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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.

Open to Public Inspection

A For the	2009 calendar year, or tax year beginning and ending					
B Check if	Please C Name of organization	D Employer identification number				
applicable	use IRS THE JEREMY AND HANNELORE GRANTHAM					
Addres	s label or the property of the					
Name	The second secon	20-3959397				
chang	Doing Business As					
I return   See   Number and street (or P.U. box it mail is not delivered to street address)   Hoom/suite   E   Telephone number						
ated	Instruct 40 ROWES WHARF	617-330-7500				
Ameno	City or town, state or country, and ZIP + 4	G Gross receipts \$ 24,637,175.				
Applic	L BOSION, MA UZIIU	H(a) Is this a group return				
pendir	F Name and address of principal officer: JEREMY GRANTHAM	for affiliates? Yes X No				
		H(b) Are all affiliates included? Yes No				
I Tay.eye	ompt status: X 501(c) ( 3	If "No," attach a list. (see instructions)				
		· '				
	e: ► N/A organization: Corporation X Trust Association Other ► L Yea	H(c) Group exemption number				
		r of formation: 2007 M State of legal domicile: MA				
Part I	Summary					
ω 1	Briefly describe the organization's mission or most significant activities. ${ t \underline{PROVIDES}}$	GRANTS TO ORGANIZATIONS				
2	ENGAGED IN PROTECTING THE ENVIRONMENT.					
Activities & Governance	Check this box  if the organization discontinued its operations or disposed of mo	re than 25% of its net assets.				
3	Number of voting members of the governing body (Part VI, line 1a)	3 5				
8 4	Number of independent voting members of the governing body (Part VI, line 1b)	. 4 5				
න් -						
ties 5	Total number of employees (Part V, line 2a)					
`≨   <sup>6</sup>	Total number of volunteers (estimate if necessary)	6 0				
	Total gross unrelated business revenue from Part VIII, column (C), line 12	7a 0.				
	Net unrelated business taxable income from Form 990-T, line 34					
		Prior Year Current Year				
<u>6</u> 8	Contributions and grants (Part VIII, line 1h)	18,500,000.				
⊇│ॣ	D					
ē   5 6   10	Investment income (Port VIII column (A) lines 3D Chaffel V C U	<129,912.>				
뿔   10	Cobservations (Part VIII, column (A), lines 5, 4, and 70, 1					
11	Other revenue (Part VIII, column (A), lines \$ 6d, 8c, 9c, 10c, and 11e)	<u>&lt;387,233.</u> >				
	Total revenue - add lines 8 through 11 (must equal Fart VIII, oblumn (A), line 12)	17,982,855.				
	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	1,000,000.				
14	Benefits paid to or for members (Part IX, column (A) line 4)					
ဖ္ထ 15	Salanes, other compensation, employee benefits Part X, column (AY, lines 5-i 0)					
ž   16a	Professional fundraising fees (Part IX, column (A), line 11e)					
ou l	Total fundraising expenses (Part IX, column (D), line 25)					
ผื   🛺 🌷	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	609,331. 780,116.				
I	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	609,331. 1,780,116.				
19  -	Revenue less expenses Subtract line 18 from line 12	<3,617,875.> 16,202,739.				
35	•	Beginning of Current Year End of Year				
20 End Balances 21 22 22 22 22 22 22 22 22 22 22 22 22 2	Total assets (Part X, line 16)	67,653,541. 98,776,672.				
5日 21	Total liabilities (Part X, line 26)					
된 <u>22</u>	Net assets or fund balances. Subtract line 21 from line 20	67,653,541. 98,776,672.				
Part II	Signature Block					
	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements	s, and to the best of my knowledge and belief, it is true, correct,				
	and complete Deciaration of preparer (other than officer) is based on all information of which preparer has any knowledge					
lian	1 Comments of the contract of	11/12/2010				
ign	Signature of officer /	Date /				
lere		Date · {				
	JEREMY GRANTHAM, TRUSTEE					
	Type or print name and title					
aid	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Check If Preparer's identifying number (see instructions)				
	signature Kanada III   2   Ue	elf- mployed  (see instructions)				
reparer's	Firm's name (or RAPHAET, AND RAPHAET, T.T.P	EIN ▶				
lse Only	yours if self-employed). 52 CHURCH STREET	LIN P				
	address and	Dh				
	ZIP+4 BOSTON, MA 02116	Phone no. ► 617-357-0100				
May the If	RS discuss this return with the preparer shown above? (see instructions)	X Yes No				
932001 02-04-10 LHA For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions. Form 990 (2009) (//						
		$\wedge$ $\lambda$				
		$\iota_{\mathcal{V}}$				

	990 (2009)	ENVIRONMENTAL	TRUST	20-39	59397	Page 2
Pa	rt III Statement of	Program Service Acc	omplishments			
1	PROVIDES GRAENVIRONMENT	ANTS TO ORGANIZ	ATIONS ENGAGED IN	N PROTECTING THE		
2	_		ım services during the year which	n were not listed on	Г	<b>□</b>
	the prior Form 990 or 9				Yes	LX No
_		e new services on Schedule C			Yes	<b>₽</b>
3	If "Yes," describe these	e changes on Schedule O.	ificant changes in how it conduct		LIYes	L& No
4				st program services by expenses.		
		-	ction 4947(a)(1) trusts are require e, if any, for each program servic	d to report the amount of grants and e reported.		
	(Codo:	\(\( \text{Expanses}  \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	000 including greats of \$	1,000,000.)(Revenue\$		
4a	•	NVIRONMENTAL OR		QUALIFY AS SECTION	501(C	)3
					<del></del> _	
				<del></del>		
	<del></del>		<del></del>			
			<del> </del>			<del></del>
4b	(Code:	) (Expenses \$	including grants of \$	) (Revenue \$	_	
	<u> </u>					<del></del>
				<del></del>		
	<del></del>		<del>_</del> ·			
					,	
		<del></del>				
4c	(Code:	) (Expenses \$	including grants of \$	) (Revenue \$		)
			<del></del>			
				<del></del>	<del>.</del>	
				· · · · · · · · · · · · · · · · · · ·		
			_ <del></del>			
		<u> </u>				
	011	n (Decembe in Cahadida O.)				
4d		s (Describe in Schedule O.) including grant:	e of \$	evenue \$ )		
40	(Expenses \$  Total program service		000,000.	) )		
_+-	TOTAL PLOGLATIT SCI VICE		<del>/</del>			

i	O 11/	<u> </u>	- ( D	<u> </u>
	Part IV	Cnecklist	or Require	ed Schedules

	·		Yes	No_
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?  If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			_
	public office? If "Yes," complete Schedule C, Part I	3		_ X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4	-	X
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and			
Ū	reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to			
_	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6	<del> </del>	<u>X</u>
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	\ _	}	17
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III			
_		8	<u> </u>	X
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		x
40	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments?	9		
10	If "Yes," complete Schedule D, Part V	10		_X_
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VIII, IX, or X			
	as applicable	11	X	
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,		. "	, 11 1
	Part VI.		) <i>-</i>	\$ \sec.
0	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	*		1,%
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.	144		*****
0	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	\$1600)	:30	4 33.4
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII		1. E. F.	S. Sales Line
0	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	2.00		
0	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	1.80		
0	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	* *5		eris in
	the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.	ſ`.`·`	33,3	130
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		in the said	- T
	Schedule D, Parts XI, XII, and XIII.	12	X	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year?  Yes No			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional X	,	<u></u>	An "xx Siphole
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			,,
	and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
	located outside the United States? If "Yes," complete Schedule F, Part III	16		<u>X</u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		x
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		х
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		X
	TP TO THE TOTAL PROPERTY OF THE TOTAL PROPER		990	2009)
			,	/

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	The discount of frequency		_	
	•		Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		x
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			
_	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		x
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		_X_
24a	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 lines 24b through 24d and complete Schedule K. If "No", go to line 25	04-		v
ь	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24a 24b		X
_	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	270		
•	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
þ	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			37
00	Schedule L, Part I	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		x
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial	_20		
	contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete			
	Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties, (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	-		v
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	28c 29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	_29		
-	contributions? If "Yes," complete Schedule M	30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32	_	<u> </u>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I			v
34	Was the organization related to any tax-exempt or taxable entity?	33		<u> </u>
<b>5</b> 4	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	x	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?			
-	If "Yes," complete Schedule R, Part V, line 2	35		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37_		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	20	😛	
	Note. All Form 990 filers are required to complete Schedule O.	<u>38</u>	990 (	2000)

Form	990 (2009) ENVIRONMENTAL TRUST 20-3959	397	Р	age <b>5</b>
Par				
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of			
	U.S. Information Returns. Enter -0 if not applicable		l	
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	]		
	(gambling) winnings to prize winners?	1c	İ	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return			
ь	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		Х
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Х
b	If "Yes," enter the name of the foreign country:			
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and			
	Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		_ <b>X</b>
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited			
	Tax Shelter Transaction?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	1		
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services		1	
	provided to the payor?	7a	_	X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		X
	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal			
	benefit contract?	7 <u>e</u>		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f_		X
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7 <u>g</u>		X
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		X
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the			
	supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings	١.		
_	at any time during the year?	8_	<b></b> -	<del> </del>
9	Sponsoring organizations maintaining donor advised funds.			
a	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations, Enter:			
a	Initiation fees and capital contributions included on Part VIII, line 12  Gross receipts, included on Form 990, Part VIII, line 12 for public use of club facilities.	1	}	
11	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  [10b]	1		
11	Section 501(c)(12) organizations. Enter:  Gross income from members or shareholders			
a	Gross income from members or shareholders  Gross income from other sources (Do not net amounts due or paid to other sources against	1		
b	amounts due or received from them.)			
120	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	120		<del> </del>
	11 1001 Silver silve difficulties of the opening interest received of accorded during the year.	Form	990	(2009)
				(/

Form 990 (2009) ENVIRONMENTAL TRUST

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

Sec	tion A. Governing Body and Management			
	,		Yes	No
1a	Enter the number of voting members of the governing body			
b	Enter the number of voting members that are independent 1b 5			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
_	officer, director, trustee, or key employee?	2	х	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision	_		
•	of officers, directors or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4	-	X
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		X
6	Does the organization have members or stockholders?	6		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the			
, a	governing body?	7a		X
h	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		$\frac{\mathbf{x}}{\mathbf{x}}$
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year		_	
•	by the following:			
-	The governing body?	8a	х	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
9	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		x
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a	163	X
	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates,	100		
-	and branches to ensure their operations are consistent with those of the organization?	10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11		X
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			_==_
	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a		X
	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise			
-	to conflicts?	12b		
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	-		
	ın Schedule O how this is done	12c		
13	Does the organization have a written whistleblower policy?	13		X
14	Does the organization have a written document retention and destruction policy?	14		<u>x</u>
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		X
b	Other officers or key employees of the organization	15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		<u>X</u>
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ►MA			
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 X 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, are	id fina	ncıal	
	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	ion: 🕨	·	
	JEREMY GRANTHAM - 617-330-7500			
	40 ROWES WHARF, BOSTON, MA 02110			

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Form 990 (2009) Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors** 

# Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed.

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

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

(A) Name and Title	(B) Average			(C Pos	C) ition	,		( <b>D)</b> Reportable	<b>(E)</b> Reportable	(F) Estimated
Name and Title	hours	(cl			I that apply)		ly)	compensation	compensation	amount of
	per week	Individual trustee or director	Institutional trustee	Officer		Highest compensated employee		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
JEREMY GRANTHAM	1 00									•
TRUSTEE	1.00	X				<del> </del>		0.	0.	0.
HANNELORE GRANTHAM TRUSTEE		х						0.	0.	0.
CARTER ROBERTS TRUSTEE		X						0.	0.	0.
BRETT JANKS										-
TRUSTEE		X	<u></u>					0.	0.	0.
WAYNE KLOCKNER										
TRUSTEE		X						0.	0.	0.
		_								
			_							
						_				 
				_		<u>.</u>				
			L							

	( <b>A)</b> Name and title	(B) Average			(C Posi	itıor			( <b>D</b> ) Reportable	<b>(E)</b> Reportable	portable Esti				
		hours per week	Individual trustee or director	Institutional trustee	all t		Highest compensated demployee		compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC		amou oth comper from organiz and re organiz	er sation the ation lated		
											-				
											+	_			
											_				
											+	<u>.                                    </u>			
		_	_								$\frac{1}{1}$				
1h	Total .							_	0.		) ·		0.		
2	Total number of individuals (including but is compensation from the organization	not limited to th	nose	liste	d al	oove	e) wh	10 re	<del></del>				0		
3	Did the organization list any <b>former</b> officer line 1a? If "Yes," complete Schedule J for s		stee	, key	y em	plo	yee,	or h	nighest compensated er	nployee on		Ye	s No X		
4	For any individual listed on line 1a, is the s and related organizations greater than \$15	um of reportab 0,000? <i>If</i> "Yes,	" co	mple	ete S	Sche	edule	J f	for such individual	-		4	x		
5 Sec	Did any person listed on line 1a receive or the organization? If "Yes," complete School tion B. Independent Contractors				rom	any	unr	elat	ed organization for serv	ces rendered to		5	X		
1	Complete this table for your five highest countries the organization.	ompensated inc	depe	ende	nt c	onti	racto	ors t	hat received more than	\$100,000 of comp	nsa	tion from	- I		
	(A) Name and business	address			_			_	(B) Description of s	ervices	Co	(C) mpensa	tion		
						<u>-</u>									
		<del></del>			_										
	Total number of independent contractors (	including but n	ot li	mıte	d to	tho	se le	hats	( ahove) who received a	ore than					
	\$100,000 in compensation from the organi	_					0			io. o man	F	orm <b>99</b> (	(2009)		

Form 990 (2009) ENVIRONMENTAL TRUST 20-3959397 Page 9 Part VIII Statement of Revenue (D) Revenue (A) (B) (C) Total revenue Related or Unrelated excluded from exempt function business tax under sections 512, 513, or 514 revenue revenue Contributions, gifts, grants and other similar amounts 1 a Federated campaigns 1a **b** Membership dues 1b c Fundraising events 1c d Related organizations 1d e Government grants (contributions) 1e f All other contributions, gifts, grants, and 18500000. similar amounts not included above 1f g Noncash contributions included in lines 1a-1f \$ 18500000. h Total. Add lines 1a-1f **Business Code** Program Service Revenue f All other program service revenue g Total. Add lines 2a-2f Investment income (including dividends, interest, and 1,543,043 1543043. other similar amounts) Income from investment of tax-exempt bond proceeds Royalties 5 (ii) Personal (i) Real 6 a Gross Rents b Less. rental expenses c Rental income or (loss) d Net rental income or (loss) (ii) Other 7 a Gross amount from sales of (i) Securities 4981365. assets other than inventory b Less: cost or other basis 6654320 and sales expenses **<**1672955 c Gain or (loss) <1672955.> <1672955.> d Net gain or (loss) 8 a Gross income from fundraising events (not Revenue including \$ contributions reported on line 1c). See Part IV, line 18 Other b Less. direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 а b Less: direct expenses b c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances а b Less: cost of goods sold ... c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 31,342. 11 a SECTION 988 GAIN FROM 31,342. ь INCOME FROM LEGACY VEN 75. c SECTION 988 LOSS FROM <91.> <91. <418,559.b <418,559.> d All other revenue <387,233.b e Total. Add lines 11a-11d  $\triangleright$ 17982855 0. 0.<517,145.> Total revenue. See instructions.

Form 990 (2009)

932009 02-04-10

## ENVIRONMENTAL TRUST 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).								
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraising expenses				
1	Grants and other assistance to governments and								
-	organizations in the U.S. See Part IV, line 21	1,000,000.	1,000,000.						
2	Grants and other assistance to individuals in	<u> </u>	7						
	the U.S. See Part IV, line 22								
3	Grants and other assistance to governments,								
	organizations, and individuals outside the U.S.								
	See Part IV, lines 15 and 16								
4	Benefits paid to or for members								
5	Compensation of current officers, directors,				<del>-</del>				
	trustees, and key employees .								
6	Compensation not included above, to disqualified				<del>_</del>				
	persons (as defined under section 4958(f)(1)) and			1					
	persons described in section 4958(c)(3)(B)								
7	Other salaries and wages								
8	Pension plan contributions (include section 401(k)								
	and section 403(b) employer contributions)								
9	Other employee benefits								
10	Payroli taxes								
11	Fees for services (non-employees).								
a	Management .								
b	Legal								
¢	Accounting .	37,760.		37,760.					
þ	Lobbying								
e	Professional fundraising services. See Part IV, line 17								
f	Investment management fees				- <u></u> -				
g	Other								
12	Advertising and promotion								
13	Office expenses .								
14	Information technology .								
15	Royalties								
16	Occupancy								
17	Travel .								
18	Payments of travel or entertainment expenses	ì							
	for any federal, state, or local public officials								
19	Conferences, conventions, and meetings								
20	Interest	202,947.		202,947.					
21	Payments to affiliates								
22	Depreciation, depletion, and amortization	- <u></u> -							
23	Insurance								
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	DEDUCTIONS RELATED TO P	504,753.		504,753.					
b	TODETON MANUAC	34,341.		34,341.	<del></del>				
c	CONTRACTOR OF THE CONTRACTOR O	284.		284.	<del></del>				
d	CILL DE COMPANDE COM	31.		31.					
e	<u> </u>								
f	All other expenses								
25 25	Total functional expenses. Add lines 1 through 24f	1,780,116.	1,000,000.	780,116.	0.				
<u>25</u> 26	Joint costs. Check here Jif following		_, 555, 555						
	SOP 98-2. Complete this line only if the organization								
	reported in column (B) joint costs from a combined								
	educational campaign and fundraising solicitation								
_	<del></del>								

Pa	rt X	Balance Sheet			
		,	(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing .		1	
	2	Savings and temporary cash investments	2,127,477.	2	<u> 10,045,643.</u>
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	713,466.	4	3,983,248.
	5	Receivables from current and former officers, directors, trustees, key			
		employees, and highest compensated employees. 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	
ets	7	Notes and loans receivable, net		7	185,449.
Assets	8	Inventories for sale or use		_8_	
•	9	Prepaid expenses and deferred charges		9	····
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a	_		
	1	Less: accumulated depreciation 10b		10c	
	11	Investments - publicly traded securities	2,693,905.	11	18,455,975.
	12	Investments - other securities. See Part IV, line 11	62,118,693.	12	66,106,357.
	13	Investments - program-related. See Part IV, line 11		_13	<u> </u>
	14	Intangible assets .		14	
	15	Other assets See Part IV, line 11	60 650 544	15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	67,653,541.	16	98,776,672.
	17	Accounts payable and accrued expenses		_17	
	18   19	Grants payable		18	
	20	Tax-exempt bond liabilities		19	_
"	21	Escrow or custodial account liability. Complete Part IV of Schedule D		20 21	
iţie	22	Payables to current and former officers, directors, trustees, key employees,		21	
Liabilities	-	highest compensated employees, and disqualified persons Complete Part II			
Ë		of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	<del></del> "
	25	Other liabilities. Complete Part X of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	0.		0.
		Organizations that follow SFAS 117, check here   X and complete			
S		lines 27 through 29, and lines 33 and 34.			
ğ	27	Unrestricted net assets	67,653,541.	27	98,776,672.
391	28	Temporarily restricted net assets		28	
Ē	29	Permanently restricted net assets		29	
Ξ		Organizations that do not follow SFAS 117, check here   and			
6		complete lines 30 through 34.			
ets	30	Capital stock or trust principal, or current funds		30	
Ass	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated income, or other funds		_32	
~	33	Total net assets or fund balances	67,653,541.	33	98,776,672.
	34	Total liabilities and net assets/fund balances	67,653,541.	34	98,776,672.

Form **990** (2009)

**b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit

or audits, explain why in Schedule O and describe any steps taken to undergo such audits

Form	990 (2009)	ENVIRONMENTAL TRUST	20-3959397	7 Pa	ge <b>1</b> :
Par	t XI   Financial	Statements and Reporting			
				Yes	No
1	Accounting metho	od used to prepare the Form 990: Cash X Accrual Other			
	If the organization	changed its method of accounting from a prior year or checked "Other," explain in	Schedule O.		
2a	Were the organiza	ation's financial statements compiled or reviewed by an independent accountant?	2a		X
b	Were the organiza	ation's financial statements audited by an independent accountant?	2b	X	
C	If "Yes" to line 2a	or 2b, does the organization have a committee that assumes responsibility for overs	sight of the audit,		
	review, or compila	ation of its financial statements and selection of an independent accountant?	<u>2c</u>		X
	If the organization	changed either its oversight process or selection process during the tax year, expla	aın ın Schedule O		
d	If "Yes" to line 2a	or 2b, check a box below to indicate whether the financial statements for the year v	were issued on a		
	consolidated basis	s, separate basis, or both:			
	X Separate ba	siss Consolidated basis Both consolidated and separate basis			
За	As a result of a fed	deral award, was the organization required to undergo an audit or audits as set forth	h in the Single Audit	1	

Form **990** (2009)

Act and OMB Circular A-133?

#### SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury

Name of the organization

# **Public Charity Status and Public Support**

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

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

THE JEREMY AND HANNELORE GRANTHAM

ENVIRONMENTAL TRUST

2009

Open to Public Inspection

**Employer identification number** 

20-3959397

Part I Reason for Public Charity Status (All organizations must complete this part ) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i), 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, 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) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 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. c Type III - Functionally integrated a X Type I b \_\_\_ Type II \_\_ Type III - Other e X By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III  $\overline{\mathbf{x}}$ supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, Nο X the governing body of the supported organization? 11g(i) X (ii) A family member of a person described in (i) above? 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) Provide the following information about the supported organization(s). h (iii) Type of (iv) Is the organization (v) Did you notify the (vi) is the (i) Name of supported (vii) Amount of (ii) EIN organization in col. (i) organized in the U.S.? organization in col. (i) listed in your organization in col. organization support (described on lines 1-9 (i) of your support? governing document? above or IRC section (see instructions)) Yes Yes Yes No No No WORLD WILDLIFE FOU52-16933877 <u>500,000.</u> THE NATURE CONSERVANCY 53-02426527 X X X 500,000.

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

Schedule A (Form 990 or 990-EZ) 2009

1,000,000.

**Total** 

Schedule A (Form 990 or 990-EZ) 2009 Page 2 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (Complete only if you checked the box on line 5, 7, or 8 of Part 1) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2005 (b) 2006 (c) 2007 (d) 2008(e) 2009 (f) Total 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge 4 Total, Add lines 1 through 3 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11. column (f) 6 Public support. Subtract line 5 from line 4 Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2005 (b) 2006 (c) 2007 (d) 2008 (f) Total (e) 2009 7 Amounts from line 4 8 Gross income from interest, dividends, payments received on secunties loans, rents, royalties and income from similar sources 9 Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV) 11 Total support. Add lines 7 through 10 12 Gross receipts from related activities, etc. (see instructions) 12 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f) 14 15 Public support percentage from 2008 Schedule A, Part II, line 14 15 % 16a 33 1/3% support test - 2009. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test - 2008. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2009. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more. and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization b 10% -facts-and-circumstances test - 2008. 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 stop here. Explain in Part IV how the

organization meets the "facts and circumstances" test. The organization qualifies as a publicly supported organization

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

	on A. Public Support		1		·	<del></del>	
	ar year (or fiscal year beginning in)▶	(a) 2005	(ь) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
	fts, grants, contributions, and						
	embership fees received. (Do not		ļ	,	ļ		
inc	clude any "unusual grants.")						
me for any org	oss receipts from admissions, erchandise sold or services per- med, or facilities furnished in y activity that is related to the ganization's tax-exempt purpose						
	oss receipts from activities that not an unrelated trade or bus-						
ine	ess under section 513						
4 Ta	x revenues levied for the organ-						
	ation's benefit and either paid to expended on its behalf						
5 Th	e value of services or facilities						
	mished by a governmental unit to						
	e organization without charge				İ		
6 To	otal. Add lines 1 through 5						
	nounts included on lines 1, 2, and						
	received from disqualified persons						
fron	ounts included on lines 2 and 3 received in other than disqualified persons that seed the greater of \$5,000 or 1% of the				-		
	ount on line 13 for the year					<del> </del>	
•	id lines 7a and 7b						
	ublic support (Subtract line 7c from line 6) on B. Total Support		<u> </u>	l	<u> </u>		
	lar year (or fiscal year beginning in)	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
	mounts from line 6	(a) 2005	(0) 2000	(6) 2001	(0) 2008	(e) 2009	(I) IOIAI
10a Gr div se	ross income from interest, vidends, payments received on curties loans, rents, royalties id income from similar sources						
<b>b</b> Un	related business taxable income		-				
, -	ss section 511 taxes) from businesses quired after June 30, 1975						
	Id lines 10a and 10b						
11 Ne ac wh	et income from unrelated business tivities not included in line 10b, nether or not the business is gularly carned on						
or	ther income Do not include gain loss from the sale of capital sets (Explain in Part IV)						
	tal support (Add lines 9, 10c, 11, and 12)						
14 Fir	rst five years. If the Form 990 is for	the organization	s first, second, thi	rd, fourth, or fifth t	ax year as a section	on 501(c)(3) organiz	ation,
	eck this box and stop here						▶□
Section	on C. Computation of Publi	c Support Pe	rcentage				
<b>15</b> Pu	ublic support percentage for 2009 (I	ne 8, column (f) c	livided by line 13,	column (f))		15	
<b>16</b> Pu	pblic support percentage from 2008	Schedule A, Part	t III, line 15			16	
Section	on D. Computation of Inves	stment Incom	e Percentage				_
17 Inv	vestment income percentage for 20	<b>09</b> (line 10c, colu	mn (f) divided by li	ne 13, column (f))		17	
	vestment income percentage from 2				••	18	
19a 33	3 1/3% support tests - 2009. If the	organization did	not check the box	on line 14, and line	e 15 is more than	33 1/3%, and line 1	7 is not
mo	ore than 33 1/3%, check this box ai	nd stop here. The	organization qual	fies as a publicly s	supported organiz	ation	▶□
	3 1/3% support tests - 2008. If the		-	= =			and
	e 18 is not more than 33 1/3%, che	-					_
	ivate foundation. If the organizatio		-	=		-	

Schedule A (Form 990 or 990-EZ) 2009

# Schedule D

(Form 990)

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," to Form 990,

Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

Open to Pul

Department of the Treasury Internal Revenue Service

Name of the organization

► Attach to Form 990. ► See separate instructions.

THE JEREMY AND HANNELORE GRANTHAM

Employer identification number

	ENVIRONMENTAL TRUS		20-3959397
Pai	rt I Organizations Maintaining Donor Advise	ed Funds or Other Similar Funds	or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, Im	e 6.	·
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		<del> </del>
	,		
3	Aggregate yello at and af year		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	•	
_	are the organization's property, subject to the organization's		L Yes No
6	Did the organization inform all grantees, donors, and donor a		•
	for chantable purposes and not for the benefit of the donor of	or donor advisor, or for any other purpose o	conferring
_	impermissible private benefit?		Yes No
Pa			art IV, line 7.
1	Purpose(s) of conservation easements held by the organizat	ion (check all that apply).	
	Preservation of land for public use (e.g., recreation or p	oleasure) Preservation of an hist	torically important land area
	Protection of natural habitat	Preservation of a certif	fied historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form o	of a conservation easement on the last
	day of the tax year.		
			Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements	•	2b
С	Number of conservation easements on a certified historic str	ructure included in (a)	2c
d	Number of conservation easements included in (c) acquired	• •	2d
3	Number of conservation easements modified, transferred, re		•
•	year >	reacce, example to the first by the	organization during the tax
4	Number of states where property subject to conservation ea	sement is located	
5	Does the organization have a written policy regarding the pe		
•	violations, and enforcement of the conservation easements i		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,		
7	Amount of expenses incurred in monitoring, inspecting, and		
8	Does each conservation easement reported on line 2(d) above	_	
J	and section 170(h)(4)(B)(ii)?	ve satisfy the requirements of section 1700	Yes No
9	In Part XIV, describe how the organization reports conservat		
3	include, if applicable, the text of the footnote to the organiza		
	conservation easements.	tion's illiancial statements that describes t	ne organization's accounting for
Pai	rt III Organizations Maintaining Collections o	f Art Historical Treasures or Of	ther Similar Assets
	Complete if the organization answered "Yes" to Form		inci olillidi Assots.
	Complete with organization and voted to to to to	000,1 41111, 1110 0.	
10	If the organization elected, as permitted under SFAS 116, no	at to roport in its revenue statement and be	Names alread warder of out break-ward
ıa	treasures, or other similar assets held for public exhibition, e		
			olic service, provide, in Part XIV, the text of
_	the footnote to its financial statements that describes these		
b	If the organization elected, as permitted under SFAS 116, to		
	or other similar assets held for public exhibition, education, o	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 tre		gain, provide
	the following amounts required to be reported under SFAS 1	16 relating to these items:	
а	Revenues included in Form 990, Part VIII, line 1	<del></del> .	• \$
b	Assets included in Form 990, Part X		<b>▶</b> \$

18

		MENTAL TRU		<u> </u>	Otto		<u>95939</u>	
Par	t III Organizations Maintaining C							
3	Using the organization's acquisition, accessi	on, and other record	ls, check any of th	ne following that	are a sign	ificant use of it	s collectio	n items
	(check all that apply):							
а	Public exhibition	d		xchange prograi	ms			
b	Scholarly research	<sub>.</sub> e	· L Other					
С	Preservation for future generations							
4	Provide a description of the organization's co	ollections and explai	n how they furthe	r the organizatio	n's exemp	t purpose in P	art XIV	
5	During the year, did the organization solicit o	r receive donations	of art, historical tr	easures, or othe	r sımılar as	ssets		
	to be sold to raise funds rather than to be ma	aintained as part of t	the organization's	collection?			Yes	No_
Par	t IV Escrow and Custodial Arran	gements. Comple	ete if organization	answered "Yes	" to Form 9	990, Part IV, lin	e 9, or	
	reported an amount on Form 990, Par	rt X, line 21.						
1a	Is the organization an agent, trustee, custod	an or other intermed	diary for contributi	ons or other ass	sets not inc	cluded		
	on Form 990, Part X?						Yes	☐ No
b	If "Yes," explain the arrangement in Part XIV	and complete the fo	ollowing table.					
							Amoun	t
С	Beginning balance .					1c		
d	Additions during the year					1d		
е	Distributions during the year				_	1e		
f	Ending balance				•	1f		
2a	Did the organization include an amount on Fe	orm 990, Part X, line	21?				Yes	No
b	If "Yes," explain the arrangement in Part XIV.							
Par			swered "Yes" to	Form 990, Part I	V, line 10.			
		(a) Current year	(b) Prior year	(c) Two years	s back (d)	Three years bac	k (e) Fou	r years back
1a	Beginning of year balance							
b	Contributions							
c	Net investment earnings, gains, and losses							
d	Grants or scholarships							
e	Other expenditures for facilities							
•	and programs							
f	Administrative expenses							
g	End of year balance							
2	Provide the estimated percentage of the year	r end balance held a			,' <u></u>			
- а	Board designated or quasi-endowment		%					
ь	Permanent endowment ▶	%						
c		<u></u>						
	Are there endowment funds not in the posse	ession of the organiz	ation that are held	d and administer	red for the	organization		
-	by:	<b>3-</b>				ga		Yes No
	(i) unrelated organizations						3a(i)	100 110
	(ii) related organizations		•	•			3a(ii)	
h	If "Yes" to 3a(ii), are the related organizations	s listed as required o	n Schedule R2				3b	
4	Describe in Part XIV the intended uses of the	•		•				
_	rt VI Investments - Land, Building			90, Part X, line 1	0.			
	Description of investment	(a) Cost or o		ost or other		umulated	(d) Boo	k value
		basis (investr	,,	is (other)	• •	ciation	(-,	
1a	Land							
	Buildings							
	Leasehold improvements							
	Equipment							
	Other						_	
	I. Add lines 1a through 1e, (Column (d) must e	equal Form 990, Part	X, column (B), line	e 10(c).)			_	0.

Schedule D (Form 990) 2009

THE JEREMY AND HANNELORE GRANTHAM Schedule D (Form 990) 2009 ENVIRONMENTAL TRUST 20-3959397 Page 3 Part VII Investments - Other Securities. See Form 990, Part X, line 12. (a) Description of security or category (c) Method of valuation: (b) Book value (including name of security) Cost or end-of-year market value Financial derivatives Closely-held equity interests Other 5,494,692. HIGHFIELDS CAPITAL IV LP END-OF-YEAR MARKET VALUE LIBERTY SQUARE STRATEGIC 1,754,149. END-OF-YEAR MARKET VALUE ABRAMS CAPITAL 6,178,033. END-OF-YEAR MARKET VALUE KING STREET CAPITAL <u>12,115,631</u> END-OF-YEAR MARKET VALUE 17,400,041. ELLIOTT INTERNATIONAL LTD END-OF-YEAR MARKET VALUE 82,600. COPPER RIVER PARTNERS LP END-OF-YEAR MARKET VALUE CHALKSTREAM INVESTMENT FUND 10,487,053. END-OF-YEAR MARKET VALUE NYES LEDGE CAPITAL PARTNERS 1,086,043. END-OF-YEAR MARKET VALUE 66,106,357. Total. (Col (b) must equal Form 990, Part X, col (B) line 12.) Part VIII Investments - Program Related. See Form 990, Part X, line 13 (c) Method of valuation: (a) Description of investment type (b) Book value Cost or end-of-year market value Total. (Coi (b) must 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

Γotal. ( <u>C</u> ol	umn (b) must equal Form 990, Part X, col (B) line 15.)	
Part X	Other Liabilities. See Form 990, Part X, line 25.	
1	(a) Description of liability	(b) Amount
ederal inc	ome taxes	

Total. (Column (b) must equal Form 990, Part X, col (B) line 25.)

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

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$\overline{}$	dule D (Form 990) 2009 ENVIRONMENTAL TRUST			20-	3959397 Page <b>4</b>
Par	t XI Reconciliation of Change in Net Assets from Form 990	to Audited Fina	ancial State	ment	'S
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1	_	17,982,855.
2	Total expenses (Form 990, Part IX, column (A), line 25)		2		1,780,116.
3	Excess or (deficit) for the year Subtract line 2 from line 1		3		16,202,739.
4	Net unrealized gains (losses) on investments		4		14,920,395.
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 through 8		9	-	14,920,395.
_10	Excess or (deficit) for the year per audited financial statements. Combine lines 3	and 9	10		31,123,134.
Par	t XII Reconciliation of Revenue per Audited Financial Stater	nents With Rev	enue per R	eturn	1
1	Total revenue, gains, and other support per audited financial statements			1	32,184,693.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains on investments	2a 14,9	20,395.		
b	Donated services and use of facilities	2b			
С	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIV)	2d			
е	Add lines 2a through 2d			2e	14,920,395.
3	Subtract line 2e from line 1	•		3	17,264,298.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	<u> 18,558.</u>		
b	Other (Describe in Part XIV.)	4b			
С	Add lines 4a and 4b		ı	4c	718,558.
_5_	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	17,982,856.
Pai	t XIII Reconciliation of Expenses per Audited Financial State	ments With Ex	penses per	Retu	
1	Total expenses and losses per audited financial statements			1	1,061,558.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		:		
а	Donated services and use of facilities	2a			
b	Prior year adjustments .	2b			
C	Other losses .	2c_			
d	Other (Describe in Part XIV.)	2d			
е	Add lines 2a through 2d	•		2e	0.
3	Subtract line 2e from line 1			3	1,061,558.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1.	1 1 -			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	18,558.	1	
b	Other (Describe in Part XIV.)	4b		i	
С	Add lines 4a and 4b		Ì	4c	718,558.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	<del></del>		5	1,780,116.
	t XIV Supplemental Information				
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Pa				
X, lın	e 2; Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also co	mplete this part to	provide any add	ditional	information.

ENVIRONMENTAL TRUST 20-3959397 Page 5

Schedule D (Form 990) 2009 Part XIV Supplemental Information (continued)

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
RENAISSANCE INT'L EQUITY FUND LP	2,902,863.	FMV
VISION OPPORTUNITY CAPITAL PARTNERS	7,548,487.	FMV
LEGACY VENTRUES IV, LLC	923,751.	FMV
MORGAN STANLEY REAL ESTATE FUND	133,014.	FMV
932421		Schedule D (Form 990) 2000

#### **SCHEDULE O**

(Form 990)

**Supplemental Information to Form 990** 

on 2

Open to Public Inspection

Department of the Treasury

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

Attach to Form 990.

Internal Revenue Service THE JEREMY AND HANNELORE GRANTHAM Name of the organization Employer identification number ENVIRONMENTAL TRUST 20-3959397 FORM 990, PART VI, SECTION A, LINE 2: TWO TRUSTEES, R. JEREMY GRANTHAM AND HANNELORE GRANTHAM ARE MARRIED. FORM 990, PART VI, SECTION B, LINE 11: TRUSTEE JEREMY GRANTHAM RECEIVES THE 990, HE REVIEWS THE INFORMATION. FORM 990, PART VI, SECTION C, LINE 19: UPON REQUEST FORM 990, PART VI LINE 2

2009 Open to Public Inspection **Employer identification number** OMB No 1545-0047 Direct controlling Direct controlling 20-3959397 Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.) End-of-year assets status (if section Public charity 501(c)(3)) ▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37. Total income Exempt Code section ▶ See separate instructions. Related Organizations and Unrelated Partnerships Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.) Legal domicile (state or Legal domicile (state or foreign country) foreign country) THE JEREMY AND HANNELORE GRANTHAM ▶ Attach to Form 990. Primary activity Primary activity ENVIRONMENTAL TRUST Name, address, and EIN Name, address, and EIN of related organization of disregarded entity (a Name of the organization Department of the Treasury Internal Revenue Service SCHEDULE R (Form 990) Part II Part

24

Schedule R (Form 990) 2009

ENVIRONMENTAL TRUST Schedule R (Form 990) 2009 Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.) Part III

Page 2

20-3959397

managing partner? General or Yes S Code V-UBI amount in box n 20 of Schedule L K-1 (Form 1065) y Ξ ate allocations? Disproportion-Yes No Ξ Share of end-of-year assets <u>(6</u> Share of total income ε Predominant income (related, unrelated, excluded from tax under sections 512-514) e Direct controlling entity ਉ Legal domicile (state or foreign country) <u>©</u> Primary activity 9 Name, address, and EIN of related organization Œ Part IV

Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

טישמיוובמייסיום ויסמיסט מס מיסי שליה אין אין אין אין אין אין אין אין אין אין							
(a)	<b>(</b>	<u></u>	9	(e)	€		ε
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign country)	Direct controlling Type of entity (C corp., S corp., or trust)	Type of entity (C corp, S corp, or trust)	Share of total income	Share of end-of-year assets	Percentage ownership
							_
	L	L					

Schedule R (Form 990) 2009

# THE JEREMY AND HANNELORE GRANTHAM ENVIRONMENTAL TRUST

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20-3959397

Schedule R (Form 990) 2009

Part V Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, or 36.)

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.			Yes No	_
1 Dunng the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?				
a Receipt of (i) interest (ii) annurties (iii) royalties or (iv) rent from a controlled entity		1a	X	
<b>b</b> Gift, grant, or capital contribution to other organization(s)		t dt	X	
c Gift, grant, or capital contribution from other organization(s)		5	×	١
d Loans or loan guarantees to or for other organization(s)		2	×	Ι.
e Loans or loan guarantees by other organization(s)	•	- <u>-</u>	×	1
	: :			1
f Sale of assets to other organization(s)		#	×	١
g Purchase of assets from other organization(s)		10	×	١.
h Exchange of assets		ŧ	×	1
i Lease of facilities, equipment, or other assets to other organization(s)	•	<b>;=</b>	×	ΙI
				- 1
Lease of facilities, equipment, or other assets from other organization(		1	×	
k Performance of services or membership or fundraising solicitations for other organization(s)		¥	×	
l Performance of services or membership or fundraising solicitations by other organization(s)		=	×	
	:	£	×	
n Sharing of paid employees	:	£	×	ŀ
Demphireamont said to other examination for example.				
	!	9	×	
p neimodisement paid by onlei olganization for expenses	•	<u>라</u>	×	-
o Other transfer of cash or property to other organization(s)		-	<b>&gt;</b>	ı
		<u>.</u>	4 :	1
2 If the answer to any of the above is "Yes" see the instructions for information on who miret complete this line included and contracting the above is "Yes" see the instructions for information on who miret complete this line included and an additional transfer and transfer at the contraction of the above is "Yes" see the instructions for information on who miret complete this line included and an additional transfer at the contraction of the above is "Yes" see the instructions for information on who miret complete this line included and additional transfer at the contraction of the above is "Yes" see the instructions for information on who miret complete this line included and additional transfer at the contraction of the c	· · · · · · · · · · · · · · · · · · ·	14	*	1
	insaction thresholds.			Ī
(a) Name of other organization(s)	(b) Transaction	(c) Amount involved	penlo	
	type (a-t)			- 1
(1) WORLD WILDLIFE FOUNDATION	В	500	500,000.	•
(2) THE NATURE CONSERVANCY	ρ	טסג	טטט טטב	
				•1
(3)				- 1
(4)				1
(5)				
(9)				1
832163 02-04-10	Scho	tulo D (Eorm)		1 0

20-3959397

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THE JEREMY AND HANNELORE GRANTHAM ENVIRONMENTAL TRUST

Schedule R (Form 990) 2009

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

Name, address, and EIN of entrty						9	<b>E</b>
	Primary activity	Legal domicile (state or foreign	Are all partners section 501(c)(3)	Share of end-of- year assets	Dispropor- tionate	Code V-UBI amount in box 20	ÖË
			Yes No		Yes No	of Schedule K-1 (Form 1065)	1 -
:							
			_				_
							_
				i			
		-					
							_
							!
					<del>-</del>		_

Schedule R (Form 990) 2009

Form **8868** 

(Rev April 2009)

Department of the Treasury Internal Revenue Service

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

File a separate application for each return.

OMB No. 1545-1709

• If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box	
1 f you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (o	
- not complete Part II unless you have already been granted an automatic 3-month extension o	n 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 the	nis box and complete
Part I only	▶ □
All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 70 to file income tax returns.	04 to request an extension of time
Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month aur noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a conjugate you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on www.irs.gov/efile and click on e-file for Chanties & Nonprofits.	n 8868 electronically if (1) you want the additional composite or consolidated Form 990-T. Instead,
Type or Name of Exempt Organization	Employer identification number
print THE JEREMY AND HANNELORE GRANTHAM	
File by the ENVIRONMENTAL TRUST	20-3959397
due date for filing your 40 ROWES WHARF	
return See instructions	
BOSTON, MA 02110	
Check type of return to be filed (file a separate application for each return)	
X Form 990 Form 990-T (corporation)	Form 4720
Form 990-BL Form 990-T (sec. 401(a) or 408(a) trust)	Form 5227
Form 990-EZ Form 990-T (trust other than above)	Form 6069
Form 990-PF Form 1041-A	Form 8870
JEREMY GRANTHAM	
The books are in the care of AO ROWES WHARF - BOSTON, MA 021	10
Telephone No. ► 617 – 330 – 7500 FAX No. ►	
<ul> <li>If the organization does not have an office or place of business in the United States, check this</li> <li>If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)</li> </ul>	
box . If it is for part of the group, check this box . and attach a list with the names	
box   and attach a list with the harnes	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) exter	sion of time until
AUGUST 15, 2010 , to file the exempt organization return for the organ	zation named above. The extension
is for the organization's return for:	
►X calendar year 2009 or	
tax year beginning, and ending	·
2 If this tax year is for less than 12 months, check reason: Initial return	nal 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, le	ss 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 Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if require	·
deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment Sy. See instructions.	stem).
Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 845	
LHA For Privacy Act and Paperwork Reduction Act Notice, see Instructions.	Form 8868 (Rev. 4-2009)
LIN I OF FITACY ACTAIN CAPELWORK REGULERING ACTIVOLICE, SEE INSTRUCTIONS.	Fulli 8868 (Nev. 4-2009)

Form 8868 (Rev. 4-2009)	Page 2
<ul> <li>If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this be Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed</li> <li>If you are filing for an Automatic 3-Month Extension, complete only Part I (on page 1)</li> </ul>	Form 8868.
art II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no continuous)	opies needed).
Type or print Print Page 1 Page 1 Page 2 Pag	Employer identification number 20-3959397
File by the extended due date for filing the Number, street, and room or suite no If a P.O. box, see instructions.	For IRS use only
return See Instructions BOSTON, MA 02110	
Check type of return to be filed (File a separate application for each return):  X Form 990 Form 990-EZ Form 990-T (sec. 401(a) or 408(a) trust) Form 990-BL Form 990-PF Form 990-T (trust other than above) Form 4720	Form 5227 Form 8870
STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previou	sly filed Form 8868.
JEREMY GRANTHAM  • The books are in the care of ▶ 40 ROWES WHARF - BOSTON, MA 02110  Telephone No. ▶ 617-330-7500 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)	members the extension is for.  Change in accounting period
<ul> <li>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</li> <li>If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated.</li> </ul>	8a \$
tax payments made Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868	8b \$
c Balance Due. Subtract line 8b from line 8a 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	8c \$ N/A
Signature and Verification  Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the it is true, correct, and complete, and that I am authorized to prepare this form.	e best of my knowledge and belief,
Signature ► CPA	Date S//// U Form 8268 (Rev. 4-2009)