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Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service

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benefit trust or private foundation)

▶ The organization may have to use a copy of this return to satisfy state reporting requirements Inspection July 1 For the 2009 calendar year, or tax year beginning 2009, and ending C Name of organization Pesticide Action Network North America Regional C D Employer identification number Please B Check if applicable use IRS Doing Business As Pesticide Action Network North America 2949686 ☐ Address change label or Number and street (or PO box if mail is not delivered to street address) Telephone number print or Name change type. 500 49 Powell Street (415)981-1771 See Initial return Specific City or town, state or country, and ZIP + 4 ☐ Terminated San Francisco CA 94102 2.267.446 G Gross receipts \$ Amended return F Name and address of principal officer ✓ No Application pending H(a) Is this a group return for affiliates? Yes Kathryn Gilje (same as C above) H(b) Are all affiliates included? ☐Yes ☐ No 4947(a)(1) or √ 501(c) (3)

√ (insert no) If "No," attach a list (see instructions) Website: ▶ www.panna.org H(c) Group exemption number ▶ Form of organization 🗹 Corporation 🗹 Trust 🔲 Association 🔲 Other 🕨 L Year of formation M State of legal domicile CA Summary Briefly describe the organization's mission or most significant activities. In 2009-10 we made significant progress toward replacing pesticides with ecologically sound, socially just alternatives. We worked with U.S. communities to reduce exposure to pesticides in the air and water; helped win a U.S. phaseout of the persistent neurotoxin endosulfan; and advanced this bioaccumulating pesticide for global elimination under the Stockholm Convention. Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets 12 3 Number of voting members of the governing body (Part VI, line 1a). 12 4 Number of independent voting members of the governing body (Part VI, line 1b) 5 28 Total number of employees (Part V, line 2a) 27 6 Total number of volunteers (estimate if necessary) 0 7a 7a Total gross unrelated business revenue from Part VIII, column (C) 0 **Current Year** Contributions and grants (Part VIII, line 1h) 1,914,224 2,235,610 NOV 1 8 2010 31,867 29,097 Program service revenue (Part VIII, line 2g) (2,642)2,738 Investment income (Part VIII, column (A), lines 0 Other revenue (Part VIII, column (A), lines 5, 6d, (C) (C) (A) and (1e) Total revenue - add lines 8 through 11 (must equal Part VIII, column (A) 1.943,449 2,267,445 0 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0 Benefits paid to or for members (Part IX, column (A), line 4) . 1.570.483 1,342,796 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11e) **b** Total fundraising expenses (Part IX, column (D), line 25) ▶ 742,965 642,290 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f). 2,313,448 1,985,086 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25). (369,999)282,359 19 Revenue less expenses. Subtract line 18 from line 12 **Beginning of Current Year End of Year**

호텔 20	Total assets (Part X, line 16)	1,	295,895	1,5/2,110
Se Ba	Total liabilities (Part X, line 26)		184,512	178,368
Net Asset Fund Balar 22 22 23 24 25	Net assets or fund balances Subtract line 21 from line 20	1,	,111,383	1,393,742
Part II	Signature Block		-	
Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedard belief, it is true, correct, and complete Declaration of preparer (other trian officer) is based or Signature of officer Signature of officer Type or print name and title	ging Dire	of which preparer I	nas any knowledge 2010
Paid Preparer's	Preparer's signature signature	theck if elf- mployed ▶ □	Preparer's identifyin (see instructions)	g number
Use Only	Firm's name (or yours	EIN	•	
USE OIIIY	if self-employed), address, and ZIP + 4	Phone no	o ► ()	
May the	IRS discuss this return with the preparer shown above? (see instructions)		[Yes 🗌 No

1,295,895

1,572,110

Par	Statement of Program Service Accomplishments
1	Briefly describe the organization's mission: PAN North America works to replace hazardous pesticides with ecologically sound, socially just alternatives. As one of five PAN Regional Centers worldwide, we link local and international consumer, labor, health, environment and agriculture groups into a citizens' network that challenges the global proliferation of pesticides, defends basic rights to health and environmental quality, and works to ensure the transition to a just and viable society.
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
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 \$ 699,828 including grants of \$ 0) (Revenue \$ 993,508) Campaigns: Pesticide Action Network (PAN) North America builds network power through strategic alliances with other public interest organizations. As the Regional Center of an international network, we facilitate collaboration among more than 150 organizations in North America, linked to some 600 groups in more than 90 countries worldwide. Together, we mount effective joint campaigns achieving bans and restrictions on high-hazard pesticides and promoting sustainable solutions (particularly ecological agriculture, food security, food sovereignty, fair trade, worker protection and social justice). For example, by working through the Stockholm Convention on Persistent Organic Pollutants, we're moving endosulfan, a neurotoxic pesticide, toward global phaseout, and helped get a U.S. phaseout in June 2010. We convened strategy meetings and developed joint policy positions promoting agroecological farming in North America and globally; and we provided technical support and organized campaigns with partner NGOs in Africa, Asia and across the U.S., reducing exposure to hazardous pesticide drift and increasing food security.
4b	(Code:) (Expenses \$ 554,233 including grants of \$ 0) (Revenue \$ 615,186) Coalitions: At times our campaigns with network partners lead to creation of formal coalitions for which the Organization serves as facilitator, administrator and/or fiscal sponsor, making the coalition technically a project of the Organization. The most significant coalitions sponsored by PAN:North America in 2009-2010 were Californians for Pesticide Reform (185 groups across the state, among which the organization is one of the leading members carrying out the policy advocacy work of the coalition); and the International Campaign for Justice in Bhopal (for which PAN hosted operations of the U.S. Coordinator).
4c	(Code:) (Expenses \$ 213,505 including grants of \$ 0) (Revenue \$ 102,127) Grassroots Science: The Organization provides environmental monitoring services to communities, including air monitoring equipment (PAN's "Drift Catcher") supported by training, funding, operation of an air sample analysis laboratory and interpretation of results, empowering grassroots groups to advocate for protection from pesticide exposure. We provided research and analysis on pesticide issues to allied groups, especially public exposure to pesticide hazards; and we engage with regulatory bodies on technical matters and provide scientific critiques for regulatory policy-making at state, national and international levels. The Organization maintains a web-based database of pesticide information (www.pesticideinfo.org—toxicity, regulatory status, poisoning symptoms, etc.). In 2009-10 we also developed www.WhatsOnMyFood.org, with information on pesticide residues, their relative hazards, and what people can do to reduce food borne pesticides.
4d	Other program services. (Describe in Schedule O.) (Expenses \$ 236,089 including grants of \$ 0) (Revenue \$ 35,250) Total program service expenses \$ 1,703,655
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Par	t IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1_	/	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	~	ļ <u>-</u>
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		V
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4	V	
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	_6		V
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		V
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III.	8		V
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	V	
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10_		~
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable	11	~	
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.			
•	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII			
	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.			
•	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.			
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X. Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII.	12	~	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		~
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		~
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	~	
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		~
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		~
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		~
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		v
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		1
20	If "Yes," complete Schedule G, Part III	20		V

Pai	t IV Checklist of Required Schedules (continued)	,		
			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		~
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		~
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		V
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	24a		V
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	<u> </u>	
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	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		~
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		,
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		v
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III.	27		v
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		\(\triangle \)
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	28c		v
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		~
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30_		~
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		~
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		~
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? <i>If</i> "Yes," <i>complete Schedule R, Part I</i>	33		~
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		~
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		~
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_		~
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,			
38	Part VI	37		~
	19? Note. All Form 990 filers are required to complete Schedule O	38	~	

Par	Statements Regarding Other IRS Fillings and Tax Compliance			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	_ 1c		
	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 If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	V	
-	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)			
3а	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		V
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		v
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.	_		.,
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	<u>5a</u> 5b		<i>V</i>
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	30		<u> </u>
	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?	- Va		
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	~	
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	- <u>-</u>	~	•
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	~	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		,
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		~
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		~
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g	-	
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
^	Sponsoring organizations maintaining donor advised funds.			-
9 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.			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members of shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
12a	amounts due or received from them.)	12a		-

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			
	المراز		Yes	No
1a	Enter the number of voting members of the governing body			
b	Enter the number of voting members that are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
	any other officer, director, trustee, or key employee?	2		>
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		~
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		~
		5		~
5	Did the organization become aware during the year of a material diversion of the organization's assets?	6		V.
6	Does the organization have members or stockholders?			<u> </u>
7a	Does the organization have members, stockholders, or other persons who may elect one or more members	7-		/
	of the governing body?	7a		~
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:			
а	The governing body?	8a	~	
	Each committee with authority to act on behalf of the governing body?	8b	~	
9	Is there any officer, director, 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	9a		~
Sec	tion B. Policies (This Section B requests information about policies not required by the Inter-			
	enue Code.)			
	ondo occory		Yes	No
		100	163	V
	Does the organization have local chapters, branches, or affiliates?	10a		
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with those of the organization?	10b	_	
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the			
	form?	11	~	
11A	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	~	
	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,"	12c	1	
40	describe in Schedule O how this is done	13	~	
13	Does the organization have a written whistleblower policy?		~	
14	Does the organization have a written document retention and destruction policy?	14		
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	~	
b	Other officers or key employees of the organization	15b	~	
	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		V
l.				
D	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?	4Ch		
800		16b	L	L
	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶ see list in Schedule O			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(cr	s(8)(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 inte	erest	
-	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 reco	rde a	f tha	
	organization: ► Steve Scholl-Buckwald, PAN, 49 Powell St, #500, San Francisco CA 94102, 415-981-1771	ius U	ıııe	
	organization.			

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the 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.

Check this box if the organization did not		any o	curre			cer, d	lirec			
(A)	(B)			•	C)			(D)	(E)	(F)
Name and Title	Average hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
Amy Shannon						ä	-			·
President	2	1			İ		İ	o	0	0
Judy Hatcher										
Vice-President	2	V						o	0	0
Polly Hoppin										
Secretary	2	V						0	0	0
Shawna Larson-Carmen										
Treasurer	2	V				}		0	o	0
Martha Guzman										
Director	2	1						O	o	0
Jonathan Harrison										
Director	2	V				1		0	0	0
Ellen Kennedy										
Director	2	1			i			0	0	0
Nikiko Masumoto									-	
Director	2	V						0	0	_ 0
Ana Duncan Pardo										
Director	2	1						0	0	0
Michael Picker										
Director	2	1						0	0	0
Ted Schettler										
Director	2	1				<u> </u>		0	0	0
Jennifer Sokolove										-
Director	2	V						0	0	0
Kathryn Gilje										
Executive Director	36			~				56,131	0	5,166
Steve Scholl-Buckwald]		
Managing Director	40			1			L	77,922	0	25,914
Heather Pilatic										
Communications Director	40	ļ		~			<u> </u>	49,224	0	6,466

Par	t VII Section A. Officers, Directors, Tru	stees, Key	Emp	loye	ees,	an	d Hig	hest	Compensated	d Employees (c	
	(A)	(B)			(0				(D) Reportable	(E)	(F)
	Name and title			compensation compensa from from rela the organization (W-2/1099-i	Reportable compensation from related organizations (W-2/1099-MISC)	' 1					
			trustee	nal trustee		oyee	ompensated		(W-2/1099-MISC)		organization and related organizations
					ļ <u></u>						
						\vdash					
						_					
1h	Total			<u> </u>	<u></u>	<u>L</u> .	l	┢	183,277		0 37,54
2	Total		to th	ose	list	ed :	above				
	reportable compensation from the organization	ation ►0									
											Yes No
3	Did the organization list any former office employee on line 1a? <i>If "Yes," complete S</i>							oye 	e, or highest o		3
4	For any individual listed on line 1a, is the state organization and related organizations individual.										4
5	Did any person listed on line 1a receive services rendered to the organization? If "	or accrue Yes," com	com plete	pen <i>Sch</i>	satı nedu	on ile s	from I for s	any such	unrelated org	anization for	5
Se	ction B. Independent Contractors							<u>. </u>			
1	Complete this table for your five highest compensation from the organization.	ompensate	ed ind	ере	ende	ent (contra	acto	rs that receive	d more than \$	100,000 of
	(A) Name and business add	dress							(B) Description of s	services	(C) Compensation
non	e										
		·						-			
	· · · · · · · · · · · · · · · · · · ·		_								
2	Total number of independent contractors (imore than \$100,000 in compensation from					l to	those	e list	ed above) who	received	

Part	: VIII	Statement of Re	venue						
						(A) Total revenue	(B) Related or exempt function	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
<u>8</u> 8				1a	20,849		revenue		512, 513, or 514
ra T	i	Federated campaigns		1b	0	1			
g E		Membership dues		1c	0				
ifts ir a		•		1d	0				
nig.		Related organizations		1e	19,078				
sir	_	Government grants (contri		16	10,070				
돌	T	All other contributions, gifts, g		1f	2,195,683		,		
i t	_	and similar amounts not inclu			17,485				:
Contributions, gifts, grants and other similar amounts	_	Noncash contributions include Total. Add lines 1a–1f	eu iii iines ia-			2,235,610			
-	•	Totali Add IIII Co Ta Ti		• •	Business Code	_,,			
June	_	Organization Member	ships		900099	75	75	0	0
Seve	2a	Magazine Subscriptio			511120	250	250	0	0
Se F	b	Program Service Fees		· · · · ·	541700	15,398	15,398	0	0
ž	С.	Program Expense Rei			900099	13,374	13,374	0	0
Š	a					,	10,0.		
ıran	e	All other program servi				0	0	0	0
Program Service Revenue		Total. Add lines 2a–2f			>	29,097			
	9	······································							
	3	Investment income (inc	_			2,738	0	0	2,738
		other similar amounts) Income from investment of			, , , , P	0	0	0	
	4 5		or tax-exem		·	0	0	0	_
	٦	rioyanies	(i) Real	· · ·	(II) Personal				
	6-	Cross Dants	· · · · · · · · · · · · · · · · · · ·	0	0				
		Gross Rents		0	0				
		Less. rental expenses Rental income or (loss)		0	0				
		Net rental income or (kg	268)		•	0	0		· · · O
		•	(i) Securiti		(II) Other				
	7a	Gross amount from sales of assets other than inventory	(,, 55551.1.	0					
	١.								
	D	Less. cost or other basis		0	o				:
	_	and sales expenses .		0	0				
		Gain or (loss) Net gain or (loss) .			•	0	0	0	0
4	į .	- ·							
nue	8a	Gross income from	fundraisi	ng O					
, Ke		events (not including \$ of contributions reported		 a)		,		•	
Other Reveni		See Part IV, line 18			o				
ē	۱ ۲	Less direct expenses		_	0				
₹	C	Net income or (loss) from	om fundrai		vents	0	0	0	o o
_				-					
	ya.	Gross income from gam See Part IV, line 19			o				
	h	Less: direct expenses,			0				
		Net income or (loss) from				0	0	0	0
		• •			<u> </u>				
	IVa	Gross sales of inverteurns and allowances	•		o				
	h	Less, cost of goods so			0				
		Net income or (loss) from				0	0		· · · · · o
	-	Miscellaneous Rev			Business Code				
	11a								
	' ld								
	"								
	یہ ا	All other revenue							_
		Total. Add lines 11a-1				0	-		
		Total revenue. See ins				2,267,445	29,097	0	2,738

Part IX Statement of Functional Expenses

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

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

	All other organizations must 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	(D) Fundraising expenses			
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	0	0					
2	Grants and other assistance to individuals in the U.S See Part IV, line 22	0	0					
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	0	0					
4	Benefits paid to or for members	0	0					
5	Compensation of current officers, directors, trustees, and key employees	249,313	218,554	20,738	10,021			
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and	0	0	0	0			
	persons described in section 4958(c)(3)(B)	834,764	731,682	18,101	84,891			
7	Other salaries and wages	004,704	701,002					
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	59,547 121,301	53,785 106,588	1,691 3,820	4,071 10,893			
9	Other employee benefits	77,871	68,418	2,539	6,914			
10	Payroll taxes	- 77,011						
11	Fees for services (non-employees):	o	o	o	0			
	Management	4,584	4,440	40	104			
	Legal	15,395	13,491	490	1,414			
		0	0	0	0			
	Professional fundraising services See Part IV, line 17	0			0			
f	_	0	0	0	0			
g		56,288	50,832	456	5,000			
12	Advertising and promotion	630	630	0	0			
13	Office expenses	102,447	55,408	2,136	44,903			
14	Information technology	47,888	41,236	781	5,871			
15	Royalties	0	0	0	0			
16	Occupancy	126,505	112,519	3,834	10,152			
17	Travel	49,624	42,811	4	6,809			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0	0	0	0			
19	Conferences, conventions, and meetings .	34,625	26,026	8,560	39			
20	Interest , ,	0	0	0	0			
21	Payments to affiliates	25,462	23,573		0			
22	Depreciation, depletion, and amortization.	8,760	7,677	487 277	1,402 806			
23	Insurance	8,700	7,077	211				
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)							
а	Volunteers	8,287	7,528	0	759			
a b	Fauinment & Jah sunnlies	13,319	13,281	10	28			
C	Donor acquisition	23,300	0	0	23,300			
d	Joint projects	125,176	125,176	0	0			
e								
′ f	All other expenses							
25	Total functional expenses. Add lines 1 through 24f	1,985,086	1,703,655	63,964	217,467			
26	Joint costs. Check here ► ✓ if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and							
	fundraising solicitation	20,349	19,331	0	1,017			

Pa	ŕt X	Balance Sheet			
	_		(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing	30,876	1	15,307
	2	Savings and temporary cash investments	420,715	2_	593,784
	3	Pledges and grants receivable, net	735,668	3	813,676
	4	Accounts receivable, net	36,057	4	66,326
	5	Receivables from current and former officers, directors, trustees, key			
	•	employees, and highest compensated employees. Complete Part II of			
		Schedule L ,	0	5	0
	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	0		0
Assets	7	Notes and loans receivable, net	6,589	7	<u></u>
lss	8	Inventories for sale or use			13,893
7	9	Prepaid expenses and deferred charges	44,165	9	37,125
	10a	Zaria, Dananigo, and Odarpinoria osot or			
		other basis. Complete Part VI of Schedule D	21,825		31,999
	b	Less accumulated depreciation	21,025		0
	11	Investments—publicly traded securities	0	• • •	0
	12	Investments—other securities See Part IV, line 11	=	13	0
	13	Investments—program-related. See Part IV, line 11			0
	14	Intangible assets	0		0
	15 16	Other assets See Part IV, line 11	1,295,895		1,572,110
			74,304		62,393
	17	Accounts payable and accrued expenses	0		0_,550
	18	Grants payable	0	<u> </u>	0
	19	Deferred revenue	0	20	0
s.	20	Tax-exempt bond liabilities	110,208		115,975
Liabilitieș	21	Payables to current and former officers, directors, trustees, key			
ē	22	employees, highest compensated employees, and disqualified			r 1
Ë		persons Complete Part II of Schedule L	0	22	0
	23	Secured mortgages and notes payable to unrelated third parties	0		0
	24	Unsecured notes and loans payable to unrelated third parties	0	24	0
	25	Other liabilities Complete Part X of Schedule D	0	25	0
	26	Total liabilities. Add lines 17 through 25	184,512	26	178,368
Fund Balances		Organizations that follow SFAS 117, check here ▶ 🗹 and complete lines 27 through 29, and lines 33 and 34.			
anc	27	Unrestricted net assets	167,491	27	193,838
Bal	28	Temporarily restricted net assets	943,892	28	1,199,904
豆	29	Permanently restricted net assets	0	29	0
or Fur		Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34.	8		
S S	30	Capital stock or trust principal, or current funds		30	
set	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
As	32	Retained earnings, endowment, accumulated income, or other funds		32	
Net Assets	33	Total net assets or fund balances	1,111,383		1,393,742
2	34	Total liabilities and net assets/fund balances	1,295,895	34	1,572,110

Pai	t XI Financial Statements and Reporting		.,	
_			Yes	No
1	Accounting method used to prepare the Form 990. Cash Accrual Other			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in			
	Schedule O.		~	
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a	<u> </u>	<u> </u>
b	Were the organization's financial statements audited by an independent accountant?	2b_	~	
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of			
	the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	~	
	If the organization changed either its oversight process or selection process during the tax year, explain in			
	Schedule O.			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were			
	issued on a consolidated basis, separate basis, or both:			
	✓ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
За	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		~
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	3b		Ĺ

Form **990** (2009)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

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

OMB No 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization Employer identification number Pesticide Action Network North America Regional Center 94 2949686 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.) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state. An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) 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.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) An organization that normally receives: (1) more than 331/3 % 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 331/3 % 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 **b** Type II **c** ☐ Type III–Functionally integrated **d** ☐ Type III–Other a 🗌 Type I 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 Since August 17, 2006, has the organization accepted any gift or contribution from any of the g following persons? Yes No (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) 11g(i) and (iii) below, the governing body of the supported organization? 11g(ii) (ii) A family member of a person described in (i) above? 11q(iii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? . . . Provide the following information about the supported organization(s). (III) Type of organization (i) Name of supported (u) EIN (iv) Is the organization (vii) Amount of (v) Did you notify (vi) Is the in col (i) listed in your organization in col the organization in organization (described on lines 1-9 support governing document? (i) organized in the above or IRC section col (i) of your support? US? (see instructions)) Yes No Yes Yes

18

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 I.) Section A. Public Support (f) Total (c) 2007 (d) 2008 (e) 2009 Calendar year (or fiscal year beginning in) (a) 2005 (b) 2006 Gifts, grants, contributions, and membership fees received. (Do not 1,914,224 2,235,610 11,512,892 2,100,523 2,435,758 2,827,777 include any "unusual grants") Tax revenues levied for the organization's benefit and either paid to or expended on 0 0 0 its behalf The value of services or facilities furnished by a governmental unit to the organization without charge 2,235,610 2,435,758 1,914,224 11,512,892 2,100,523 2,827,777 Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount 4,286,119 shown on line 11, column (f) 7,226,772 Public support. Subtract line 5 from line 4. Section B. Total Support (c) 2007 (e) 2009 (d) 2008 (f) Total Calendar year (or fiscal year beginning in) (a) 2005 **(b)** 2006 2,827,777 1,914,224 2,235,610 11,512,892 2.100.523 2,435,758 Amounts from line 4 . . . R Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar 20,600 7,167 2,738 21,533 23,732 75,771 Net income from unrelated business activities, whether or not the business is 0 0 0 0 0 0 regularly carried on Other income Do not include gain or 10 loss from the sale of capital assets (Explain in Part IV) 11,588,662 11 Total support. Add lines 7 through 10 ... 167,572 12 Gross receipts from related activities, etc. (see instructions) 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 62.36 % 14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f)) 60.30 % 15 15 Public support percentage from 2008 Schedule A, Part II, line 14 33\% support test - 2009. If the organization did not check the box on line 13, and line 14 is 33\% w or more, check this box 331/3 % support test - 2008. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3 % or more, check this 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 🚬 🔒 🔲 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

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

	dule A (Form 990 or 990-EZ) 2009						Page 3
Pa	Support Schedule for Orga (Complete only if you checke				a)(2)		_
Sec	tion A. Public Support						-
C	alendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 200	9 (f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
	furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	,					
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons .						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b	<u> </u>					
8	Public support (Subtract line 7c from line 6)						
Sec	tion B. Total Support						
Ca	alendar year (or fiscal year beginning in) 🕨	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 200	9 (f) Total
9 10a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b	<u> </u>					
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)			,			
14	First five years. If the Form 990 is for organization, check this box and stop	here	<u> </u>				ection 501(c)(3) ▶ □
Sec	tion C. Computation of Public Su	pport Perce	ntage			, , -	
15 16	Public support percentage for 2009 (lin Public support percentage from 2008 S					15 16	<u>%</u> %
Sec	tion D. Computation of Investmen	nt Income P	ercentage				
17	Investment income percentage for 200	9 (line 10c, co	lumn (f) dıvıde	d by line 13, c	olumn (f)) .	17	%
18 19a	Investment income percentage from 20	008 Schedule /	A, Part III, line	17		nore than 3	% and line
	17 is not more than 33% %, check this b	oox and stop h	ere. The organ	ization qualifies	s as a publicly	supported	organization ► 🛘
b	331/3 % support tests - 2008. If the organ line 18 is not more than 331/3 %, check this	s box and stop	here. The orga	nızatıon qualıfıe	s as a publicly	supported	organization 🕨 🗌
20	Private foundation. If the organization	did not check	a box on line	14, 19a, or 19b	, check this b	ox and see	instructions ► □

Part IV	Page 4 Supplemental Information. Complete this part to provide the explanations required by Part II, line 10:
andi	Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Provide any other additional information. See instructions.
	Take in mile 17 d of 17 b, driet in mile 121 t to the day of the day
.	
	`
-	
• • • • • • • • • • • • • • • • • • • •	

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

1 9

OMB Ńo 1545-0047
20**09**

Open to Public Inspection

Department of the Treasury Internal Revenue Service For Organizations Exempt From Income Tax Under section 501(c) and section 527

► Complete if the organization is described below.

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

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

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

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

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

• S	Section 501(c)(3) organizations organization organization answered "Yes	that have NOT filed Form 5768 (elections," to Form 990, Part IV, line 5 (Prox	n under section 501 y Tax), then	(h)) Complete Par	t II-B Do	not complete Part II-A			
• 5	Section 501(c)(4), (5), or (6) orga	anizations Complete Part III							
Nan	ne of organization				Employe	r identification number			
Pe	sticide Action Network No	orth America Regional Center		1	94	2949686			
Par	t I-A Complete if the	organization is exempt unde	er section 501(c	c) or is a secti	on 527	organization.			
1 2 3		ne organization's direct and indirect							
Par	t I-B Complete if the	e organization is exempt und	er section 501(c)(3).					
_	Enter the amount of any elf the organization incurred Was a correction made? If "Yes," describe in Part I	excise tax incurred by the organization excise tax incurred by organization d a section 4955 tax, did it file Form	managers under m 4720 for this y	section 4955 . ear?	• \$ · · ·	. Yes No			
Par						υ <u>ι(</u> υ)(ა)			
1		expended by the filing organization of the second control of the s							
2		ing organization's funds contribute ities			on • \$				
3	line 17b	penditures. Add lines 1 and 2. Er			\$				
4 5									
	(a) Name	(b) Address	(c) EIN	(d) Amount parc filing organizati funds If none, er	ion's	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-			
						,			

		,					- 3 -
Pa		plete if the organizat r section 501(h)).	ion is exemp	ot under section	n 501(c)(3) and	filed Form 5768	(election
		the filing organization				-	
В	Check ▶ ☐ if	the filing organization	checked box	A and "limited	control" provision	ons apply.	
	(The	Limits on Lob term "expenditures" m			ed.)	(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying	expenditures to influence	e public opinio	on (grass roots lo	bbving)	17,250	
t		expenditures to influence	•			0	
c		expenditures (add lines	-			17,250	
c						1,967,836	
e		ourpose expenditures (ac	dd lines 1c and	d 1d)		1,985,086	
f		axable amount. Enter the				249,254	
	If the amount on	line 1e, column (a) or (b) is:	The lobbying	nontaxable amou	nt is:		
	Not over \$500,00	00	20% of the ar	mount on line 1e			
	Over \$500,000 b	out not over \$1,000,000	\$100,000 plus	15% of the excess	s over \$500,000		
	Over \$1,000,000	but not over \$1,500,000		10% of the excess			
	Over \$1,500,000	but not over \$17,000,000		5% of the excess	over \$1,500,000 _		
	Over \$17,000,00	0	\$1,000,000			20.01	
ç		ntaxable amount (enter 2				62,314	
ŀ		g from line 1a. If zero or				<u> </u>	
İ	Subtract line 1	f from line 1c. If zero or mount other than zero on	less, enter -0-			rm 4700 reporting	
j						-	☐ Yes ☐ No
	(Some	e organizations that ma	ade a section	Period Under S 501(h) election ou uctions for lines	ection 501(h) do not have to co 2a through 2f on	mplete all of the f page 4.)	ive
		Lobbyin	g Expenditure	s During 4-Year	Averaging Period	1	
		(or fiscal year ning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total
28	Lobbying nontax	kable amount					
ł	Lobbying ceiling (150% of line 2a						
_	Total lobbying e	xpenditures					
	d Grassroots nont	axable amount	- , , , ,				
_	Grassroots ceilir (150% of line 20						
1	Grassroots lobb	ying expenditures					

Schedule C (Form 990 or 990-EZ) 2009

		(a	a)		(b)	
		Yes	No	A	mount	t
1 Duri	ing the year, did the filing organization attempt to influence foreign, national, state or local					
legis	slation, including any attempt to influence public opinion on a legislative matter or		1			
	rendum, through the use of.					
	unteers?					
	i staff or management (include compensation in expenses reported on lines 1c through 1i)? .					
	dia advertisements?	_				
	olications, or published or broadcast statements?					
	nts to other organizations for lobbying purposes?					
	ect contact with legislators, their staffs, government officials, or a legislative body?		L .			
h Rall	lies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? .	<u> </u>				
i Oth	er activities? If "Yes," describe in Part IV	<u> </u>	-			
	al. Add lines 1c through 1i					
	the activities in line 1 cause the organization to be not described in section 501(c)(3)? .		-			
	Yes," enter the amount of any tax incurred under section 4912		i			
	ne filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Part III	-A Complete if the organization is exempt under section 501(c)(4), section 5	01(c)	(5), o	r sec	tion	
	501(c)(6).				Yes	No
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			1	1.03	110
1 Wei 2 Did	re substantially all (90% or more) dues received nondeductible by members? the organization make only in-house lobbying expenditures of \$2,000 or less?			2	-	
	the organization make only in riodisc lobbying expenditures of the prior year?			3		
Part III	-B Complete if the organization is exempt under section 501(c)(4), section 5 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part II "Yes."	01(c) I-A, I	(5), c ine 3	r sec I is an	tion Iswer	ed
1 Due	es, assessments and similar amounts from members		1			
	ction 162(e) nondeductible lobbying and political expenditures (do not include amounts of poli penses for which the section 527(f) tax was paid).	itical				
a Cur	rent year		2a	ļ		
b Car	ryover from last year		2b	ļ		
	al		2c	ļ		
			3	 		
			4	-		
		•	5			
				L		
Also, cor	e this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, applete this part for any additional information. cal campaign activity	line 5	; and	Part II	-B, lin	e 1ı.
4 If n exc anc 5 Tax Part IV Complete Also, cor	e this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, mplete this part for any additional information.	of the bying		Part		II-B, lin

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

Pes	sticide Action Network North America Regional	Center		94	2	2949686
Pa	Organizations Maintaining Donor A the organization answered "Yes" to F			nds or A	Accounts	. Complete if
		(a) Donor advised fu	inds	(b) Fu	inds and other	er accounts
1	Total number at end of year					
2						
3						
4	Aggregate value at end of year					
5	Did the organization inform all donors and donor funds are the organization's property, subject to					Yes No
6	Did the organization inform all grantees, donors, used only for charitable purposes and not for the purpose conferring impermissible private benefit	e benefit of the dono		or for ar	ny other	☐ Yes ☐ No
Par	t II Conservation Easements. Complete i					line 7.
1	Purpose(s) of conservation easements held by the					
•	Preservation of land for public use (e.g., recre		Preservation of	of an histo	rically impo	ortant land area
	☐ Protection of natural habitat	,	Preservation			
	☐ Preservation of open space					
2	Complete lines 2a through 2d if the organization is easement on the last day of the tax year.	neld a qualified conse	rvation contributio	n in the fo	orm of a co	onservation
					Held at the	End of the Tax Year
а	Total number of conservation easements			. 2a		
b	Total acreage restricted by conservation easeme					
С	Number of conservation easements on a certified	d historic structure in	cluded in (a)	. 2c		
d	Number of conservation easements included in (c) acquired after 8/13	7/06	2d	<u></u>	
3	Number of conservation easements modified, trathe tax year ►	insferred, released, e	xtınguished, or ter	minated I	by the orga	anization during
4	Number of states where property subject to con-	servation easement is	s located ▶		•	
5	Does the organization have a written policy regardulations, and enforcement of the conservation	•	onitoring, inspectio		-	Yes No
6	Staff and volunteer hours devoted to monitoring. •					
7	Amount of expenses incurred in monitoring, insp ▶\$	ecting, and enforcing	conservation eas	ements o	luring the y	/ear
8	Does each conservation easement reported on In 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?		the requirements	of section	n 	Yes No
9	In Part XIV, describe how the organization report balance sheet, and include, if applicable, the tex the organization's accounting for conservation ex-	t of the footnote to t asements.	ne organization's f	nancial s	tatements	that describes
Pa	t III Organizations Maintaining Collection Complete if the organization answered			ther Sim	nilar Asse	ts.
1a	If the organization elected, as permitted under S art, historical treasures, or other similar assets hel provide, in Part XIV, the text of the footnote to it	d for public exhibition	, education, or rese	earch in f	urtherance	e sheet works of of public service,
b	If the organization elected, as permitted under S historical treasures, or other similar assets held it provide the following amounts relating to these in the second state of the second	for public exhibition, tems.	education, or resea	arch in fu	rtherance	of public service,
	(i) Revenues included in Form 990, Part VIII, line(ii) Assets included in Form 990, Part X				▶ \$	
2	If the organization received or held works of art following amounts required to be reported under	, historical treasures SFAS 116 relating to	, or other similar a o these items:	ssets for		
а	Revenues included in Form 990, Part VIII, line 1				\$	• • • • • • • • • • • • • • • • • • • •
	a				_ ~	

Р	age	: :

Par	rt III Organizations Maintain	ing Collections	of Art, Histor	ical Treasure	s, or Ot	her Similar	Assets (continued)		
3	Using the organization's acquisition collection items (check all that appl		other records,	check any of th	ne follow	ing that are a	a significant use of its		
а	Public exhibition		a 📙	Loan or exch					
b			e [Other					
С	Preservation for future general	tions							
4	Provide a description of the organize Part XIV.	zation's collections	s and explain I	now they furthe	er the org	ganızation's e	exempt purpose in		
5	During the year, did the organization assets to be sold to raise funds rathe	solicit or receive de r than to be mainta	onations of art, ained as part of	historical treasu	ures, or o	ther similar	. Yes No		
Par	Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.								
	Is the organization an agent, truste included on Form 990, Part X? .				tions or	other assets	not Yes 🗹 No		
b	If "Yes," explain the arrangement in	Part XIV and cor	nplete the follo	wing table:					
					4-		Amount		
С						-			
d	3 ,								
е	Distributions during the year					 			
f	Ending balance				. <u>1f</u>	L	. V Yes No		
_	If "Yes," explain the arrangement in	Part XIV	<u> </u>						
Par	rt V Endowment Funds. Co								
		(a) Current year	(b) Prior year	(c) Two year	rs back (d) Three years b	ack (e) Four years back		
1a	3 ,		 						
b	Contributions								
С	Net investment earnings, gains, and losses	<u> </u>							
d	Grants or scholarships								
е	Other expenditures for facilities and programs								
f g	Administrative expenses End of year balance						_		
2	Provide the estimated percentage of	of the year end ba	lance held as.						
а	5	•							
b	Permanent endowment ▶	%							
С	Term endowment ▶ %	6							
За	Are there endowment funds not in th	e possession of th	ne organization	that are held as	nd admir	nistered for th			
	organization by:						Yes No		
	(i) unrelated organizations						. 3a(i)		
	(ii) related organizations						3a(ii)		
р 4	If "Yes" to 3a(II), are the related org Describe in Part XIV the intended u						. <u>3b</u>		
	rt VI Investments—Land, Bu				Port V III	22.10			
rai									
	Description of investment	(a) Cost or ot (investm	ent)	Cost or other basis (other)		cumulated reciation	(d) Book value		
1a	Land		0	0			0		
b	Buildings		0	0		0	0		
	Leasehold improvements		0	8,864		5,202	3,662		
d	Equipment		0	159,887	-	131,915	27,972		
	Other		0	28,921		28,556	365		
ota	al. Add lines 1a through 1e (Column (d)	must equal Form 9:	yu, Part X, colu	mn (B), line 10(c)	<i>).)</i>	▶	31,999		

Part VII Investments—Other Securities	See Form 990, Part X	line 12	- Tage U
(a) Description of security or category	(b) Book value	(c) Method of valua	tion
(including name of security)		Cost or end-of-year man	ket value
Financial derivatives			
Closely-held equity interests			
Other			
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)			
Part VIII Investments—Program Relate			
(a) Description of investment type	(b) Book value	(c) Method of valua Cost or end-of-year ma	
			
			· · · · · · · · · · · · · · · · · · ·
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)			
Part IX Other Assets. See Form 990, Pa	rt X, line 15.		
	(a) Description		(b) Book value
			.,
			
-			
Total. (Column (b) must equal Form 990, Part X, col	(B) line 15.)		
Part X Other Liabilities. See Form 990,			
1. (a) Description of liability	(b) Amount		
Federal income taxes			ı
		_	
		_	
	 	-	,
		\dashv	ı
	 	-	I
		-	
	*		
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)		<u></u>	
<u> </u>			· · · · · · · · · · · · · · · · · · ·

Par	Reconciliation of Change in Net Assets from Form 990 to Audited Financial S	tate	ments
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	2,267,445
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	1,985,086
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	282,359
4	Net unrealized gains (losses) on investments	4	0
5	Donated services and use of facilities	5	82,990
6	Investment expenses	6	0
7	Prior period adjustments	7_	0
8	Other (Describe in Part XIV.)	8	0
9	Total adjustments (net) Add lines 4 through 8	9	0
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	365,349
Par	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue	e pe	er Return 2,350,435
1	Total revenue, gains, and other support per audited financial statements		2,350,435
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12.		
а	Net unrealized gains on investments	븼	
b	Donated services and use of facilities	끸	
С	Recoveries of prior year grants	걸	
d	Other (Describe in Part XIV.)	٩,	82,990
е	Add lines 2a through 2d	-	
3	Subtract line 2e from line 1	-	3 2,267,445
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1	٦	
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a	겆	
b	Other (Describe in Part XIV)	4_	
C -	Add lines 4a and 4b		5 2.267.445
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		,
Pal	t XIII Reconciliation of Expenses per Audited Financial Statements With Expense	Ses .	2,068,076
1	Total expenses and losses per audited financial statements	\vdash	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25: Penetral services and use of facilities. 2a 82,99	n	
а	Donated services and use of facilities	<u> </u>	
b	Prior year adjustments	7	
C	Other losses	7	
d	Other (Describe in Part XIV.)	٦	82,990
е	Add lines 2a through 2d	<u> </u>	1,985,086
3	Subtract line 2e from line 1	 '	- 1,500,000
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	d	
a	investment expenses not included on torn ose, i are vin, into to	d	
	Other (Describe III are Alv)	1	ic 0
5	Add lines 4a and 4b		5 1,985,086
	t XIV Supplemental Information		
	aplete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a a	nd 4	Part IV lines 1h
	2b, Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d a		
	part to provide any additional information		•
Par	t IV: Trust, Escrow, Custodial Arrangements, Line 2b:		
The	Organization receives donations, grants and contracts, pays expenses, and holds cash for	orga	anizations which
••••			***************************************
furt	her the mission of the Organization and for whom we serve as fiscal sponsor. In cases wher	ı the	Organization

em	ploys staff for a coalition and the coalition is considered a project of the Organization, it typi	cally	creates one or more
tem	porarily restricted funds to account for the specific coalition's project expenses. These are	the f	unds identified in
		•••••	
the	Statement of Activities temporarily restricted program as "Coalitions."		
lı	n cases where the Organization agrees to be fiscal sponsor for a coalition and/or unincorpor	ated	organizations which

Part XIV Supplemental Information (continued)
further the mission of the Organization but are not projects of the Organization, and its role does not require it to employ
project staff or provide substantial coordination services, the Organization maintains the coalition funds in a custodial
account, reported in the Statement of Financial Position. These custodial accounts are not reflected in the Statement of
Activities.
Part X: FIN 48 Footnote., Line 2:
The Organization recognizes the effect of income tax positions only if those positions are more likely than not of being
sustained. The Organization does not believe its financial statements include any uncertain tax positions.
•

Schedule F (Form 990)

Statement of Activities Outside the United States

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

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047
2009
Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

Pesticide Action Network North America Regional Center

Inspection
Employer identification number
94 : 2949686

Pa				e the United States.	. Complete if the organiz	zation answered	
1	"Yes" to Form 990, For grantmakers. Does the assistance, the grantees' e	ne organization	n maintain red e grants or as	sistance, and the selec	tion criteria used to aw		_
2	the grants or assistance? For grantmakers. Describ					•	,
	United States.						
3	Activities per Region (Use	Schedule F-1	(Form 990) If	additional space is nee	ded.)		_
	(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region	
Eur	оре	0	0	fundraising	environmntl treaties		0
Eur	ope	0	О	program services	environmntl treaties		0
Sub	-Saharan Africa	0	0	program services	pesticide alternatives		0
Cen	itral America and the Carib	0	0	program services	environmntl treaties		0
Sou	ith Asia	0	o	program services	environmntl treaties		0
							_
						<u></u>	_
							-
							-
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							-
			0				_
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						-	_
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0

Totals

0

Page 2

Schedule F (Form 990) 2009

· 	1	1	ı	ı	١	. 1	1	!	I	i	l	I	I	I	l	ŀ	
A	(i) Method of valuation (book, FMV, appraisal, other)																
if the organization arisk it received more than \$\$	(h) Description of non-cash assistance								-								
	(g) Amount of non-cash assistance				-												
	(f) Manner of cash disbursement																
	(e) Amount of cash grant																
	(d) Purpose of grant																
	(c) Region																
	(b) IRS code section and EIN (if applicable)																
Part II Grants and Part IV, line Use Schedu	1 (a) Name of organization												, a				

Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

| Parter total number of other organizations or entities | Parter total number of other organizations or entities | Parter total number of other organizations or entities | Parter total number of other organizations or entities | Parter total number of other organizations or entities | Parter total number of other organizations or entities | Parter Number of Other organizations or entities | Parter Number of Other Organizations or entities | Parter Number of Other Organizations or entities | Parter Number of Other Organizations or entities | Parter Number of Other Organizations or entities | Parter Number of Other Organizations or entities | Parter Number of Other Organizations or entities | Parter Number of Other Organizations or entities | Parter Number of Other Organizations or entities | Parter Number of Other Organizations or entities | Parter Number of Other Organizations or entities | Parter Number of Other

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Schedule F (Form 990) 2009

Page 3

Schedule F (Form 990) 2009

Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Use Schedule F-1 (Form 990) if additional space is needed. Part III

(h) Method of valuation (book, FMV, appraisal, other) (g) Description of non-cash assistance (f) Amount of non-cash assistance (e) Manner of cash disbursement (d) Amount of cash grant (c) Number of recipients (b) Region (a) Type of grant or assistance

Schedule F (Form 990) 2009

Schedule F (Fo Part IV		Page 4
Part IV	Supplemental Information	
	Complete this part to provide the information required in Part I, line 2, and any additional information	
	•••••••••••••••••••••••••••••••••••••••	
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SCHEDULE O (Form 990)

Supplemental Information to Form 990

2949686

Employer identification number

94

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Pesticide Action Network North America Regional Center

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

► Attach to Form 990.

Form 990, Part III: Line 4d. Other program services. Communications and Membership: Pesticide Action Network North America provided information on pesticide issues—scientific and health studies, agroecological farming, alternatives in pest management and policy analyses to members, the general public and policy makers, and outreach to the media on these issues. We published weekly online news briefs on pesticides, health and alternatives; a trimesterly magazine for members and the public; and extensive web-based information services including local, national and international policy documents; data and analysis from our community air monitoring projects; and resources for pest management without the use of highly hazardous chemical products and systems. We also provided individual members, partner organizations, and coalitions with opportunities and support to participate in public interest campaigns via action alerts and local projects. Form 990: Part VI, Section B, Line 11A. Process of Form 990 Review. Form 990 is emailed to all members of the Board of Directors before filing. The form is filed after the members of the organization's Management Oversight Committee (combined executive and finance committee) affirm that they have reviewed it. Form 990: Part VI, Section B, Line 12c. Conflict of Interest Policy Disclosure. Members of the Board and the key employees of Pesticide Action Network are asked each year directly to confirm in writing that they are aware of our conflict of interest policy and that they are in compliance. In addition, the finance staff is instructed to review any payments to key employees, board and associated entities to ensure that there are no conflict of interest problems. Form 990: Part VI, Section B, Line 15. Determining Compensation. Each year (June 2010 most recently) the organization's Management Oversight Committee reviews comparable data on compensation of nonprofit executive officers in northern California, and submits a written recommendation on executive compensation for the coming fiscal year, citing such data, to the full Board of Directors. Board decisions on compensation are recorded in the minutes.

Schedule O (Form 990) 2009	Page 2
Name of the organization	Employer identification number
Form 990: Part VI, Section C, Line 17. List of States.	
AL, AK, AZ, AR, CA, CO, CT, FL, GA, HI, IL, KS, KY, ME, MD, MA, MI, N	IN, MS, MO, NH, NJ, NM, NY, NC, ND, OH, OK, OR,
PA, RI, SC, TN, UT, VA, WA, WV, WI	·
Form 990: Part VI, Section C, Line 19. Documents Available to Public. The organization's governing documents and conflict of interest policy.	
Financial statements are available on the website or by request.	of are available to the public aport request.
·	