



See a Social Security Number? Say Something!  
Report Privacy Problems to <https://public.resource.org/privacy>  
Or call the IRS Identity Theft Hotline at 1-800-908-4490



Form **990**Department of the Treasury  
Internal Revenue Service**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)

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

OMB No 1545-0047

**2008****Open to Public  
Inspection****A For the 2008 calendar year, or tax year beginning** 07/01, 2008, and ending 06/30, 2009

<b>B</b> Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Termination <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C</b> Name of organization <b>EARTHSHARE</b> Doing Business As Number and street (or P O box if mail is not delivered to street address) Room/suite <b>7735 OLD GEORGETOWN ROAD</b> 900 City or town, state or country, and ZIP + 4 <b>BETHESDA, MD 20814</b>	<b>D</b> Employer identification number <b>52-1601960</b>	
		<b>E</b> Telephone number <b>(240) 333-0300</b>	
		<b>G</b> Gross receipts \$ <b>13,263,193.</b>	
		<b>H(a)</b> Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>H(b)</b> Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list (see instructions)	
<b>F</b> Name and address of principal officer <b>KALMAN STEIN</b> <b>7735 OLD GEORGETOWN ROAD BETHESDA, MD 20814</b>		<b>H(c)</b> Group exemption number ▶	
<b>I</b> Tax-exempt status <input checked="" type="checkbox"/> 501(c) ( 3 ) ◀ (insert no ) 4947(a)(1) or 527			
<b>J</b> Website: ▶ <b>WWW.EARTHSHARE.ORG</b>			
<b>K</b> Type of organization <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		<b>L</b> Year of formation <b>1988</b> <b>M</b> State of legal domicile <b>DC</b>	

**Part I Summary**

<b>1</b> Briefly describe the organization's mission or most significant activities <u>TO ENGAGE INDIVIDUALS AND ORGANIZATIONS IN CREATING A HEALTHY AND SUSTAINABLE ENVIRONMENT.</u>																																																									
<b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its assets																																																									
<b>3</b> Number of voting members of the governing body (Part VI, line 1a)	<b>30</b>																																																								
<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b)	<b>30</b>																																																								
<b>5</b> Total number of employees (Part V, line 2a)	<b>15</b>																																																								
<b>6</b> Total number of volunteers (estimate if necessary)	<b>100</b>																																																								
<b>7a</b> Total gross unrelated business revenue from Part VIII, line 12, column (C)	<b>NONE</b>																																																								
<b>7b</b> Net unrelated business taxable income from Form 990-T, line 48	<b>NONE</b>																																																								
<table border="1"> <thead> <tr> <th></th> <th>Prior Year</th> <th>Current Year</th> </tr> </thead> <tbody> <tr> <td><b>8</b> Contribution and grants (Part VIII, line 1h)</td> <td>11,342,617.</td> <td>11,152,241.</td> </tr> <tr> <td><b>9</b> Program service revenue (Part VIII, line 2g)</td> <td>2,053,121.</td> <td>2,085,222.</td> </tr> <tr> <td><b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)</td> <td>90,523.</td> <td>25,730.</td> </tr> <tr> <td><b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)</td> <td></td> <td>NONE</td> </tr> <tr> <td><b>12</b> Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)</td> <td>13,486,261.</td> <td>13,263,193.</td> </tr> <tr> <td><b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1-3)</td> <td>11,156,325.</td> <td>10,703,366.</td> </tr> <tr> <td><b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)</td> <td></td> <td>NONE</td> </tr> <tr> <td><b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)</td> <td>1,313,526.</td> <td>1,395,066.</td> </tr> <tr> <td><b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)</td> <td></td> <td>NONE</td> </tr> <tr> <td><b>b</b> Total fundraising expenses, Part IX, column (D), line 25) ▶ <b>275,113.</b></td> <td></td> <td></td> </tr> <tr> <td><b>17</b> Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)</td> <td>993,950.</td> <td>1,051,739.</td> </tr> <tr> <td><b>18</b> Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)</td> <td>13,463,801.</td> <td>13,150,171.</td> </tr> <tr> <td><b>19</b> Revenue less expenses Subtract line 18 from line 12</td> <td>22,460.</td> <td>113,022.</td> </tr> <tr> <td colspan="2"> <table border="1"> <thead> <tr> <th></th> <th>Beginning of Year</th> <th>End of Year</th> </tr> </thead> <tbody> <tr> <td><b>20</b> Total assets (Part X, line 16)</td> <td>10,384,144.</td> <td>9,935,699.</td> </tr> <tr> <td><b>21</b> Total liabilities (Part X, line 26)</td> <td>9,614,604.</td> <td>9,053,137.</td> </tr> <tr> <td><b>22</b> Net assets or fund balances Subtract line 21 from line 20</td> <td>769,540.</td> <td>882,562.</td> </tr> </tbody> </table> </td> </tr> </tbody> </table>			Prior Year	Current Year	<b>8</b> Contribution and grants (Part VIII, line 1h)	11,342,617.	11,152,241.	<b>9</b> Program service revenue (Part VIII, line 2g)	2,053,121.	2,085,222.	<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)	90,523.	25,730.	<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		NONE	<b>12</b> Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	13,486,261.	13,263,193.	<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1-3)	11,156,325.	10,703,366.	<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)		NONE	<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	1,313,526.	1,395,066.	<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)		NONE	<b>b</b> Total fundraising expenses, Part IX, column (D), line 25) ▶ <b>275,113.</b>			<b>17</b> Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	993,950.	1,051,739.	<b>18</b> Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	13,463,801.	13,150,171.	<b>19</b> Revenue less expenses Subtract line 18 from line 12	22,460.	113,022.	<table border="1"> <thead> <tr> <th></th> <th>Beginning of Year</th> <th>End of Year</th> </tr> </thead> <tbody> <tr> <td><b>20</b> Total assets (Part X, line 16)</td> <td>10,384,144.</td> <td>9,935,699.</td> </tr> <tr> <td><b>21</b> Total liabilities (Part X, line 26)</td> <td>9,614,604.</td> <td>9,053,137.</td> </tr> <tr> <td><b>22</b> Net assets or fund balances Subtract line 21 from line 20</td> <td>769,540.</td> <td>882,562.</td> </tr> </tbody> </table>			Beginning of Year	End of Year	<b>20</b> Total assets (Part X, line 16)	10,384,144.	9,935,699.	<b>21</b> Total liabilities (Part X, line 26)	9,614,604.	9,053,137.	<b>22</b> Net assets or fund balances Subtract line 21 from line 20	769,540.	882,562.
	Prior Year	Current Year																																																							
<b>8</b> Contribution and grants (Part VIII, line 1h)	11,342,617.	11,152,241.																																																							
<b>9</b> Program service revenue (Part VIII, line 2g)	2,053,121.	2,085,222.																																																							
<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)	90,523.	25,730.																																																							
<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		NONE																																																							
<b>12</b> Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	13,486,261.	13,263,193.																																																							
<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1-3)	11,156,325.	10,703,366.																																																							
<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)		NONE																																																							
<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	1,313,526.	1,395,066.																																																							
<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)		NONE																																																							
<b>b</b> Total fundraising expenses, Part IX, column (D), line 25) ▶ <b>275,113.</b>																																																									
<b>17</b> Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	993,950.	1,051,739.																																																							
<b>18</b> Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	13,463,801.	13,150,171.																																																							
<b>19</b> Revenue less expenses Subtract line 18 from line 12	22,460.	113,022.																																																							
<table border="1"> <thead> <tr> <th></th> <th>Beginning of Year</th> <th>End of Year</th> </tr> </thead> <tbody> <tr> <td><b>20</b> Total assets (Part X, line 16)</td> <td>10,384,144.</td> <td>9,935,699.</td> </tr> <tr> <td><b>21</b> Total liabilities (Part X, line 26)</td> <td>9,614,604.</td> <td>9,053,137.</td> </tr> <tr> <td><b>22</b> Net assets or fund balances Subtract line 21 from line 20</td> <td>769,540.</td> <td>882,562.</td> </tr> </tbody> </table>			Beginning of Year	End of Year	<b>20</b> Total assets (Part X, line 16)	10,384,144.	9,935,699.	<b>21</b> Total liabilities (Part X, line 26)	9,614,604.	9,053,137.	<b>22</b> Net assets or fund balances Subtract line 21 from line 20	769,540.	882,562.																																												
	Beginning of Year	End of Year																																																							
<b>20</b> Total assets (Part X, line 16)	10,384,144.	9,935,699.																																																							
<b>21</b> Total liabilities (Part X, line 26)	9,614,604.	9,053,137.																																																							
<b>22</b> Net assets or fund balances Subtract line 21 from line 20	769,540.	882,562.																																																							

**Part II Signature Block**

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.			
<b>Sign Here</b>	Signature of officer <i>Steven J. Kravitz</i>	Date <b>1/7/10</b>	
	Type or print name and title <b>Steven J. Kravitz, CFO</b>		
<b>Paid Preparer's Use Only</b>	Preparer's signature <i>[Signature]</i>	Date <b>1/7/10</b>	Check if self-employed <input type="checkbox"/>
	Firm's name (or yours if self-employed), address, and ZIP + 4 <b>CBIZ MHM, LLC</b> <b>3 BETHESDA METRO CENTER, SUITE 600 BETHESDA, MD 20814</b>		Preparer's identifying number (see instructions) <b>34-1862269</b>
	EIN <b>34-1862269</b>		Phone no <b>301-951-3636</b>

May the IRS discuss this return with the preparer shown above? (See instructions) ☒ Yes ☐ No

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2008)

JSA  
8E1010 2 000

28979U A10D 01/07/2010 14:27:00

13876

3

23

**Part III Statement of Program Service Accomplishments** (see instructions)**1** Briefly describe the organization's mission:

SEE STATEMENT 1

**2** Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No

If "Yes" describe these new services on Schedule O

**3** Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No

If "Yes," describe these changes on Schedule O

**4** Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.**4a** (Code \_\_\_\_\_) (Expenses \$ 12,127,218. including grants of \$ 10,703,366.) (Revenue \$ 1,789,410.)DISTRIBUTION OF FUNDS RAISED PRIMARILY THROUGH WORKPLACE  
GIVING FOR AND ON BEHALF OF MEMBERS OF EARTH SHARE AND ITS  
AFFILIATES**4b** (Code \_\_\_\_\_) (Expenses \$ 327,735. including grants of \$ \_\_\_\_\_) (Revenue \$ 295,812.)SUPPORT OF LOCAL ENVIRONMENTAL FEDERATION AFFILIATES**4c** (Code \_\_\_\_\_) (Expenses \$ \_\_\_\_\_ including grants of \$ \_\_\_\_\_) (Revenue \$ \_\_\_\_\_)**4d** Other program services (Describe in Schedule O )

(Expenses \$ \_\_\_\_\_ including grants of \$ \_\_\_\_\_) (Revenue \$ \_\_\_\_\_)

**4e** Total program service expenses ► \$ 12,454,953. (Must equal Part IX, Line 25, column (B) )

**Part IV Checklist of Required Schedules**

	Yes	No
<b>1</b> Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	<b>1</b> X	
<b>2</b> Is the organization required to complete Schedule B, Schedule of Contributors?	<b>2</b> X	
<b>3</b> 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	<b>3</b>	X
<b>4</b> <b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	<b>4</b>	X
<b>5</b> <b>Sections 501(c)(4), 501(c)(5), and 501(c)(6) organizations.</b> Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	<b>5</b>	
<b>6</b> 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? If "Yes," complete Schedule D, Part I	<b>6</b>	X
<b>7</b> 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	<b>7</b>	X
<b>8</b> Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	<b>8</b>	X
<b>9</b> 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	<b>9</b>	X
<b>10</b> Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	<b>10</b>	X
<b>11</b> 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	<b>11</b> X	
<b>12</b> 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	<b>12</b> X	
<b>13</b> Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	<b>13</b>	X
<b>14a</b> Did the organization maintain an office, employees, or agents outside of the U S ?	<b>14a</b>	X
<b>b</b> Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U S ? If "Yes," complete Schedule F, Part I	<b>14b</b>	X
<b>15</b> 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	<b>15</b>	X
<b>16</b> 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	<b>16</b>	X
<b>17</b> Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	<b>17</b>	X
<b>18</b> Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	<b>18</b>	X
<b>19</b> Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	<b>19</b>	X
<b>20</b> Did the organization operate one or more hospitals? If "Yes," complete Schedule H	<b>20</b>	X
<b>21</b> Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	<b>21</b> X	
<b>22</b> Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	<b>22</b>	X
<b>23</b> Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J	<b>23</b> X	
<b>24a</b> Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K If "No," go to question 25	<b>24a</b>	X
<b>b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	<b>24b</b>	
<b>c</b> Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	<b>24c</b>	
<b>d</b> Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	<b>24d</b>	
<b>25a</b> <b>Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	<b>25a</b>	X
<b>b</b> 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	<b>25b</b>	X
<b>26</b> 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	<b>26</b>	X
<b>27</b> Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	<b>27</b>	X

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

	Yes	No
<b>28</b> During the tax year, did any person who is a current or former officer, director, trustee, or key employee:		
<b>a</b> 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)? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .	<b>28a</b>	X
<b>b</b> Have a family member who had a direct or indirect business relationship with the organization? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .	<b>28b</b>	X
<b>c</b> 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? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .	<b>28c</b>	X
<b>29</b> Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> . . . . .	<b>29</b>	X
<b>30</b> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> . . . . .	<b>30</b>	X
<b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> . . . . .	<b>31</b>	X
<b>32</b> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i> . . . . .	<b>32</b>	X
<b>33</b> Did the organization own 100% of an entity disregarded as separate from the organization under Regulations section 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i> . . . . .	<b>33</b>	X
<b>34</b> Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i> . . . . .	<b>34</b>	X
<b>35</b> Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> . . . . .	<b>35</b>	X
<b>36</b> <b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> . . . . .	<b>36</b>	X
<b>37</b> Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i> . . . . .	<b>37</b>	X

Form **990** (2008)

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

		Yes	No
<b>1a</b>	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>1a</b> 16	
<b>b</b>	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable. . . . .	<b>1b</b> NONE	
<b>c</b>	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? . . . . .	<b>1c</b>	X
<b>2a</b>	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. . . . .	<b>2a</b> 15	
<b>b</b>	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? . . . . . <b>Note:</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)	<b>2b</b>	X
<b>3a</b>	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? . . . . .	<b>3a</b>	X
<b>b</b>	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O . . . . .	<b>3b</b>	
<b>4a</b>	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)? . . . . .	<b>4a</b>	X
<b>b</b>	If "Yes," enter the name of the foreign country: <u>See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts</u>		
<b>5a</b>	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . . . . .	<b>5a</b>	X
<b>b</b>	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? . . . . .	<b>5b</b>	X
<b>c</b>	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? . . . . .	<b>5c</b>	
<b>6a</b>	Did the organization solicit any contributions that were not tax deductible? . . . . .	<b>6a</b>	X
<b>b</b>	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? . . . . .	<b>6b</b>	
<b>7</b>	<b>Organizations that may receive deductible contributions under section 170(c).</b>		
<b>a</b>	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75? . . . . .	<b>7a</b>	X
<b>b</b>	If "Yes," did the organization notify the donor of the value of the goods or services provided? . . . . .	<b>7b</b>	
<b>c</b>	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? . . . . .	<b>7c</b>	X
<b>d</b>	If "Yes," indicate the number of Forms 8282 filed during the year. . . . .	<b>7d</b>	
<b>e</b>	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? . . . . .	<b>7e</b>	X
<b>f</b>	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . . . .	<b>7f</b>	X
<b>g</b>	For all contributions of qualified intellectual property, did the organization file Form 8899 as required? . . . . .	<b>7g</b>	X
<b>h</b>	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? . . . . .	<b>7h</b>	X
<b>8</b>	<b>Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year? . . . . .	<b>8</b>	X
<b>9</b>	<b>Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.</b>		
<b>a</b>	Did the organization make any taxable distributions under section 4966? . . . . .	<b>9a</b>	X
<b>b</b>	Did the organization make a distribution to a donor, donor advisor, or related person? . . . . .	<b>9b</b>	X
<b>10</b>	<b>Section 501(c)(7) organizations.</b> Enter		
<b>a</b>	Initiation fees and capital contributions included on Part VIII, line 12. . . . .	<b>10a</b>	
<b>b</b>	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities. . . . .	<b>10b</b>	
<b>11</b>	<b>Section 501(c)(12) organizations.</b> Enter		
<b>a</b>	Gross income from members or shareholders. . . . .	<b>11a</b>	
<b>b</b>	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them). . . . .	<b>11b</b>	
<b>12a</b>	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041? . . . . .	<b>12a</b>	
<b>b</b>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year. . . . .	<b>12b</b>	

Form 990 (2008)

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

		Yes	No
For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances, process, or changes in Schedule O. See instructions.			
<b>1a</b>	Enter the number of voting members of the governing body . . . . .	<b>1a</b>	30
<b>b</b>	Enter the number of voting members that are independent . . . . .	<b>1b</b>	30
<b>2</b>	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? . . . . .	<b>2</b>	X
<b>3</b>	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? . . . .	<b>3</b>	X
<b>4</b>	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? . . . .	<b>4</b>	X
<b>5</b>	Did the organization become aware during the year of a material diversion of the organization's assets? . . . . .	<b>5</b>	X
<b>6</b>	Does the organization have members or stockholders? . . . . .	<b>6</b>	X
<b>7a</b>	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? . . . . .	<b>7a</b>	X
<b>b</b>	Are any decisions of the governing body subject to approval by members, stockholders, or other persons? . . . .	<b>7b</b>	X
<b>8</b>	Did the organizations contemporaneously document the meetings held or written actions undertaken during the year by the following:		
<b>a</b>	The governing body? . . . . .	<b>8a</b>	X
<b>b</b>	Each committee with authority to act on behalf of the governing body? . . . . .	<b>8b</b>	X
<b>9a</b>	Does the organization have local chapters, branches, or affiliates? . . . . .	<b>9a</b>	X
<b>b</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? . . . . .	<b>9b</b>	X
<b>10</b>	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990 . . . . .	<b>10</b>	X
<b>11</b>	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 . . . . .	<b>11</b>	X

**Section B. Policies**

		Yes	No
<b>12a</b>	Does the organization have a written conflict of interest policy? If "No," go to line 13 . . . . .	<b>12a</b>	X
<b>b</b>	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? . . . . .	<b>12b</b>	X
<b>c</b>	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done . . . . .	<b>12c</b>	X
<b>13</b>	Does the organization have a written whistleblower policy? . . . . .	<b>13</b>	X
<b>14</b>	Does the organization have a written document retention and destruction policy? . . . . .	<b>14</b>	X
<b>15</b>	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:		
<b>a</b>	The organization's CEO, Executive Director, or top management official? . . . . .	<b>15a</b>	X
<b>b</b>	Other officers or key employees of the organization? . . . . .	<b>15b</b>	X
	Describe the process in Schedule O (see instructions)		
<b>16a</b>	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? . . . . .	<b>16a</b>	X
<b>b</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? . . . . .	<b>16b</b>	

**Section C. Disclosure**

**17** List the states with which a copy of this Form 990 is required to be filed ► SEE STATEMENT 2

**18** 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.  
☐ Own website ☒ Another's website ☒ Upon request

**19** 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

**20** State the name, physical address, and telephone number of the person who possesses the books and records of the organization ► STEVEN KRAVITZ 7735 OLD GEORGETOWN ROAD BETHESDA, MD 20814  
240-333-0300







**Part VIII Statement of Revenue**

52-1601960

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
<b>Contributions, gifts, grants and other similar amounts</b>	<b>1a</b>	Federated campaigns . . . . .	<b>1a</b> 11,152,241.				
	<b>b</b>	Membership dues . . . . .	<b>1b</b>				
	<b>c</b>	Fundraising events . . . . .	<b>1c</b>				
	<b>d</b>	Related organizations . . . . .	<b>1d</b>				
	<b>e</b>	Government grants (contributions) . .	<b>1e</b>				
	<b>f</b>	All other contributions, gifts, grants, and similar amounts not included above .	<b>1f</b>				
	<b>g</b>	Noncash contributions included in lines 1a-1f \$ 81,500.					
	<b>h</b>	<b>Total.</b> Add lines 1a-1f . . . . .		11,152,241.			
<b>Program Service Revenue</b>	<b>Business Code</b>						
	<b>2a</b>	MEMBER FEES		1,546,567.	1,546,567.		
	<b>b</b>	AFFILIATE FEES		538,655.	538,655.		
	<b>c</b>						
	<b>d</b>						
	<b>e</b>						
	<b>f</b>	All other program service revenue . . . . .					
	<b>g</b>	<b>Total.</b> Add lines 2a-2f . . . . .		2,085,222.			
<b>Other Revenue</b>	<b>3</b>	Investment income (including dividends, interest, and other similar amounts) . . . . . STMT 3. . . . .		25,730.			25,730.
	<b>4</b>	Income from investment of tax-exempt bond proceeds . . . . .		NONE			
	<b>5</b>	Royalties . . . . .		NONE			
		(i) Real (ii) Personal					
	<b>6a</b>	Gross Rents . . . . .					
	<b>b</b>	Less rental expenses . . . . .					
	<b>c</b>	Rental income or (loss) . . . . .					
	<b>d</b>	Net rental income or (loss) . . . . .		NONE			
		(i) Securities (ii) Other					
	<b>7a</b>	Gross amount from sales of assets other than inventory . . . . .					
	<b>b</b>	Less cost or other basis and sales expenses . . . . .					
	<b>c</b>	Gain or (loss) . . . . .					
	<b>d</b>	Net gain or (loss) . . . . .		NONE			
	<b>8a</b>	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18 . . . . .	<b>a</b>				
	<b>b</b>	Less direct expenses . . . . .	<b>b</b>				
	<b>c</b>	Net income or (loss) from fundraising events . . . . .		NONE			
	<b>9a</b>	Gross income from gaming activities See Part IV, line 19 . . . . .	<b>a</b>				
	<b>b</b>	Less direct expenses . . . . .	<b>b</b>				
<b>c</b>	Net income or (loss) from gaming activities . . . . .		NONE				
<b>10a</b>	Gross sales of inventory, less returns and allowances . . . . .	<b>a</b>					
<b>b</b>	Less cost of goods sold . . . . .	<b>b</b>					
<b>c</b>	Net income or (loss) from sales of inventory . . . . .		NONE				
<b>Miscellaneous Revenue</b>			<b>Business Code</b>				
<b>11a</b>							
<b>b</b>							
<b>c</b>							
<b>d</b>	All other revenue . . . . .						
<b>e</b>	<b>Total.</b> Add lines 11a-11d . . . . .		NONE				
<b>12</b>	<b>Total Revenue.</b> Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e . . . . .		13,263,193.	2,085,222.	NONE	25,730.	

**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).**

<b>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</b>	(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 . . .	10,703,366.	10,703,366.		
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22 . . . . .	NONE			
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 . . . . .	NONE			
4 Benefits paid to or for members . . . . .	NONE			
5 Compensation of current officers, directors, trustees, and key employees . . . . .	547,307.	280,056.	129,848.	137,403.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . .	NONE			
7 Other salaries and wages . . . . .	643,653.	500,976.	86,705.	55,972.
8 Pension plan contributions (include section 401 (k) and section 403(b) employer contributions) . .	65,435.	52,320.	9,410.	3,705.
9 Other employee benefits . . . . .	60,783.	47,966.	9,338.	3,479.
10 Payroll taxes . . . . .	77,888.	61,532.	11,683.	4,673.
11 Fees for services (non-employees)				
a Management . . . . .	NONE			
b Legal . . . . .	11,358.	7,592.	770.	2,996.
c Accounting . . . . .	35,350.		35,350.	
d Lobbying . . . . .	NONE			
e Professional fundraising services See Part IV, line 17	NONE			
f Investment management fees . . . . .	NONE			
g Other . . . . .	NONE			
12 Advertising and promotion . . . . .	NONE			
13 Office expenses . . . . .	16,369.	9,204.	5,047.	2,118.
14 Information technology . . . . .	NONE			
15 Royalties . . . . .	NONE			
16 Occupancy . . . . .	146,056.	97,789.	26,376.	21,891.
17 Travel . . . . .	97,231.	59,578.	29,062.	8,591.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	NONE			
19 Conferences, conventions, and meetings . . . .	59,191.	7,125.	50,382.	1,684.
20 Interest . . . . .	NONE			
21 Payments to affiliates . . . . .	NONE			
22 Depreciation, depletion, and amortization . . .	59,560.	49,771.	1,629.	8,160.
23 Insurance . . . . .	10,633.	7,248.	1,851.	1,534.
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 LOCAL REPRESENTATIVES -----	147,907.	147,377.		530.
b COMMUNICATIONS -----	56,167.	56,167.		
c CAMPAIGN EXPENSES -----	69,072.	68,959.		113.
d PROFESSIONAL FEES -----	92,500.	81,841.	10,659.	
e AD COUNCIL -----	107,242.	107,242.		
f All other expenses -----	143,103.	108,844.	11,995.	22,264.
<b>25 Total functional expenses. Add lines 1 through 24f</b>	<b>13,150,171.</b>	<b>12,454,953.</b>	<b>420,105.</b>	<b>275,113.</b>
<b>26 Joint Costs.</b> Check here <input type="checkbox"/> 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 . . . . .				

**Part X Balance Sheet**

		(A) Beginning of year		(B) End of year
<b>Assets</b>	1 Cash - non-interest-bearing . . . . .	2,383,863.	1	1,967,314.
	2 Savings and temporary cash investments . . . . .		2	
	3 Pledges and grants receivable, net . . . . .	7,586,856.	3	7,376,479.
	4 Accounts receivable, net . . . . .	339,369.	4	317,905.
	5 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	
	7 Notes and loans receivable, net . . . . .		7	
	8 Inventories for sales or use . . . . .		8	
	9 Prepaid expenses and deferred charges . . . . . SFMT. 4 . . . . .	3,200.	9	9,046.
	10a Land, buildings, and equipment cost basis . . . . . 10a . . . . . 487,384.			
	b Less accumulated depreciation. Complete Part VI of Schedule D. . . . . 10b . . . . . 333,468.	70,856.	10c	153,916.
	11 Investments - publicly traded securities . . . . . SFMT. 5 . . . . .		11	86,039.
	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 . . . . .	NONE	15	25,000.
16 <b>Total assets.</b> Add lines 1 through 15 (must equal line 34) . . . . .	10,384,144.	16	9,935,699.	
<b>Liabilities</b>	17 Accounts payable and accrued expenses . . . . .	219,247.	17	229,382.
	18 Grants payable . . . . .		18	
	19 Deferred revenue . . . . .		19	
	20 Tax-exempt bond liabilities . . . . .		20	
	21 Escrow account liability. Complete Part IV of Schedule D . . . . .		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L . . . . .		22	
	23 Secured mortgages and notes payable to unrelated third parties . . . . .		23	
	24 Unsecured notes and loans payable . . . . .		24	
	25 Other liabilities. Complete Part X of Schedule D . . . . .	9,395,357.	25	8,823,755.
	26 <b>Total liabilities.</b> Add lines 17 through 25. . . . .	9,614,604.	26	9,053,137.
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.</b>			
	27 Unrestricted net assets . . . . .	721,709.	27	809,731.
	28 Temporarily restricted net assets . . . . .	47,831.	28	72,831.
	29 Permanently restricted net assets . . . . .		29	
	<b>Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.</b>			
	30 Capital stock or trust principal, or current funds . . . . .		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund . . . . .		31	
	32 Retained earnings, endowment, accumulated income, or other funds . . . . .		32	
	33 Total net assets or fund balances . . . . .	769,540.	33	882,562.
34 <b>Total liabilities and net assets/fund balances.</b> . . . . .	10,384,144.	34	9,935,699.	

**Part XI Financial Statements and Reporting**

		Yes	No
1	Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other		
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? . . . . .	2b	X
c	If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? . . . . .	2c	X
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? . . . . .	3a	X
b	If "Yes," did the organization undergo the required audit or audits? . . . . .	3b	

Department of the Treasury  
Internal Revenue Service

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

OMB No 1545-0047

2008

**Open to Public  
Inspection**

Employer identification number

52-1601960

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 a 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 \_\_\_\_\_

**5** ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II )

**6** ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.

**7** ☒ 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 )

**8** ☐ A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II )

**9** ☐ An organization that normally receives (1) more than 33 1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2)**. (Complete Part III )

**10** ☐ An organization organized and operated exclusively to test for public safety See **section 509(a)(4)**. (see instructions)

**11** ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h

**a** ☐ Type I      **b** ☐ Type II      **c** ☐ Type III - Functionally Integrated      **d** ☐ Type III - Other

**e** ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)

**f** If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box ☐

**g** Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

(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? ☐

(ii) A family member of a person described in (i) above? ☐

(iii) A 35% controlled entity of a person described in (i) or (ii) above? ☐

**h** Provide the following information about the organizations the organization supports

	Yes	No
<b>11g(i)</b>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>11g(ii)</b>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>11g(iii)</b>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

[illegible]

Schedule A (Form 990 or 990-EZ) 2008

**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 beginning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") . . . . .	9,194,459.	9,083,929.	10,108,033.	11,342,617.	11,152,241.	50,881,279.
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . . . .						
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge . . . . .						
<b>4</b> <b>Total.</b> Add lines 1-3 . . . . .	9,194,459.	9,083,929.	10,108,033.	11,342,617.	11,152,241.	50,881,279.
<b>5</b> The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) . . . . .						
<b>6</b> <b>Public support.</b> Subtract line 5 from line 4 . . . . .						50,881,279.

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
<b>7</b> Amounts from line 4. . . . .	9,194,459.	9,083,929.	10,108,033.	11,342,617.	11,152,241.	50,881,279.
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources . . . . .	27,054.	72,324.	116,818.	90,523.	25,730.	332,449.
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on . . . . .						
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV) . . . . .	3,454.					3,454.
<b>11</b> <b>Total support.</b> Add lines 7 through 10 . . . . .						51,217,182.
<b>12</b> Gross receipts from related activities, etc. (See instructions) . . . . .					<b>12</b>	9,247,912.
<b>13</b> <b>First five years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and <b>stop here</b> . . . . .						<input type="checkbox"/>

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

<b>14</b> Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f)) . . . . .	<b>14</b>	99.34 %
<b>15</b> Public support percentage from 2007 Schedule A, Part IV-A, line 26f . . . . .	<b>15</b>	99.39 %
<b>16a</b> <b>33 1/3% support test - 2008.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization . . . . .		<input checked="" type="checkbox"/>
<b>b</b> <b>33 1/3% support test - 2007.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization . . . . .		<input type="checkbox"/>
<b>17a</b> <b>10%-facts-and-circumstances test - 2008.</b> If the organization did not check a box on line 13, 16a or 16b, and line 14 is 10% or more, and if the organization meets the "fact-and-circumstances" test, check this box and <b>stop here.</b> Explain in Part IV how the organization meets the "facts and circumstances" test. The organization qualifies as a publicly supported organization . . . . .		<input type="checkbox"/>
<b>b</b> <b>10%-facts-and-circumstances test - 2007.</b> If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and <b>stop here.</b> Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . . . .		<input type="checkbox"/>
<b>18</b> <b>Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions . . . . .		<input type="checkbox"/>

**Part III Support Schedule for Organizations Described in Section 509(a)(2)**  
 (Complete only if you checked the box on line 9 of Part I.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") . . . . .						
<b>2</b> Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose . . . . .						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513 . . . . .						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . . . .						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge . . . . .						
<b>6</b> <b>Total.</b> Add lines 1-5 . . . . .						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons . . . . .						
<b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000 . . . . .						
<b>c</b> Add lines 7a and 7b. . . . .						
<b>8</b> <b>Public support</b> (Subtract line 7c from line 6) . . . . .						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
<b>9</b> Amounts from line 6. . . . .						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources . . . . .						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 . . . . .						
<b>c</b> Add lines 10a and 10b . . . . .						
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on . . . . .						
<b>12</b> Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) . . . . .						
<b>13</b> <b>Total support.</b> (Add lines 9, 10c, 11, and 12) . . . . .						
<b>14</b> <b>First five years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> . . . . . <input type="checkbox"/>						

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

<b>15</b> Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f)) . . . . .	<b>15</b>	%
<b>16</b> Public support percentage from 2007 Schedule A, Part IV-A, line 27g . . . . .	<b>16</b>	%

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

<b>17</b> Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f)) . . . . .	<b>17</b>	%
<b>18</b> Investment income percentage from 2007 Schedule A, Part IV-A, line 27h . . . . .	<b>18</b>	%
<b>19a</b> <b>33 1/3% support tests - 2008.</b> 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 <b>stop here</b> The organization qualifies as a publicly supported organization . . . . . <input type="checkbox"/>		
<b>b</b> <b>33 1/3% support tests - 2007.</b> If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3 %, and line 18 is not more than 33 1/3 %, check this box and <b>stop here</b> The organization qualifies as a publicly supported organization . . . . . <input type="checkbox"/>		
<b>20</b> <b>Private foundation.</b> If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions . . . . . <input type="checkbox"/>		

**Part IV** **Supplemental Information.** Complete this part to provide the explanation required by Part II, line 10, Part II, line 17a or 17b, or Part III, line 12. Provide any other additional information. (see instructions)

## SCHEDULE A, PART II - OTHER INCOME

DESCRIPTION	2004	2005	2006	2007	2008	TOTAL
MISCELLANEOUS INCOME	3,454.					3,454.
TOTALS	3,454.					3,454.
	=====	=====	=====	=====	=====	=====



**SCHEDULE D**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

Name of the organization

EARTHSHARE

**Supplemental Financial Statements**

► **Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.**

OMB No 1545-0047

**2008**

**Open to Public Inspection**

Employer identification number

52-1601960

**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 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 advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? . . . . . <input type="checkbox"/> Yes <input type="checkbox"/> No		
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit? . . . . . <input type="checkbox"/> Yes <input type="checkbox"/> No		

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

1 Purpose(s) of conservation easements held by the organization (check all that apply)

<input type="checkbox"/> Preservation of land for public use (e.g., recreation or pleasure)	<input type="checkbox"/> Preservation of an historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of certified historic structure
<input type="checkbox"/> Preservation of open space	

2 Complete lines 2a-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 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) . . . . .	2c
d Number of conservation easements included in (c) acquired after 8/17/06 . . . . .	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ► \_\_\_\_\_

4 Number of states where property subject to conservation easement is located ► \_\_\_\_\_

5 Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and enforcement of the conservation easements it holds? . . . . . ☐ Yes ☐ No

6 Staff or volunteer hours devoted to monitoring, inspecting, and enforcing easements during the year ► \_\_\_\_\_

7 Amount of expenses incurred in monitoring, inspecting, and enforcing easements during the year ► \$ \_\_\_\_\_

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)? . . . . . ☐ Yes ☐ No

9 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

**Part III 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, 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, 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 . . . . . ► \$ \_\_\_\_\_

2 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 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 Maintaining Collections of Art, Historical Treasures, or Other Similar Assets** (continued)

3 Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply)

- a ☐ Public exhibition  
 b ☐ Scholarly research  
 c ☐ Preservation for future generations  
 d ☐ Loan or exchange programs  
 e ☐ Other \_\_\_\_\_

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? . . . . . ☐ Yes ☐ No

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

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? . . . . . ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIV and complete the following table

	Amount
c Beginning balance . . . . .	1c
d Additions during the year . . . . .	1d
e Distributions during the year . . . . .	1e
f Ending balance . . . . .	1f

2a Did the organization include an amount on Form 990, Part X, line 21? . . . . . ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIV

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

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

2 Provide the estimated percentage of the year end balance held as

- a Board designated or quasi-endowment ▶ \_\_\_\_\_ %  
 b Permanent endowment ▶ \_\_\_\_\_ %  
 c Term endowment ▶ \_\_\_\_\_ %

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

- (i) unrelated organizations . . . . .  
 (ii) related organizations . . . . .

	Yes	No
3a(i)		
3a(ii)		
3b		

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? . . . . .

4 Describe in Part XIV the intended uses of the organization's endowment funds

**Part VI Investments - Land, Buildings, and Equipment.** See Form 990, Part X, line 10

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Depreciation	(d) Book value
1a Land . . . . .				
b Buildings . . . . .				
c Leasehold improvements . . . . .	143,052.		143,052.	
d Equipment . . . . .	344,332.		190,416.	153,916.
e Other . . . . .				
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c) ) . . . . .				153,916.

**Part VII Investments - Other Securities.** See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Financial derivatives and other financial products . . . . .		
Closely-held equity interests . . . . .		
Other -----		
-----		
-----		
-----		
-----		
-----		
-----		
-----		
-----		
-----		
<b>Total.</b> (Column (b) should equal Form 990, Part X, col (B) line 12.) ▶		

**Part VIII Investments - Program Related.** See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
-----		
-----		
-----		
-----		
-----		
-----		
-----		
-----		
-----		
-----		
-----		
<b>Total.</b> (Column (b) should equal Form 990, Part X, col (B) line 13.) ▶		

**Part IX Other Assets.** See Form 990, Part X, line 15.

(a) Description	(b) Book value
-----	
-----	
-----	
-----	
-----	
-----	
-----	
-----	
-----	
-----	
<b>Total.</b> (Column (b) should equal Form 990, Part X, col (B) line 15.) ▶	

**Part X Other Liabilities.** See Form 990, Part X, line 25.

(a) Description of liability	(b) Amount
Federal income taxes	
CAMPAIGN FUNDS PAYABLE TO MEMB	8,797,410.
DEFERRED REVENUE	NONE
DEFERRED RENT	26,345.
-----	
-----	
-----	
-----	
-----	
-----	
<b>Total.</b> (Column (b) should equal Form 990, Part X, col (B) line 25.) ▶	8,823,755.

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

**Part 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	13,263,193.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	13,150,171.
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	113,022.
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4-8	9	
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	113,022.

**Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return**

1	Total revenue, gains, and other support per audited financial statements	1	39,244,538.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments	2a	
b	Donated services and use of facilities	2b	34,592,000.
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV)	2d	
e	Add lines 2a through 2d	2e	34,592,000.
3	Subtract line 2e from line 1	3	4,652,538.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	8,610,655.
c	Add lines 4a and 4b	4c	8,610,655.
5	Total revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12.)	5	13,263,193.

**Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return**

1	Total expenses and losses per audited financial statements	1	39,131,516.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	34,592,000.
b	Prior year adjustments	2b	
c	Losses reported on Form 990, Part IX, line 25	2c	
d	Other (Describe in Part XIV)	2d	
e	Add lines 2a through 2d	2e	34,592,000.
3	Subtract line 2e from line 1	3	4,539,516.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	8,610,655.
c	Add lines 4a and 4b	4c	8,610,655.
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18.)	5	13,150,171.

**Part XIV Supplemental Information**

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, 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

MEMBER CHARITIES

SCHEDULE D - PART XII & XIII - LINE 4B

NET CONTRIBUTION AMOUNT DESIGNATED TO MEMBER CHARITIES.

**Part XIV** Supplemental Information *(continued)*

Area with horizontal dashed lines for supplemental information.

## Grants and Other Assistance to Organizations, Governments, and Individuals in the U.S.

2008

► Complete if the organization answered "Yes," on Form 990, Part IV, lines 21 or 22. ► Attach to Form 990.

Employer identification number

52-1601960

## Part I General Information on Grants and Assistance

- Part II** **Grants and Other Assistance to Governments and Organizations in the United States.** Complete if the organization answered "Yes" on 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. Use Part IV and Schedule I-1 (Form 990) if additional space is needed.

2	Enter total number of section 501(c)(3) and government organizations	101	▲
3	Enter total number of other organizations	101	▲

Schedule I (Form 990) 2008

**Part III** Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.  
Use Schedule I-1 (Form 990) 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

**Part IV** Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information

PROCEDURE FOR MONITORING THE USE OF GRANT FUNDS

SCHEDULE I- PART I- LINE 2

EARTH SHARE MONITORS GRANTS GIVEN BY REQUIRING REPORTS FROM THE

GRANTEES/ORGANIZATIONS. THE ORGANIZATIONS ARE REQUIRED TO REPORT AS PART

OF THEIR APPLICATIONS THE USE OF FUNDS RECEIVED. THE REVIEW OF REPORTS IS

DONE ANNUALLY.

**SCHEDULE I-1  
(Form 990)**

Department of the Treasury  
Internal Revenue Service  
Name of the organization

**Continuation Sheet for Schedule I (Form 990)**

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

OMB No. 1545-0047

**2008**

**Open to Public  
Inspection**

Name of the organization

**EARTHSHARE**

Employer identification number

**52-1601960**

**Part I Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule I (Form 990), Part I)**

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AFRICAN WILDLIFE FOUNDATION 1400 16TH STREET NW, STE. 120	52-0781390	501(C)3	160,132.		BOOK		WORKPLACE GIVING
ALASKA CONSERVATION FOUNDATION 441 WEST 5TH AVENUE, STE. 402	92-0061466	501(C)3	28,887.		BOOK		WORKPLACE GIVING
AMAZON CONSERVATION TEAM 4211 NORTH FAIRFAX DRIVE	54-1915987	501(C)3	9,019.		BOOK		WORKPLACE GIVING
AMERICAN FARMLAND TRUST 1200 18TH STREET NW, SUITE 800	52-1190211	501(C)3	58,574.		BOOK		WORKPLACE GIVING
AMERICAN FORESTS 734 15TH STREET NW, SUITE 800	53-0196544	501(C)3	66,299.		BOOK		WORKPLACE GIVING
AMERICAN RIVERS 1101 14TH STREET NW, SUITE 1400	23-7305963	501(C)3	67,856.		BOOK		WORKPLACE GIVING
AMERICAN SOLAR ENERGY SOCIETY 2400 CENTRAL AVENUE, SUITE A	59-1768923	501(C)3	23,094.		BOOK		WORKPLACE GIVING
AMERICA'S CHARITIES 14150 NEWBROOK DRIVE SUITE 110	54-1517707	501(C)3	5,755.		BOOK		WORKPLACE GIVING
APPALACHIAN MOUNTAIN CLUB 5 JOY STREET BOSTON, MA 02108	04-6001677	501(C)3	17,860.		BOOK		WORKPLACE GIVING
ARBOR DAY FOUNDATION 211 N. 12TH STREET LINCOLN, NE 68508	23-7169265	501(C)3	36,350.		BOOK		WORKPLACE GIVING
AUDUBON NEW YORK 200 TRILLIUM LANE ALBANY, NY 12203	13-1624102	501(C)3	12,796.		BOOK		WORKPLACE GIVING
BAT CONSERVATION INTERNATIONAL 500 CAPITAL OF TEXAS HWY N AUSTIN, TX 78746	74-2553144	501(C)3	76,270.		BOOK		WORKPLACE GIVING
BEYOND PESTICIDES 701 E STREET SE, SUITE 200	52-1360541	501(C)3	45,009.		BOOK		WORKPLACE GIVING
BUFFALO OLMS TED PARKS CONSERVANCY 84 PARKSIDE AVENUE BUFFALO, NY 14214	22-2720927	501(C)3	9,882.		BOOK		WORKPLACE GIVING
CENTER FOR HEALTH, ENVIRONMENT AND JUSTICE 150 SOUTH WASHINGTON STREET	52-1219489	501(C)3	29,128.		BOOK		WORKPLACE GIVING

**2** Enter total number of Section 501(c)(3) and government organizations

**3** Enter total number of other organizations

101

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

**Schedule I-1 (Form 990) 2008**



**SCHEDULE I-1  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

Name of the organization

EARTHSHARE

**Continuation Sheet for Schedule I (Form 990)**

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

OMB No. 1545-0047

**2008**

**Open to Public  
Inspection**

Employer identification number

52-1601960

**Part I Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule I (Form 990), Part I)**

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CLEAN WATER FUND							
1010 VERMONT AVENUE NW, SUITE 1100	52-1043444	501(C)3	58,360.		BOOK		WORKPLACE GIVING
CLEARWATER, HUDSON RIVER SLOOP							
112 LITTLE MARKET STREET	14-6049022	501(C)3	13,970.		BOOK		WORKPLACE GIVING
COMMUNITY SHARES OF ILLINOIS							
44 EAST MAIN, STE 208 CHAMPAIGN, IL 61820	36-3073918	501(C)3	15,150.		BOOK		WORKPLACE GIVING
CONNECTICUT FOREST & PARK ASSOCIATION							
16 MERIDEN ROAD ROCKFALL, CT 06481	06-0613430	501(C)3	5,989.		BOOK		WORKPLACE GIVING
CONSERVATION INTERNATIONAL							
2011 CRYSTAL DRIVE, SUITE 500	52-1497470	501(C)3	72,087.		BOOK		WORKPLACE GIVING
DEFENDERS OF WILDLIFE							
1130 SEVENTEENTH STREET NW	53-0183181	501(C)3	194,874.		BOOK		WORKPLACE GIVING
EARTH DAY NETWORK							
1616 P STREET NW, SUITE 340	13-3798288	501(C)3	11,154.		BOOK		WORKPLACE GIVING
EARTH ISLAND INSTITUTE							
2150 ALLSTON WAY, SUITE 460	94-2889684	501(C)3	6,917.		BOOK		WORKPLACE GIVING
EARTH SHARE							
7735 OLD GEORGETOWN ROAD BETHESDA, MD 20814	52-160-1960	501(C)3	1,374,622.		BOOK		WORKPLACE GIVING
EARTHSHARE CALIFORNIA							
49 POWELL STREET, SUITE 500	94-2840364	501(C)3	152,497.		BOOK		WORKPLACE GIVING
EARTHSHARE GEORGIA							
1447 PEACHTREE STREET, SUITE 214	58-2022001	501(C)3	41,381.		BOOK		WORKPLACE GIVING
EARTHSHARE ILLINOIS							
35 EAST WACKER DRIVE, SUITE 1300	36-3871726	501(C)3	119,497.		BOOK		WORKPLACE GIVING
EARTHSHARE MICHIGAN							
6380 DRUMHELLER ROAD BATH, MI 48808	38-2721314	501(C)3	32,430.		BOOK		WORKPLACE GIVING
EARTHSHARE MISSOURI							
1222 SPRUCE STREET, ROOM 3.310	43-1679971	501(C)3	31,629.		BOOK		WORKPLACE GIVING
EARTHSHARE NEW ENGLAND							
675 VW PARKWAY, #167	22-3151372	501(C)3	68,826.		BOOK		WORKPLACE GIVING

2 Enter total number of Section 501(c)(3) and government organizations

3 Enter total number of other organizations

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

Schedule I-1 (Form 990) 2008

**SCHEDULE I-1  
(Form 990)**

Department of the Treasury  
Internal Revenue Service  
Name of the organization

**Continuation Sheet for Schedule I (Form 990)**

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

OMB No. 1545-0047

**2008**

**Open to Public  
Inspection**

Name of the organization

EARTHSHARE

Employer identification number

52-1601960

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
EARTHSHARE NEW JERSEY 425 GREENWOOD AVENUE, SUITE 2A	22-3323080	501(C)3	33,282.		BOOK		WORKPLACE GIVING
EARTHSHARE NEW YORK 305 7TH AVENUE, 15TH FLOOR	13-3632209	501(C)3	251,400.		BOOK		WORKPLACE GIVING
EARTHSHARE NORTH CAROLINA 331 WEST MAIN STREET, SUITE 505	56-1775025	501(C)3	60,119.		BOOK		WORKPLACE GIVING
EARTHSHARE OHIO 3528 N HIGH STREET, STE. E	31-1428289	501(C)3	57,044.		BOOK		WORKPLACE GIVING
EARTHSHARE OREGON P.O. BOX 40333 PORTLAND, OR 97240	93-1001285	501(C)3	43,366.		BOOK		WORKPLACE GIVING
EARTHSHARE TEXAS 707 WEST AVENUE, SUITE 203 AUSTIN, TX 78701	74-2627643	501(C)3	112,018.		BOOK		WORKPLACE GIVING
EARTHSHARE WASHINGTON 1402 THIRD AVENUE, STE. 817	91-1363472	501(C)3	28,299.		BOOK		WORKPLACE GIVING
ECOLOGIC DEVELOPMENT FUND 25 MOUNT AUBURN STREET, SUITE 203	25-1704582	501(C)3	5,175.		BOOK		WORKPLACE GIVING
ENVIRONMENTAL ADVOCATES OF NEW YORK, INC. 353 HAMILTON STREET ALBANY, NY 12210	22-2360736	501(C)3	21,824.		BOOK		WORKPLACE GIVING
ENVIRONMENTAL AND ENERGY STUDY INSTITUTE 1112 16TH STREET NW, SUITE 300	52-1268030	501(C)3	112,282.		BOOK		WORKPLACE GIVING
ENVIRONMENTAL DEFENSE FUND 257 PARK AVENUE SOUTH NEW YORK, NY 10010	11-6107128	501(C)3	159,693.		BOOK		WORKPLACE GIVING
ENVIRONMENTAL FUND FOR PENNSYLVANIA 1420 WALNUT ST STE 1304	23-2672152	501(C)3	8,045.		BOOK		WORKPLACE GIVING
ENVIRONMENTAL FUND OF ARIZONA 14700 N. FRANK LLOYD WRIGHT BLVD	86-0731684	501(C)3	68,944.		BOOK		WORKPLACE GIVING
ENVIRONMENTAL LAW INSTITUTE 2000 L STREET NW, SUITE 620	52-0901863	501(C)3	27,070.		BOOK		WORKPLACE GIVING
FLORIDA DEFENDERS OF THE ENVIRONMENT 4424 NW 13TH STREET, SUITE C-8	59-1297777	501(C)3	5,436.		BOOK		WORKPLACE GIVING

2 Enter total number of Section 501(c)(3) and government organizations

3 Enter total number of other organizations

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

Schedule I-1 (Form 990) 2008

**SCHEDULE I-1  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

Name of the organization

EARTHSHARE

**Continuation Sheet for Schedule I (Form 990)**

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

OMB No. 1545-0047

**2008**

**Open to Public  
Inspection**

Employer identification number

52-1601960

**Part I Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule I (Form 990), Part I)**

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FLORIDA WILDLIFE FEDERATION P.O. BOX 6870 TALLAHASSEE, FL 32314	59-1398265	501(C)3	14,173.		BOOK		WORKPLACE GIVING
FOREST SERVICE EMPLOYEES FOR ENVIRONMENTAL P.O. BOX 11615 EUGENE, OR 97440	93-1162218	501(C)3	8,949.		BOOK		WORKPLACE GIVING
FRIENDS OF THE EARTH 1717 MASSACHUSETTS AVE NW, STE 600	23-7420660	501(C)3	43,654.		BOOK		WORKPLACE GIVING
FRIENDS OF THE EVERGLADES 7800 RED ROAD, SUITE 215K	23-7099893	501(C)3	6,022.		BOOK		WORKPLACE GIVING
FRIENDS OF THE NATIONAL ZOO P.O. BOX 37012, MRC 5516	52-0853312	501(C)3	40,163.		BOOK		WORKPLACE GIVING
GALAPAGOS CONSERVANCY 11150 FAIRFAX BLVD., SUITE 408	13-3281486	501(C)3	15,617.		BOOK		WORKPLACE GIVING
GLOBAL IMPACT 66 CANAL CENTER PLAZA SUITE 310	52-1273585	501(C)3	9,938.		BOOK		WORKPLACE GIVING
GREEN CORPS 44 WINTER STREET, FOURTH FLOOR	23-2687791	501(C)3	12,539.		BOOK		WORKPLACE GIVING
GREEN MOUNTAIN CLUB 4711 WATERBURY-STOWE ROAD	03-0162865	501(C)3	6,136.		BOOK		WORKPLACE GIVING
IZAAK WALTON LEAGUE OF AMERICA 707 CONSERVATION LANE	36-1930035	501(C)3	48,009.		BOOK		WORKPLACE GIVING
JANE GOODALL INSTITUTE FOR WILDLIFE RESEARC 4245 NORTH FAIRFAX DRIVE, SUITE 600	94-2474731	501(C)3	39,937.		BOOK		WORKPLACE GIVING
KEEP AMERICA BEAUTIFUL 1010 WASHINGTON BLVD STAMFORD, CT 06901	13-1761633	501(C)3	11,793.		BOOK		WORKPLACE GIVING
LAND TRUST ALLIANCE 1660 L STREET NW SUITE 1100	04-2751357	501(C)3	13,840.		BOOK		WORKPLACE GIVING
LEAGUE OF CONSERVATION VOTERS EDUCATION FUN 1920 L STREET NW, SUITE 800	52-1379661	501(C)3	11,842.		BOOK		WORKPLACE GIVING
MASSACHUSETTS AUDUBON SOCIETY 208 SOUTH GREAT ROAD LINCOLN, MA 01773	04-2104702	501(C)3	11,518.		BOOK		WORKPLACE GIVING

2 Enter total number of Section 501(c)(3) and government organizations

3 Enter total number of other organizations

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

Schedule I-1 (Form 990) 2008

SCHEDULE I-1  
(Form 990)

Department of the Treasury  
Internal Revenue Service  
Name of the organization

Continuation Sheet for Schedule I (Form 990)

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

OMB No. 1545-0047

2008

Open to Public  
Inspection

Name of the organization

EARTHSHARE

Employer identification number

52-1601960

Part I Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule I (Form 990), Part I.)

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MINNESOTA ENVIRONMENTAL FUND							
450 SYNDICATE ST. N., STE. 320	41-1693030	501(C)3	56,249.		BOOK		WORKPLACE GIVING
NATIONAL AUDUBON SOCIETY							
225 VARICK STREET, 7TH FLOOR	13-1624102	501(C)3	46,655.		BOOK		WORKPLACE GIVING
NATIONAL FISH AND WILDLIFE FOUNDATION							
1133 15TH STREET, NW, STE. 1100	52-1384139	501(C)3	88,228.		BOOK		WORKPLACE GIVING
NATIONAL FOREST FOUNDATION							
BLOS 27 STE 3, FORT MISSOULA RD	52-1786332	501(C)3	36,597.		BOOK		WORKPLACE GIVING
NATIONAL PARKS CONSERVATION ASSOCIATION							
1300 19TH STREET, NW SUITE 300	53-0225165	501(C)3	248,421.		BOOK		WORKPLACE GIVING
NATIONAL WILDLIFE FEDERATION							
11100 WILDLIFE CENTER DRIVE	53-0204616	501(C)3	315,539.		BOOK		WORKPLACE GIVING
NATURAL RESOURCES DEFENSE COUNCIL							
40 WEST 20TH STREET NEW YORK, NY 10010	13-2654926	501(C)3	305,437.		BOOK		WORKPLACE GIVING
NEW YORK RESTORATION PROJECT							
254 WEST 31ST STREET, 10TH FLOOR	13-3959056	501(C)3	5,143.		BOOK		WORKPLACE GIVING
NEW YORK-NEW JERSEY TRAIL CONFERENCE							
156 RAMAPO VALLEY ROAD MAHWAH, NJ 07430	22-6042838	501(C)3	6,957.		BOOK		WORKPLACE GIVING
OCEAN CONSERVANCY							
1300 19TH STREET, NW SUITE 800	23-7245152	501(C)3	111,967.		BOOK		WORKPLACE GIVING
OCEANA							
1350 CONNECTICUT AVE NW, 5TH FLOOR	51-0401308	501(C)3	20,655.		BOOK		WORKPLACE GIVING
PARKS AND TRAILS NEW YORK							
29 ELK ST ALBANY, NY 12207	14-1753475	501(C)3	8,055.		BOOK		WORKPLACE GIVING
PESTICIDE ACTION NETWORK NORTH AMERICA							
49 POWELL STREET, SUITE 500	94-2949686	501(C)3	10,127.		BOOK		WORKPLACE GIVING
RAILS-TO-TRAILS CONSERVANCY							
2121 WARD COURT, NW, 5TH FLOOR	52-1437006	501(C)3	385,975.		BOOK		WORKPLACE GIVING
RAINFOREST ALLIANCE							
665 BROADWAY, SUITE 500 NEW YORK, NY 10012	13-3377893	501(C)3	145,073.		BOOK		WORKPLACE GIVING

2 Enter total number of Section 501(c)(3) and government organizations

3 Enter total number of other organizations

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

Schedule I-1 (Form 990) 2008

**SCHEDULE I-1  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

Name of the organization

EARTHSHARE

**Continuation Sheet for Schedule I (Form 990)**

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

OMB No 1545-0047

**2008**

**Open to Public  
Inspection**

Employer identification number

52-1601960

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
RESTORE AMERICA'S ESTUARIES 2020 14TH STREET, SUITE 210	54-1965304	501(C)3	11,623.		BOOK		WORKPLACE GIVING
ROCKY MOUNTAIN INSTITUTE 2317 SNOWMASS CREEK ROAD SNOWMASS, CO 81654	74-2244146	501(C)3	25,167.		BOOK		WORKPLACE GIVING
SAVE THE BAY 100 SAVE THE BAY DRIVE PROVIDENCE, RI 02905	05-0343046	501(C)3	12,946.		BOOK		WORKPLACE GIVING
SIERRA CLUB FOUNDATION 85 2ND STREET, SUITE 750	94-6069890	501(C)3	381,438.		BOOK		WORKPLACE GIVING
STUDENT CONSERVATION ASSOCIATION 689 RIVER ROAD, PO BOX 550	91-0880684	501(C)3	40,878.		BOOK		WORKPLACE GIVING
SURFRIDER FOUNDATION P.O. BOX 6010 SAN CLEMENTE, CA 92674	95-3941826	501(C)3	216,728.		BOOK		WORKPLACE GIVING
THE CONSERVATION FUND 1655 N. FORT MYER DRIVE, SUITE 1300	52-1388917	501(C)3	339,662.		BOOK		WORKPLACE GIVING
THE NATURE CONSERVANCY 4245 NORTH FAIRFAX DRIVE, SUITE 100	53-0242652	501(C)3	1,490,180.		BOOK		WORKPLACE GIVING
THE PEREGRINE FUND 5668 WEST FLYING HAWK LANE BOISE, ID 83709	23-1969973	501(C)3	124,452.		BOOK		WORKPLACE GIVING
THE WILDERNESS SOCIETY 1615 M STREET, NW WASHINGTON, DC 20036	53-0167933	501(C)3	71,980.		BOOK		WORKPLACE GIVING
TROUT UNLIMITED 146 BAYARD ST PORT EWEN, NY 12466	23-7355317	501(C)3	6,332.		BOOK		WORKPLACE GIVING
TRUST FOR PUBLIC LAND 116 NEW MONTGOMERY STREET, 4TH FLOOR	23-7222333	501(C)3	108,712.		BOOK		WORKPLACE GIVING
U. S. PUBLIC INTEREST RESEARCH GROUP EDUCAT 218 D STREET SE, SECOND FLOOR	52-1384240	501(C)3	27,198.		BOOK		WORKPLACE GIVING
UNION OF CONCERNED SCIENTISTS 2 BRATTLE SQUARE, P.O. BOX 9105	04-2535767	501(C)3	115,338.		BOOK		WORKPLACE GIVING
VERMONT LAND TRUST 8 BAILEY AVENUE MONTEPELIER, VT 05602	03-0264836	501(C)3	6,195.		BOOK		WORKPLACE GIVING

2 Enter total number of Section 501(c)(3) and government organizations

3 Enter total number of other organizations

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

Schedule I-1 (Form 990) 2008





**SCHEDULE J  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Compensation Information**

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

► Attach to Form 990. To be completed by organizations  
that answered "Yes" to Form 990, Part IV, line 23.

OMB No 1545-0047

**2008**

**Open to Public  
Inspection**

Name of the organization

EARTHSHARE

Employer identification number

52-1601960

**Part I Questions Regarding Compensation**

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

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

**b** If line 1a is checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain . . . . .

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

**3** Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply.

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

**4** During the year, did any person listed in Form 990, Part VII, Section A, line 1a:

- a** Receive a severance payment or change of control payment? . . . . .
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan? . . . . .
- c** Participate in, or receive payment from, an equity-based compensation arrangement? . . . . .
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

**Only 501(c)(3) and 501(c)(4) organizations must complete lines 5-8.**

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

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

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

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

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

**8** Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs. section 53.4958-4(a)(3)? If "Yes," describe in Part III . . . . .

Yes No

1b

2

4a

4b

4c

5a

5b

6a

6b

7

8

X

X

X

X

X

X

X

X

X

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

Schedule J (Form 990) 2008





**Part III** Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8. Also complete this part for any additional information

Area with horizontal dashed lines for supplemental information.

**SCHEDULE J-2**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Continuation Sheet for Form 990**

▶ Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

OMB No 1545-0047

**2008**

**Open to Public  
Inspection**

Name of the Organization

EARTHSHARE

Employer Identification number

52-1601960

**Part I** Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
ELIZABETH HITCHCOCK CHAIR	1.	X		X				NONE		NONE
KEITH GROTY TREASURER	1.	X		X				NONE		NONE
LYNN WERNER SECRETARY	1.	X		X				NONE		NONE
KATYA ANDRESON DIRECTOR	1.	X						NONE		NONE
PAUL BINGLE DIRECTOR	1.	X						NONE		NONE
LEE BODNER DIRECTOR	1.	X						NONE		NONE
WILLIAM BORDEN DIRECTOR	1.	X						NONE		NONE
MARK CARLSON DIRECTOR	1.	X						NONE		NONE
MARIE CURTIS DIRECTOR	1.	X						NONE		NONE
JAY DEAN DIRECTOR	1.	X						NONE		NONE
JAY FELDMAN DIRECTOR	1.	X						NONE		NONE
MARTHA FIELD DIRECTOR	1.	X						NONE		NONE
DEB FURRY DIRECTOR	1.	X						NONE		NONE
AMY GOLDEN DIRECTOR	1.	X						NONE		NONE
ROBERT HOLLEY DIRECTOR	1.	X						NONE		NONE
MARYLL KLEIBRINK DIRECTOR	1.	X						NONE		NONE
PAUL LAMBERT DIRECTOR	1.	X						NONE		NONE
ANDREA MANION DIRECTOR	1.	X						NONE		NONE
CHARLIE MCCABE DIRECTOR	1.	X						NONE		NONE
SCOTT MCLNTYRE DIRECTOR	1.	X						NONE		NONE
MARY O'CONNOR DIRECTOR	1.	X						NONE		NONE

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

Schedule J-2 (Form 990) 2008

JSA

8E1294 1 000

28979U A10D 01/07/2010 13:41:52

13876

37

► **Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.**

Name of the Organization

Employer Identification number

EARTHSHARE

52-1601960

## Part I Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

[illegible]

**SCHEDULE M**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

Name of the organization

EARTHSHARE

**Non-Cash Contributions**

► To be completed by organizations that answered  
"Yes" on Form 990, Part IV, lines 29 or 30.  
► Attach to Form 990.

OMB No 1545-0047

**2008**

**Open To Public  
Inspection**

Employer identification number

52-1601960

**Part I Types of Property**

	(a) Check if applicable	(b) Number of contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d) Method of determining revenues
1 Art-Works of art . . . . .				
2 Art-Historical treasures . . . . .				
3 Art-Fractional interests . . . . .				
4 Books and publications . . . . .				
5 Clothing and household goods . . . . .				
6 Cars and other vehicles . . . . .				
7 Boats and planes . . . . .				
8 Intellectual property . . . . .				
9 Securities-Publicly traded . . . . .	X		81,500.	FAIR MARKET VALUE
10 Securities-Closely held stock . . . . .				
11 Securities-Partnership, LLC, or trust interests . . . . .				
12 Securities-Miscellaneous . . . . .				
13 Qualified conservation contribution (historic structures) . . . . .				
14 Qualified conservation contribution (other) . . . . .				
15 Real estate-Residential . . . . .				
16 Real estate-Commercial . . . . .				
17 Real estate-Other . . . . .				
18 Collectibles . . . . .				
19 Food inventory . . . . .				
20 Drugs and medical supplies . . . . .				
21 Taxidermy . . . . .				
22 Historical artifacts . . . . .				
23 Scientific specimens . . . . .				
24 Archeological artifacts . . . . .				
25 Other ►( . . . . . )				
26 Other ►( . . . . . )				
27 Other ►( . . . . . )				
28 Other ►( . . . . . )				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement . . . . . **29**

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, line 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? . . . . .		X
b If "Yes," describe the arrangement in Part II		
31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? . . . . .		X
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? . . . . .		X
b If "Yes," describe in Part II		
33 If the organization did not report revenues in column (c) for a type of property for which column (a) is checked, describe in Part II		

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

Schedule M (Form 990) 2008

JSA

8E1298 1 000

28979U A10D 01/07/2010 13:41:52

13876

**Part II** **Supplemental Information.** Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information

[illegible]

**SCHEDULE O  
(Form 990)**

Department of the Treasury  
Internal Revenue Service  
Name of the organization

**Supplemental Information to Form 990**

► 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.

OMB No 1545-0047

**2008**

**Open to Public  
Inspection**

EARTHSHARE

Employer identification number

52-1601960

MEMBERS OF ORGANIZATION

PART VI, SECTION A- LINE 6

EARTHSHARE HAS ORGANIZATIONS THAT ARE BENEFICIARIES OF THE CORPORATION,

WHO ELECT THE BOARD AND HAVE AUTHORITY TO APPROVE ANY SIGNIFICANT

DECISIONS OF THE GOVERNING BODY/BOARD OF DIRECTORS.

Name of the organization

Employer identification number

EARTHSHARE

52-1601960

## MEMBER'S AUTHORITIES

## PART VI, SECTION A- LINE 7A &amp; 7B

EARTHSHARE HAS ORGANIZATIONS THAT ARE BENEFICIARIES OF THE CORPORATION.

THEY ELECT THE GOVERNING BODY/BOARD AND HAVE AUTHORITY TO APPROVE ANY

SIGNIFICANT DECISIONS.



Name of the organization

EARTHSHARE

Employer identification number

52-1601960

REVIEW OF FORM 990

PART VI, SECTION A - LINE 10

THE FORM 990 IS COMPLETED BY AN INDEPENDENT AUDITOR, AND IS REVIEWED BY  
THE SENIOR STAFF, THE CHAIR OF FINANCE COMMITTEE, AND THE EXECUTIVE  
COMMITTEE. IT IS ALSO TRANSMITTED TO THE BOARD OF DIRECTORS, PRIOR TO  
FILING.

Name of the organization

EARTHSHARE

Employer identification number

52-1601960

ENFORCEMENT OF CONFLICT OF INTEREST

PART VI, SECTION B- LINE 12C

BOARD MEMBERS AND STAFF ARE FURNISHED ANNUALLY WITH A CONFLICT OF  
INTEREST QUESTIONNAIRE FOR THE PURPOSES OF IDENTIFYING AND REVIEWING  
TRANSACTIONS OR RELATIONSHIPS THAT HAVE THE POTENTIAL TO LEAD TO A  
CONFLICT OF INTEREST.

Name of the organization

Employer identification number

EARTHSHARE

52-1601960

AVAILABILITY OF STMTS TO THE PUBLIC

PART VI, SECTION C- LINE 19

EARTHSHARE MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY,  
AND FINANCIAL STATEMENTS AVAILABLE UPON REQUEST BY PROVIDING COPIES OR  
INSPECTION AT THE OFFICE.

Name of the organization

EARTHSHARE

Employer identification number

52-1601960

PROCESS FOR DETERMINING COMPENSATIONPART VI, SECTION B - LINE 15A

THE EXECUTIVE COMMITTEE OF THE BOARD OF DIRECTORS DOES AN ANNUAL  
PERFORMANCE REVIEW OF THE PRESIDENT/CEO THAT INCLUDES A CONFIDENTIAL  
PERFORMANCE SURVEY SENT TO ALL DIRECTORS AND A REVIEW OF COMPARABLE  
SALARIES AMONG PEER AND LOCAL ORGANIZATIONS. THE EXECUTIVE COMMITTEE  
MEETS ONCE EACH MONTH AND MINUTES ARE KEPT FOR THOSE MEETINGS. THE  
PRESIDENT/CEO IS AN EX OFFICIO MEMBER OF THE EXECUTIVE COMMITTEE, BUT HE  
IS EXCUSED FOR THE REVIEW AND COMPENSATION DISCUSSIONS. THE FINAL ANNUAL  
COMPENSATION DECISION IS COMMUNICATED IN WRITING FROM THE CHAIR OF THE  
BOARD OF DIRECTORS TO THE PRESIDENT/CEO AND THE CHIEF FINANCIAL OFFICER.

Name of the organization

EARTHSHARE

Employer identification number

52-1601960

PROCESS FOR DETERMINING COMPENSATIONPART VI, SECTION B - LINE 15BTHE PRESIDENT/CEO ESTABLISHES AND REVIEWS THE COMPENSATION OF THE KEYEMPLOYEES OF THE ORGANIZATION BASED UPON JOB DUTIES, PERFORMANCE ANDSALARY SURVEY INFORMATION FROM OTHER COMPARABLE NONPROFIT ORGANIZATIONS.

## FORM 990, PART III, LINE 1 - ORGANIZATION'S MISSION

=====

EARTHSHARE IS A MEMBERSHIP FEDERATION OF LOCAL, NATIONAL, AND INTERNATIONAL ENVIRONMENTAL AND CONSERVATION CHARITIES. ITS MISSION IS TO BUILD AN EXPANDING, SUSTAINABLE FUNDING SOURCE FOR ITS MEMBER GROUPS BY INVOLVING INDIVIDUALS AND EMPLOYERS, PRIMARILY THROUGH WORKPLACE GIVING; AND, THROUGH ITS MEMBER GROUPS, TO PROMOTE AND PROTECT PUBLIC HEALTH AND WELFARE AND CONSERVE NATURAL RESOURCES FOR FUTURE GENERATIONS.

FORM 990, PART VI, LINE 17 - STATES  
=====

AL, AK, AZ, AR, CA, CO, CT,  
FL, GA, IL, KS, KY, ME, MD, MA, MI,  
MN, MS, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA,  
RI, SC, TN, UT, VA, WA, WV, WI,

FORM 990, PART VIII - INVESTMENT INCOME

DESCRIPTION	(A) TOTAL REVENUE	(B) RELATED OR EXEMPT REVENUE	(C) UNRELATED BUSINESS REV.	(D) EXCLUDED REVENUE
				25,730.
TOTALS				25,730.



FORM 990, PART X - PREPAID EXPENSES AND DEFERRED CHARGES  
=====

DESCRIPTION -----	ENDING BOOK VALUE -----
PREPAID EXPENSES	9,046. -----
TOTALS	9,046. =====

## FORM 990, PART X - INVESTMENTS - PUBLICLY TRADED SECURITIES

DESCRIPTION -----	ENDING BOOK VALUE -----
MUTUAL FUNDS-EQUITY SECURITIES	86,039. -----
TOTALS	86,039. =====

Form **4562**Department of the Treasury  
Internal Revenue Service

(99)

**Depreciation and Amortization**  
(Including Information on Listed Property)

OMB No 1545-0172

**2008**Attachment  
Sequence No **67**

▶ See separate instructions.

▶ Attach to your tax return.

Name(s) shown on return

**EARTHSHARE**

Identifying number

**52-1601960**

Business or activity to which this form relates

**GENERAL DEPRECIATION****Part I Election To Expense Certain Property Under Section 179****Note:** If you have any listed property, complete Part V before you complete Part I

1	Maximum amount See the instructions for a higher limit for certain businesses . . . . .	1	
2	Total cost of section 179 property placed in service (see instructions) . . . . .	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions) . . . . .	3	
4	Reduction in limitation Subtract line 3 from line 2. If zero or less, enter -0- . . . . .	4	
5	Dollar limitation for tax year Subtract line 4 from line 1. If zero or less, enter -0- If married filing separately, see instructions . . . . .	5	

(a) Description of property	(b) Cost (business use only)	(c) Elected cost
6		
7	Listed property Enter the amount from line 29 . . . . .	7
8	Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 . . . . .	8
9	Tentative deduction Enter the smaller of line 5 or line 8 . . . . .	9
10	Carryover of disallowed deduction from line 13 of your 2007 Form 4562 . . . . .	10
11	Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see instructions) . . . . .	11
12	Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11 . . . . .	12
13	Carryover of disallowed deduction to 2009 Add lines 9 and 10, less line 12 . . . . . ▶	13

**Note:** Do not use Part II or Part III below for listed property. Instead, use Part V**Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property) (See instructions)**

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions) . . . . .	14	
15	Property subject to section 168(f)(1) election . . . . .	15	
16	Other depreciation (including ACRS) . . . . .	16	

**Part III MACRS Depreciation (Do not include listed property) (See instructions)****Section A**

17	MACRS deductions for assets placed in service in tax years beginning before 2008 . . . . .	17	
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here . . . . . ▶ <input type="checkbox"/>		

**Section B - Assets Placed in Service During 2008 Tax Year Using the General Depreciation System**

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only - see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs		S/L	
h Residential rental property			27.5 yrs	MM	S/L	
i Nonresidential real property			39 yrs	MM	S/L	
				MM	S/L	

**Section C - Assets Placed in Service During 2008 Tax Year Using the Alternative Depreciation System**

20a Class life					S/L	
b 12-year			12 yrs		S/L	
c 40-year			40 yrs	MM	S/L	

**Part IV Summary (See instructions.)**

21	Listed property Enter amount from line 28 . . . . .	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return Partnerships and S corporations - see instr . . . . .	22	
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs . . . . .	23	

**Part V Listed Property** (Include automobiles, certain other vehicles, cellular telephones, certain computers, and property used for entertainment, recreation, or amusement)**Note:** For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only** 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable**Section A - Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles)**

24a Do you have evidence to support the business/investment use claimed?				Yes	<input checked="" type="checkbox"/>	No	24b If "Yes," is the evidence written?				Yes	<input checked="" type="checkbox"/>	No
(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)		(f) Recovery period	(g) Method/Convention	(h) Depreciation deduction	(i) Elected section 179 cost				
25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use (see instructions)									25				
26 Property used more than 50% in a qualified business use													
		%											
		%											
		%											
27 Property used 50% or less in a qualified business use													
		%					S/L -						
		%					S/L -						
		%					S/L -						
28 Add amounts in column (h), lines 25 through 27 Enter here and on line 21, page 1									28				
29 Add amounts in column (i), line 26 Enter here and on line 7, page 1											29		

**Section B - Information on Use of Vehicles**

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person

If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles

	(a) Vehicle 1		(b) Vehicle 2		(c) Vehicle 3		(d) Vehicle 4		(e) Vehicle 5		(f) Vehicle 6	
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
30 Total business/investment miles driven during the year (do not include commuting miles)												
31 Total commuting miles driven during the year												
32 Total other personal (noncommuting) miles driven												
33 Total miles driven during the year Add lines 30 through 32												
34 Was the vehicle available for personal use during off-duty hours?												
35 Was the vehicle used primarily by a more than 5% owner or related person?												
36 Is another vehicle available for personal use?												

**Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees**

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons (see instructions)

	Yes	No
37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?		
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners		
39 Do you treat all use of vehicles by employees as personal use?		
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?		
41 Do you meet the requirements concerning qualified automobile demonstration use? (See instructions)		

**Note:** If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles**Part VI Amortization**

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
42 Amortization of costs that begins during your 2008 tax year (see instructions)					
43 Amortization of costs that began before your 2008 tax year					43
44 Total. Add amounts in column (f) See the instructions for where to report					44

## DEPRECIATION

[illegible]

Asset description	Date placed in service	Cost or basis		Accumulated amortization	Ending accumulated amortization	Code	Life		Current-year amortization
<b>TOTALS</b>									

55

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

OMB No 1545-1709

Department of the Treasury  
Internal Revenue Service► **File a separate application for each return.**

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box ☒ **X**
  - If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form).
- Do not complete Part II unless** you have already been granted an automatic 3-month extension on a previously filed Form 8868

**Part I Automatic 3-Month Extension of Time.** Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only ☐

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

**Electronic Filing (e-file).** Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit [www.irs.gov/efile](http://www.irs.gov/efile) and click on *e-file for Charities & Nonprofits*.

<b>Type or print</b>  File by the due date for filing your return. See instructions.	Name of Exempt Organization	Employer identification number
	EARTH SHARE	52-1601960
	Number, street, and room or suite no. If a P.O. box, see instructions	
	7735 OLD GEORGETOWN ROAD	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions.	
	BETHESDA, MD 20814	

**Check type of return to be filed** (file a separate application for each return).

<input checked="" type="checkbox"/> Form 990	<input type="checkbox"/> Form 990-T (corporation)	<input type="checkbox"/> Form 4720
<input type="checkbox"/> Form 990-BL	<input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust)	<input type="checkbox"/> Form 5227
<input type="checkbox"/> Form 990-EZ	<input type="checkbox"/> Form 990-T (trust other than above)	<input type="checkbox"/> Form 6069
<input type="checkbox"/> Form 990-PF	<input type="checkbox"/> Form 1041-A	<input type="checkbox"/> Form 8870

- The books are in the care of ► STEVEN KRAVITZ

Telephone No. ► 240 333-0300

FAX No. ► \_\_\_\_\_

- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) \_\_\_\_\_. If this is for the whole group, check this box ☐. If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension will cover.

1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until 02/15, 2010, to file the exempt organization return for the organization named above. The extension is for the organization's return for:

- ☐ calendar year \_\_\_\_\_ or  
 ► ☒ tax year beginning 07/01, 2008, and ending 06/30, 2009

2 If this tax year is for less than 12 months, check reason: ☐ Initial return ☐ Final return ☐ Change in accounting period

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	\$
b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$
c <b>Balance Due.</b> Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$

**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.

For Privacy Act and Paperwork Reduction Act Notice, see Instructions.

Form **8868** (Rev. 4-2009)