative body? | | | | |
| i Other activities? If Yes,' describe in Part IV. 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 under section 4912. c If Yes,' enter the amount of any tax incurred under section 4912. c If Yes,' enter the amount of any tax incurred under section 4912. c If Yes,' enter the amount of any tax incurred under section 4912. c If Yes,' enter the amount of any tax incurred under section 4912. c If Yes,' enter the amount of any tax incurred under section 4912. c If Yes,' enter the amount of any tax incurred under section 501(c)(4), section 501(c)(5), or section 501(c) If Were substantially all (90% or more) dues received nondeductible by members? 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 2 Did the organization make only in-house lobbying expenditures from the prior year? 3 and III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c) 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. 1 Dues, assessments and similar amounts from members. 2 Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expensions for which the section 527(f) tax was paid). a Current year. 2 a Current year. 2 a Current year. 3 a Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues. 3 a Aggregate amount of lobbying and political expenditures (see instructions). 4 Taxable amount of lobbying and political expenditures (see instructions). 5 If Notices were sent and the amount on line 2 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 expenditure next year? Taxable amount | | | - | | |
| J Total. Add lines Ic through Ii. 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? bit '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. d If the filing organization incurred a section 4912 tax, did it file 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) 1 Were substantially all (90% or more) dues received nondeductible by members? 1 Yes 2 Did the organization agree to carryover lobbying expenditures of \$2,000 or less? 3 Did the organization agree to carryover lobbying and political expenditures from the prior year? 2 Section 162(e) non-deductible lobbying and political expenditures from the prior year? 3 Dues, assessments and similar amounts from members. 1 Dues, assessments and similar amounts from members. 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). a Current year. 2 Carryover from last year. 2 Description 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues. 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible lobbying and political expenditure expenditure ext year?. 4 Taxable amount of lobbying and political expenditures (see instructions). 5 Taxable amount of lobbying and political expenditures (see instructions). 5 Taxable amount of lobbying and political expenditures (see instructions). 5 Taxable amount of lobbying and political expenditures (see instructions). 5 Taxable amount of lobbying and political expenditures (see instructions). | i Other activities? If 'Yes' describe in Part IV | | | | |
| 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. d If the filing organization incurred a section 4912 tax, did it file 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) 1 Were substantially all (90% or more) dues received nondeductible by members? 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? 3 Did the organization agree to carryover lobbying and political expenditures from the prior year? 3 Did the organization agree to carryover lobbying and political expenditures from the prior year? 5 Demplete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c) if BOTH Part III-A, questions 1 and 2 are answered 'No' OR if Part III-A, line 3 is answered 'Yes.' 1 Dues, assessments and similar amounts from members 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). a Current year. b Carryover from last year. c Total. 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues. 3 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 expenditure next year?. 1 Taxable amount of lobbying and political expenditures (see instructions) 1 If No Supplemental Information 1 Implete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; and Part II-B, line 1i. | i Total Add lines to through ti | | - | | |
| bif 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. art III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c) Were substantially all (90% or more) dues received nondeductible by members?. 1 Were substantially all (90% or more) dues received nondeductible by members?. 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? 3 Did the organization agree to carryover lobbying and political expenditures from the prior year? 4 The substantially all (90% or more) dues received nondeductible section 501(c)(4), section 501(c)(5), or section 501(c) if BOTH Part III-A, question is exempt under section 501(c)(4), section 501(c)(5), or section 501(c) if BOTH Part III-A, question is exempt under section 501(c)(4), section 501(c)(5), or section 501(c) if BOTH Part III-A, question is exempt under section 501(c)(4), section 501(c)(5), or section 501(c) if BOTH Part III-A, question is exempt under section 501(c)(4), section 501(c)(5), or section 501(c) if BOTH Part III-A, question is exempt under section 501(c)(6), or section 501(c) if BOTH Part III-A, line 3 is answered 'Yes.' 1 Dues, assessments and similar amounts from members 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). 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). 2 Control of the section 527(f) tax was paid). 3 Agree of the section 527(f) tax was paid). 4 If notices were sent and the amount on line 2 expenses for nondeductible lobbying and political expenditure next year? 4 If the organization agree to carryover to the reasonable estimate of nondeductible lo | 2a Did the activities in line 1 cause the organization to be not described in anti- 501(2)(2) | | | | |
| d If the filling organization incurred a section 4912 tax, did it file 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) Were substantially all (90% or more) dues received nondeductible by members? 1 | b If 'Yes' enter the amount of any tay incurred under section 4010 | | | | |
| art III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c) 1 Were substantially all (90% or more) dues received nondeductible by members? | C If 'Yes' enter the amount of any tax incurred by organization managers and a section 4912. | 133 | | | |
| Art III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c) Yes | d If the filing organization incurred a section 4912 toy did it file Form 4700 for this incurred | diam'r. | ALC: N | A-107 (1995) | |
| Yes Versubstantially all (90% or more) dues received nondeductible by members? | Part III-A Complete if the organization is example under coefficient 501(a)(4) and it is a few form 4/20 for this year? | - \(\frac{1}{2}\) | | | |
| 1 Were substantially all (90% or more) dues received nondeductible by members? 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? 3 THII-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c) if BOTH Part III-A, questions 1 and 2 are answered 'No' OR if Part III-A, line 3 is answered 'Yes.' 1 Dues, assessments and similar amounts from members. 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). a Current year. b Carryover from last year. c Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues. 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues. 3 If I 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 expenditure next year? 1 Taxable amount of lobbying and political expenditures (see instructions). 5 Int IV Supplemental Information mplete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; and Part II-B, line 1i. o, complete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; and Part II-B, line 1i. o, complete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; and Part II-B, line 1i. o, complete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; and Part III-B, line 1i. | | ·/(3), | 01 5 | ection 30 i(c)(o | |
| art III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c) if BOTH Part III-A, questions 1 and 2 are answered 'No' OR if Part III-A, line 3 is answered 'Yes.' 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). a Current year. 2a 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 If I 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 expenditure next year? 5 i Taxable amount of lobbying and political expenditures (see instructions) 5 art IV Supplemental Information Supplemental Inf | Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? | | | 2 | |
| 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). a Current year | art III-B Complete if the organization is exempt under section 501(cV4) section 501(c | ·V51 | OFE | action 501/cV6 | |
| a Current year | 1 Dues, assessments and similar amounts from members | | 1 | | |
| b Carryover from last year | 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). | | B) | | |
| Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues | a Current year | | 2a | | |
| Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues | b Carryover from last year | | 2b | | |
| Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues | c Total | | 2c | | |
| Taxable amount of lobbying and political expenditures (see instructions) Taxable amount of lobbying and political expenditures (see instructions) Taxable amount of lobbying and political expenditures (see instructions) Taxable amount of lobbying and political expenditures (see instructions) Taxable amount of lobbying and political expenditures (see instructions) Taxable amount of lobbying and political expenditures (see instructions) Taxable amount of lobbying and political expenditures (see instructions) Taxable amount of lobbying and political expenditures (see instructions) Taxable amount of lobbying and political expenditures (see instructions) Taxable amount of lobbying and political expenditures (see instructions) Taxable amount of lobbying and political expenditures (see instructions) Taxable amount of lobbying and political expenditures (see instructions) Taxable amount of lobbying and political expenditures (see instructions) Taxable amount of lobbying and political expenditures (see instructions) Taxable amount of lobbying and political expenditures (see instructions) Taxable amount of lobbying and political expenditures (see instructions) Taxable amount of lobbying and political expenditures (see instructions) Taxable amount of lobbying and political expenditures (see instructions) Taxable amount of lobbying and political expenditures (see instructions) Taxable amount of lobbying and political expenditures (see instructions) Taxable amount of lobbying and political expenditures (see instructions) Taxable amount of lobbying and political expenditures (see instructions) Taxable amount of lobbying and political expenditures (see instructions) Taxable amount of lobbying and political expenditures (see instructions) Taxable amount of lobbying and political expenditures (see instructions) Taxable amount of lobbying and political expenditures (see instructions) Taxable amount of lobbying and political expenditures (see instructions) Taxable amount of lobbying and political expendi | Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues | [| 3 | | |
| Taxable amount of lobbying and political expenditures (see instructions) Taxable amount of lobbying and political expenditures (see instructions) Taxable amount of lobbying and political expenditures (see instructions) Taxable amount of lobbying and political expenditures (see instructions) Taxable amount of lobbying and political expenditures (see instructions) Taxable amount of lobbying and political expenditures (see instructions) Taxable amount of lobbying and political expenditures (see instructions) Taxable amount of lobbying and political expenditures (see instructions) Taxable amount of lobbying and political expenditures (see instructions) Taxable amount of lobbying and political expenditures (see instructions) Taxable amount of lobbying and political expenditures (see instructions) Taxable amount of lobbying and political expenditures (see instructions) Taxable amount of lobbying and political expenditures (see instructions) Taxable amount of lobbying and political expenditures (see instructions) Taxable amount of lobbying and political expenditures (see instructions) Taxable amount of lobbying and political expenditures (see instructions) Taxable amount of lobbying and political expenditures (see instructions) Taxable amount of lobbying and political expenditures (see instructions) Taxable amount of lobbying and political expenditures (see instructions) Taxable amount of lobbying and political expenditures (see instructions) Taxable amount of lobbying and political expenditures (see instructions) Taxable amount of lobbying and political expenditures (see instructions) Taxable amount of lobbying and political expenditures (see instructions) Taxable amount of lobbying and political expenditures (see instructions) Taxable amount of lobbying and political expenditures (see instructions) Taxable amount of lobbying and political expenditures (see instructions) Taxable amount of lobbying and political expenditures (see instructions) Taxable amount of lobbying and political expendi | 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 politic | al | | | |
| art IV Supplemental Information mplete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; and Part II-B, line 1i. o, complete this part for any additional information. | expenditure next year? | | 4 | | |
| mplete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; and Part II-B, line 1i. o, complete this part for any additional information. | Taxable amount of lobbying and political expenditures (see instructions) | | 5 | | |
| | | | | | |
| | mplete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; and | Part I | I-B, lii | ne 1i. | |
| | o, complete this part for any additional information. | | 362 | | |
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| Part IV Supplemental Information (continued) | 52-1557765 | Page 4 |
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| 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 사용하다 하는데 하는데 하는데 이렇게 하는데 이렇게 되었다. | | |
| | Number of conservation easements modified, tra | | | arganization during the tay |
| 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 pub | 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 | | | ►\$ |

| Farting Organizations maintaining Collections of Art, Historical Treasures, | or Other Similar As | ssets (| contir | nued) |
|--|--|---------|----------|---------|
| 3 Using the organization's acquisition accession and other records, check any of the following items (check all that apply): | | | | |
| a Public exhibition d Loan or exchange program | | | | |
| b Scholarly research e Other | 115 | | | |
| c Preservation for future generations | | | | |
| Provide a description of the organization's collections and explain how they further the organization's collections. | and the second second | | | |
| Part XIV. | ganization's exempt purp | ose in | | |
| 5 During the year, did the organization solicit or receive donations of art, historical treasures | s or other similar | | | |
| assets to be sold to raise funds rather than to be maintained as part of the organization's | collection? | Ye | s | No |
| Part IV Escrow and Custodial Arrangements Complete if organization answ 9, or reported an amount on Form 990, Part X, line 21. | vered 'Yes' to Form | 990, P | art IV | , line |
| 1 a Is the organization an agent, trustee, custodian, or other intermediary for contributions or included on Form 990, Part X? | other assets not | ☐ Ye: | S | □No |
| b If 'Yes,' explain the arrangement in Part XIV and complete the following table: | | | | |
| c Paginging halance | | Amou | nt | |
| c Beginning balance. | | | | |
| d Additions during the year. | 1d | | | |
| e Distributions during the year. | 1 e | | | |
| f Ending balance. | 1f | | | |
| 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. | | | | |
| Part V Endowment Funds Complete if organization answered 'Yes' to Form 9 | | | | |
| (a) Current year (b) Prior year (c) Two years by | ack (d) Three years back | (e) | Four yea | rs back |
| 1 a Beginning of year balance | | | | ولانان |
| b Contributions | | N. ONLY | | |
| c Net Investment earnings, gains, and losses | | | | |
| d Grants or scholarships | | T Year | | |
| e Other expenditures for facilities and programs | | | 100 | |
| f Administrative expenses | | Y Comme | | |
| g End of year balance | | 40 | | No. |
| 2 Provide the estimated percentage of the year end balance held as: | Spring Colors | | | |
| 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 admorganization by: | ninistered for the | Í | | |
| (i) unrelated organizations | | 0 0 | Yes | No |
| (ii). related organizations. | | 3a(i) | | |
| b If 'Yes' to 3a(ii), are the related organizations listed as required on Schedule R? | | - ' | - 4 | |
| 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 | | | |
| | | 40.5 | | Attac |
| Description of investment (a) Cost or other basis (b) Cost or other basis (other) | (c) Accumulated Depreciation | (d) E | ook Va | llue |
| 1a Land | 2 Sp. Coldion | | | |
| b Buildings | | | | |
| c Leasehold improvements | | | | _ |
| d Equipment | 80,077. | | 6 | 5/7 |
| e Other | 00,011. | | 0, | 547. |
| otal. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).). | | | | |
| vimi naa iinoo ta tiilougii 16 (oolullii tu) iilust Ballal Farm 990 Part X Yollimn (R1 lina 10/5)) | The state of the s | | C | 547. |

| | (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 | | |
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| | | St. Co. St. Co |
| Total. (Column (b) must equal Form 990 Part X, col. (B) line 12.) | 5 000 5 111 | |
| Part VIII Investments-Program Related (See | | |
| (a) Description of investment type | (b) Book value | (c) Method of valuation |
| | | Cost or end-of-year market value |
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| Total. (Column (b) must equal Form 990, Part X, Col. (B) line 13.) | | |
| Part IX Other Assets (See Form 990, Part X. | line 1E) N/A | |
| Part IX Other Assets (See Form 990, Part X, | line 15) N/A | |
| | escription | (b) Book value |
| | | (b) Book value |
| (a) De | escription | |
| (a) De | 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) | |
| (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) | |
| Total. (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) 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) | |
| (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 | t XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements | | |
|------------------------|--|---------------------------|--|
| 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. |
| Pai | t XII Reconciliation of Revenue per Audited Financial Statements With Revenue per R | eturn | 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: | | |
| ā | Net unrealized gains on investments | 1000 | |
| | Donated services and use of facilities | 1000 | |
| | Recoveries of prior year grants | | |
| | Other (Describe in Part XIV) | | |
| | Add lines 2a through 2d. | . 2e | |
| 3 | Subtract line 2e from line 1 | | 1,438,657. |
| 4 | 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 | 13.0 | |
| | Other (Describe in Part XIV) | - | |
| | Add lines 4a and 4b | 10 | |
| | Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) | | 1,438,657. |
| Par | XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per | Poture | 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: | 1000 | 1,464,016. |
| | Donated services and use of facilities | 1000 | |
| | Prior year adjustments. 2b | - | |
| | Other losses | 1000 | |
| | Other (Describe in Part XIV). | - | |
| | | | |
| | Add lines 2a through 2d | | 1 161 016 |
| | 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 | 100 | |
| | Other (Describe in Part XIV) | 1000 | |
| - | Add lines 4a and 4b | 4c | |
| Dout | Total expenses. Add lines 3 and 4c (This must equal Form 990, Part I, line 18.) | 5 | 1,464,016. |
| | XIV Supplemental Information | | |
| Comp ine 4 nforn | lete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this paration. | , lines 1b art to prov | and 2b; Part V, vide any additional |
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| Schedule D (Form 990) 2009 | EARTHWORKS | 52-1557765 | Page 5 |
|---|-------------------------|------------|----------|
| Part XIV Supplementa | Information (continued) | | |
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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 | |
| THE CORPORATION IS ORGANIZED EXCLUSIVELY FOR CHARIT. | ABLE AND EDUCATIONAL PURPOSES. |
| MORE SPECIFICALLY, THE ACTIVITIES OF THE CORPORATION | N SHALL INCLUDE BUT NOT BE |
| LIMITED TO: PROTECTING COMMUNITIES AND THE ENVIROME | NT FROM THE IMPACTS OF |
| DESTRUCTIVE MINERAL DEVELOPMENT IN THE US AND WORLD | WIDE, BY WORKING WITH COMMUNITIES |
| AND GRASSROOTS GROUPS TO REFORM GOVERNMENTAL POLICI | ES, IMPROVE COPORATE PRACTICES, |
| AND INFLUENCE INVESTMENT DECISIONS. THE CORPORATION | N SHALL WORK TO ENCOURAGE |
| CONSERVATION, RECYCLING, RESPONSIBLE MATERIALS POLICE | CIES, FUEL EFFICIENCY, AND |
| RENEWABLE ENERGY SOURCES. THE CORPORATION SHALL EX | POSE THE HEALTH, ENVIRONMENTAL, |
| ECONOMIC, SOCIAL AND CULTURAL IMPACTS OF IRRESPONSI | BLE_MINERAL_DEVELOPMENT_THROUGH |
| WORK INFORMED BY SOUND SCIENCE, AND ACHIEVED THROUGH | H, BUT NOT LIMITED TO PUBLIC |
| EDUCATION, RESEARCH, LITIGATION AND ADVOCACY | |
| FORM 990, PART III, LINE 4D - OTHER PROGRAM SERVICES DES | SCRIPTION |
| EARTHWORKS_PARTNERSHIP_PROGRAMSEARTHWORKS_PROVIDE | ES BACK-OFFICE SERVICES |
| (INCLUDING PAYROLL, ACCOUNTING, AND ADMINISTRATION) | , A LEGAL FRAMEWORK, AND CAPACITY |
| BUILDING SUPPORT TO A VARIETY OF SMALL PROGRAMS (SIN | NGLE 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 STIMULAT | TE DEMAND AND SUPPLY FOR |
| RESPONSIBLY SOURCED MATERIALS FOR METALSMITHS AND JE | EWELERS. |
| | |
| COMMON GROUND UNITED: THIS PROJECT PROVIDES A PLATE | FORM ALLOWING DIVERSE |
| ORGANIZATIONS, FROM LOCAL TO NATIONAL, TO EXPRESS A | UNITED_VOICE CONCERNING THE |
| PROTECTION OF OUR WATER CULTURAL ECOLOGICAL AND F | CONOMIC RESOURCES AND THE HEALTH |

Employer identification number

| EARTHWORKS | 52-1557765 |
|---|---------------------------------|
| FORM 990, PART III, LINE 4D - OTHER PROGRAM SERVICES DESC | CRIPTION (CONTINUED) |
| AND SAFETY OF OUR CITIZENS FROM THE ADVERSE IMPACTS O | OF ALL EXTRACTIVE RESOURCE |
| DEVELOPMENTS. | |
| | |
| ALASKANS FOR RESPONSIBLE MINING: A VOLUNTARY ASSOCIA | ATION OF NON-GOVERNMENTAL |
| ORGANIZATIONS WORKING TOGETHER TO RAISE PUBLIC AWAREN | NESS OF THE IMPACTS OF THE |
| EXTRACTIVE INDUSTRY TO ALASKA'S WATERSHEDS, WILDLIFE, | FISHERIES, COMMUNITIES AND |
| PUBLIC HEALTH; AND TO REFORM ALASKA'S INADEQUATE MIN | NING LAWS. |
| | |
| ARIZONA MINING COALITION: THIS PROJECT SEEKS TO RAIS | SE PUBLIC AWARENESS 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 | RE-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 TH | E SINGULAR LANDSCAPE OF THE |
| AMERICAN WEST, AND HOW A NEW UNDERSTANDING OF PROGRES | S MAY BE OUR BEST HOPE FOR A |
| BRIGHT AND HEALTHY FUTURE. | |
| | |
| PUBLIC MEMBER INFORMATION - | |
| | |
| MEDIA/COMMUNICATIONS - WEBSITE, NEWSLETTER AND OTHER | METHODS TO PROMOTE AND |
| PUBLICIZE THE WORK OF EARTHWORKS AND ITS ALLIES, INCL | UDING PUBLIC OPINION RESEARCH. |
| | |
| RESEARCH/PUBLICATIONS - ANALYSIS OF POLICY PROPSALS, | DEVELOPMENT OF POLICY |
| PROPOSALS, RESEARCH INTO IMPACTS OF MINING IN THE FOR | M 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. | |
| | |
| | |
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| | |
| | |

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 |
|--|---|--|--|
| If you ar | e filing for an Automatic 3-Mo | nth Extension, complete only Part I and check this box | ► <u>X</u> |
| If you ar | 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 |
| If the orgIf this is check th | 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 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 Manager and the Company of the Com | | | | | 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 uiiieiale at uprolatad | 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 | ' I | 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 OIL 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 | |
| | HAROMAN 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 | | 1. 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 | | |
| BAA TEEA0105L 11/30/10 | Form | 990 (| (2010) |

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?..... X Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body?..... X 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, | ((| | | mpe | (D) | (E) | (F) |
|-------------------------------|---|---------------------------------|-----------------------|------------------------------|------------------------------|------------------------------|--------|--|---|---|
| Name and title | Average | Position (check all that apply) | | 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. | 0. | <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 | | ١,, | | 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) | | | | | | | | | | |
| BAA | <u> </u> | 1 | I FEEA | 0107L | . 12 | /21/10 | L | l . | | Form 990 (2010) |

| 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) (c) | | | (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) | tor | onal trustee | | employee | Highest compensate employee | | | | and related organizations |
| | Scho) | 0 | 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 Х |
| 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' d | 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 | ת עו | III Statement of Revenue | | (A) | (B) | (C) | (D) |
|---|----------------|---|--|---|--|--|--|
| | | | | Total revenue | Related or exempt function revenue | Unrelated business revenue | Revenue excluded from tax under sections 512, 513, or 514 |
| 2 S | 1 a | Federated campaigns 1 | | | | | |
| CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS | b | Membership dues | | | | 2.0 | |
| IS, G | С | Fundraising events | | | | | |
| F F | d | Related organizations 10 | | PROFESSION AND ADMINISTRATION OF THE PROFESSION AND ADMINISTRATION OF THE PROFESSION AND ADMINISTRATION AND | | | |
| SIR | e | Government grants (contributions) 1 | 9 | | | | |
| HER. | f | All other contributions, gifts, grants, and similar amounts not included above 11 | 2,246,024. | | | | |
| DOO | a | Noncash contributions included in lns 1a-1f: | | TO BE DESCRIPTION OF THE PARTY | | TOTAL CONTINUES OF A | Ber Haller |
| δ¥ | h | Total. Add lines 1a-1f | | 2,246,024. | | | All Control of the Co |
| I E | | | Business Code | | THANK THE TAX | The second second | 海州州城市 (1995) |
| VEN | 2a | | | | | | With the second |
| 25 | b | | | | | | |
| Z. | | | | | | | |
| SEI | d | | - | | | | |
| RA | e | | | | | | |
| PROGRAM SERVICE REVENUE | | All other program service revenue Total. Add lines 2a-2f | | | Personal Company | "Termina are Againment | |
| | | Investment income (including dividen | | | | PARTITION OF THE RESIDENCE OF THE PARTITION OF THE PARTIT | |
| | 3 | other similar amounts) | us, interest and | 2,574. | | | 2,574. |
| | 4 | Income from investment of tax-exempt | ot bond proceeds | | | | |
| | 5 | Royalties | <u></u> | | | | |
| ٠ | | (i) Real | (ii) Personal | | TOTAL STREET, | | |
| | | Gross Rents | | | | | |
| | | Less: rental expenses. | | | | | |
| | | Rental income or (loss) Net rental income or (loss) | | ALCOHOLD . | | gallenar e | |
| | | (i) Securities | (ii) Other | | | | 76 CASA CASA |
| | /a | Gross amount from sales of assets other than inventory. | | | | | |
| | h | Less: cost or other basis | 1 -1 -1 -1 -1 -1 -1 -1 -1 -1 -1 -1 -1 -1 | 1996 | | | |
| | IJ | and sales expenses | | | 1 10 10 10 10 10 10 10 10 10 10 10 10 10 | PROBLEM SERVER | |
| | С | Gain or (loss) | | | | | |
| | d | Net gain or (loss) | <u></u> | *** | | | |
| NUE | 8a | Gross income from fundraising events (not including. \$ | 5 | | | | |
| EVE | | of contributions reported on line 1c). | | | | Text of the street | |
| OTHER REVEN | | See Part IV, line 18 | | | | ALCOHOLD TO | |
| ОТН | | Less: direct expenses | | | | | Park Comments |
| | | Net income or (loss) from fundraising | | | | Anna Maria | WATER TO SEE |
| | | Gross income from gaming activities. See Part IV, line 19 | | | | o de la companya de l | |
| | | Less: direct expenses | | | | | |
| | | Net income or (loss) from gaming act | ivities | | | | |
| | 10 a | Gross sales of inventory, less returns and allowances | a | 《 集》中,但是"美国" | | | And the second |
| | | Less: cost of goods sold | | | | | |
| | | Net income or (loss) from sales of inv | · · · · · · · · · · · · · · · · · · · | | AND SECTION OF THE SE | The same and the s | |
| | | Miscellaneous Revenue | Business Code | | | a karan da a | |
| | 11 a | MISCELLANEOUS | | 59,187. | | | 59,187. |
| | b _. | | | | | | |
| | С | | | | | | |
| | | All other revenue | | FO 107 | | | |
| | | Total. Add lines 11a-11d | | 59,187. 2,307,785. | 0. | 0. | 61,761. |
| | 14. | Total revenue. See Instructions | | 4,301,103. | υ. | ı | 01,/01. |

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).

| | All other organizations must comp | | (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. | 803. |
| 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). | ed und ributing ry emp | der section 4958(f)(1)), g employers and bloyees' beneficiary | | 6 | |
| Ş | 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 | 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 又 ひ 田 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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Form 990 (2010)

| Form 990 (2010) EARTHWORKS | 52-155776 | 55 | Page 1 |
|---|-------------------|------|--------|
| 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 | | | 1,636. |
| 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 | 33-1/3% support test – 2009. If the and stop here. The organization of | he organization d qualifies as a pub | id not check a bo licly supported or | x on line 13 or 16 ganization | a, and line 15 is 3 | 33-1/3% or more, | check this box |
| 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 ನನ- | 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. |
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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, 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> | For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ, that received from any one contributor, during the year, contributions for use <i>exclusively</i> for religious, charitable, etc, purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an <i>exclusively</i> religious, charitable, etc, purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively | | | | | |
| religious, charitable, etc, 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 | | \$ | |
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| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
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| | | | |
| | | \$ | |
| (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 |
| } | | | |
| | · | | |
| | | \$ | |
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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 | 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 | |
| | | | | | | |
| | (e) Transfer of gift Transferee's name, address, and ZIP + 4 | | | tionship 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 | |
| | | | | | | |
| | (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 contributions 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) | | | | | | |
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| (3) | | | | | | |
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| (4) | | | | | | |
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| (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

| Lobbying Expenditures During 4-Year Averaging Period | | | | | | | | |
|--|-----------------|-----------------|-----------------|-----------------|------------------|--|--|--|
| 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)? | | | | | . 627 | 4.4 |
| c Media advertisements? | | | | | ompad goodschioos. | 23.00 March 200 |
| d Mailings to members, legislators, or the public? | | | | ٠ | | |
| 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? | | | ¹ 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 additionally associated as a second 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) | | |
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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

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 | ining Collecti | ons of Art, H | istorica | il Treasures, or | Other Similar Ass | ets (contii | <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 📙 O | 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. | nization 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 to | able: | | 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 | | iation | | ad Waal ta Farr | m 000 Dort IV line | 10 | |
| Part V Endowment Funds. Co | | | | 1 | | | eara baalı |
| | (a) Current year | (b) Prio | r year | (c) Two years back | (d) Three years back | (e) Four ye | ears back |
| 1 a Beginning of year balance | | | | | | | 2340 6 |
| b Contributions | | | | | | 77.00 (MINUS 441) | 100 |
| c Net investment earnings, gains, and losses | | | | | | | |
| d Grants or scholarships | | | | | | | 1200 |
| e Other expenditures for facilities and programs | | | | | | | 1.12.01.12 |
| f Administrative expenses | | | | | | | |
| g End of year balance | | | | J | ARTHER STATES | | |
| 2 Provide the estimated percentage | e of the year end | balance held a | s: | | | | |
| a Board designated or quasi-endow | vment ► | % | | | | | |
| 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) | 1515 (L | basis (other) | depreciation | (u) Dook | value |
| 1a Land | | | | | - Adam (Otto American) | | |
| 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. |
| BAA | | | | · · · · · · · · · · · · · · · · · · · | | ule D (Form | |

| Part VII Investments-Other Securities. See Fo | orm 990, Part X, Ii | ine 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 | ntion: rket value |
| (1) Financial derivatives | | | |
| (2) Closely-held equity interests | - | | |
| (3) Other | | | |
| (A) | | | |
| (B) | | | |
| <u>(C)</u> | | | |
| (D) | · | | |
| (E) | | | |
| (F) | | | # |
| (G) (H) | · | | |
| (1) | | | |
| Total. (Column (b) must equal Form 990 Part X, column (B) line 12.) | | 290 | a Power Workship and an |
| 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 mai | ket value |
| (1) | | | |
| (2) | | | |
| (3) | | | |
| (4) (5) | | | |
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| (6) | | | |
| <u>(7)</u> (8) | | | |
| (9) | | | |
| (10) | | | |
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| | | | 量/数的 1000 mm / 4 |
| • | 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 |
| 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) | | | (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 , 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) 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 , 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) (2) (10) Total. (Column (b) must equal Form 990, Part X, column(B) Part X Other Liabilities. (See Form 990, Part X, column(B) (1) Federal income taxes (2) | ription , 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 , 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) (a) Description of liability (1) Federal income taxes (2) (3) | ription , line 15) | | (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) | 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) | 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) | 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).

| Par | 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 | † XII 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: | |
| a | a Net unrealized gains on investments | |
| ł | Donated services and use of facilities | |
| (| Recoveries of prior year grants | |
| | d Other (Describe in Part XIV) | |
| • | e 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: | |
| i | a Investments expenses not included on Form 990, Part VIII, line 7b | |
| | Other (Describe in Part XIV.) | |
| | c 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 | |
| | b Prior year adjustments | |
| | c Other losses | |
| , | 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 | |
| 1 | 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. |
| | rt XIV Supplemental Information | |
| Corr Part any | nplete 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 part additional information. | b and 2b; art to provide |
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| Schedule D (Form 990) 2010 EARTHWORKS | 52-1557765 | Page 5 |
|--|------------|--------|
| Schedule D (Form 990) 2010 EARTHWORKS Part XIV Supplemental Information (continued) | | |
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SCHEDULE I

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

OMB No. 1545-0047

2010

Open to Public Inspection

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 |

| 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. | |
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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 until8/15, 2011, to file the exempt organization return for the organization named above 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.

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