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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 benefit trust or private foundation)

2010

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

A For the 2010 calendar year, or tax year beginning 7/01, 2010, and ending 6/30, 2011

B Check if applicable

- ☐ Address change
☐ Name change
☐ Initial return
☐ Terminated
☐ Amended return
☐ Application pending

ENVIRONMENTAL FEDERATION OF CALIFORNIA
DBA EARTH SHARE CALIFORNIA
49 POWELL STREET #510
SAN FRANCISCO, CA 94102

D Employer Identification Number

94-2840364

E Telephone number

415-981-1999

G Gross receipts \$ 1,878,535.

F Name and address of principal officer
PATRICIA SMITH
SAME AS C ABOVEH(a) Is this a group return for affiliates? ☐ Yes ☒ NoH(b) Are all affiliates included?
If 'No,' attach a list (see instructions) ☐ Yes ☐ NoI Tax-exempt status ☒ 501(c)(3) ☐ 501(c) () (insert no) ☐ 4947(a)(1) or ☐ 527

J Website: WWW.EARTHSHARECA.ORG

H(c) Group exemption number

K Form of organization ☒ Corporation ☐ Trust ☐ Association ☐ Other

L Year of Formation 1982

M State of legal domicile CA

Part I Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities <u>THE PRIMARY PURPOSE OF THE ORGANIZATION IS TO BROADEN ITS AFFILIATES' (501(C)(3) ORGANIZATIONS) FINANCIAL SUPPORT BY OBTAINING ACCESS TO AND COORDINATING PARTICIPATION IN CORPORATE AND GOVERNMENTAL PAYROLL DEDUCTION FUNDRAISING CAMPAIGNS.</u>		
	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets		
	3	Number of voting members of the governing body (Part VI, line 1a)	3	21
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	21
	5	Total number of individuals employed in calendar year 2010 (Part V, line 2a)	5	9
	6	Total number of volunteers (estimate if necessary)	6	0
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
7b	Net unrelated business taxable income from Form 990-T, line 34	7b	0.	
Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9	Program service revenue (Part VIII, line 2g)	1,642,765.	1,449,777.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	470,320.	427,704.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	3,306.	1,054.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	2,116,391.	1,878,535.
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	1,571,446.	1,404,018.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	375,736.	377,956.
	16a	Professional fundraising fees (Part IX, column (A), line 11e)		
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶	54,597.	
	17	Other expenses (Part IX, column (A), lines 11a, 11b, 11c, 11d, 11e, 11f, 11g, 11h, 11i, 11j, 11k, 11l, 11m, 11n, 11o, 11p, 11q, 11r, 11s, 11t, 11u, 11v, 11w, 11x, 11y, 11z)	169,208.	142,171.
	18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	2,116,390.	1,924,145.
19	Revenue less expenses Subtract line 18 from line 12	1.	-45,610.	
Not Assets or Fund Balances	20	Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21	Total liabilities (Part X, line 26)	1,445,122.	1,273,319.
	22	Net assets or fund balances Subtract line 21 from line 20	1,125,900.	999,707.
			319,222.	273,612.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer <u>Patricia Smith</u>		Date <u>May 14, 2012</u>	
	Type or print name and title <u>Patricia Smith Executive Director</u>			
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed
	KENNETH A. PRESTON	<u>Ken Preston</u>	3/10/12	PTIN N/A
	Firm's name	Firm's address		Firm's EIN
BREGANTE + COMPANY LLP, CPA'S		55 HAWTHORNE STREET, SUITE 910		N/A
SAN FRANCISCO, CA 94105		Phone no		415-777-1001

May the IRS discuss this return with the preparer shown above? (see instructions)

☒ Yes ☐ No

BAA For Paperwork Reduction Act Notice, see the separate instructions.

TEEA0113L 12/21/10

Form 990 (2010)

Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response to any question in this Part III ☐**1** Briefly describe the organization's mission

THE PRIMARY PURPOSE OF THE ORGANIZATION IS TO BROADEN ITS AFFILIATES' (501(C)(3) ORGANIZATIONS) FINANCIAL SUPPORT BY OBTAINING ACCESS TO AND COORDINATING PARTICIPATION IN CORPORATE AND GOVERNMENTAL PAYROLL DEDUCTION FUNDRAISING CAMPAIGNS.

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

If 'Yes,' describe these new services on Schedule O

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

If 'Yes,' describe these changes on Schedule O

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported**4a** (Code ☐) (Expenses \$ 1,765,082. including grants of \$ 1,404,018.) (Revenue \$ 427,704.)

THE PRIMARY PURPOSE OF THE FEDERATION IS TO BROADEN ITS AFFILIATES' FINANCIAL SUPPORT BY OBTAINING ACCESS TO AND COORDINATING PARTICIPATION IN CORPORATE AND GOVERNMENTAL PAYROLL FUNDRAISING CAMPAIGNS. AS OF JUNE 30, 2011, THE AGENCY REPRESENTED OVER 88 ENVIRONMENTAL ORGANIZATIONS IN OVER 180 WORKPLACE GIVING CAMPAIGNS.

4b (Code ☐) (Expenses \$ including grants of \$) (Revenue \$)**4c** (Code ☐) (Expenses \$ including grants of \$) (Revenue \$)**4d** Other program services (Describe in Schedule O)

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

4e Total program service expenses ▶ 1,765,082.

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	X	
2 Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions)		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		X
4 Section 501(c)(3) organizations Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II		X
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III		
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		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' complete Schedule D, Part II		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III		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		X
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		X
11 If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI		X
b Did the organization report an amount for investments— other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII		X
c Did the organization report an amount for investments— program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII		X
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX		X
e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	X	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X	X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII	X	
b Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		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, Parts I and IV		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, Parts II and IV		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, Parts III and IV		X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions)		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		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		X
20 a Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H		X
b If 'Yes' to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)		

Part 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? <i>If 'Yes,' complete Schedule I, Parts I and II</i>	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? <i>If 'Yes,' complete Schedule I, Parts I and III</i>	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? <i>If 'Yes,' complete Schedule J</i>	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, and that was issued after December 31, 2002? <i>If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No,' go to line 25</i>	24a	X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c	
d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d	
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? <i>If 'Yes,' complete Schedule L, Part I</i>	25a	X
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? <i>If 'Yes,' complete Schedule L, Part I</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? <i>If 'Yes,' complete Schedule L, Part II</i>	26	X
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? <i>If 'Yes,' complete Schedule L, Part III</i>	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)		
a A current or former officer, director, trustee, or key employee? <i>If 'Yes,' complete Schedule L, Part IV</i>	28a	X
b A family member of a current or former officer, director, trustee, or key employee? <i>If 'Yes,' complete Schedule L, Part IV</i>	28b	X
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If 'Yes,' complete Schedule L, Part IV</i>	28c	X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If 'Yes,' complete Schedule M</i>	29	X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If 'Yes,' complete Schedule M</i>	30	X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If 'Yes,' complete Schedule N, Part I</i>	31	X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If 'Yes,' complete Schedule N, Part II</i>	32	X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If 'Yes,' complete Schedule R, Part I</i>	33	X
34 Was the organization related to any tax-exempt or taxable entity? <i>If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1</i>	34	X
35 Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35	X
a Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If 'Yes,' complete Schedule R, Part V, line 2</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If 'Yes,' complete Schedule R, Part V, line 2</i>	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? <i>If 'Yes,' complete Schedule R, Part VI</i>	37	X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38 X	

BAA

Form 990 (2010)

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response to any question in this Part V ☐

		Yes	No
1 a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.	1 a 1		
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	1 b 0		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c	X	
2 a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return.	2 a 9		
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).	2 b	X	
3 a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3 a		X
b If 'Yes,' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O.	3 b		
4 a 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)?	4 a		X
b If 'Yes,' enter the name of the foreign country: _____ See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a		X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		X
c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5 c		
6 a 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?	6 a		X
b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6 b		
7 Organizations that may receive deductible contributions under section 170(c).			
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7 a		X
b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7 b		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7 c		X
d If 'Yes,' indicate the number of Forms 8282 filed during the year.	7 d		
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 e		X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		X
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 g		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7 h		
8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9 Sponsoring organizations maintaining donor advised funds.			
a Did the organization make any taxable distributions under section 4966?	9 a		
b Did the organization make a distribution to a donor, donor advisor, or related person?	9 b		
10 Section 501(c)(7) organizations. Enter			
a Initiation fees and capital contributions included on Part VIII, line 12.	10 a		
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.	10 b		
11 Section 501(c)(12) organizations. Enter			
a Gross income from members or shareholders.	11 a		
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).	11 b		
12 a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12 a		
b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year.	12 b		
13 Section 501(c)(29) qualified nonprofit health insurance issuers.			
a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.	13 a		
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans.	13 b		
c Enter the amount of reserves on hand.	13 c		
14 a Did the organization receive any payments for indoor tanning services during the tax year?	14 a		X
b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O.	14 b		

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.

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

☒**Section A. Governing Body and Management**

	Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year	1a 21	
b Enter the number of voting members included in line 1a, above, who are independent	1b 21	
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	X
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 governing documents since the prior Form 990 was filed?	4	X
5 Did the organization become aware during the year of a significant 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 governing body?	7a	X
b Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
a The governing body?	8a X	
b Each committee with authority to act on behalf of the governing body?	8b X	
9 Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O	9	X

Section 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 X	
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 X	
11a Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11a X	
b Describe in Schedule O the process, if any, used by the organization to review this Form 990 SEE SCHEDULE O		
12a Does the organization have a written conflict of interest policy? If 'No,' go to line 13	12a X	
b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b X	
c Does the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done SEE SCHEDULE O	12c X	
13 Does the organization have a written whistleblower policy?	13 X	
14 Does the organization have a written document retention and destruction policy?	14 X	
15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a The organization's CEO, Executive Director, or top management official	15a X	
b Other officers of key employees of the organization SEE SCHEDULE O	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	X
b If 'Yes,' has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b	

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ► NONE

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.

☐ Own website ☒ Another's website ☒ Upon request

19 Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to the public SEE SCHEDULE O

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization

► PATRICIA SMITH 49 POWELL STREET # 510 SAN FRANCISCO CA 94102 415-981-1999

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent ContractorsCheck if Schedule O contains a response to any question in this Part VII ☐**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees****1 a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

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

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 neither the organization nor any related organization compensated any current officer, director, or trustee

(A) Name and title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) MEGAN BAEHRENS BOARD MEMBER	1	X						0.	0.	0.
(2) GEOFFREY BAUMAN TREASURER	1	X						0.	0.	0.
(3) JENNIFER BOWEN BOARD MEMBER	1	X						0.	0.	0.
(4) RVISRA CHIRATHIVAT AT LARGE DIR.	1	X						0.	0.	0.
(5) ANDREW CUNNINGHAM III AT LARGE DIR.	1	X						0.	0.	0.
(6) NONA DENNIS AT LARGE BM	1	X						0.	0.	0.
(7) ANGEL GABRIEL GONZALES BOARD MEMBER	1	X						0.	0.	0.
(8) RENE HAMLIN BOARD MEMBER	1	X						0.	0.	0.
(9) MICHELLE KREMER BOARD MEMBER	1	X						0.	0.	0.
(10) ELLEN MANCHESTER AT LARGE DIR.	1	X						0.	0.	0.
(11) MARSHA MATHER-THRIFT FIRST VP	1	X						0.	0.	0.
(12) SCOTT MCINTYRE PRESIDENT	1	X						0.	0.	0.
(13) JANE MCEWAN AT LARGE BM	1	X						0.	0.	0.
(14) ROCHELLE NASON BOARD MEMBER	1	X						0.	0.	0.
(15) MELISSA NICHOLSON BOARD MEMBER	1	X						0.	0.	0.
(16) CARI PORTER BOARD MEMBER	1	X						0.	0.	0.
(17) CATHERINE RONDINARO BOARD MEMBER	1	X						0.	0.	0.

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (cont)

(A) Name and title	(B) Average hours per week (describe hours for related organizations in Sch O)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) NOEL ROBINSON BOARD MEMBER	1	X						0.	0.	0.
(19) J. GARDNER TRIMBLE BOARD MEMBER	1	X						0.	0.	0.
(20) TED SCHOFIELD SECOND VP	1	X						0.	0.	0.
(21) RAY SULLIVAN AT LARGE BM	1	X						0.	0.	0.
(22) JAY EILERTSON CFO	38			X				79,114.	0.	8,868.
(23) PATRICIA SMITH EXECUTIVE DIREC	38			X				74,430.	0.	9,787.
(24)										
(25)										
(26)										
(27)										
(28)										
(29)										
1 b Sub-total								153,544.	0.	18,655.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								153,544.	0.	18,655.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization **0**

3 Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? If 'Yes,' complete Schedule J for such individual

	Yes	No
3		X
4		X
5		X

4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If 'Yes' complete Schedule J for such individual

5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If 'Yes,' complete Schedule J for such person

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization **0**

Part VIII Statement of Revenue

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	1a Federated campaigns	1a	1,404,018.			
	b Membership dues	1b				
	c Fundraising events	1c				
	d Related organizations	1d				
	e Government grants (contributions)	1e				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	45,759.			
	g Noncash contributions included in lns 1a-1f \$					
	h Total. Add lines 1a-1f		1,449,777.			
PROGRAM SERVICE REVENUE	2a ADMINISTRATIVE FEES	Business Code 561000	422,704.	422,704.		
	b MEMBERSHIP DUES	561000	5,000.	5,000.		
	c					
	d					
	e					
	f All other program service revenue					
	g Total. Add lines 2a-2f		427,704.			
	OTHER REVENUE	3 Investment income (including dividends, interest and other similar amounts)		1,054.		
4 Income from investment of tax-exempt bond proceeds						
5 Royalties						
6a Gross Rents		(i) Real (ii) Personal				
b Less rental expenses						
c Rental income or (loss)						
d Net rental income or (loss)						
7a Gross amount from sales of assets other than inventory		(i) Securities (ii) Other				
b Less cost or other basis and sales expenses						
c Gain or (loss)						
d Net gain or (loss)						
8a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18		a				
b Less direct expenses		b				
c Net income or (loss) from fundraising events						
9a Gross income from gaming activities See Part IV, line 19		a				
b Less direct expenses		b				
c Net income or (loss) from gaming activities						
10a Gross sales of inventory, less returns and allowances		a				
b Less cost of goods sold		b				
c Net income or (loss) from sales of inventory						
Miscellaneous Revenue		Business Code				
11a						
b						
c						
d All other revenue						
e Total. Add lines 11a-11d						
12 Total revenue. See instructions		1,878,535.	427,704.	0.	1,054.	

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)

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	1,404,018.	1,404,018.		
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	156,323.	79,485.	65,511.	11,327.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7 Other salaries and wages	164,677.	132,502.		32,175.
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9 Other employee benefits	32,334.	21,865.	8,160.	2,309.
10 Payroll taxes	24,622.	15,924.	5,249.	3,449.
11 Fees for services (non-employees)				
a Management				
b Legal				
c Accounting	10,000.		10,000.	
d Lobbying				
e Professional fundraising services See Part IV, line 17				
f Investment management fees				
g Other	4,181.		4,181.	
12 Advertising and promotion	16,331.	16,331.		
13 Office expenses	7,376.	5,639.	639.	1,098.
14 Information technology				
15 Royalties				
16 Occupancy	27,223.	21,865.	4,042.	1,316.
17 Travel	6,381.	6,005.	119.	257.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	3,937.	936.	1,983.	1,018.
20 Interest				
21 Payments to affiliates	49,718.	49,718.		
22 Depreciation, depletion, and amortization	592.	513.	49.	30.
23 Insurance	2,610.		2,610.	
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24f. If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O.)				
a TELEPHONE	8,092.	6,352.	429.	1,311.
b POSTAGE AND SHIPPING	3,313.	3,179.	64.	70.
c MISCELLANEOUS	2,417.	750.	1,430.	237.
d				
e				
f All other expenses				
25 Total functional expenses. Add lines 1 through 24f	1,924,145.	1,765,082.	104,466.	54,597.
26 Joint costs. Check here <input checked="" type="checkbox"/> if following SOP 98-2 (ASC 958-720). Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

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Form 990 (2010)

Part X Balance Sheet

		(A) Beginning of year		(B) End of year
ASSETS	1 Cash — non-interest-bearing	86,833.	1	445,329.
	2 Savings and temporary cash investments	528,364.	2	54,332.
	3 Pledges and grants receivable, net	822,068.	3	766,117.
	4 Accounts receivable, net	375.	4	389.
	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)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	4,784.	9	5,133.
	10a Land, buildings, and equipment cost or other basis. Complete Part VI of Schedule D	10a 46,618.		
	b Less accumulated depreciation	10b 46,618.	592.	10c
	11 Investments — publicly traded securities		11	
	12 Investments — other securities. See Part IV, line 11		12	
	13 Investments — program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	2,106.	15	2,019.
16 Total assets. Add lines 1 through 15 (must equal line 34)	1,445,122.	16	1,273,319.	
LIABILITIES	17 Accounts payable and accrued expenses	24,864.	17	24,687.
	18 Grants payable	1,047,619.	18	926,514.
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties.		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities. Complete Part X of Schedule D	53,417.	25	48,506.
	26 Total liabilities. Add lines 17 through 25	1,125,900.	26	999,707.
	NET ASSETS OR FUND BALANCES	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29 and lines 33 and 34.		
27 Unrestricted net assets		315,332.	27	266,901.
28 Temporarily restricted net assets		3,890.	28	6,711.
29 Permanently restricted net assets			29	
Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.				
30 Capital stock or trust principal, or current funds			30	
31 Paid-in or capital surplus, or land, building, or equipment fund			31	
32 Retained earnings, endowment, accumulated income, or other funds			32	
33 Total net assets or fund balances		319,222.	33	273,612.
34 Total liabilities and net assets/fund balances.		1,445,122.	34	1,273,319.

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Form 990 (2010)

Part XI Reconciliation of Net AssetsCheck if Schedule O contains a response to any question in this Part XI ☐

1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,878,535.
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,924,145.
3	Revenue less expenses. Subtract line 2 from line 1	3	-45,610.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	319,222.
5	Other changes in net assets or fund balances (explain in Schedule O)	5	0.
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	273,612.

Part XII Financial Statements and ReportingCheck if Schedule O contains a response to any question in this Part XII ☐

- 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?
- 2b Were the organization's financial statements audited by an independent accountant?
- c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?
- If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O
- 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 separate basis, consolidated basis, or both
- ☒ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis
- 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?
- 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

	Yes	No
2a		X
2b	X	
2c	X	
3a		X
3b		

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Form 990 (2010)

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

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

2010

Open to Public
Inspection

Name of the organization **ENVIRONMENTAL FEDERATION OF CALIFORNIA**
DBA EARTH SHARE CALIFORNIA

Employer identification number
94-2840364

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is (For lines 1 through 11, check only one box.)

- 1 ☐ A church, convention of churches or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 ☐ A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E.)
- 3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state _____
- 5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 ☐ A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 ☐ An organization that normally receives (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions — subject to certain exceptions, and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 10 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h.
- a ☐ Type I b ☐ Type II c ☐ Type III — Functionally integrated d ☐ Type III — Other
- e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f ☐ If the organization received a written determination from the IRS that is a Type I, Type II or Type III supporting organization, check this box.
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

- (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?
- (ii) A family member of a person described in (i) above?
- (iii) A 35% controlled entity of a person described in (i) or (ii) above?

	Yes	No
11 g (i)		
11 g (ii)		
11 g (iii)		

h Provide the following information about the supported organization(s)

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in column (i) listed in your governing document?		(v) Did you notify the organization in column (i) of your support?		(vi) Is the organization in column (i) organized in the U.S.?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
(A)									
(B)									
(C)									
(D)									
(E)									
Total									

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

Schedule A (Form 990 or 990-EZ) 2010

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

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include 'unusual grants'.)	1,806,023.	1,905,294.	1,806,662.	1,642,766.	1,454,777.	8,615,522.
2 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf						0.
3 The value of services or facilities furnished by a governmental unit to the organization without charge						0.
4 Total. Add lines 1 through 3	1,806,023.	1,905,294.	1,806,662.	1,642,766.	1,454,777.	8,615,522.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						0.
6 Public support. Subtract line 5 from line 4						8,615,522.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7 Amounts from line 4	1,806,023.	1,905,294.	1,806,662.	1,642,766.	1,454,777.	8,615,522.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	13,050.	15,157.	7,215.	3,306.	1,054.	39,782.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						0.
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						0.
11 Total support. Add lines 7 through 10						8,655,304.
12 Gross receipts from related activities, etc (see instructions)					12	0.

13 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ▶ ☐**Section C. Computation of Public Support Percentage**

14 Public support percentage for 2010 (line 6, column (f) divided by line 11, column (f))	14	99.5 %
15 Public support percentage from 2009 Schedule A, Part II, line 14	15	99.5 %

16a **33-1/3% support test – 2010.** If the organization did not check the box on line 13, and the line 14 is 33-1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☒b **33-1/3% support test – 2009.** If the organization did not check a box on line 13 or 16a, and line 15 is 33-1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐17a **10%-facts-and-circumstances test – 2010.** 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 – 2009.** 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 ▶ ☐

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Schedule A (Form 990 or 990-EZ) 2010

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

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

Section A. Public Support

Calendar year (or fiscal yr beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions and membership fees received. (Do not include any 'unusual grants'.)						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose.						
3 Gross receipts from activities that are not an unrelated trade or business under section 513.						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf.						
5 The value of services or facilities furnished by a governmental unit to the organization without charge.						
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.						
c Add lines 7a and 7b.						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal yr beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9 Amounts from line 6.						
10a 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.						
c Add lines 10a and 10b.						
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 the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ☐**Section C. Computation of Public Support Percentage**

15 Public support percentage for 2010 (line 8, column (f) divided by line 13, column (f)).	15	%
16 Public support percentage from 2009 Schedule A, Part III, line 15.	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2010 (line 10c, column (f) divided by line 13, column (f)).	17	%
18 Investment income percentage from 2009 Schedule A, Part III, line 17.	18	%

19a 33-1/3% support tests – 2010. If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 is not more than 33-1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization. ☐**b 33-1/3% support tests – 2009.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33-1/3%, and line 18 is not more than 33-1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization. ☐**20 Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions. ☐

Part IV **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. Also complete this part for any additional information. (See instructions).

[illegible]

**SCHEDULE D
(Form 990)**Department of the Treasury
Internal Revenue Service

Name of the organization

Supplemental Financial Statements

- **Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11, or 12.**
► **Attach to Form 990.** ► **See separate instructions.**

OMB No 1545-0047

2010**Open to Public
Inspection**ENVIRONMENTAL FEDERATION OF CALIFORNIA
DBA EARTH SHARE CALIFORNIA

Employer identification number

94-2840364

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered 'Yes' to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate contributions to (during year)		
3 Aggregate grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?		<input type="checkbox"/> Yes <input type="checkbox"/> No

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

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

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

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ► _____

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

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

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ► _____

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

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

9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered 'Yes' to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenues included in Form 990, Part VIII, line 1	► \$ _____
(ii) Assets included in Form 990, Part X	► \$ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

a Revenues included in Form 990, Part VIII, line 1	► \$ _____
b Assets included in Form 990, Part X	► \$ _____

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

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

a ☐ Public exhibition

d ☐ Loan or exchange programs

b ☐ Scholarly research

e ☐ Other _____

c ☐ Preservation for future generations

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

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

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

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

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

c Beginning balance

d Additions during the year

e Distributions during the year

f Ending balance

	Amount
1c	
1d	
1e	
1f	

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

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

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

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a					
b					
c					
d					
e					
f					
g					

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

a Board designated or quasi-endowment ▶ _____ %

b Permanent endowment ▶ _____ %

c Term endowment ▶ _____ %

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

(i) unrelated organizations

(ii) related organizations

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

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

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

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

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment		16,052.	16,052.	0.
e Other		30,566.	30,566.	0.
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				0.

BAA

Schedule D (Form 990) 2010

Part VII Investments—Other Securities. See Form 990, Part X, line 12. N/A

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A) -----		
(B) -----		
(C) -----		
(D) -----		
(E) -----		
(F) -----		
(G) -----		
(H) -----		
(I) -----		
Total. (Column (b) must equal Form 990 Part X, column (B) line 12.) ▶		

Part VIII Investments—Program Related. (See Form 990, Part X, line 13) N/A

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) ▶		

Part IX Other Assets. (See Form 990, Part X, line 15) N/A

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total. (Column (b) must equal Form 990, Part X, column (B), line 15) ▶	

Part X Other Liabilities. (See Form 990, Part X, line 25)

(a) Description of liability	(b) Amount
(1) Federal income taxes	
(2) AFFILIATION FEES PAYABLE	48,506.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	
Total. (Column (b) must equal Form 990, Part X, column (B) line 25) ▶	48,506.

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

SEE PART XIV

Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1,878,535.
2	Total expenses (Form 990, Part IX, column (A), line 25)	1,924,145.
3	Excess or (deficit) for the year Subtract line 2 from line 1	-45,610.
4	Net unrealized gains (losses) on investments	
5	Donated services and use of facilities	
6	Investment expenses	
7	Prior period adjustments	
8	Other (Describe in Part XIV)	
9	Total adjustments (net) Add lines 4 through 8	
10	Excess or (deficit) for the year per audited financial statements Combine lines 3 and 9	-45,610.

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

1	Total revenue, gains, and other support per audited financial statements	1	932,871.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments	2a	
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV)	2d	
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	932,871.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investments expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV) SEE PART XIV	4b	945,664.
c	Add lines 4a and 4b	4c	945,664.
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	1,878,535.

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

1	Total expenses and losses per audited financial statements	1	978,481.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV)	2d	
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	978,481.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investments expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV) SEE PART XIV	4b	945,664.
c	Add lines 4a and 4b	4c	945,664.
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	1,924,145.

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

PART X- FIN 48 FOOTNOTE

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.

Part XIV Supplemental Information *(continued)*[illegible]

2010

SCHEDULE D, PART XIV - SUPPLEMENTAL INFORMATION **PAGE 6**

CLIENT 2025

ENVIRONMENTAL FEDERATION OF CALIFORNIA
DBA EARTH SHARE CALIFORNIA

94-2840364

SCHEDULE D, PART XII, LINE 4B

OTHER REVENUE INCLUDED ON FORM 990 BUT NOT INCLUDED IN F/S

CONTRIBUTION AMTS DESIGNATED TO OTHERS

TOTAL \$ 945,664.
\$ 945,664.

SCHEDULE D, PART XIII, LINE 4B

OTHER EXPENSES INCLUDED ON FORM 990 BUT NOT INCLUDED IN F/S

CONTRIBUTION AMTS DESIGNATED TO OTHERS

TOTAL \$ 945,664.
\$ 945,664.

SCHEDULE I
(Form 990)

Department of the Treasury
Internal Revenue Service

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

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

OMB No. 1545-0047

2010

Open to Public
Inspection

Name of the organization

ENVIRONMENTAL FEDERATION OF CALIFORNIA

Part I General Information on Grants and Assistance

Employer identification number

94-2840364

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

☒ Yes ☐ No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000.

Part II can be duplicated if additional space is needed

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) AFRICAN WILDLIFE FDN 1400 16TH ST. NW, SUITE WASHINGTON, DC 20036	52-0781390		10,008.	0. BOOK		N/A	UNRESTRICTED
(2) AMERICAN FORESTS 734 15TH STREET, NW, SU WASHINGTON, DC 20005	53-0196544		5,789.	0. BOOK		N/A	UNRESTRICTED
(3) AMERICAN RIVER CONSER. P.O. BOX 562 COLOMA, CA 95613	68-0195752		16,027.	0. BOOK		N/A	UNRESTRICTED
(4) ANZA-BORREGO FDN P.O. BOX 2001 BORREGO SPRINGS, CA 920	33-0334338		10,355.	0. BOOK		N/A	UNRESTRICTED
(5) BAY AREA RIDGE TRAIL 1007 GENERAL KENNEDY AV SAN FRANCISCO, CA 94129	94-3148503		12,619.	0. BOOK		N/A	UNRESTRICTED
(6) BUTTE ENVIRON. COUNCIL 116 WEST SECOND ST., SU CHICO, CA 95928	94-2309829		6,326.	0. BOOK		N/A	UNRESTRICTED
(7) CA NATIVE PLANT SOC. 2707 K STREET, SUITE 1 SACRAMENTO, CA 95816	94-6116403		8,431.	0. BOOK		N/A	UNRESTRICTED
(8) CALIF. AGAINST WASTE P.O. BOX 289 SACRAMENTO, CA 95812	68-0032326		6,960.	0. BOOK		N/A	UNRESTRICTED

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

58

3 Enter total number of other organizations

0

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

TEEA3901L 10/29/10

Schedule I (Form 990) 2010

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1					
2					
3					
4					
5					
6					
7					

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

PART IV - ADDITIONAL SUPPLEMENTAL INFORMATION

EARTHSHARE ANNUALLY RECEIVES FROM ITS MEMBERS AUDITS, IRS FORM 990S, 501(C)(3)

DETERMINATION LETTERS, STATEMENTS OF THEIR ACTIVITIES IN THE UNITED STATES, AND AN

ANNUAL REPORTING ON THE USES OF FUNDS RECEIVED FROM EARTHSHARE.

Continuation Sheet for Schedule I (Form 990)

2010

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

Continuation Page 1 of 5

Name of the organization		Employer identification number					
ENVIRONMENTAL FEDERATION OF CALIFORNIA		94-2840364					
Part III Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CALIF. AUDUBON SOCIETY 2530 SAN PABLO AVE., SUIT BERKELEY, CA 94702	94-6086896		10,847.		BOOK	N/A	UNRESTRICT ED
CALIF. WATERFOWL ASSOC 4630 NORTHGATE BLVD., SUI SACRAMENTO, CA 95834	94-1149574		10,221.		BOOK	N/A	UNRESTRICT ED
CALIFORNIA TROUT 870 MARKET STREET, SUITE SAN FRANCISCO, CA 94102	23-7097680		11,564.		BOOK	N/A	UNRESTRICT ED
CLEAN WATER FUND 111 NEW MONTGOMERY ST., S SAN FRANCISCO, CA 94105	52-1043444		9,197.		BOOK	N/A	UNRESTRICT ED
COMM. FOR BETTER ENVIR 1440 BROADWAY, SUITE 701 OAKLAND, CA 94612	94-2998086		6,912.		BOOK	N/A	UNRESTRICT ED
DEFENDERS OF WILDLIFE 1130 17TH STREET NW WASHINGTON, DC 20036	53-0183181		7,942.		BOOK	N/A	UNRESTRICT ED
DESERT TORTOISE PRES. 4067 MISSION INN AVE RIVERSIDE, CA 92501	23-7413415		11,784.		BOOK	N/A	UNRESTRICT ED
EARTH ISLAND INSTITUTE 300 BROADWAY, SUITE 28 SAN FRANCISCO, CA 94133	94-2889684		8,388.		BOOK	N/A	UNRESTRICT ED
EARTH SHARE NATIONAL 7735 OLD GEORGETOWN RD., BETHESDA, MD 20814	52-1601960		113,659.		BOOK	N/A	UNRESTRICT ED
EARTH SHARE NAT'L MS 7735 OLD GEORGETOWN RD., BETHESDA, MD 20814	52-1601960		14,016.		BOOK	N/A	UNRESTRICT ED

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Schedule I (Form 990) 2010

Continuation Sheet for Schedule I (Form 990)

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

2010

Continuation Page 2 of 5

Name of the organization		Employer identification number					
ENVIRONMENTAL FEDERATION OF CALIFORNIA							
94-2840364							
Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ECOLOGY CENTER 2530 SAN PABLO AVENUE BERKELEY, CA 94702	94-1703351		6,700.		BOOK	N/A	UNRESTRICTED
ENVIRON. DEFENSE CTR 906 GARDEN ST SANTA BARBARA, CA 93101	77-0061994		7,988.		BOOK	N/A	UNRESTRICTED
ENVIRONMENTAL DEFENSE 5655 COLLEGE AVE., SUITE OAKLAND, CA 94618	11-6107128		11,799.		BOOK	N/A	UNRESTRICTED
FRIENDS OF THE EARTH 311 CALIFORNIA ST., SUITE SAN FRANCISCO, CA 94104	23-7420660		7,697.		BOOK	N/A	UNRESTRICTED
FRIENDS OF THE RIVER 915 20TH ST. SACRAMENTO, CA 95814	94-2400210		12,246.		BOOK	N/A	UNRESTRICTED
GOLDEN GATE NAT'L PARK FORT MASON CENTER, BUILDI SAN FRANCISCO, CA 94123	94-2781708		10,434.		BOOK	N/A	UNRESTRICTED
GREATER LA ZOO ASSOC 5333 ZOO DRIVE LOS ANGELES, CA 90027	95-2369545		7,026.		BOOK	N/A	UNRESTRICTED
GREENBELT ALLIANCE 631 HOWARD ST., SUITE 510 SAN FRANCISCO, CA 94105	94-1676747		9,631.		BOOK	N/A	UNRESTRICTED
HEAL THE BAY 1444 9TH ST. SANTA MONICA, CA 90401	95-4031055		15,455.		BOOK	N/A	UNRESTRICTED
JANE GOODALL INSTITUTE 4245 NORTH FAIRFAX DRIVE, ARLINGTON, VA 22203	94-2474731		5,219.		BOOK	N/A	UNRESTRICTED

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Schedule I Cont (Form 990) 2010

Continuation Sheet for Schedule I (Form 990)

2010

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

Continuation Page 3 of 5

Name of the organization			Employer identification number				
ENVIRONMENTAL FEDERATION OF CALIFORNIA							
Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LEAGUE TO SAVE L TAHOE 955 EMERALD BAY ROAD S. LAKE TAHOE, CA 96150	94-6128680		14,078.		BOOK	N/A	UNRESTRICTED
MARIN AGRIC. LAND TR. P.O. BOX 809 POINT REYES ST., CA 94956	94-2689383		8,314.		BOOK	N/A	UNRESTRICTED
MARIN CONSERV. LEAGUE 1623A FIFTH AVENUE SAN RAFAEL, CA 94901	94-6089780		5,840.		BOOK	N/A	UNRESTRICTED
MOUNTAIN LION FDN 1107 9TH STREET, SUITE 34 SACRAMENTO, CA 95814	94-3015360		10,136.		BOOK	N/A	UNRESTRICTED
NATIONAL PARKS CONSER. 1300 19TH ST. NW, SUITE 3 WASHINGTON, DC 20036	53-0225165		17,812.		BOOK	N/A	UNRESTRICTED
NAT'L WILDLIFE FED 11100 WILDLIFE CENTER DRI RESTON, VA 20190	53-0204616		12,945.		BOOK	N/A	UNRESTRICTED
NATURAL RESOURCES DEF. 111 SUTTER ST., 20TH FLOOR SAN FRANCISCO, CA 94104	13-2654926		37,572.		BOOK	N/A	UNRESTRICTED
NATURE CONSERVANCY CA 201 MISSION ST., 4TH FLOOR SAN FRANCISCO, CA 94105	53-0242652		117,089.		BOOK	N/A	UNRESTRICTED
OCEAN CONSERVANCY 1300 19TH ST. NW, SUITE 8 WASHINGTON, DC 20036	24-7245152		12,132.		BOOK	N/A	UNRESTRICTED
ORGANIC FARMING RES. 303 POTRERO AVE., SUITE 2 SANTA CRUZ, CA 95060	77-0252545		11,360.		BOOK	N/A	UNRESTRICTED

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Schedule I (Form 990) 2010

Continuation Sheet for Schedule I (Form 990)

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

2010

Continuation Page 4 of 5

Name of the organization		Employer identification number					
ENVIRONMENTAL FEDERATION OF CALIFORNIA		94-2840364					
Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
OUR CITY FOREST 595 PARK AVENUE., SUITE 1 SAN JOSE, CA 95110	77-0371911		6,600.		BOOK	N/A	UNRESTRICTED
PACIFIC ENVIRON. & RES 311 CALIFORNIA ST., SUITE SAN FRANCISCO, CA 94104	94-2628924		6,217.		BOOK	N/A	UNRESTRICTED
PESTICIDE ACTION NET. 49 POWELL STREET, SUITE 5 SAN FRANCISCO, CA 94102	94-2949686		7,125.		BOOK	N/A	UNRESTRICTED
PLACER LAND TRUST 11521 BLOCKER DRIVE, SUIT AUBURN, CA 95603	68-0223143		6,779.		BOOK	N/A	UNRESTRICTED
PLAN. & CONS. LEAGUE 1107 NINTH ST., SUITE 360 SACRAMENTO, CA 95814	94-2190378		6,665.		BOOK	N/A	UNRESTRICTED
RAILS TO TRAILS CONSER 26 O'FARRELL STREET, SUIT SAN FRANCISCO, CA 94108	52-1437006		15,322.		BOOK	N/A	UNRESTRICTED
RAINFOREST ACTION NETW 221 PINE ST., SUITE 500 SAN FRANCISCO, CA 94104	94-3045180		13,195.		BOOK	N/A	UNRESTRICTED
SACRAMENTO TREE FDN 191 LATHROP WAY, SUITE D SACRAMENTO, CA 95815	94-2825234		6,722.		BOOK	N/A	UNRESTRICTED
SAN DIEGO COASTKEEPER 2924 EMERSON ST., SUITE 2 SAN DIEGO, CA 92106	33-0647946		7,094.		BOOK	N/A	UNRESTRICTED
SAN GORGONIO WILDERNES 34701 MILL CREEK ROAD MENTONE, CA 92359	33-0478045		7,339.		BOOK	N/A	UNRESTRICTED

Schedule I (Form 990) 2010

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Continuation Sheet for Schedule I (Form 990)

2010

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

Continuation Page 5 of 5

Name of the organization						Employer identification number	
ENVIRONMENTAL FEDERATION OF CALIFORNIA						94-2840364	
Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SAN JOSE CONSERV. CORP 2650 SENTER RD. SAN JOSE, CA 95111	77-0155997		7,612.		BOOK	N/A	UNRESTRICTED
SAVE OUR SHORES 345 LAKE AVE., SUITE A SANTA CRUZ, CA 95062	94-2745941		11,345.		BOOK	N/A	UNRESTRICTED
SAVE THE BAY 350 FRANK H. OGAWA PLAZA, OAKLAND, CA 94612	94-6078420		22,705.		BOOK	N/A	UNRESTRICTED
SF BAYKEEPER 785 MARKET STREET, SUITE SAN FRANCISCO, CA 94103	68-0120240		9,090.		BOOK	N/A	UNRESTRICTED
SIERRA CLUB FOUNDATION 85 SECOND ST., SUITE 750 SAN FRANCISCO, CA 94105	94-6069890		49,264.		BOOK	N/A	UNRESTRICTED
SLIDE RANCH 2025 SHORELINE HIGHWAY MUIR BEACH, CA 94965	23-7069469		6,829.		BOOK	N/A	UNRESTRICTED
SURFRIDER FOUNDATION P.O. BOX 6010 SAN CLEMENTE, CA 92467	95-3941826		51,538.		BOOK	N/A	UNRESTRICTED
TRUST FOR PUBLIC LAND 116 NEW MONTGOMERY ST., 4 SAN FRANCISCO, CA 94105	23-7222333		12,128.		BOOK	N/A	UNRESTRICTED
URBAN CORPS SAN DIEGO 3127 JEFFERSON ST. SAN DIEGO, CA 92110	33-0352148		8,011.		BOOK	N/A	UNRESTRICTED
WORLD WILDLIFE FUND 1250 24TH ST. NW WASHINGTON, DC 20037	52-1693387		33,832.		BOOK	N/A	UNRESTRICTED

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Schedule I Cont (Form 990) 2010

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.
▶ Attach to Form 990 or 990-EZ.

OMB No 1545-0047

2010

**Open to Public
Inspection**

Name of the organization **ENVIRONMENTAL FEDERATION OF CALIFORNIA**
DBA EARTH SHARE CALIFORNIA

Employer identification number
94-2840364

FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS

1) CFO WORKS WITH TAX PREPARERS TO FINALIZE DRAFT OF FORM 990. 2) ONCE DRAFT IS COMPLETED, COPY OF DRAFT WILL BE SUBMITTED TO ESCA FINANCE AND AUDIT COMMITTEE MEMBERS, AS WELL AS ESCA'S EXECUTIVE DIRECTOR. 3) ESCA FINANCE AND AUDIT COMMITTEE MEMBERS, AS WELL AS EXECUTIVE DIRECTOR, WILL REVIEW THE DRAFT AND MAKE SUGGESTIONS FOR NECESSARY CHANGES TO CFO, WHO WILL REVIEW COMMENTS AND DISCUSS AS NEEDED WITH TAX PREPARERS. 4) IF NECESSARY, ANY CHANGES NEEDED WILL BE INCORPORATED INTO THE FORM 990 AND A SECOND DRAFT PREPARED. 5) A FORMAL MEETING OF THE FINANCE AND/OR AUDIT COMMITTEES WILL BE SCHEDULED, DURING WHICH THE PROPOSED FINAL VERSION OF THE FORM 990 WILL BE DISCUSSED AND A VOTE TAKEN TO APPROVE THE DRAFT. 6) SHOULD THE MEETING OF THE FINANCE AND/OR AUDIT COMMITTEES RESULT IN MORE SUGGESTED CHANGES, THEN THESE CHANGES WILL BE DISCUSSED WITH THE TAX PREPARERS AND INCORPORATED INTO THE FORM 990. THEN, A FINAL DRAFT WILL BE RE-SUBMITTED TO THE FINANCE AND/OR AUDIT COMMITTEES FOR THEIR FINAL APPROVAL. 7) ONCE THE FINANCE AND/OR AUDIT COMMITTEES APPROVE THE FINAL VERSION OF THE FORM 990, THE TAX PREPARERS WILL THEN FILE THE FORM 990.

FORM 990, PART VI, LINE 12C - EXPLANATION OF MONITORING AND ENFORCEMENT OF CONFLICTS

PER THE WRITTEN CONFLICT OF INTEREST POLICY, IT IS THE RESPONSIBILITY OF EACH BOARD MEMBER TO REPORT ANY POTENTIAL CONFLICTS OF INTEREST ON AN ANNUAL BASIS. THEREFORE, EACH YEAR, ALL BOARD MEMBERS OF ESCA ARE REQUIRED TO COMPLETE A FULL DISCLOSURE FORM CONCERNING PERTINENT ASPECTS OF ANY POTENTIAL OR ACTUAL CONFLICTS OF INTEREST AND TO SIGN AND DATE THE FORM. THESE FORMS ARE REVIEWED TO DETERMINE IF THERE HAVE BEEN ANY REPORTED CONFLICTS OF INTEREST. ANY REPORTED POTENTIAL OR ACTUAL CONFLICTS OF INTEREST WOULD BE INVESTIGATED BY THE EXECUTIVE COMMITTEE TO DETERMINE WHETHER OR NOT THEY CONSTITUTE ANY ACTION ON THE PART OF THE FULL BOARD, UP TO AND INCLUDING REMOVAL FROM THE BOARD SHOULD THAT BE DEEMED NECESSARY.

Name of the organization ENVIRONMENTAL FEDERATION OF CALIFORNIA
DBA EARTH SHARE CALIFORNIA

Employer identification number
94-2840364

FORM 990, PART VI, LINE 15B - COMPENSATION REVIEW & APPROVAL PROCESS FOR OFFICERS & KEY EMPLOYEES

THE PROCESS FOR DETERMINING THE INITIAL COMPENSATION TO OFFER THE EXECUTIVE DIRECTOR AND THE CHIEF FINANCIAL OFFICER IS CONDUCTED BY THE PERSONNEL COMMITTEE. THE COMMITTEE CONSIDERS COMPARABILITY DATA, DUTIES AND RESPONSIBILITIES OF THE POSITION(S) AND THE ORGANIZATION'S CURRENT FINANCIAL STATE. THE PERSONNEL COMMITTEE SUBMITS ITS REVIEW AND RECOMMENDATION OF COMPENSATION TO THE EXECUTIVE COMMITTEE FOR FINAL APPROVAL BEFORE THE INITIAL OFFER IS MADE.

THE ANNUAL REVIEW OF THE EXECUTIVE DIRECTOR IS CONDUCTED BY THE PERSONNEL COMMITTEE. THE PERSONNEL COMMITTEE CONDUCTS AN ANNUAL 360 REVIEW ALLOWING FOR INPUT FROM THE ED, ORGANIZATION'S STAFF, MEMBER GROUPS AND BOARD OF DIRECTORS. A REVIEW OF THE ED'S ACCOMPLISHMENTS IS ALSO TAKEN IN CONSIDERATION AND REVIEWED AGAINST THE ANNUAL WORK PLAN AND REVENUE. ONCE THE REVIEW IS COMPLETED THE PERSONNEL COMMITTEE, ITS MEMBERS HAVE A CLOSED DOOR SESSION FOR REVIEW AND DISCUSSION. THE COMMITTEE THEN MEETS IN A CLOSE DOOR SESSION WITH THE EXECUTIVE COMMITTEE MEMBERS FOR FINAL APPROVAL OF SALARY INCREASE AND BONUS, IF TO BE OFFERED, TO THE ED. ANY CONSIDERATION OF A SALARY INCREASE OR BONUS IS DONE WITHIN THE CONSTRAINTS OF THE ORGANIZATION'S ANNUAL BUDGET. THE PRESIDENT OF THE BOARD HAS THE FINAL MEETING WITH THE ED TO PRESENT THE ANNUAL REVIEW AND THE SALARY AND BONUS TO BE OFFERED.

PRESENTLY THE ANNUAL REVIEW OF THE CFO IS CONDUCTED BY THE EXECUTIVE DIRECTOR. IN THE FUTURE, SHOULD THE ORGANIZATION GROW TO ACCOMMODATE ADDITIONAL KEY EMPLOYEES A REVIEW OF COMPENSATION WILL BE DONE BY THE PERSONNEL COMMITTEE.

FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AVAILABLE

FOR THE PRESENT TIME, THE GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS ARE AVAILABLE TO THE PUBLIC UPON REQUEST. FORM 990 CAN BE VIEWED ONLINE AT GUIDESTAR.

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

OMB No. 1545-1709

► **File a separate application for each return.**

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box ☒
- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form)

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868

Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile and click on *e-file for Charities & Nonprofits*.

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).A corporation required to file Form 990-T and requesting an automatic 6-month extension — check this box and complete Part I only ☐*All other corporations (including 1120-C filers), partnerships, REMICS, and trusts must use Form 7004 to request an extension of time to file income tax returns*

Type or print File by the due date for filing your return. See instructions.	Name of exempt organization	Employer identification number
	ENVIRONMENTAL FEDERATION OF CALIFORNIA DBA EARTH SHARE CALIFORNIA	94-2840364
	Number, street, and room or suite number. If a P.O. box, see instructions.	
	49 POWELL STREET #510	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions.	
	SAN FRANCISCO, CA 94102	

Enter the Return code for the return that this application is for (file a separate application for each return) ☐

Application Is For	Return Code	Application Is For	Return Code
Form 990	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 990-EZ	03	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (section 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

- The books are in the care of _____

Telephone No. _____ FAX No. _____

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

- 1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until _____, 20____, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
- ☐ calendar year 20____ or
 - ☐ tax year beginning _____, 20____, and ending _____, 20____

- 2 If the tax year entered in line 1 is for less than 12 months, check reason: ☐ Initial return ☐ Final return ☐ Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$
b If this application is for Form 990-PF, 990-T, 4720, or 6069, 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, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.**BAA For Paperwork Reduction Act Notice, see Instructions.**Form **8868** (Rev. 1-2011)

- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** and check this box ☒ **X**

Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** (on page 1).

Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).

Type or print	Name of exempt organization	Employer identification number
	ENVIRONMENTAL FEDERATION OF CALIFORNIA DBA EARTH SHARE CALIFORNIA	94-2840364
File by the extended due date for filing the return. See instructions	Number, street, and room or suite number. If a P.O. box, see instructions	
	BREGANTE + COMPANY LLP, CPA'S 55 HAWTHORNE STREET, SUITE 910 City, town or post office, state, and ZIP code. For a foreign address, see instructions. SAN FRANCISCO, CA 94105	

Enter the Return code for the return that this application is for (file a separate application for each return) **01**

Application Is For	Return Code	Application Is For	Return Code
Form 990	01		
Form 990-BL	02	Form 1041-A	08
Form 990-EZ	03	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (section 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

- The books are in care of **JAY EILERTSON**
Telephone No **415-981-1999** FAX No. _____
- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN).... If this is for the whole group, check this box ☐. If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for.

- 4 I request an additional 3-month extension of time until 5/15, 20 12
- 5 For calendar year _____, or other tax year beginning 7/01, 20 10, and ending 6/30, 20 11
- 6 If the tax year entered in line 5 is for less than 12 months, check reason: ☐ Initial return ☐ Final return
☐ Change in accounting period

7 State in detail why you need the extension... ADDITIONAL TIME IS REQUIRED TO GATHER ALL THE INFORMATION NECESSARY FOR FILING A COMPLETE AND ACCURATE RETURN

8a 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.	8a \$
8b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.	8b \$
8c Balance due. Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	8c \$

Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature Ken Preston Title CPA Date 2/14/12

BAA

FIF20502L 11/15/10

Form 8868 (Rev 1-2011)