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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)

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

OMB No. 1545-0047

2011

Open to Public Inspection

A For the 2011 calendar year, or tax year beginning **JUL 1, 2011** and ending **JUN 30, 2012**

B Check if applicable: ☐ Address change ☒ Name change ☐ Initial return ☐ Terminated ☐ Amended return ☐ Application pending	C Name of organization ECHOING GREEN, INC. Doing Business As Number and street (or P.O. box if mail is not delivered to street address) Room/suite 494 EIGHTH AVENUE - 2ND FLOOR City or town, state or country, and ZIP + 4 NEW YORK, NY 10001-2519 F Name and address of principal officer CHERYL DORSEY SAME AS C ABOVE	D Employer identification number 13-3424419 E Telephone number 212-689-1165 G Gross receipts \$ 5,622,178. H(a) Is this a group return for affiliates? ☐ Yes ☒ No H(b) Are all affiliates included? ☐ Yes ☐ No If "No," attach a list (see instructions) H(c) Group exemption number ▶
I Tax-exempt status ☒ 501(c)(3) ☐ 501(c) () ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527		
J Website: ▶ WWW.ECHOINGGREEN.ORG		
K Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶		L Year of formation: 1987 M State of legal domicile: NY

Part I Summary

1	Briefly describe the organization's mission or most significant activities. ASSISTING TOP EMERGING SOCIAL ENTREPRENEURS TO CREATE INNOVATIVE SOCIAL CHANGE WORLDWIDE.		
2	Check this box ☐ 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	17
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	16
5	Total number of individuals employed in calendar year 2011 (Part V, line 2a)	5	26
6	Total number of volunteers (estimate if necessary)	6	427
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
b	Net unrelated business taxable income from Form 990-T, line 34	7b	0.
8	Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
9	Program service revenue (Part VIII, line 2g)	3,502,438.	4,921,009.
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	0.	598,550.
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	17,542.	17,444.
12	Total revenue. Add lines 8 through 11 (must equal Part VIII, column (A), line 12)	48,411.	45,118.
13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	3,568,391.	5,582,121.
14	Benefits paid to or for members (Part IX, column (A), line 4)	1,334,251.	2,657,036.
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	0.	0.
16a	Professional fundraising fees (Part IX, column (A), line 11e)	1,352,847.	1,823,952.
b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 753,609.	0.	45,000.
17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	1,065,094.	1,503,002.
18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	3,752,192.	6,028,990.
19	Revenue less expenses. Subtract line 18 from line 12	-183,801.	-446,869.
20	Total assets (Part X, line 16)	Beginning of Current Year	End of Year
21	Total liabilities (Part X, line 26)	5,784,569.	6,329,026.
22	Net assets or fund balances. Subtract line 21 from line 20	1,743,666.	2,734,992.
		4,040,903.	3,594,034.

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 CHERYL DORSEY, PRESIDENT Type or print name and title	Date 5/8/13
Paid Preparer Use Only	Print/Type preparer's name FREDERICK MARTENS Firm's name ▶ LUTZ AND CARR, CPAS LLP Firm's address ▶ 300 EAST 42ND STREET NEW YORK, NY 10017	Preparer's signature Date 04/13/13 Check if self-employed ☐ PTIN P00298107 Firm's EIN ▶ 13-1655065 Phone no. 212-697-2299

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

☒ Yes ☐ No

SCANNED JUN 24 2013

616

Part III Statement of Program Service Accomplishments

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

☒ X**1** Briefly describe the organization's mission:

ECHOING GREEN UNLEASHES NEXT GENERATION TALENT TO SOLVE THE WORLD'S BIGGEST PROBLEMS. SINCE OUR FOUNDING ALMOST 25 YEARS AGO BY THE PRIVATE EQUITY FIRM, GENERAL ATLANTIC, WE HAVE FOCUSED OUR EFFORTS ON IDENTIFYING AND FUNDING PROMISING SOCIAL ENTREPRENEURS TO HELP THEM

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 organization's program service accomplishments for each of its three largest program services, as measured 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 \$ 3,880,672. including grants of \$ 2,657,036.) (Revenue \$ 627,128.)

FELLOWSHIP AND ALUMNI PROGRAM - THE ECHOING GREEN FELLOWSHIP PROGRAM FOCUSES ON IDENTIFYING AND FUNDING PROMISING SOCIAL ENTREPRENEURS TO HELP THEM LAUNCH INNOVATIVE SOCIAL CHANGE ORGANIZATIONS WORLDWIDE. WE'VE INVESTED CLOSE TO \$30 MILLION IN SEED FUNDING TO NEARLY 500 SOCIAL ENTREPRENEURS WHO WORK TO SOLVE DEEP-ROOTED PROBLEMS IN THE WORLD THROUGH THEIR INNOVATIVE IDEAS. THROUGH OUR TWO-YEAR ECHOING GREEN FELLOWSHIP PROGRAM, WE PROVIDE START-UP CAPITAL AND TECHNICAL ASSISTANCE TO HELP NEW LEADERS LAUNCH THEIR ORGANIZATIONS AND BUILD CAPACITY. WE OFFER GRANTS OF UP TO \$90,000, A HEALTH INSURANCE REIMBURSEMENT STIPEND, A YEARLY PROFESSIONAL DEVELOPMENT STIPEND, ACCESS TO CONFERENCES LED BY ORGANIZATIONAL DEVELOPMENT EXPERTS, ACCESS TO TECHNICAL SUPPORT AND PRO BONO PARTNERSHIPS TO HELP GROW YOUR

4b (Code) (Expenses \$ 219,001. including grants of \$) (Revenue \$ 16,540.)

YOUTH ENGAGEMENT - A MULTI-MEDIA PLATFORM THAT SERVES AS A KEY HUB OF YOUTH ACTIVITY ON SOCIAL ENTREPRENEURSHIP AND DRIVES THE MOBILIZATION OF YOUNG PROFESSIONALS INTO CAREERS OF SOCIAL CHANGE. THE ACTIVITIES INCLUDE PUBLISHING OUR NEW, 2ND-EDITION BE BOLD BOOK, WORK ON PURPOSE, WHICH DELVES MORE DEEPLY INTO THE LIFE JOURNEYS AND LESSONS OF TOP SOCIAL ENTREPRENEURS; EXPANDING ECHOING GREEN'S JUNIOR BOARD, THE SOCIAL INVESTMENT COUNCIL TO PARTNER WITH ECHOING GREEN AND OUR FELLOWS; AND DEVELOPING ECHOING GREEN'S WEBSITE AND SOCIAL MEDIA OFFERINGS TO HELP YOUNG PEOPLE NAVIGATE THE CHANGEMAKING LANDSCAPE.

4c (Code) (Expenses \$ 433,909. including grants of \$) (Revenue \$)

THOUGHT LEADERSHIP - DEVELOP AND DISSEMINATE RESEARCH AND LEARNING FROM SEEDING AND SUPPORTING EARLY STAGE SOCIAL ENTREPRENEURS TO KEY POPULATIONS WHO WORK IN THE FIELD. KEY TOOLS CREATED IN THIS PROGRAM INCLUDE THE SEQ FRAMEWORK, FOR UNDERSTANDING THE QUALITIES THAT SUCCESSFUL SOCIAL ENTREPRENEURS POSSESS, AND THE INNOVATION INDEX, TO DETECT EMERGING TRENDS IN YOUNG PEOPLES' EFFORTS TO CHANGE THE WORLD. ECHOING GREEN WILL BUILD OUT A CALENDAR OF TARGETED SPEAKING ENGAGEMENTS THAT ALLOWS US TO AMPLIFY OUR MESSAGE TO KEY STAKEHOLDERS AS WELL AS NEW ONES.

4d Other program services (Describe in Schedule O.)

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

4e Total program service expenses 4,533,582.

Form 990 (2011)

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)? <i>If "Yes," complete Schedule A</i>	X	
2 Is the organization required to complete Schedule B, Schedule of Contributors?	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</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? <i>If "Yes," complete Schedule C, Part II</i>		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? <i>If "Yes," complete Schedule C, Part III</i>		X
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</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? <i>If "Yes," complete Schedule D, Part II</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		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? <i>If "Yes," complete Schedule D, Part IV</i>		X
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	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? <i>If "Yes," complete Schedule D, Part VI</i>	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? <i>If "Yes," complete Schedule D, Part VII</i>		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? <i>If "Yes," complete Schedule D, Part VIII</i>		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? <i>If "Yes," complete Schedule D, Part IX</i>		X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>		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)? <i>If "Yes," complete Schedule D, Part X</i>	X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII</i>	X	
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional</i>		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		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, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>	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? <i>If "Yes," complete Schedule F, Parts II and IV</i>	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? <i>If "Yes," complete Schedule F, Parts III and IV</i>	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? <i>If "Yes," complete Schedule G, Part I</i>	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? <i>If "Yes," complete Schedule G, Part II</i>	X	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b <i>If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?</i>		

Form 990 (2011)

Part IV Checklist of Required Schedules (continued)

	Yes	No
21 Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	X	
22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	X	
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	X	
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
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?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I		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? If "Yes," complete Schedule L, Part I		X
26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III		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? If "Yes," complete Schedule L, Part IV		X
b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		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? If "Yes," complete Schedule L, Part IV	X	
29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I		X
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		X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
b Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2		X
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	X	

Note. All Form 990 filers are required to complete Schedule O

Form 990 (2011)

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

Form 990 (2011)

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**

	1a	1b	2	3	4	5	6	7a	7b	8a	8b	9	Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year	17													
If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.														
b Enter the number of voting members included in line 1a, above, who are independent		16												
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?														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?														X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?					X									
5 Did the organization become aware during the year of a significant diversion of the organization's assets?														X
6 Did the organization have members or stockholders?														X
7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?														X
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?														X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:														
a The governing body?						X								
b Each committee with authority to act on behalf of the governing body?														X
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														X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)

	10a	10b	11a	11b	12a	12b	12c	13	14	15a	15b	16a	16b	Yes	No
10a Did the organization have local chapters, branches, or affiliates?															X
b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?															
11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?			X												
b Describe in Schedule O the process, if any, used by the organization to review this Form 990															
12a Did the organization have a written conflict of interest policy? If "No," go to line 13					X										
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?					X										
c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done							X								
13 Did the organization have a written whistleblower policy?								X							
14 Did the organization have a written document retention and destruction policy?								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										X					
b Other officers or key employees of the organization										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?															X
b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?															

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed **NY**

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made 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 made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: **LARA GALINSKY - 212-689-1165**
494 EIGHTH AVENUE - 2ND FLOOR, NEW YORK, NY 10001-2519

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**

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.

- 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 (do not check more than one box, unless person is both an officer and a director/trustee)						(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) DAVID C. HODGSON CHAIR	1.00	X		X				0.	0.	0.
(2) MAYA AJMERA VICE CHAIR	1.00	X		X				0.	0.	0.
(3) CHERYL DORSEY PRESIDENT/EXECUTIVE DIRECTOR	40.00	X		X				209,308.	0.	18,641.
(4) ESTHER BENJAMIN TREASURER	1.00	X		X				0.	0.	0.
(5) STEVE P. BUFFONE BOARD MEMBER	1.00	X						0.	0.	0.
(6) PETER J. CAMPBELL BOARD MEMBER	1.00	X						0.	0.	0.
(7) GUY DE CHAZAL BOARD MEMBER	1.00	X						0.	0.	0.
(8) BETSY FADER BOARD MEMBER	1.00	X						0.	0.	0.
(9) MARIANNE GIMON BOARD MEMBER	1.00	X						0.	0.	0.
(10) DAVID ISSROFF BOARD MEMBER	1.00	X						0.	0.	0.
(11) ANDREW R. KASSOY BOARD MEMBER	1.00	X						0.	0.	0.
(12) DR. MARIE KELLY BOARD MEMBER	1.00	X						0.	0.	0.
(13) AJAY NAGPAL BOARD MEMBER	1.00	X						0.	0.	0.
(14) DIANA PROPPER DE CALLEJON BOARD MEMBER	1.00	X						0.	0.	0.
(15) MARC SAIONTZ BOARD MEMBER	1.00	X						0.	0.	0.
(16) JEROME C. VASCELLARO BOARD MEMBER	1.00	X						0.	0.	0.
(17) DAN WEISS BOARD MEMBER	1.00	X						0.	0.	0.

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

(A) Name and title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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) LARA GALINSKY SENIOR VICE PRESIDENT	40.00			X				154,423.	0.	15,647.
(19) ARMAND BIROONAK SECRETARY	40.00			X				0.	0.	0.
(20) RICH LEIMSIDER DIRECTOR OF FELLOW & ALUMNI PROGRAMS	40.00					X		118,585.	0.	5,941.
1b Sub-total								482,316.	0.	40,229.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								482,316.	0.	40,229.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **3**

- 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
- 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

	Yes	No
3		X
4	X	
5		X

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. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
MBO PARTNERS PO BOX 823673, PHILADELPHIA, PA 19182	ACCOUNTING & FINANCIAL CONSULTING	119,943.
2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization 1		

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	1 a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c	560,000.				
	d Related organizations	1d					
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above	1f	4,361,009.				
	g Noncash contributions included in lines 1a-1f \$						
	h Total. Add lines 1a-1f			4,921,009.			
Program Service Revenue	2 a GRANT ASSIGNMENT REVEN	Business Code	900099	598,550.	598,550.		
	b						
	c						
	d						
	e						
	f All other program service revenue						
	g Total. Add lines 2a-2f			598,550.			
	Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			17,444.		
4 Income from investment of tax-exempt bond proceeds							
5 Royalties							
6 a Gross rents		(i) Real	(ii) Personal				
b Less: rental expenses							
c Rental income or (loss)							
d Net rental income or (loss)							
7 a 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)							
8 a Gross income from fundraising events (not including \$ 560,000. of contributions reported on line 1c). See Part IV, line 18		a	22,250.				
b Less: direct expenses		b	22,250.				
c Net income or (loss) from fundraising events				0.			
9 a Gross income from gaming activities. See Part IV, line 19		a					
b Less: direct expenses		b					
c Net income or (loss) from gaming activities							
10 a Gross sales of inventory, less returns and allowances		a	34,347.				
b Less: cost of goods sold	b	17,807.					
c Net income or (loss) from sales of inventory			16,540.	16,540.			
Miscellaneous Revenue	11 a OTHER INCOME	Business Code	900099	28,578.	28,578.		
	b						
	c						
	d All other revenue						
	e Total. Add lines 11a-11d			28,578.			
	12 Total revenue. See instructions.			5,582,121.	643,668.	0.	17,444.

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).

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

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 United States. See Part IV, line 21	1,141,805.	1,141,805.		
2 Grants and other assistance to individuals in the United States. See Part IV, line 22	740,315.	740,315.		
3 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16	774,916.	774,916.		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	442,746.	265,471.	56,605.	120,670.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	1,084,866.	575,350.	194,989.	314,527.
8 Pension plan accruals and contributions (include section 401(k) and section 403(b) employer contributions)	19,330.	475.	18,407.	448.
9 Other employee benefits	153,891.	40,974.	93,458.	19,459.
10 Payroll taxes	123,119.	37,966.	67,351.	17,802.
11 Fees for services (non-employees)				
a Management	424,552.	315,516.	103,242.	5,794.
b Legal	7,722.	4,551.	1,270.	1,901.
c Accounting	132,925.	78,336.	21,872.	32,717.
d Lobbying				
e Professional fundraising services. See Part IV, line 17	45,000.			45,000.
f Investment management fees				
g Other	66,800.	44,886.	14,688.	7,226.
12 Advertising and promotion	5,076.	3,819.	1,257.	
13 Office expenses	170,263.	68,434.	73,690.	28,139.
14 Information technology				
15 Royalties				
16 Occupancy	233,394.	125,199.	52,852.	55,343.
17 Travel	116,132.	89,089.	21,950.	5,093.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	24,843.	14,599.	3,927.	6,317.
23 Insurance				
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a EVENT FEES & CATERING	271,252.	195,234.	2,711.	73,307.
b MISCELLANEOUS	50,043.	16,647.	13,530.	19,866.
c				
d				
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	6,028,990.	4,533,582.	741,799.	753,609.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

Check here ☐ if following SOP 98-2 (ASC 958-720)

Part X Balance Sheet

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	330,837.	1	168,400.
	2 Savings and temporary cash investments	2,685,720.	2	3,145,710.
	3 Pledges and grants receivable, net	2,588,680.	3	2,734,928.
	4 Accounts receivable, net	21,993.	4	8,470.
	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	27,974.	8	14,683.
	9 Prepaid expenses and deferred charges	79,373.	9	40,024.
	10a Land, buildings, and equipment cost or other basis. Complete Part VI of Schedule D	10a 394,118.		
	b Less: accumulated depreciation	10b 214,080.		
		969.	10c	180,038.
	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	49,023.	15	36,773.
	16 Total assets. Add lines 1 through 15 (must equal line 34)	5,784,569.	16	6,329,026.
Liabilities	17 Accounts payable and accrued expenses	125,525.	17	207,468.
	18 Grants payable	1,618,141.	18	2,527,524.
	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 (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25	
	26 Total liabilities. Add lines 17 through 25	1,743,666.	26	2,734,992.
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here ☒ and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	1,754,351.	27	1,608,367.
	28 Temporarily restricted net assets	2,047,217.	28	1,746,332.
	29 Permanently restricted net assets	239,335.	29	239,335.
	Organizations that do not follow SFAS 117, check here ☐ 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	4,040,903.	33	3,594,034.
	34 Total liabilities and net assets/fund balances	5,784,569.	34	6,329,026.

Form 990 (2011)

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	5,582,121.
2	Total expenses (must equal Part IX, column (A), line 25)	2	6,028,990.
3	Revenue less expenses. Subtract line 2 from line 1	3	-446,869.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	4,040,903.
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	3,594,034.

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?
- b 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		

Form 990 (2011)

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

2011

Open to Public Inspection

Name of the organization

ECHOING GREEN, INC.

Employer identification number

13-3424419

Part I

Reason for Public Charity Status

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 to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h

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

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

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

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

(i) ☐ A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?

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

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

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

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

[illegible]

Total

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

Schedule A (Form 990 or 990-EZ) 2011

132021
01-24-12

13

10400413 759420 6678

2011.05060 ECHOING GREEN, INC.

6678 1

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) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	3671401.	4680009.	5512455.	3502438.	4921009.	22287312.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	3671401.	4680009.	5512455.	3502438.	4921009.	22287312.
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)						9496008.
6 Public support. Subtract line 5 from line 4						12791304.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7 Amounts from line 4	3671401.	4680009.	5512455.	3502438.	4921009.	22287312.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	36,723.	22,618.	3,161.	17,542.	17,444.	97,488.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)		1,320.	1,505.	818.	40.	3,683.
11 Total support. Add lines 7 through 10						22388483.
12 Gross receipts from related activities, etc. (see instructions)					12	119,560.

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 2011 (line 6, column (f) divided by line 11, column (f))	14	57.13 %
15 Public support percentage from 2010 Schedule A, Part II, line 14	15	55.09 %
16a 33 1/3% support test - 2011. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ☒		
b 33 1/3% support test - 2010. 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 - 2011. 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 - 2010. 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 ☐		

Schedule A (Form 990 or 990-EZ) 2011

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 year beginning in) ►	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(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 year beginning in) ►	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(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 2011 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2010 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2011 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2010 Schedule A, Part III, line 17	18	%

19a **33 1/3% support tests - 2011.** 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 - 2010.** 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 ☐

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

▶ Complete if the organization answered "Yes," to Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No. 1545-0047

2011Open to Public
Inspection

Name of the organization

ECHOING GREEN, INC.

Employer identification number

13-3424419

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?		☐ Yes ☐ 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?		☐ Yes ☐ 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)

☐ Preservation of land for public use (e.g., recreation or education)	☐ Preservation of an historically important land area
☐ Protection of natural habitat	☐ Preservation of a certified historic structure
☐ 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 the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes ☐ No

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

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

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	239,335.	239,335.	239,335.	100,000.	
b Contributions				139,335.	
c Net investment earnings, gains, and losses	522.	916.	1,116.	3,119.	
d Grants or scholarships					
e Other expenditures for facilities and programs	522.	916.	1,116.	3,119.	
f Administrative expenses					
g End of year balance	239,335.	239,335.	239,335.	239,335.	

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

a Board designated or quasi-endowment ☐ _____ %

b Permanent endowment ☒ 100.00 %

c Temporarily restricted endowment ☐ _____ %

The percentages in lines 2a, 2b, and 2c should equal 100%

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

(i) unrelated organizations

(ii) related organizations

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

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

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

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

Description of property	(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		93,679.	16,820.	76,859.
d Equipment		148,007.	148,007.	0.
e Other		152,432.	49,253.	103,179.
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				180,038.

Schedule D (Form 990) 2011

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

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

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

(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. (Col (b) must equal Form 990, Part X, col (B) line 13.) ▶		

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

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

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25.) ▶	

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
2. FIN 48 (ASC 740)

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	5,582,121.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	6,028,990.
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-446,869.
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 through 8	9	
10	Excess or (deficit) for the year per audited financial statements Combine lines 3 and 9	10	-446,869.

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	5,582,121.
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	0.
3	Subtract line 2e from line 1	3	5,582,121.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	5,582,121.

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

1	Total expenses and losses per audited financial statements	1	6,028,990.
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	0.
3	Subtract line 2e from line 1	3	6,028,990.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV.)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	6,028,990.

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 V, LINE 4: INTEREST EARNED ON THE ENDOWMENT FUND IS IMMEDIATELY

AVAILABLE FOR USE IN GENERAL OPERATIONS.

PART X, LINE 2: MANAGEMENT HAS EVALUATED ALL INCOME TAX POSITIONS AND

CONCLUDED THAT NO DISCLOSURES RELATED TO UNCERTAIN TAX POSITIONS ARE

REQUIRED IN THE FINANCIAL STATEMENTS.

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

2011Open to Public
Inspection

Name of the organization

Employer identification number

ECHOING GREEN, INC.**13-3424419****Part I** **General Information on Activities Outside the United States.** Complete if the organization answered "Yes"
to Form 990, Part IV, line 14b**1 For grantmakers.** Does the organization maintain records to substantiate the amount of its grants and other assistance,
the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ **Yes** ☐ **No****2 For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the
United States.**3 Activities per Region.** (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, 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 and investments in region
EUROPE	0	0	GRANTING TO INDIVIDUALS AND ORGANIZATIONS ONLY	FELLOWSHIP PROGRAM AND RELATED ACTIVITIES	7,856.
SUB-SAHARAN AFRICA	0	0	GRANTING TO INDIVIDUALS AND ORGANIZATIONS ONLY	FELLOWSHIP PROGRAM AND RELATED ACTIVITIES	207,269.
NORTH AMERICA	1	24	GRANTING TO INDIVIDUALS AND ORGANIZATIONS ONLY	FELLOWSHIP PROGRAM AND RELATED ACTIVITIES	29,752.
EAST ASIA AND THE THE PACIFIC	0	0	GRANTING TO INDIVIDUALS AND ORGANIZATIONS ONLY	FELLOWSHIP PROGRAM AND RELATED ACTIVITIES	80,474.
MIDDLE EAST AND NORTH AFRICA	0	0	GRANTING TO INDIVIDUALS AND ORGANIZATIONS ONLY	FELLOWSHIP PROGRAM AND RELATED ACTIVITIES	1,393.
SOUTH ASIA	0	0	GRANTING TO INDIVIDUALS AND ORGANIZATIONS ONLY	FELLOWSHIP PROGRAM AND RELATED ACTIVITIES	448,172.
3 a Sub-total	1	24			774,916.
b Total from continuation sheets to Part I	0	0			0.
c Totals (add lines 3a and 3b)	1	24			774,916.

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

Schedule F (Form 990) 2011

Part II **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who 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 of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH ASIA	FELLOWSHIP AWARD	80,000	WIRE TRANSFER	0		
		SOUTH ASIA	FELLOWSHIP AWARD	80,000	WIRE TRANSFER	0		
		NORTH AMERICA	FISCAL SPONSORSHIP	9,500	WIRE TRANSFER	0		
		SOUTH ASIA	FELLOWSHIP PROGRAM - CASH ASSISTANCE	5,377	WIRE TRANSFER	0		

2 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 23 Enter total number of other organizations or entities 2

Schedule F (Form 990) 2011

Schedule F (Form 990) 2011 **ECHOING GREEN, INC.**

13-3424419

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16

Part III can be duplicated if additional space is needed

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
FELLOWSHIP PROGRAM - CASH ASSISTANCE	NORTH AMERICA	2	9,252.	WIRE TRANSFER	0.		
FELLOWSHIP PROGRAM - CASH ASSISTANCE	SUB-SAHARAN AFRICA	5	16,872.	WIRE TRANSFER	0.		
FELLOWSHIP PROGRAM - CASH ASSISTANCE	EUROPE	2	4,742.	WIRE TRANSFER	0.		
FELLOWSHIP PROGRAM - CASH ASSISTANCE	MIDDLE EAST AND NORTH AFRICA	1	1,393.	WIRE TRANSFER	0.		
FELLOWSHIP PROGRAM - CASH ASSISTANCE	SOUTH ASIA	6	15,604.	WIRE TRANSFER	0.		
FELLOWSHIP PROGRAM - NONCASH ASSISTANCE	SOUTH ASIA	3	0.	WIRE TRANSFER	3,191.	TRAVEL EXPENSES	ACTUAL
FELLOWSHIP PROGRAM - AWARD	EAST ASIA AND THE PACIFIC	1	80,000.	WIRE TRANSFER	0.		
FELLOWSHIP PROGRAM - AWARD	SUB-SAHARAN AFRICA	4	180,000.	WIRE TRANSFER	0.		
FELLOWSHIP PROGRAM - AWARD	SOUTH ASIA	5	260,000.	WIRE TRANSFER	0.		

Schedule F (Form 990) 2011

Part IV Foreign Forms

- 1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926) ☒ Yes ☐ No
- 2 Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A) ☐ Yes ☒ No
- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations. (see Instructions for Form 5471) ☐ Yes ☒ No
- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621) ☐ Yes ☒ No
- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect To Certain Foreign Partnerships (see Instructions for Form 8865) ☐ Yes ☒ No
- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713) ☐ Yes ☒ No

Schedule F (Form 990) 2011

Part V Supplemental Information

Complete this part to provide the information required by Part I, line 2 (monitoring of funds), Part I, line 3, column (f) (accounting method, amounts of investments vs expenditures per region), Part II, line 1 (accounting method), Part III (accounting method), and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information.

SCHEDULE F, PART I, LINE 2: FELLOWSHIP PROGRAM: THE ORIGINAL APPLICATION SPECIFIES THE DESIGNATED USE OF THE FUNDS. FELLOWS ARE REQUIRED TO SUBMIT 4 REPORTS (1 EVERY 6 MONTHS) OVER THE COURSE OF THEIR FELLOWSHIP. THESE REPORTS INCLUDE DESCRIPTIONS OF THE FUNDS SPENT, ACTIVITIES OF THE ENTITY, AND FINANCIAL STATEMENTS. IF THERE IS AN EVIDENT DEPARTURE FROM THE ORIGINAL DESIGNATED USE, THE CONTRACT PROVIDES FOR RETURN OF GRANT FUNDS TO ECHOING GREEN. FACILITY EXISTS WITHIN THE CONTRACT FOR ECHOING GREEN TO REQUEST EXTRA DETAIL INFORMATION NECESSARY TO PROVE SATISFACTORY EXPENDITURES OF GRANT FUNDS, IN ADDITION TO AN OBLIGATION TO SIGN AN AFFIDAVIT CONFIRMING DETAILS OF THE USE OF FUNDS, IF REQUESTED.

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

**Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19,
or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.**

OMB No 1545-0047

2011

Open To Public Inspection

Name of the organization

ECHOING GREEN, INC.

Employer identification number
13-3424419

Part I

Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a ☒ Mail solicitations
- b ☒ Internet and email solicitations
- c ☒ Phone solicitations
- d ☒ In-person solicitations
- e ☒ Solicitation of non-government grants
- f ☒ Solicitation of government grants
- g ☒ Special fundraising events

2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?

☒ Yes ☐ No

b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
SUSAN ULIN ASSOCIATES LTD. - 156 FIFTH AVENUE, NEW YORK,	GALA EVENT FUNDRIASING CONSULTING		X	582,250.	45,000.	537,250.
Total				582,250.	45,000.	537,250.

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing

NY

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))
		GALA EVENT (event type)	(event type)	NONE (total number)	
Revenue	1 Gross receipts	582,250.			582,250.
	2 Less: Charitable contributions	560,000.			560,000.
	3 Gross income (line 1 minus line 2)	22,250.			22,250.
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses	22,250.			22,250.
	10 Direct expense summary. Add lines 4 through 9 in column (d)				22,250.
	11 Net income summary. Combine line 3, column (d), and line 10				0.

Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	☐ Yes _____ % ☐ No	☐ Yes _____ % ☐ No	☐ Yes _____ % ☐ No	
	7 Direct expense summary. Add lines 2 through 5 in column (d)				
	8 Net gaming income summary. Combine line 1, column d, and line 7				

9 Enter the state(s) in which the organization operates gaming activities _____

a Is the organization licensed to operate gaming activities in each of these states?

☐ Yes ☐ No

b If "No," explain. _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?

☐ Yes ☐ No

b If "Yes," explain. _____

- 11 Does the organization operate gaming activities with nonmembers? ☐ Yes ☐ No
- 12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? ☐ Yes ☐ No
- 13 Indicate the percentage of gaming activity operated in
- | | | |
|-------------------------------|------------|---|
| a The organization's facility | 13a | % |
| b An outside facility | 13b | % |
- 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records

Name ► _____

Address ► _____

- 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?
- ☐
- Yes
- ☐
- No

b If "Yes," enter the amount of gaming revenue received by the organization ► \$ _____ and the amount of gaming revenue retained by the third party ► \$ _____

c If "Yes," enter name and address of the third party:

Name ► _____

Address ► _____

16 Gaming manager information

Name ► _____

Gaming manager compensation ► \$ _____

Description of services provided ► _____

☐ Director/officer
☐ Employee
☐ Independent contractor

17 Mandatory distributions

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? ☐ Yes ☐ No

b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ► \$ _____

Part IV **Supplemental Information.** Complete this part to provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).
SCHEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISERS:(I) NAME OF FUNDRAISER: SUSAN ULIN ASSOCIATES LTD.(I) ADDRESS OF FUNDRAISER: 156 FIFTH AVENUE, NEW YORK, NY 10010

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, line 21 or 22.
▶ Attach to Form 990.

OMB No. 1545-0047

2011

Open to Public
Inspection

Name of the organization

ECHOING GREEN, INC.

Employer identification number
13-3424419

Part I General Information on Grants and Assistance

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

☒ 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
FARM COMMONS 2934 MILWAUKEE ST # 2 MADISON, WI 53704	45-5445890	501C3	80,000.	0.			FELLOWSHIP AWARD
IPOSTER 948 INCLINE WAY INCLINE VILLAGE, NV 89451	80-0627614	501C3	80,000.	0.			FELLOWSHIP AWARD
VERA SOLUTIONS, BENEFIT LLC 7800 LEESBURG DRIVE BETHESDA, MD 20817	27-3440108	LLP/LLC	80,000.	0.			FELLOWSHIP AWARD
ONE DEGREE 144 2ND STREET, LOWER LEVEL SAN FRANCISCO, CA 94105	36-4729392	501C3	80,000.	0.			FELLOWSHIP AWARD
SPRINGBOARD COLLABORATIVE 755 S. MOLE ST PHILADELPHIA, PA 19146	45-3719806	501C3	80,000.	0.			FELLOWSHIP AWARD
OKCOPAY, INC 1816 5TH AVE W SEATTLE, WA 98119	45-2788325	S-CORP	80,000.	0.			FELLOWSHIP AWARD

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

14.

3 Enter total number of other organizations listed in the line 1 table

8.

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

Schedule I (Form 990) (2011)

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
MEDHA CORP 47 SOUTH STREET, NATICK MA 01760 NATICK, MA 01301	27-3525991	501C3	90,000.	0.			FELLOWSHIP AWARD
ID INSIGHT 789 COLRAIN ROAD GREENFIELD, MA 01301	27-4933181	501C3	90,000.	0.			FELLOWSHIP AWARD
BROWN BOI PROJECT C/O MOVEMENT STRATEGY CENTER, 436 OAKLAND, CA 94612	20-1037643	501C3	70,000.	0.			FELLOWSHIP AWARD
NBA MATH HOOPS C/O ECHOING GREEN, 494 8TH AVENUE NEW YORK, NY 10001	45-1059457	501C3	70,000.	0.			FELLOWSHIP AWARD
THE SCHOLARSHIP ACADEMY C/O ECHOING GREEN, 494 8TH AVENUE NEW YORK, NY 10001	20-3721836	501C3	70,000.	0.			FELLOWSHIP AWARD
VISIBLE MEN, INC. C/O ECHOING GREEN, 494 8TH AVENUE NEW YORK, NY 10001	26-4436216	501C3	70,000.	0.			FELLOWSHIP AWARD
COACHING FOR CHANGE C/O ECHOING GREEN, 494 8TH AVENUE NEW YORK, NY 10001	27-3708397	501C3	70,000.	0.			FELLOWSHIP AWARD
FARM BUILDERS INTERNATIONAL, LLC. 39 BROOKSIDE ROAD PORTLAND, ME 04103	45-2428378	LLC	9,589.	0.			FELLOWSHIP PROGRAM - CASH ASSISTANCE
REACH EDUCATION INCORPORATED 218 D STREET SE, WASHINGTON, DC 20003	26-4622113	501C3	5,605.	0.			FELLOWSHIP PROGRAM - CASH ASSISTANCE

Schedule I (Form 990)

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
RECHAR, INC. 1160 MISSION STREET, #1213, SAN FRANCISCO, CA 94103	27-3854514	C-CORP	7,723.	0.			FELLOWSHIP PROGRAM - CASH ASSISTANCE
SANERGY C/O ECHOING GREEN, 494 8TH AVENUE NEW YORK, NY 10001	27-4528974	C-CORP	5,427.	0.			FELLOWSHIP PROGRAM - CASH ASSISTANCE
SHINING HOPE FOR COMMUNITIES 14 RED GLEN ROAD MIDDLETOWN, CT 06457	27-1493201	501C3	5,758.	0.			FELLOWSHIP PROGRAM - CASH ASSISTANCE
TIYATIEN HEALTH, INC. 365 CARDINAL MEDEIROS, UNIT 1 CAMBRIDGE, MA 02141	26-1401736	C-CORP	5,993.	0.			FELLOWSHIP PROGRAM - CASH ASSISTANCE
OP-ED PROJECT C/O ECHOING GREEN, 494 8TH AVENUE NEW YORK, NY 10001	45-1343136	LLC	24,734.	0.			FISCAL SPONSORSHIP
HIGHEST COMMON DENOMINATOR FUND MEY - C/O ECHOING GREEN, 494 8TH AVENUE - NEW YORK, NY 10001	27-1156814	501C3	5,000.	0.			FISCAL SPONSORSHIP
SANERGY C/O ECHOING GREEN, 494 8TH AVENUE NEW YORK, NY 10001	27-4528974	C-CORP	5,000.	0.			FISCAL SPONSORSHIP

Schedule I (Form 990)

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
FELLOWSHIP PROGRAM - CASH ASSISTANCE	62	114,017.	3,598. ACTUAL		TRAVEL EXPENSE COVERAGE
FELLOWSHIP AWARD	17	613,200.	0.		
FISCAL SPONSORSHIP	3	9,500.	0.		

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

SCHEDULE I, PART I, LINE 2: FELLOWSHIP PROGRAM: THE ORIGINAL APPLICATION

SPECIFIES THE DESIGNATED USE OF THE FUNDS. FELLOWS ARE REQUIRED TO SUBMIT

4 REPORTS (1 EVERY 6 MONTHS) OVER THE COURSE OF THEIR FELLOWSHIP. THESE

REPORTS INCLUDE DESCRIPTIONS OF THE FUNDS SPENT, ACTIVITIES OF THE ENTITY,

AND FINANCIAL STATEMENTS. IF THERE IS AN EVIDENT DEPARTURE FROM THE

ORIGINAL DESIGNATED USE, THE CONTRACT PROVIDES FOR RETURN OF GRANT FUNDS TO

ECHOING GREEN. FACILITY EXISTS WITHIN THE CONTRACT FOR ECHOING GREEN TO

REQUEST EXTRA DETAIL INFORMATION NECESSARY TO PROVE SATISFACTORY

EXPENDITURES OF GRANT FUNDS, IN ADDITION TO AN OBLIGATION TO SIGN AN

Part IV Supplemental Information

AFFIDAVIT CONFIRMING DETAILS OF THE USE OF FUNDS, IF REQUESTED.

ALUMNI PROGRAM: ECHOING GREEN'S ALUMNI PROGRAM AIMS TO SUPPORT THE ORGANIZATION'S GRANTEEES WITH ADDITIONAL TECHNICAL ASSISTANCE AND PEER SUPPORT AFTER THE FUNDING PERIOD IS COMPLETED. ECHOING GREEN PROVIDES PRO-BONO SUPPORT IN THE FORM OF CONNECTING GRANTEEES TO ONE ANOTHER AS PEERS, MENTORS AND ADVISORS, AS WELL AS ACTING AS TRUSTED ADVISORS FOR A SELECT GROUP OF ALUMNI AT KEY INFLECTION POINTS IN THEIR PERSONAL OR PROFESSIONAL LIVES. IN ADDITION, ECHOING GREEN GIVES ITS ALUMNI OPPORTUNITIES TO PARTICIPATE IN THE FELLOW SEARCH AND SELECTION PROCESS.

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

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

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 23.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization

ECHOING GREEN, INC.

Employer identification number

13-3424419

Part I Questions Regarding Compensation

- 1a** Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.
- | | |
|--|--|
| ☐ First-class or charter travel | ☐ Housing allowance or residence for personal use |
| ☐ Travel for companions | ☐ Payments for business use of personal residence |
| ☐ Tax indemnification and gross-up payments | ☐ Health or social club dues or initiation fees |
| ☐ Discretionary spending account | ☐ Personal services (e.g., maid, chauffeur, chef) |
- b** If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain.
- 2** Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?
- 3** Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director. Explain in Part III.
- | | |
|---|---|
| ☒ Compensation committee | ☒ Written employment contract |
| ☐ Independent compensation consultant | ☒ Compensation survey or study |
| ☒ Form 990 of other organizations | ☒ Approval by the board or compensation committee |
- 4** During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:
- a** Receive a severance payment or change-of-control payment?
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?
- c** Participate in, or receive payment from, an equity-based compensation arrangement?
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.
- Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.**
- 5** For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:
- a** The organization?
- b** Any related organization?
- If "Yes" to line 5a or 5b, describe in Part III.
- 6** For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:
- a** The organization?
- b** Any related organization?
- If "Yes" to line 6a or 6b, describe in Part III.
- 7** For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III.
- 8** Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III.
- 9** If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1b		
2	X	
4a		X
4b		X
4c		X
5a		X
5b		X
6a		X
6b		X
7		X
8		X
9		

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

Schedule J (Form 990) 2011

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported as deferred in prior Form 990
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 CHERYL DORSEY	(i) 209,308.	0.	0.	8,950.	9,691.	227,949.	0.
	(ii) 0.	0.	0.				
2 LARA GALINSKY	(i) 154,423.	0.	0.	6,898.	8,749.	170,070.	0.
	(ii) 0.	0.	0.				
3	(i)						
	(ii)						
4	(i)						
	(ii)						
5	(i)						
	(ii)						
6	(i)						
	(ii)						
7	(i)						
	(ii)						
8	(i)						
	(ii)						
9	(i)						
	(ii)						
10	(i)						
	(ii)						
11	(i)						
	(ii)						
12	(i)						
	(ii)						
13	(i)						
	(ii)						
14	(i)						
	(ii)						
15	(i)						
	(ii)						
16	(i)						
	(ii)						

Department of the Treasury
Internal Revenue Service

► Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

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

2011

Open To Public Inspection

ECHOING GREEN, INC.

13-3424419

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b

[illegible]

- 2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under section 4958
- 3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization

Complete if the organization answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a.

[illegible]

Complete if the organization answered "Yes" on Form 990, Part IV, line 27

[illegible]

Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
THE SOCIAL ENTREPRENEURS'	THE ORGANIZATION'S	598,550.	ECHOING GRE		X

Part V Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule L (see instructions)

SCH L, PART IV, BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS:

(A) NAME OF PERSON: THE SOCIAL ENTREPRENEURS' FUND, LLC

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:

THE ORGANIZATION'S BOARD CHAIR, DAVID C. HODGSON, IS A MEMBER IN THE LLC

(C) AMOUNT OF TRANSACTION \$ 598,550.

(D) DESCRIPTION OF TRANSACTION: ECHOING GREEN ENTERED INTO AN AGREEMENT WITH A THE SOCIAL ENTREPRENEURS' FUND, LLC (THE "LLC") WHICH PERMITS ECHOING GREEN TO ASSIGN EXISTING FELLOWSHIP GRANT OBLIGATIONS TO THE LLC. SEE BELOW FOR ADDITIONAL EXPLANATION.

(E) SHARING OF ORGANIZATION REVENUES? = NO

SCHEDULE L PART IV**BUSINESS TRANSACTION WITH THE SOCIAL ENTREPRENEURS' FUND, LLC**

ECHOING GREEN ENTERED INTO AN AGREEMENT WITH A THE SOCIAL ENTREPRENEURS' FUND, LLC (THE "LLC") WHICH PERMITS ECHOING GREEN TO ASSIGN EXISTING FELLOWSHIP GRANT OBLIGATIONS TO THE LLC. FELLOWSHIP GRANTS ELIGIBLE FOR ASSIGNMENT MUST BE THOSE MADE TO FOR-PROFIT GRANTEEES WHICH WERE NOT PREVIOUSLY FUNDED BY DONOR-RESTRICTED CONTRIBUTIONS. IN ADDITION TO ASSUMING ANY EXISTING LIABILITY OF ECHOING GREEN, THE LLC WILL ALSO PAY ECHOING GREEN ANY AMOUNTS

Part V Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule L (see instructions).

PREVIOUSLY PAID UNDER THE ASSIGNED FELLOWSHIP AGREEMENTS, PLUS AN AMOUNT EQUAL TO 3% INTEREST ACCRUED SINCE THE FELLOWSHIP AWARD. AMOUNTS ASSIGNED TO THE LLC, AND REIMBURSEMENT OF PRIOR PAYMENTS MADE IN CONNECTION WITH THE FELLOWSHIPS ASSIGNED, ARE RECOGNIZED AS REVENUE BY ECHOING GREEN.

FOR FELLOWSHIP GRANTS ASSIGNED, ECHOING GREEN RETAINS THE RIGHT TO RECEIVE PAYMENT FROM THE LLC FOR A PORTION OF ANY AMOUNTS RECEIVED BY THE LLC FROM A GRANTEE REPRESENTING RETURN ON INVESTMENT. AMOUNTS DUE TO ECHOING GREEN WOULD BE EQUAL TO 20% OF ANY AMOUNTS RECEIVED IN EXCESS OF THE RESPECTIVE TOTAL ORIGINAL FELLOWSHIP AWARD.

FOR THE YEAR ENDED JUNE 30, 2012, ECHOING GREEN ELECTED TO ASSIGN A TOTAL OF \$305,000 OF FELLOWSHIP GRANT OBLIGATIONS. IN ADDITION TO THE AMOUNT ASSIGNED, ECHOING GREEN RECEIVED \$285,000 FROM THE LLC IN REIMBURSEMENT OF FELLOWSHIP GRANT INSTALLMENTS PREVIOUSLY PAID, PLUS \$8,550 OF INTEREST THEREON. IN ACCORDANCE WITH ECHOING GREEN'S CONFLICT OF INTEREST POLICY, MR. HODGSON RECUSED HIMSELF FROM THE DISCUSSION AND DECISION MAKING BY THE ECHOING GREEN BOARD OF DIRECTORS IN CONNECTION WITH THIS MATTER.

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

2011

Open to Public
Inspection

Name of the organization

ECHOING GREEN, INC.

Employer identification number

13-3424419

FORM 990 PART I LINE 5

NUMBER OF VOLUNTEERS

THE NUMBER OF VOLUNTEERS INCLUDES APPROXIMATELY 400 FELLOWSHIP
APPLICATION JUDGES, AS WELL AS FELLOWSHIP FINALIST JUDGES.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

LAUNCH INNOVATIVE SOCIAL CHANGE ORGANIZATIONS AROUND THE WORLD. SINCE
ITS INCEPTION, ECHOING GREEN HAS INVESTED IN NEARLY 500 SOCIAL
ENTREPRENEURS WHO WORK TO SOLVE DEEPLY-ROOTED PROBLEMS IN THE WORLD
THROUGH THEIR INNOVATIVE IDEAS. AMONG THE ORGANIZATIONS WE HELPED
LAUNCH INCLUDE TEACH FOR AMERICA, CITY YEAR, GENOCIDE INTERVENTION
NETWORK, THE SEED SCHOOL, GLOBAL FUND FOR CHILDREN, AND HUNDREDS OF
OTHERS. WE ALSO WORK TO BUILD A ROBUST ECOSYSTEM OF CHANGEMAKING BY
SUPPORTING YOUNG PEOPLE TO SELECT CAREERS IN SOCIAL CHANGE, WORKING
WITH DONORS TO APPROACH THEIR PHILANTHROPY IN AN ENGAGED MANNER, AND
PROVIDING DATA THAT BUILDS OUR FIELD.

FORM 990, PART III, LINE 3, CHANGES IN PROGRAM SERVICES:

ECHOING GREEN EXPANDED ITS ACTIVITIES BY ENTERING INTO AN AGREEMENT
WITH THE SOCIAL ENTREPRENEURS' FUND, LLC (SEE ALSO FORM 990 SCHEDULE
L), WHICH PERMITS ECHOING GREEN TO ASSIGN TO THE LLC EXISTING
FELLOWSHIP GRANT OBLIGATIONS TO FOR-PROFIT GRANTEES. THIS EXPANSION OF
ECHOING GREEN'S ACTIVITIES EFFECTIVELY SERVES AS AN ADDITIONAL FUNDING
SOURCE FOR THESE TYPES OF FELLOWSHIP GRANTS AND WILL ALLOW ECHOING
GREEN TO INCREASE THE NUMBER OF FELLOWSHIPS THAT IT CAN OFFER. THIS

Name of the organization

ECHOING GREEN, INC.

Employer identification number

13-3424419

RELATIONSHIP IS LIMITED TO THE FINANCIAL OBLIGATIONS, AND NO OTHER BENEFIT OR SERVICE AS PART OF THE FELLOWSHIP PROGRAM IS AFFECTED.

DURING FISCAL YEAR 2012, ECHOING GREEN ALSO INTRODUCED THE THE BLACK MALE ACHIEVEMENT (BMA) FELLOWSHIP, A NEW FELLOWSHIP PROGRAM WHICH INVESTS IN NEW AND INNOVATIVE ORGANIZATIONS DEDICATED TO IMPROVING THE LIFE OUTCOMES OF BLACK MEN AND BOYS IN THE UNITED STATES. THE 18-MONTH FELLOWSHIP OFFERS \$70,000 IN SEED FUNDING, MENTORING AND SUPPORT FROM ECHOING GREEN STAFF AND EXPERTS. THE BLACK MALE ACHIEVEMENT FELLOWSHIPS ARE DESIGNED TO SUPPORT SOCIAL ENTREPRENEURS WHO ARE STARTING UP NEW ORGANIZATIONS TO HELP TRANSFORM THE LIVES OF BLACK MEN AND BOYS IN THEIR COMMUNITIES. THE PROGRAM WILL SELECT EIGHT FELLOWS WHO ARE GENERATING NEW IDEAS AND BEST PRACTICES IN THE THREE CORE AREAS OF EDUCATION, FAMILY, AND WORK.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS: ORGANIZATION, AND A COMMUNITY OF LIKE-MINDED SOCIAL ENTREPRENEURS AND PUBLIC SERVICE LEADERS, INCLUDING THE ECHOING GREEN NETWORK OF NEARLY 500 ALUMNI WORKING ALL OVER THE WORLD.

FORM 990, PART VI, SECTION A, LINE 4: THE ORGANIZATION AMENDED ITS BYLAWS TO APPROVE THE POSITION OF VICE-CHAIR.

FORM 990, PART VI, SECTION A, LINE 8B: THE ONLY COMMITTEE WITH AUTHORITY TO ACT ON BEHALF OF THE BOARD (GOVERNING BODY) IS THE EXECUTIVE COMMITTEE. MEETINGS FOR THE EXECUTIVE COMMITTEE ARE NORMALLY HELD ADJACENT TO THE FULL BOARD MEETINGS, BUT ARE NOT DOCUMENTED. TYPICALLY, DECISIONS TAKEN BY THE EXECUTIVE COMMITTEE ARE RATIFIED AT THE NEXT BOARD MEETING AND DOCUMENTED

Name of the organization

ECHOING GREEN, INC.

Employer identification number

13-3424419

AT THAT TIME.

FORM 990, PART VI, SECTION B, LINE 11: THE FORM 990 IN DRAFT FORMAT WILL BE SUPPLIED WILL BE SUPPLIED TO THE FINANCE COMMITTEE AND THE FULL BOARD FOR REVIEW BEFORE AND DURING THE APRIL 2013 BOARD MEETING. UPON COMPLETION OF THAT MEETING, ANY COMMENTS RESULTING WILL BE INTEGRATED INTO THE DRAFT 990 AND A FINAL VERSION SUBMITTED TO THE IRS. THE FORM 990 WILL BE A SPECIFIC AGENDA ITEM AT THE BOARD MEETING, AND MINUTES WILL INDICATE BOARD APPROVAL OF THE 990 SUBJECT TO ANY CHANGES SPECIFIED.

FORM 990, PART VI, SECTION B, LINE 12C: THE ORGANIZATION REQUESTS, AT THE END OF EACH FISCAL YEAR, THAT BOARD MEMBERS COMPLETE A DETAILED QUESTIONNAIRE THAT COVERS ALL FACETS OF CONFLICTS OF INTEREST, RELATED PARTIES, TRANSACTIONS WITH RELATED PARTIES, AND EXCESS BENEFIT TRANSACTIONS. THE ORGANIZATION MAKES ITS BEST EFFORTS TO COLLATE RESPONSES FROM THE BOARD MEMBERS TO THE QUESTIONNAIRE, AND TO ENSURE THAT ALL FACTS REGARDING BUSINESS RELATIONSHIPS ARE KNOWN. THE APPROPRIATE POLICY CONTAINS DETAILS OF THE PROCEDURES FOR ADDRESSING A CONFLICT OF INTEREST. THE PROCEDURE ALLOWS FOR THE INTERESTED PERSON TO PRESENT DETAILS OF THE TRANSACTION FOR THE BOARD TO INVESTIGATE, TO REVIEW POSSIBLE ALTERNATIVES, AND TO REACH A CONCLUSION ON THE BEST ROUTE FORWARD. REQUIRED ACTIONS IN THE EVENT OF A POLICY VIOLATION ARE ALSO CONTAINED WITHIN THE POLICY DOCUMENT.

FORM 990, PART VI, SECTION B, LINE 15: THE CEO RECEIVED A SALARY INCREASE FROM BEGINNING OF THE FISCAL YEAR AND A COMPENSATION BONUS FOR PERFORMANCE THE PREVIOUS FISCAL YEAR. THIS ADJUSTMENT WAS DISCUSSED AND APPROVED BY THE EXECUTIVE COMMITTEE. THE SENIOR VP RECEIVED A SALARY INCREASE FROM

Name of the organization

ECHOING GREEN, INC.

Employer identification number

13-3424419

BEGINNING OF THE FISCAL YEAR AND A COMPENSATION BONUS FOR PERFORMANCE THE PREVIOUS FISCAL YEAR. THIS ADJUSTMENT WAS DISCUSSED AND APPROVED BY THE CEO IN CONJUNCTION WITH THE EXECUTIVE COMMITTEE. ALL OTHER EMPLOYEES RECEIVED SALARY ADJUSTMENTS AFTER REVIEW BY THE SENIOR VP, WHICH TOOK INTO ACCOUNT COMPARABLE SALARIES FOR SIMILAR NONPROFITS IN NYC, AND ALSO THE ADVICE OF AN EXTERNAL HR CONSULTANT.

FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION'S FINANCIAL STATEMENTS ARE AVAILABLE ON ITS WEBSITE WWW.ECHOINGGREEN.ORG AFTER FORMAL APPROVAL. OTHER ORGANIZATIONAL DOCUMENTS ARE MADE AVAILABLE ON REQUEST.



*Schedule
to kick base
meeting
for 5/29*

Date: May 8, 2013
To: Laurie Kelly, Noah Pivko
From: Edelman
Re: LinkedIn Group Assessment Criteria

OPPORTUNITY

- With more than one million groups focused on a particular topic or industry, LinkedIn Groups present an engagement opportunity for PCS digital ambassadors to connect with key audiences, advance the reputation of the practice as well as their professional brands and expand the practice's network of contacts.
- This document outlines the criteria by which we evaluate LinkedIn Groups to identify the ones that best match PCS' business objectives.

OBJECTIVES

- **Evaluate the Groups** by applying the proposed criteria in order to identify the ones best matched to PCS' goals and future participation.
- **Identify a recommended set of priority Groups** for PCS' consideration, providing our perspective on engagement opportunities for the PCS ambassador within that group.
- **Provide a recommendation as to whether a PwC Private Company Services LinkedIn group would be beneficial.**

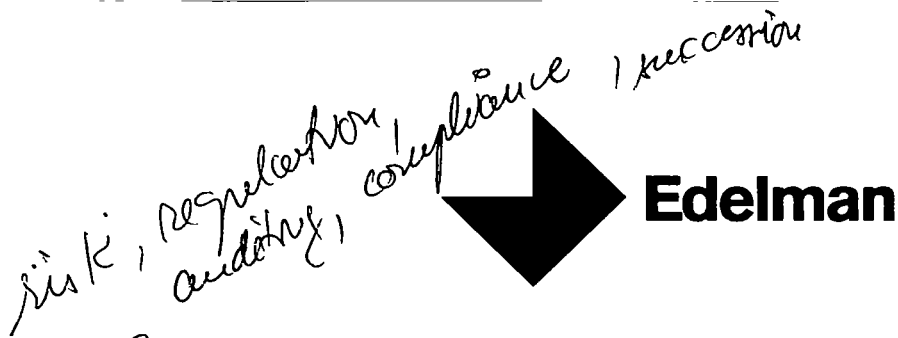
PROPOSED CRITERIA

Edelman has developed a set of criteria to help evaluate and identify the best LinkedIn Groups on behalf of PwC PCS digital ambassadors as a first step to participation.

Some of this information is reported by LinkedIn as part of their standard set of Group Statistics and some will be determined manually by Edelman as we observe member profiles and monitor group activity and discussion.

- **Group Description**
Every LinkedIn group provides a summary description of its purpose, which is a valuable initial filter for understanding whether the group is aligned with our purpose. Sometimes the group has veered away from its original purpose, so if there's uncertainty as to its fit and relevance, it may be necessary to explore further.

We will look for Groups that address business challenges of private companies, as well as Groups that address issues relevant to our target audience. Topics include:



- Tax and wealth management planning
 - Charitable giving
- Estate and gift planning
 - Family offices
 - Family businesses
 - Succession planning
 - International expansion
 - Innovation
 - Talent
 - Information technology
 - Systems security
 - Digital and social media
 - Controlling costs
 - Profitability
 - Transformation
 - Regulation
 - Risk
- Expansion
 - Accessing capital
 - Exit strategies
- Wealth management
 - People and change
 - Middle market
 - Growth
 - Growth strategies
 - Risk
 - Compliance
 - Audit
 - Controls
 - M&A
 - International tax
 - FATCA
 - FBAR
 - Data analytics

- **Most Popular Discussions**

Edelman will conduct an audit of discussion topics to determine whether they're complementary to PCS' agenda and business (e.g. M&A, innovation, talent, risk, etc.). Other questions we'll aim to answer include:

- Is the content informative/interesting?
- Are article or resource references available? Are they relevant and valuable?
- Is discussion activity/participation distributed across members and not dominated by a small-group.

- **Group Size**

Groups should demonstrate active participation, but not be so large that their size impedes the ability to hold a discussion and engage with members. A small group may be better for networking and presents a better chance to start discussions that actually receive attention and responses. Also, members will be better positioned to contribute to ongoing discussions and be featured as a "Top Influencer," which in turn will help them build authority and online visibility. Our target range is more than 250 members and less than 5000.

- **Members**

Group participants should be representative of organizations that are PCS clients, prospects or in the networks of our digital ambassadors. Ideally, they are senior decision makers at these companies. While consultants and marketers may be members, they should comprise a minor percentage of the overall audience. Groups with members from public companies will be considered if they are topically relevant and have a strong private company contingent. Companies represented should largely fall within PCS' target revenue range of \$250M-\$1B. Edelman will also evaluate members by the other groups of which they're members.

Ideally, Group members should work in:

- Private Industry
 - Airlines/aviation
 - Automotive
 - Chemicals
 - Consumer electronics
 - Consumer goods retail
 - Consumer services
 - Electrical and electronic manufacturing
 - Farming
 - Glass, ceramics and concrete
 - Industrial automation
 - Information technology and services
 - Logistics and supply chain
 - Machinery
 - Maritime
 - Mechanical or industrial engineering
 - Mining metals; Nanotechnology
 - Oil energy; Package freight delivery
 - Packaging and containers
 - Paper forest products
 - Plastics or renewables and environment
 - Railroad manufacturing
 - Ranching
 - Textiles
 - Venture capital and private equity
 - Wine and spirits

Note: LinkedIn's industry profile differs from above. This level of analysis would need to be done on select basis and not across the entire group's membership.

- Location/Demographics

We will give priority to US-based business with a focus on companies in PCS' priority markets as well as the location of PCS' digital ambassadors:

 - Baltimore
 - Carolinas (Charlotte, Greensboro, Raleigh)
 - Florida
 - Greater Atlanta (Atlanta, Knoxville, Nashville)
 - Chicago
 - Greater Houston (Houston, New Orleans)
 - Greater Michigan (Detroit, Grand Rapids, Toledo)
 - Lake Erie (Cleveland, Pittsburgh)
 - Minneapolis
 - NY Metro (NYC, Long Island, Stamford, NJ)
 - North Texas (Dallas)
 - Northeast (Albany, Boston, Hartford)
 - OKI (Cincinnati, Columbus, Indianapolis, Louisville)
 - Philadelphia Metro (Harrisburg, Philadelphia)
 - San Francisco (Sacramento, SF)
 - San Jose
 - Southern California (LA, Orange County)
 - Washington Metro (D.C.)

- **Members' seniority**

We will give priority to Groups whose members are senior decision makers. LinkedIn's standard reporting on seniority includes:

- Owner
- Director
- CEO
- CFO
- Senior
- VP

We also will examine members' job titles to help understand member seniority.

- **Activity and Growth**

The following category of criteria is helpful to gauge the group's relative health. We want to confirm the rate of participation and discussion as steady or growing. A decline in membership relative to the group's size would be a red flag. Some of the key criteria that we would examine include:

- The rate of weekly comments
- The volume of discussions per week
- Ratio of comments to discussions
- New member growth
- Week over week growth rate

NEXT STEPS

- Edelman/PCS to schedule a conference call to review the recommended criteria (1 day)
- PCS to confirm agreement on final target criteria (1 day)
- PCS to provide search terms (keywords) that drive traffic to PCS website pages and identify names / location of PCS digital ambassadors (1 day)
- Edelman to begin assessment and prepare recommendations (process to take approximately 7-10 business days)

###

EXHIBIT JJJ
PricewaterhouseCoopers LLP (PwC) and Edelman
STATEMENT OF WORK #80
PROJECT NAME: PwC PCS LinkedIn Groups Strategy
May 1, 2013 – May 31, 2013

Pursuant to the Agreement by and between PricewaterhouseCoopers LLP ("Client") and Daniel J. Edelman, Inc., doing business as Edelman ("Edelman") dated January 1, 2008, this Statement of Work is incorporated into and subject to the terms and conditions of the Agreement. The parties agree to the below Scope of Services and financial terms:

SCOPE OF SERVICES

Project Overview

Edelman has been engaged to support PwC PCS' LinkedIn strategy by focusing on how to best leverage the champion network of PCS ambassadors in existing LinkedIn groups to further engagement on relevant topics and increase PCS' visibility among clients, prospects and influencers on the platform.

Specifically, Edelman will identify existing groups that are relevant to PCS' business in which ambassadors can gain familiarity with the dynamics of group participation, understand audience goals and interests, and identify opportunities to amplify PCS' content and thought leadership as a first step to building the partner and audience engagement necessary to potentially launch a PCS group in the future.

Project Activities & Objectives

LinkedIn Group Assessment: Research existing LinkedIn groups for PCS ambassador participation

We will examine the LinkedIn groups most relevant to PCS' business, including groups for organizations that PCS ambassadors are members of offline, and recommend 3-5 priority groups for ongoing engagement. We will

(1) work with PCS to establish a set of criteria against which to evaluate LinkedIn groups. Criteria could include group focus (e.g., private companies, industry vertical, family businesses, etc.), demographic (e.g., family business owners, private company CXOs, consultants), geographic focus (e.g., national, regional) and frequency of group member participation.

(2) deliver recommendations on priority groups, providing our perspective on engagement opportunities for the PCS ambassador within that group and obtain agreement on final target groups.

(3) invite the PCS digital ambassador to join and observe, together with us, the targeted group(s) so as to better understand the conversation trends, sentiment and member dynamics

(4) provide a weekly engagement report based on our monitoring of group activity that summarizes key conversation drivers, brand highlights and recommended engagement opportunities.

(5) schedule a call with the PCS ambassadors to gather feedback and insights on the discussion trends and conversation.

(6) deliver a summary report providing best practices and key learnings from group engagement, as well as time expectations for levels of engagement, that can be shared with the practice as other partners engage on LinkedIn.

Proposed Tactics/Deliverables/Milestones & Timeline

Below is a summary of activities we will perform to support the program, which focuses on content planning, tactical recommendations, program optimization / reporting and program management.

Deliverables/Milestones & Timeline

Program Element	Activities Could Include:	Start & End Dates
LinkedIn Group Assessment	- o Establish criteria - o Priority group and initial engagement opportunities recommendation - o Group monitoring - o Weekly check-ins with PCS ambassadors to gather insights on discussion trends and topics within their group	May 1-31 2013 \$ 12,000.00

Any items not contemplated above will be considered outside the Scope of Services. If client expands the Scope of Services or increases the time retained, the amount of additional time will be agreed upon and an Addendum will be attached to the current Statement of Work.

ASSUMPTIONS

- Edelman will provide a project timeline at the start of the engagement
- PwC will designate a Digital Ambassador to join selected groups
- PwC will provide timely feedback where applicable

Term

Edelman will provide the aforementioned account planning services from

PROJECT MANAGERS

PwC: Laurie Kelly
Edelman: Matthew Wahn, Colleen Krieger

BUDGET

Professional Fees..... \$ 12,000.00
Internal expenses (3%): \$ 360.00
Estimated Expenses. \$ **As Incurred**

Total:..... \$ 12,360.00

TERMS

Fee Billing. Edelman shall invoice Client in accordance to the payment schedule set forth below. Fees are based on the Scope of Services above and not based on actual hours. As such, Edelman shall not be obligated to provide Client with hourly billing detail.

Expense Billing. Edelman shall invoice Client the actual out-of-pocket expense amount(s) at the end of the month on an as incurred basis. Actual expenses may vary from any estimated amounts provided in the Budget section.

Invoices. Edelman will render invoices to include professional services in one lump sum and expenses by category. Documentation for out-of-pocket expenses will be available upon request. Payment of the invoices will be due net thirty (30) days after receipt of a correct invoice. All such invoices shall be addressed to:

Name:	Laurie Kelly
Company Name:	PricewaterhouseCoopers LLP
Address:	125 High Street Boston, MA 02110-2704

Purchase Order. The client Purchase Order number is

FIXED FEE BILLING SCHEDULE

ESTIMATED INVOICE DATE	AMOUNT
5/1/2012	\$12,000.00
	\$12,000.00

ACCEPTED AND AGREED TO ON THIS ____ DAY OF _____, 2013.

PRICEWATERHOUSECOOPERS LLP

DANIEL J. EDELMAN, INC.

By: _____

By: _____

Printed Name: _____

Printed Name: _____

Title: _____

Title: _____

Signature Page for PwC LinkedIn Groups Strategy SOW / Exhibit JJJ

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

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).

Enter filer's identifying number, see instructions

Type or print File by the due date for filing your return. See instructions	Name of exempt organization or other filer, see instructions	Employer identification number (EIN) or
	ECHOING GREEN	☒ 13-3424419
	Number, street, and room or suite no. If a P.O. box, see instructions	Social security number (SSN)
	494 EIGHTH AVENUE - 2ND FLOOR	☐
	City, town or post office, state, and ZIP code. For a foreign address, see instructions	
	NEW YORK, NY 10001-2519	

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	01	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec 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.

LARA GALINSKY

- The books are in the care of ☒ 494 EIGHTH AVENUE - 2ND FLOOR - NEW YORK, NY 10001-2519

Telephone No ☒ 212-689-1165

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 MAY 15, 2013

5 For calendar year 2011, or other tax year beginning JUL 1, 2011, and ending JUN 30, 2012

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 NEEDED TO COMPILE THE INFORMATION NECESSARY TO COMPLETE THE 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	\$	0.
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 and any amount paid previously with Form 8868.	8b	\$	0.
c	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	\$	0.

Signature and Verification must be completed for Part II only.

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 ☐ Title ☒ **PRESIDENT**

Date ☐

Form 8868 (Rev 1-2012)

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 or other filer, see instructions. ECHOING GREEN	Employer identification number (EIN) or ☒ 13-3424419
	Number, street, and room or suite no. If a P.O. box, see instructions. 494 EIGHTH AVENUE - 2ND FLOOR	Social security number (SSN) ☐
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. NEW YORK, NY 10001-2519	

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-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 990-EZ	01	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

LARA GALINSKY

- The books are in the care of ► **494 EIGHTH AVENUE - 2ND FLOOR - NEW YORK, NY 10001-2519**
Telephone No. ► **212-689-1165** 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 **FEBRUARY 15, 2013**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
► ☐ calendar year _____ or
► ☒ tax year beginning **JUL 1, 2011**, and ending **JUN 30, 2012**.

- 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	\$	0.
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	\$	0.
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	\$	0.

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.

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

Form **8868** (Rev. 1-2012)