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Form **990**

CHANGE OF ACCOUNTING PERIOD

OMB No 1545-0047 2014

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Do not enter social security numbers on this form as it may be made public.
Information about Form 990 and its instructions is at www.irs.gov/form990.

Open to Public

Dep Inte	artment of th	e Treasuiy Service	•		er social security nun about Form 990 and il						nspection 📑	
A			lar year, or tax y	year beginn	ing 1/01	, 20	114, and ending	6/3	30	, 20	14	!
В	Check if app		С						D Employer			
	Addres				TITUTE INC.				94-2	889684		
	Name		2150 ALLST					Ī	E Telephon	number		
	Initial i	return	BERKELEY,	CA 9470	14				(510	<u> 859-</u>	9113	
	Final ret	urn/terminated						l				
	Amend	led return	··						G Gross rec		4,923,97	
	Applica	ation pending	F Name and addre	•	officer		I '	• •	a group return			No
_			SAME AS C					(P) Are all if 'No,'	subordinates ii attach a list (s	ncluded? see instructio	ns) Yes L	No
<u> </u>		npt status	X 501(c)(3)	501(c) () ◀ (insert no) 4947(a)(1						
<u>J</u>	Websit		W.EARTHISL	$\overline{}$	 		1 -		exemption num			
K		organization	Corporation	Trust	Association Othe		L Year of formation	1982	Z IVI Sta	ite of legal de	omicile CA	
P		Summary efly describ		ion's mission	on or most signific	ant activities:	EARTH ISL	AND T	MCTTTIT	E CDOM	10	
		-	_		TO PRODUCE							
<u> </u>					IVE INDIVID							
	ริเ		BLE WORLD	FOR ALL	·							
	2 Ch	eck this bo			discontinued its		lisposed of more	e than 2!	5% of its n			
=્ ૯ વ્ય	3 Nu 5 4 Nu				ning body (Part VI of the governing		liba 160	-	_	3		10
					calendar year 201				· : -	5		10 0
	6 To		of volunteers (*	·~;	6		750
	7a To	tal unrelate	d business reve	nue from F	art VIII, column (C), line 12'	MAY 19 20	15	.: [7a	1,59	
	b Ne	t unrelated	business taxab	le income f	rom Form 990-T,	line 34			1	7b	-1,95	8.
OCANAMO JUN					• • •			1 0	rior Year		Current Year	
€ 9	8 Co		and grants (Pa			<u>[[</u>			936,76		3,642,16	
Revenue	9 Pro	-	ice revenue (Pa		29)), lines 3, 4, and 1	7d)			,7066,35 89,65		661,83 86,79	
Pe Č	1		•		es 5, 6d, 8c, 9c, 1				464,82		185,69	
	1				(must equal Part \), line 12)	11	,557,59	97.	4,576,48	
	13 Gr.	ants and si	milar amounts p	oaid (Part I)	K, column (A), line	es 1-3)			841,82		201,69	
	14 Be	14 Benefits paid to or for members (Part IX, column (A), line 4).										
,,	15 Sa	laries, othe	r compensation	, employee	benefits (Part IX,	column (A), li	nes 5-10)	5,965,341.		11.	2,795,35	<u> 1.</u>
Fxnenses	16a Pro	ofessional f	undraising fees	(Part IX, c	olumn (A), line 11	e)						
٥	b To	tal fundrais	ıng expenses (F	Part IX, colu	umn (D), line 25)	-	399,595.				, at 2 1 - 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
ú	i 17 Oti	her expens	es (Part IX, colu	ımn (A), lın	es 11a-11d, 11f-2	4e)		5	, 336, 85		2,100,96	
	18 To	tal expense	s. Add lines 13	-17 (must e	qual Part IX, colu	mn (A), line 25	5)	12	,144,02	21.	5,098,01	2.
	<u> </u>	venue less	expenses Sub	tract line 18	3 from line 12				-586,42	24.	-521,52	24.
Net Assets or	5								g of Current		End of Year	
69	20 To		Part X, line 16)	·C>					,017,26		10,345,93	
, ž	21 To		s (Part X, line 2	•					,747,03		1,392,75	
	22 146			Subtract III	ne 21 from line 20			9	,270,22	23.]	8,953,17	<u> 17.</u>
		Signatur										
COL	der penalties nplete Declai	of perjury, I de ration of prepai	clare that I have exame rer (other than officer	mined this retuing the based on a	rn, including accompany ill information of which p	ring schedules and s preparer has any kn	statements, and to the owledge	e best of m	y knowledge a	nd belief, it is	s true, correct, and	1
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Si	ign	Signatur	e of officer					Da	te	774.4		
	ere	JOHN	N KNOX					CO-E.	. D.		_	
			print name and title				7					
		1	reparer's name		Preparer's signature		_ ^{Date}	2, _	Check	If PTIN		
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<u> </u>	with IDO	diacies 11		ITY, CA		n inctription-			Phone no		758-1222	
					shown above? (se ne separate instru			01126 05"		X	Yes 1	No 014)
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Form 990 (2014)) EARTH ISLAND INSTITUTE INC.	94-2	889684 Page	e 2
Partille Sta	tement of Program Service Accomplishments			
	ck if Schedule O contains a response or note to any line in this Part III			X
•	cribe the organization's mission:		T0110 T05	
	ISLAND INSTITUTE GROWS ENVIRONMENTAL LEADERSHIP TO PRO		·	
	NG ENVIRONMENTAL PROBLEMS BY SUPPORTING BOLD, CREATIVE	T TNDTATDOW	LS WHO AKE	
E.TUDTN	G THE PATHWAYS TOWARD A SUSTAINABLE WORLD FOR ALL.			
2 Did the orga	anization undertake any significant program services during the year which were not listed o	n the prior		
Form 990 o		ir the prior	Yes X N	^
	scribe these new services on Schedule O.			Ü
•	panization cease conducting, or make significant changes in how it conducts, any pro-	nram services?	. Yes X N	0
-	scribe these changes on Schedule O	gram services		•
•	ne organization's program service accomplishments for each of its three largest progr	am services as i	measured by expenses	5
Section 501	1(c)(3) and 501(c)(4) organizations are required to report the amount of grants and a ue, if any, for each program service reported	llocations to othe	ers, the total expenses,	,
4 a (Code) (Expenses \$ 4,044,013. including grants of \$ 201,69)6.)(Revenue	\$ 661,831	
· ——) (Neverlue	001,031	·'
SEE SCH	EDULE O			
4 b (Code:) (Expenses \$ including grants of \$) (Revenue	\$	
40 (Code	Capenises φ microding grants or φ		T	_′
		_		
4 c (Code) (Expenses \$ including grants of \$) (Revenue	Ś	<u> </u>
(COUGE	, (Expenses + meading grains of +		T	-'
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4 d Other prog	gram services (Describe in Schedule O.)			
(Expenses	•	enue \$)	
	ram service expenses ► 4,044,013.			
BAA	TEEA0102L 05/28/14		Form 990 (20	014)

Form 990 (2014) EARTH ISLAND INSTITUTE INC. Randly Checklist of Required Schedules

			res	NO
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? .	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II	4	Х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	5		х
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? If 'Yes,' complete Schedule D, Part I.	6		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If 'Yes,' complete Schedule D, Part II	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III .	8		х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV	9		х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VIII, IX, or X as applicable	2		
	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> .	11 a	Х	
1	b Did the organization report an amount for investments — other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII	11 b		х
•	c Did the organization report an amount for investments – program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII.	11 c		Х
•	d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX	11 d		
	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e	Х	
1	f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X	11 f		х
	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, and XII	12a		х
	b Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional	12 b		Х
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		X
	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
•	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? If 'Yes,' complete Schedule F, Parts I and IV	14b	х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If 'Yes,' complete Schedule F, Parts II and IV	15	х	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If 'Yes,' complete Schedule F, Parts III and IV	16		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions)	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18		х
	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III	19		х
	a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H .	20		X
١	b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 b		

Form 990 (2014) EARTH ISLAND INSTITUTE INC.

Rantive Checklist of Required Schedules (continued)

100	A CONTRACTOR OF THE PROPERTY O		Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21	Х	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	22		х
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J</i>	23		Х
24 :	a 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? <i>If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No, 'go to line 25a</i> .	24a		x
ı	b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
(c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
(d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		_
25	a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		Х
ı	b is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990 EZ? If 'Yes,' complete Schedule L, Part I	25b		х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If 'Yes', complete Schedule L, Part II .	26		Х
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	27		х
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	28a		Х
	b A family member of a current or former officer, director, trustee, or key employee? <i>If 'Yes,' complete Schedule L, Part IV</i>	28b		Х
1	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	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If 'Yes,' complete Schedule M</i>	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		Х
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	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Part II, III, or IV, and Part V, line 1	34	х	
35	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
	b If 'Yes' to line 35a, 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	35b		<u>'</u> -
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		Х
38	Note. All Form 990 filers are required to complete Schedule O	38	Х	
BA/		Form	990 (2014)

Page 5

No

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EARTH ISLAND INSTITUTE INC Form 990 (2014) 94-2889684 Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V 1 a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1 a n b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1 h 0 c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 2 a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return . 0 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) 3 a Did the organization have unrelated business gross income of \$1,000 or more during the year? **b** If 'Yes' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation in Schedule Q 4 a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?

b If 'Yes.' enter the name of the foreign country: See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts. (FBAR) X 5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5 a b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5 b X c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T? 5 0

6 a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were

not tax deductible? . 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?

b If 'Yes,' did the organization notify the donor of the value of the goods or services provided? c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?

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?

f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 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-C3 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring

organization have excess business holdings at any time during the year? 9 Sponsoring organizations maintaining donor advised funds.

a Did the sponsoring organization make any taxable distributions under section 4966?

b Did the sponsoring 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 12b

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? b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O

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Form 990 (2014)

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Part VI | Governance, Management, and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI. ... X Section A. Governing Body and Management Yes No 1 a Enter the number of voting members of the governing body at the end of the tax year 1 a 10 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 10 b Enter the number of voting members included in line 1a, above, who are independent 1 b 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other SEE SCHEDULE O X 2 officer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? 3 Х Did the organization make any significant changes to its governing documents 4 Х since the prior Form 990 was filed? $\overline{\mathbf{X}}$ 5 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 6 X 6 Did the organization have members or stockholders? 7 a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more 7 a Х members of the governing body? b Are any governance decisions of the organization reserved to (or subject to approval by) members, 7 b X stockholders, or persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: X 8 a a The governing body? Х 8Ь **b** Each committee with authority to act on behalf of the governing body? 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 Q Х Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No X 10 a 10a Did the organization have local chapters, branches, or affiliates? b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their 10 b operations are consistent with the organization's exempt purposes? 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? X 11 a \$ \ \} b Describe in Schedule O the process, if any, used by the organization to review this Form 990. SEE SCHEDULE O W. 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13 Х 12 a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise Х 12 b to conflicts? c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in SEE SCHEDULE O Х 12 c Schedule O how this was done X 13 13 Did the organization have a written whistleblower policy? 14 Did the organization have a written document retention and destruction policy? X 14 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official 15 a Х b Other officers or key employees of the organization 15 b 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 16 a X taxable entity during the year? 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? 16 b Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed CA 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. X Upon request Other (explain in Schedule O) Another's website Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to SEE SCHEDULE O the public during the tax year. 20 State the name, address, and telephone number of the person who possesses the organization's books and records JOHN KNOX, 2150 ALLSTON WAY, STE 460 BERKELEY CA 94704 (510) 859-9113

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

Check if Schedule O contains a response or note to any line in this Part VII

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

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

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

Check this box if neither the organization nor any re	lated organization	ation	con		_	ed any o	current officer, direct	or, or trustee.	
				(C)	•				
(A) Name and Title	(B) Average hours per	15	s both	ector	officei /trust/		Reportable compensation from	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation
	week (list any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	(W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
(1) MICHAEL MITRANI	1								
PRESIDENT	0	X		Х			0.	0.	0.
(2) ROBERT WILKINSON	1_								
PRES. EMERITUS	0	Х					0.	0.	0.
(3) ALEX GIEDT	11								
TREASURER	0	X		Х			0.	0.	0.
(4) KENNETH BROWER	11								
VICE PRESIDENT	0	X		X		<u> </u>	0.	0.	0.
(5) JOSH FLOUM	11]				,			
DIRECTOR	0	X				<u> </u>	0.	0.	0.
(6) BARBARA BROWER	11			}					
DIRECTOR	0	X					0.	0.	0.
(7) WILL GREEN	11								
DIRECTOR	0	X					0.	0.	0.
(8) JOHN DE GRAAF	11]							
DIRECTOR	0	X	_				0.	0.	0.
(9) JENNIFER SYNDER	11			ļ					
SECRETARY	0	X		X	<u> </u>	<u> </u>	0.	0.	0.
(10) MARTHA DAVIS							_	_	_
VICE PRESIDENT	0	Х	-	Х	_		0.	0.	0.
(11) DAVID PHILLIPS	40	ļ							
CO - EXEC. DTR	0	 	-	X	-		51,590.	0.	3,252.
(12) JOHN KNOX				١					
CO - EXEC. DTR	0	-	_	Х	<u> </u>	 .	44,160.	0.	603.
(13)									
4.0		├-		-	├		<u> </u>		
<u>(14)</u>		-							
		l		l	1				l

(LANGE OF THE PARTY OF THE PART	(B)			((Po:	sition	,		(D)	(E)	(F)
, (A) , Name and title	Average hours per week	box	, unle	ess pe	erson direct	than is bot or/trus	h an itee)	(D) Reportable compensation from the organization	Reportable compensation from related organizations	Estimated amount of other compensation
	(list any hours for related organiza - tions below dotted line)	or director	institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
(15)		-				-				
(16)		-				_				
(17)										
(18)					-		-			
(19)		-								
(20)		-								
(21)		-								
(22)			ļ <u>. </u>							
(23)						_				
(24)										
(25)										
1 b Sub-total c Total from continuation sheets to Part VII, Secti	on A		L	l	-		>	95,750. 0.	0.	3,855
d Total (add lines 1b and 1c)	OII A			•			•	95,750.	0.	3,855
2 Total number of individuals (including but not limited from the organization ► 0	I to those I	ısted	abo	ve) v	who	recei	ved	more than \$100,00	0 of reportable com	
 3 Did the organization list any former officer, direct on line 1a? If 'Yes,' complete Schedule J for such the organization and related organizations greated such individual. 	<i>h individu</i> f reportab	<i>ial</i> le co	mpe	ensa	ation	and	oth	ner compensation		Yes No 3 X
5 Did any person listed on line 1a receive or accrufor services rendered to the organization? If 'Yes	e comper s,' <i>comple</i>	nsatio	on fr	om dule	any <i>J fo</i>	unre r suc	elate ch p	ed organization or person	ındıvıdual	5 X
1 Complete this table for your five highest comper compensation from the organization Report compensation.	sated ind	epen	den	t co	ntra	ctors	tha	at received more t	han \$100,000 of	ur
(A) Name and business add		tile e	alcii	dai	ycai	Crio	ilg v	(B)		(C) Compensation
										· · · · · · · · · · · · · · · · · · ·
Total number of independent contractors (including \$100,000 of compensation from the organization).		ited to	o the	ose l	listed	d abo	ve)	who received more	than	
BAA		TEEAC	108	03/	09/15					Form 990 (2014

Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (C) Unrelated (D) (A) Total revenue (B) Revenue Related or excluded from tax exempt business (a) function revenue under sections 512-514 revenue 1 a Federated campaigns Contributions, Gifts, Grants 1 a 16,773 Similar Amounts **b** Membership dues 1 b 54,993 1 c c Fundraising events d Related organizations. 1 d e Government grants (contributions) 1 e 309,273 f All other contributions, gifts, grants, and similar amounts not included above. and Other 3,261,125 1 f a Noncash contributions included in lines 1a-1f. 98,302 h Total. Add lines 1a-1f 3,642,164 **Business Code** Program Service Revenue 900099 2a INT'L MARINE MAMMAL PROJ 216,042 216,042 900099 192,929 192,929 **b** COALSWARM 900099 141,492 141,492 C OTHER PROGRAM_ 611710 57,396 57,396 d KIDS FOR THE BAY 561520 53,972 53,972 e GLOBAL SERVICE CORP. f All other program service revenue g Total. Add lines 2a-2f. 661,831. 医肥大斑 磷酸磷 Investment income (including dividends, interest and other similar amounts) 80,874 80,874. Income from investment of tax-exempt bond proceeds. 5 Royalties 14,408 14,408 (ı) Real (II) Personal 6a Gross rents **b** Less rental expenses c Rental income or (loss) d Net rental income or (loss) (i) Securities (II) Other 7 a Gross amount from sales of assets other than inventory 330,342 b Less: cost or other basis and sales expenses 324,419 c Gain or (loss) 5,923 d Net gain or (loss) 923 923 8a Gross income from fundraising events Revenue (not including . \$ of contributions reported on line 1c). See Part IV. line 18 b Less: direct expenses c Net income or (loss) from fundraising events 9a Gross income from gaming activities See Part IV, line 19 b Less: direct expenses c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances. 86,873 b b Less: cost of goods sold 23,064 c Net income or (loss) from sales of inventory 63,809 ,809 Miscellaneous Revenue **Business Code** 11a <u>MISC.</u> 900099 101,610 101,610 b JOURNAL SALE 511120 4,278 4.278 1,<u>591</u> c ADVERTISING INCOME 541800 1,591 d All other revenue KALAMBAL WAGATA e Total. Add lines 11a-11d 107,479 11.1.2 (1.3.2 Total revenue. See instructions. 4,576,488 831 528 1,591 101,205

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). Check if Schedule O contains a response or note to any line in this Part IX (A)
Total expenses (C) (D) (B) Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII. Fundráising Program service Management and general expenses expenses expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 133,146 133,146 Grants and other assistance to domestic individuals See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and for-eign individuals. See Part IV, lines 15 and 16 Programme -68,550 68,550 Benefits paid to or for members Compensation of current officers, directors, 51,808 trustees, and key employees 16,787. 99,608 31,013 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 0 0. 0 0 Other salaries and wages 2.187.116 322,610 184,038. 680,468 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) Other employee benefits 301,035 226,496 47,975 26,564. 10 Payroll taxes 207,592 155,466 33,885 18,241. 11 Fees for services (non-employees): a Management 24,573 13,504 9,732 1,337. **b** Legal c Accounting 44,601 44,601 10,096. 10,096 d Lobbying Par Mar Mar Chan e Professional fundraising services. See Part IV, line 17 in the late of the second f Investment management fees g Other. (If line 11g amt exceeds 10% of line 25, column 477,306 26,780 108. 504,194 (A) amount, list line 11g expenses on Schedule 0) Advertising and promotion 89,945 82,443 7,502. Office expenses Information technology 105,130 78,732 17,160 9,238. Royalties . 39,089 21,043. Occupancy 239,476 179,344 16 344,567 8,147 356,933 4,219. 17 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 73,776. Conferences, conventions, and meetings 76,549 2,666 107. 20 Interest Payments to affiliates 22 Depreciation, depletion, and amortization 31,752 23,779 5,183. 2,790. 37,438 26,959 7,882 597. 23 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 ****** 24 expenses on Schedule O.) úði. a OUTSIDE SERVICES 162,569 162,569 119,194 4,553 2,451. b EQUIPMENT RENTAL AND MAINTENAN 126,198 30,534 45,309. 80,944 5,101 C POSTAGE AND SHIPPING <u>5,088.</u> d SUPPLIES 57,901 43,362 9,451 82,709. 152,666. 17,781 52,176. e All other expenses 5,098,012 4,044,013. 654,404 399,595. 25 Total functional expenses. Add lines 1 through 24e 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)

	•			(A) Beginning of year		(B) End of year			
					<u> </u>				
	1 Cash — non-interest-bearing			709,674.	1	891,843			
1	2 Savings and temporary cash investments	• •		1,784,859.	2	181,311			
3	3 Pledges and grants receivable, net	•	• • • • • • • • • • • • • • • • • • • •	1,333,215.	3	1,134,142			
1 '	4 Accounts receivable, net			182,720.	4	88,191			
,	5 Loans and other receivables from current and for trustees, key employees, and highest compensate Part II of Schedule L				5				
(section 4958(f)(1)), persons described in section 495, employers and sponsoring organizations of section 5	ans and other receivables from other disqualified persons (as defined under ction 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing aployers and sponsoring organizations of section 501(c)(9) voluntary employees' eneficiary organizations (see instructions) Complete Part II of Schedule L							
1	7 Notes and loans receivable, net		<u> </u>	7					
:	8 Inventories for sale or use			24,214.	8	56,958			
	9 Prepaid expenses and deferred charges			59,482.	9	131,588			
1	10a Land, buildings, and equipment, cost or other base Complete Part VI of Schedule D	sis. 10a	1,613,897.						
	b Less accumulated depreciation	10b	335,749.	1,309,900.	10 c	1,278,148			
1	11 Investments – publicly traded securities			3,939,373.	11	5,181,991			
1	12 Investments – other securities. See Part IV, line								
1	13 Investments – program-related. See Part IV, line	11		383,228.	13	350,405			
1	14 Intangible assets				14				
1	15 Other assets See Part IV, line 11								
1	16 Total assets. Add lines 1 through 15 (must equal	line 34) .		1,290,595. 11,017,260.	15 16	1,051,356 10,345,933			
_	17 Accounts payable and accrued expenses		600,971.	17	254,110				
1	18 Grants payable			52,562.	18				
1	19 Deferred revenue			,	19	120,618			
2	20 Tax-exempt bond liabilities				20				
2	21 Escrow or custodial account liability Complete F	Part IV of Sche	edule D	_	21				
2	Loans and other payables to current and former of key employees, highest compensated employees Complete Part II of Schedule L	officers, direct , and disqualit	ors, trustees, fied persons	English State Control of the Control	22	Andrew Commence of the commenc			
	23 Secured mortgages and notes payable to unrelate			-	23				
2	24 Unsecured notes and loans payable to unrelated			41,619.	24	25,619			
2	Other liabilities (including federal income tax, pay and other liabilities not included on lines 17-24)		ed third parties, t X of Schedule D	1,051,885.	25	992,409			
2	26 Total liabilities. Add lines 17 through 25	•	<u>.</u>	1,747,037.	26	1,392,756			
	Organizations that follow SFAS 117 (ASC 958), checlines 27 through 29, and lines 33 and 34.	k here ► [and complete						
2	27 Unrestricted net assets		•	3,887,201.	27	3,435,368			
2	28 Temporarily restricted net assets		•	5,383,022.	28	5,517,809			
2	29 Permanently restricted net assets				29				
3 3 3 3 3	Organizations that do not follow SFAS 117 (ASC 958 and complete lines 30 through 34.	· []							
3	30 Capital stock or trust principal, or current funds				30				
3									
3	32 Retained earnings, endowment, accumulated inc		funds		32				
3	33 Total net assets or fund balances .			9,270,223.	33	8,953,17			
1	34 Total liabilities and net assets/fund balances .			11,017,260.	34	10,345,93			

	m 990 (2014) EARTH ISLAND INSTITUTE INC.	94-2889684	Pa	age 12
Pa	Reconciliation of Net Assets			
	Check if Schedule O contains a response or note to any line in this Part XI.			
1	Total revenue (must equal Part VIII, column (A), line 12)	1	4,576,4	488.
2	Total expenses (must equal Part IX, column (A), line 25)	2	5,098,0	
3	Revenue less expenses. Subtract line 2 from line 1	3	-521,5	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	9,270,2	
5	Net unrealized gains (losses) on investments	5	204,4	
6	Donated services and use of facilities	6		
7	Investment expenses .	7		
8	Prior period adjustments	8	•	
9	Other changes in net assets or fund balances (explain in Schedule O)	9		0.
10	actions (DV)	10	0.050.	·
D.	column (B))	10	8,953,1	L//.
-Pa	Financial Statements and Reporting			_
	Check if Schedule O contains a response or note to any line in this Part XII			
1	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O		Yes	No
2	a Were the organization's financial statements compiled or reviewed by an independent accountant?		2 a	X
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reseparate basis, consolidated basis, or both. Separate basis Consolidated basis Both consolidated and separate basis	viewed on a		
	b Were the organization's financial statements audited by an independent accountant?		2 b X	#000 SAN AC
ı	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a s basis, consolidated basis, or both: X Separate basis Consolidated basis Both consolidated and separate basis	eparate		L
	c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the review, or compilation of its financial statements and selection of an independent accountant?		2 c X	
_	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.			
3	a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sir Audit Act and OMB Circular A-133?		3 a	х
	b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required or audits, explain why in Schedule O and describe any steps taken to undergo such audits	d audit	3 ь	

Form 990 (2014)

BAA

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service **Public Charity Status and Public Support**

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

► Attach to Form 990 or Form 990-EZ.

► Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2014



Name of	the organization					Employer identifica	tion number				
EART	TH ISLAND INSTITUTE	INC.				94-2889684	1				
Part	Reason for Public Cha	arity Status (All or	rganizations must d	omple	te this	part.) See instruct	ions.				
The or	ganization is not a private foun-	dation because it is: (For lines 1 through 11,	check o	nly one	box)					
1	A church, convention of church	nes, or association of cl	hurches described in sec t	ion 170(l	b)(1)(A)(i).					
2	A school described in section	on 1 70(b)(1)(A)(ii). (Att	ach Schedule E)								
3	A hospital or a cooperative I	nospital service organ	ization described in sec	tion 170	(b)(1)(A)(iii).					
4	A medical research organiza	ation operated in conju	unction with a hospital o	describe	d in sec	tion 170(b)(1)(A)(iii) Ei	nter the hospital's				
	name, city, and state:										
5	An organization operated for the 170(b)(1)(A)(iv). (Complete	he benefit of a college of Part II)	or university owned or ope	erated by	a gover	nmental unit described in	section				
6	A federal, state, or local gov					` '` '					
7	in section 170(b)(1)(A)(vi).	in section 170(b)(1)(A)(vi). (Complete Part II)									
8	A community trust described			-							
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.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4).										
10		•	•	-							
11	An organization organized a or more publicly supported of lines 11a through 11d that d	organizations describe	ed in section 509(a)(1) d	r sectio	n 509(a)	(2). See section 509(a)	It the purposes of one (3). Check the box in				
а	Type I. A supporting organization(s) the power to recomplete Part IV, Sections 2	egularly appoint or elect	d, or controlled by its sup t a majority of the director	ported or s or trus	rganızatı tees of tl	on(s), typically by giving he supporting organization	the supported on. You must				
b	Type II. A supporting organi management of the supporting must complete Part IV, Sec	zation supervised or c gorganization vested in tions A and C.	controlled in connection the same persons that c	with its ontrol or	support manage	ed organization(s), by I the supported organizati	naving control or on(s) You				
С	Type III functionally integrated organization(s) (see instruct	I. A supporting organizations) You must com	tion operated in connection plete Part IV, Sections	n with, ar A, D, an e	nd function d E.	nally integrated with, its s	supported				
d	Type III non-functionally integrated. The instructions) You must com	organization generally plete Part IV, Section	must satisfy a distriburs A and D, and Part V.	tion requ	Jiremen'	t and an attentiveness	requirement (see				
е	Check this box if the organiz	zation received a writt	en determination from	he IRS	that is a	Type I, Type II, Type I	II functionally				
	integrated, or Type III non-fi	• •	supporting organization								
	Enter the number of supported Provide the following information	•	d organization(s)				•				
	_ 			(-)		(v) Amount of monetary	(u) Amount of other				
	(i) Name of supported organization	(iı) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) li organizat in your g docum	ion listed overning	support (see instructions)	(vi) Amount of other support (see instructions)				
				Yes	No						
(A)						_					
(B)											
(C)							<u>-</u>				
(D)	·····					-	- ··· - · · · · · · · · · · · · · · · ·				
(E)		99. Want 1	TS Serse 2 904, Williams or one we have one or the								
Total					. 						
BAA	For Paperwork Reduction Act N	lotice, see the Instruc	ctions for Form 990 or 9	90-EZ.		Schedule A (Form	990 or 990-EZ) 2014				

Schedule A (Form 990 or 990-EZ) 2014 EARTH ISLAND INSTITUTE INC. 94-2889684

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

(Complete only	y if you checked the box on line 5, 7, or i	8 of Part I or if t	he organization failed ti	o qualify under Pa	art III. If the
organization t	fails to qualify under the tests listed b	elow, please co	omplete Part III)		

Sec	tion A. Public Support	 					
begi	ndar year (or fiscal year nning in) ►	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.')	9,374,491.	12006426.	10221846.	9,936,764.	3,642,164.	45,181,691.
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf.						_ 0.
3	The value of services or facilities furnished by a governmental unit to the organization without charge .	·					0.
4	Total. Add lines 1 through 3 .	9,374,491.	12006426.	10221846.	9,936,764.	3,642,164.	45,181,691.
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)						3,719,094.
6	Public support. Subtract line 5 from line 4						41,462,597.
Sec	tion B. Total Support			·-			
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
7	Amounts from line 4	9,374,491.	12006426.	10221846.	9,936,764.	3,642,164.	45,181,691.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources.	192,486.	143,970.	156,499.	160,394.	95,282.	748,631.
9	Net income from unrelated business activities, whether or not the business is regularly carried on	120,297.	80,407.	86,585.	185,680.	-1,958.	471,011.
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) SEE PART VI	13,902.	40,390.	414,949.	138,641.	105,888.	713,770.
11	Total support. Add lines 7 through 10						47,115,103.
12	Gross receipts from related activ	vities, etc (see ins	tructions)			12	5,894,407.
13	First five years. If the Form 990 is organization, check this box and	for the organization stop here	n's first, second, th	ird, fourth, or fifth t	tax year as a section	on 501(c)(3)	▶ □
Sec	tion C. Computation of Pu						
14	Public support percentage for 20 Public support percentage from			ne 11, column (f))		14	88.00%
15							89.10%
16 a	33-1/3% support test — 2014. If and stop here. The organization	the organization of qualifies as a pul	did not check the blicly supported o	rganization	nd the line 14 is 3	33-1/3% or more,	check this box
t	33-1/3% support test – 2013. If and stop here. The organization				5a, and line 15 is	33-1/3% or more,	check this box
17 a	10%-facts-and-circumstances to or more, and if the organization the organization meets the 'fact	meets the 'facts-a	and-circumstance	s' test, check this	box and stop her	r e. Explain in Par	t VI how
	or more, and if the organization organization meets the 'facts-an	meets the 'facts-and-circumstances'	and-circumstance test. The organiza	s' test, check this ation qualifies as	box and stop he r a publicly support	re. Explain in Par ed organization	t VI how the ►
	Private foundation. If the organ	zation did not che	eck a box on line	13, 16a, 16b, 17a			
BAA					Scl	nedule A (Form 9	90 or 990-F7) 2014

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

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

Sec	tion A. Public Support			· <u> </u>			
Calendaria	dar year (or fiscal yr beginning in) > Gifts, grants, contributions and membership fees received (Do not include	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
2	any 'unusual grants.'). 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 5	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf. The value of services or						
,	dachities furnished by a governmental unit to the organization without charge						
	Total. Add lines 1 through 5 . Amounts included on lines 1, 2, and 3 received from disqualified persons						
	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.)					natura de la compansión d	
	tion B. Total Support	(-) (010	(h) 2011	(-) 0010	(-I) 0012	4-> 0014	10 T + 1
	dar year (or fiscal yr beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
10 a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
11	Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)						
13	Total support. (Add lines 9, 10c, 11 and 12).						
14	First five years. If the Form 990 organization, check this box and	is for the organiza	ation's first, seco	nd, third, fourth, o	r fifth tax year as	a section 501(d	x)(3) ►
Sec	tion C. Computation of Pul						
15	Public support percentage for 20	•	-	ne 13, column (f))	•	15	
16	Public support percentage from :					16	%
	tion D. Computation of Inv						
17	Investment income percentage f				mn (f))	17	
18	Investment income percentage f					18	
	33-1/3% support tests – 2014. If is not more than 33-1/3%, check	this box and sto l	p here. The orgai	nization qualifies a	is a publicly suppo	orted organizati	on ►
	33-1/3% support tests — 2013. If line 18 is not more than 33-1/3%	s, check this box a	and stop here. Th	ne organization qu	alifies as a publicl	y supported or	ganization -
20	Private foundation. If the organiz	zation did not che	ck a box on line		neck this box and	see instruction	s <u> </u>

Part IV Supporting Organizations

(Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If 'No,' describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If 'Yes,' explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2)
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If 'Yes,' answer (b) and (c) below
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If 'Yes,' describe in **Part VI** when and how the organization made the determination
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If 'Yes,' explain in **Part VI** what controls the organization put in place to ensure such use
- 4a Was any supported organization not organized in the United States ('foreign supported organization')? If 'Yes' and if you checked 11a or 11b in Part I, answer (b) and (c) below
 - **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If 'Yes,' describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations
 - c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If 'Yes,' explain in **Part VI** what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes
- 5 a Did the organization add, substitute, or remove any supported organizations during the tax year? If 'Yes,' answer (b) and (c) below (if applicable) Also, provide detail in **Part VI**, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If 'Yes,' provide detail in Part VI
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If 'Yes,' complete Part I of Schedule L (Form 990)
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If 'Yes, complete Part I of Schedule L (Form 990).
- 9 a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If 'Yes,' provide detail in Part VI
 - **b** Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If 'Yes,' provide detail in **Part VI**.
 - c Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If 'Yes,' provide detail in Part VI
- 10 a Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If 'Yes, answer (b) below
 - **b** Did the organization, have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings)

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	10b		

Ŗâ	Supporting Organizations (continued)			
-1-1	Use the exceptation accepted a gift or contribution from any of the following persons?	12-65-8526	Yes	No
	Has the organization accepted a gift or contribution from any of the following persons? a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the			*. ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ;
	governing body of a supported organization?	11a	 	<u> </u>
	b A family member of a person described in (a) above?	11b		
	c A 35% controlled entity of a person described in (a) or (b) above? If 'Yes' to a, b, or c, provide detail in Part VI	11c	L	L
Se	ction B. Type I Supporting Organizations			
	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint	(v. Normaliste	Yes	No
1	or elect at least a majority of the organization's directors or trustees at all times during the tax year? If 'No,' describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If 'Yes,' explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization	2		
Se	ction C. Type II Supporting Organizations			
		F	Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If 'No,' describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s)	1		7.5
Se	ction D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If 'No,' explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).	2	*	***
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If 'Yes,' describe in Part VI the role the organization's supported organizations played in this regard	3		
Se	ction E. Type III Functionally-Integrated Supporting Organizations			·
	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions):			
•				
	a The organization satisfied the Activities Test Complete line 2 below			
	b The organization is the parent of each of its supported organizations. Complete line 3 below			
	c The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instruction	ons)		
2	Activities Test Answer (a) and (b) below.	[Yes	No
	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If 'Yes,' then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a		
	b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If 'Yes,' explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.	-10		
	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI</i>	3a		
	b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If 'Yes,' describe in Part VI the role played by the organization in this regard	3b		<u> ^</u>

Pal	Type III Non-runctionally integrated 509(a)(3) Supporting Orga	IIIIZa	IIIOIIS	
1	Check here if the organization satisfied the Integral Part Test as a qualifying trust on No other Type III non-functionally integrated supporting organizations must complete	ovemb Sect	per 20, 1970. See instructio tions A through E	ons. All
Sec	tion A — Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions).	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
Sec	tion B — Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year).		ing a parameter trade and a support	
í	Average monthly value of securities	1a		
	Average monthly cash balances .	1b		
	Fair market value of other non-exempt-use assets	1c		
	i Total (add lines 1a, 1b, and 1c)	1d		
	Discount claimed for blockage or other factors (explain in detail in Part VI):			ESPANATION CONTRACTOR
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3		3		
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 035	6		
_ 7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sec	tion C — Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	46.46.46.46.46	_
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5	-107 (A) -457 (A) A (A)	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functionally-inte (see instructions).	grate	d Type III supporting org	anization

	dule A (Form 990 or 990-EZ) 2014 EARTH ISLAND INSTITU		94-288	39684 Page 7			
	t V Type III Non-Functionally Integrated 509(a)(3) Sution D — Distributions	ipporting Organizat	ions (continueu)	Current Year			
1	Amounts paid to supported organizations to accomplish exempt pu	rposes .					
2							
3	Administrative expenses paid to accomplish exempt purposes of su	upported organizations.					
4	Amounts paid to acquire exempt-use assets						
	Qualified set-aside amounts (prior IRS approval required)						
6	Other distributions (describe in Part VI) See instructions						
7	Total annual distributions. Add lines 1 through 6						
8	Distributions to attentive supported organizations to which the organization Part VI). See instructions	on is responsive (provide	details · ·				
9	Distributable amount for 2014 from Section C, line 6						
, 10	Line 8 amount divided by Line 9 amount		,				
Sec	tion E — Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014			
1	Distributable amount for 2014 from Section C, line 6	All All All X	4 40.6 4 4 5 7 4 4 4 4 4 4 4	_			
2	Underdistributions, if any, for years prior to 2014 (reasonable cause required — see instructions).						
3	Excess distributions carryover, if any, to 2014	A 114		1 Li			
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				Maria de la constanta de la co			
	From 2013	Comment of the second					
	(Table of hear 2 afterward a			- A. 6/25/A			
,	f Total of lines 3a through e	1					
,	g Applied to underdistributions of prior years.	MILLIAN PROCE					
	Applied to underdistributions of prior years		<u> ಕ್ರೀಕ್ರಾ</u>				
	Applied to underdistributions of prior years. Applied to 2014 distributable amount						

5 Remaining underdistributions for years prior to 2014, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6 Remaining underdistributions for 2014 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
7 Excess distributions carryover to 2015. Add lines 3j and 4c .			
8 Breakdown of line 7		_	11 1 / / / / / / / / / / / / / / / / /
a in the second of the second			
b			AND OF LOOK
c)			Saminaria Maria
d Excess from 2013.	A . M		4. 4.

BAA

e Excess from 2014

line 7.

a Applied to underdistributions of prior years.
b Applied to 2014 distributable amount
c Remainder Subtract lines 4a and 4b from 4

Schedule A (Form 990 or 990-EZ) 2014

Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

PART II, LINE 10 - OTHER INCOME

NATURE AND SOURCE		2014	 2013	 2012	 2011	 2010
JOURNAL SALES MISC GRANT RETURNED	\$	4,278. 101,610.	\$ 17,342. 121,299.	\$ 12,517. 69,932. 332,500.	\$ 14,728. 25,662.	\$ 13,902.
,	TOTAL 🕏	105,888.	\$ 138,641.	\$ 414,949.	\$ 40,390.	\$ 13,902.

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ.
Information about Schedule C (Form 990 or 990-EZ) and it instructions is at www.irs.gov/form990.

··· Open to Public

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

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

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

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

If the organization answered 'Yes,' to Form 990, Part IV, line 5 (Proxy Tax) (see instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see instructions), then

• Section 501(c)(4) (5) or (6) organizations. Complete Part III

		rganizations Complete Part III			
	of organization			Employer identific	
	RTH ISLAND INSTITUT			94-288968	
ACCUPATION.	THE STATE OF THE S	rganization is exempt under section	* *		zation.
. 1	•	organization's direct and indirect political o	ampaign activities in		
2	Political expenditures.	••		▶ \$	
	Volunteer hours .				
Pai	man management	rganization is exempt under secti			
1		ise tax incurred by the organization under		▶ \$	
2	Enter the amount of any exc	ise tax incurred by organization managers	under section 4955	▶\$	O.
3	If the organization incurred a	section 4955 tax, did it file Form 4720 for	this year? .		Yes No
4:	a Was a correction made?				Yes No
1	b If 'Yes,' describe in Part IV				
Pa	rt I-C Complete if the o	rganization is exempt under section	on 501(c), excep	t section 501(c)(3).	
1	Enter the amount directly ex	pended by the filing organization for section	n 527 exempt function	on activities >\$	
2	Enter the amount of the filing of	organization's funds contributed to other organ	izations for section 523	7 exempt	·
	function activities			▶ \$	
. 3	Total exempt function expendine 17b	ditures Add lines 1 and 2 Enter here and	on Form 1120-POL,	▶\$	1
. 4	Did the filing organization file	e Form 1120-POL for this year?			Yes No
5	Enter the names, addresses organization made payments amount of political contribution	and employer identification number (EIN) s. For each organization listed, enter the ais received that were promptly and directly delal action committee (PAC). If additional spa	mount paid from the ivered to a separate po	filing organization's fun- plitical organization, such	which the filing ds. Also enter the as a separate
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter-0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

Schedule C (Form 990 or 990-EZ) 201	⁴ EARTH ISLAND	INSTITUTE INC.		94-288	9684 Page 2
Part II-A. Complete if section 501(the organization is	s exempt under see	ction 501(c)(3) and	filed Form 5768 (e	lection under
A Check ► if the filin	g organization belongs to	an affiliated group (and	list in Part IV each affilia	ated group member's nam	e,
• address,	EIN, expenses, and sh	nare of excess lobbying	expenditures).		
B Check ► I if the filing	ng organization checke	d box A and 'limited co	ntrol' provisions apply.		
(The term	Limits on Lobbying 'expenditures' means	Expenditures amounts paid or incur	red.)	(a) Filing organization's totals	(b) Affiliated group totals
1 a Total lobbying expendit	ures to influence public	opinion (grass roots lo	bbying)	6,792.	
b Total lobbying expendite	ures to influence a legis	slative body (direct lobb	oying)	20,649.	
c Total lobbying expendit	ures (add lines 1a and	1b) .		27,441.	0.
d Other exempt purpose	expenditures			5,070,571.	
e Total exempt purpose e	expenditures (add lines	1c and 1d)		5,098,012.	<u> </u>
f Lobbying nontaxable ar both columns	mount Enter the amour	nt from the following tal	ole in	404,901.	
If the amount on line 1e, col	umn (a) or (b) is. The	e lobbying nontaxable	amount is		Minke, i d'alia
Not over \$500,000		6 of the amount on line 1e.			
Over \$500,000 but not over \$1	,000,000 \$10	0,000 plus 15% of the excess	over \$500,000.		
Over \$1,000,000 but not over \$	\$1,500,000 \$17	5,000 plus 10% of the excess	over \$1,000,000.		
Over \$1,500,000 but not over \$	\$17,000,000 \$22	5,000 plus 5% of the excess of	over \$1,500,000.		
Over \$17,000,000		000,000			
g Grassroots nontaxable	•		•	101,225.	0.
h Subtract line 1g from lin				_0.	0.
i Subtract line 1f from lin	e 1c If zero or less, er	nter -0-		0.	0.
j If there is an amount othe section 4911 tax for this		e 1h or line 1i, did the org	ganization file Form 4720	reporting	Yes No
(Som	ne organizations that m	ear Averaging Period U ade a section 501(h) el elow. See the instructi	ection do not have to o		
	Lobbyin	g Expenditures During	4-Year Averaging Peri	od	
Calendar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) Total
2 a Lobbying non-taxable amount	799,484.	697,838.	757,201.	404,901.	2,659,424.
b Lobbying ceiling amount (150% of line 2a, column (e))					3,989,136.
c Total lobbying expenditures.	61,782.	37,995.	72,890.	27,441.	200,108.
d Grassroots nontaxable amount	199,871.	174,460.	189,300.	101,225.	664,856.
e Grassroots ceiling amount (150% of line 2d, column (e))					997,284.
f Grassroots lobbying expenditures .	61,782.	37,995.	55,190.	6,792.	161,759. m 990 or 990-EZ) 2014
BAA				Scriedule C (For	いい シブレ OI ブブロ・E.C.) 2014

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

	(a	1)	(b)		
For each 'Yes' response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity	Yes	No	Am	ount	
During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of				1	
a Volunteers?					%
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				ر دانست کشت	ا
c Media advertisements? .					
d Mailings to members, legislators, or the public?					
e Publications, or published or broadcast statements?					
f Grants to other organizations for lobbying purposes?					
g Direct contact with legislators, their staffs, government officials, or a legislative body?					
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i Other activities?					
j Total Add lines 1c through 1i	, ,	100			
2 a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			Warn, and a		L.J
b If 'Yes,' enter the amount of any tax incurred under section 4912	2,150				
c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912	200				
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			参 用约,300	_ ^3	. 🛊 😁
Part III-A Complete if the organization is exempt under section 501(c)(4), section 501	(c)(5)	, or		•	
section 501(c)(6).				Yes	No
4 November 1 (000) as march dues recoved pendeductible by members?			1	162	NO
1 Were substantially all (90% or more) dues received nondeductible by members?			2	-	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?			3	 	
3 Did the organization agree to carry over lobbying and political expenditures from the prior year?	· \/=\				
Part III-B Complete if the organization is exempt under section 501(c)(4), section 501 (6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No,' OR (b)	(c)(5) Part	, or s III-A,	ine 3, is	u ((C)	

answered 'Yes.'

1	Dues, assessments and similar amounts from members	1	
2	2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
а	Current year .	2 a	
b	Carryover from last year	2 b	
c	: Total	2 c	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5	Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions), and Part II-B, line 1. Also, complete this part for any additional information

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, lines 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
► Attach to Form 990.

► Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

Open to Public Inspection

Employer identification number Name of the organization EARTH ISLAND INSTITUTE INC. 94-2889684 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Part I Complete if the organization answered 'Yes' to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 1 Aggregate value of contributions to (during year) Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds No are the organization's property, subject to the organization's exclusive legal control? Yes 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 No Yes impermissible private benefit? Conservation Easements. Complete if the organization answered 'Yes' to Form 990, Part IV, line 7. 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 a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space 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 2 a b Total acreage restricted by conservation easements 2 b c Number of conservation easements on a certified historic structure included in (a) 2 c d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax vear > Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, Yes No and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ►\$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) No and section 170(h)(4)(B)(II)? In Part XIII, 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 Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered 'Yes' to Form 990, Part IV, line 8. 1 a 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 XIII, 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) Revenue included in Form 990, Part VIII, line 1 ▶\$ (ii) Assets included in Form 990, Part X ÞŚ 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 Revenue included in Form 990, Part VIII, line 1

b Assets included in Form 990, Part X

▶\$

Partille Organizations Mainta	ining Collec	tions of Art, HISTO	orical Treasures, O	Other Similar ASS	<u> </u>	л ш <u>ш</u>					
3 Using the organization's acquisition items (check all that apply):	, accession, an			re a significant use of its o	collection	n					
a Public exhibition		d Loan o	or exchange programs								
b Scholarly research		e Other									
c Preservation for future gener											
4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII											
5 During the year, did the organiza to be sold to raise funds rather the	nan to be mair	itained as part of the o	rganizatio <u>n's collection</u>	?	Yes		No				
Escrow and Custodia line 9, or reported an	I Arrangeme amount on	ents. Complete if t Form 990, Part X,	he organization an line 21.	swered 'Yes' to For	m 990 	, Part 	. IV, 				
1 a Is the organization an agent, true on Form 990, Part X?		•		ner assets not included	Yes	[No				
b If 'Yes,' explain the arrangement	in Part XIII ar	nd complete the followi	ng table:	 							
					Amoun						
c Beginning balance	•		•	1 c							
d Additions during the year			• •	1 d							
 Distributions during the year 	•			1 e							
f Ending balance	•	•		. 1f			_				
2 a Did the organization include an a					Yes	L	No				
b If 'Yes,' explain the arrangement	in Part XIII C	theck here if the explar	nation has been provide	ed in Part XIII]				
Partiva Endowment Funds. C	omplete if t	he organization an	swered 'Yes' to Fo	orm 990, Part IV, Im	<u>e 10.</u>						
	(a) Current y	rear (b) Prior year	r (c) Two years bac	k (d) Three years back	(e) I	our year	s back				
1 a Beginning of year balance											
b Contributions											
c Net investment earnings, gains, and losses											
d Grants or scholarships						·					
 Other expenditures for facilities and programs 											
f Administrative expenses											
g End of year balance	L										
2 Provide the estimated percentag	e of the currer	nt year end balance (lir	ne 1g, column (a)) held	as.							
a Board designated or quasi-endown	nent 🟲	%									
b Permanent endowment ►	%										
c Temporarily restricted endowme	nt ►	8									
The percentages in lines 2a, 2b,	and 2c should	equal 100%.									
3 a Are there endowment funds not in a organization by:	the possession	of the organization that a	are held and administered	d for the	ſ	Yes	No				
(i) unrelated organizations					3a(i)						
(ii) related organizations					3a(ii)						
b If 'Yes' to 3a(ii), are the related	organizations I	isted as required on So	chedule R?		3b						
4 Describe in Part XIII the intende	_				٠ا						
Part VI Land, Buildings, and				<u>-</u>							
Complete if the organ				, 							
Description of property		(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) l	Book va					
1 a Land	1		628,628.				<u>,628.</u>				
b Buildings	Ĺ		51,951.	18,382.			<u>,569.</u>				
c Leasehold improvements		<u></u>	776,051.	227,075.		548	<u>,976.</u>				
d Equipment	. [20,975.	20,975.			0.				
e Other			_136,292.	69,317.		66	,975.				
Total. Add lines 1a through 1e. (Colum	nn (d) must eq	ual Form 990, Part X,	column (B), line 10c.)	•			,148.				
BAA				Sched	ule D (F	orm 990)) 2014				

Part VII Investments - Other Securities.		N/A	. 10
		, Part IV, line 11b. See Form 990, Part X, lin	<u>ie 12.</u>
(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)			
(B) (C)			
(D)			
(E)			
(F)			
(G)			
<u>(H)</u>			
(1)		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
Total. (Column (b) must equal Form 990, Part X, column (B) line 12.)			·····
Part VIII Investments – Program Related. Complete if the organization answered	l 'Yes' to Form 990	, Part IV, line 11c. See Form 990, Part X, lin	ie 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. (Column (b) must equal Form 990, Part X, column (B) line 13.)			. 3
Part IX Other Assets. Complete if the organization answered	I 'Yes' to Form 990), Part IV, line 11d. See Form 990, Part X, lin	ne 15.
	scription	(b) Book val	lue
(1) ADVANCES			844.
(2) SECURITY DEPOSITS FOR OFFICE			203. 309.
(3) WETLAND RESTORATION TRUST FUND (4)			309.
(5)			
(6)			
(7)			
(8)			
(9) (10)		· · · · ·	
Total. (Column (b) must equal Form 990, Part X, column (l	B). line 15)	1,051,	356
Part X Other Liabilities.		1, 3027	550.
Complete if the organization answered 'Yes' to Fo			
(a) Description of liability	(b) Book value		:
(1) Federal income taxes (2) AGENCY OBLIGATION	989,30		
(3) DEPOSITS	3,10		- 3
(4)			. \
(5)			
(6)			* \$
(7) (8)	-		2 4
(9)	-		. 3*
(10)		三大學工學工學工學的影響等	
(11)			
Total. (Column (b) must equal Form 990, Part X, column (B) line 25)	▶ 992,40		
2. Liability for uncertain tax positions. In Part XIII, provide the text of the fotax positions under FIN 48 (ASC 740) Check here if the text of the footnote	otnote to the organization's fi	nancial statements that reports the organization's liability for uncertain	۱ 🗀
BAA	TEEA3303L 08/25/14	Schedule D (Form 990)	1 2014
	55555	Schedule B (1 offil 350)	,

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cneaule v (עטככ ווווטין	4014	CAKIR	TOTWIN	TNOTTIOLE	INC.

94-2889684

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Part XI Reconciliation of Revenue per Audited Financial State			
Complete if the organization answered 'Yes' to Form 99	0, Part IV, line 12a		
1 Total revenue, gains, and other support per audited financial statements		. 1	
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:		A CONTRACTOR OF THE PARTY OF TH	
a Net unrealized gains (losses) on investments	2 a		
b Donated services and use of facilities	2 b		
c Recoveries of prior year grants	2c		
d Other (Describe in Part XIII)	2 d	\$ 12 m	
e Add lines 2a through 2d	•	. 2 e	
3 Subtract line 2e from line 1		3	
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:		\$ 198 P	
a Investment expenses not included on Form 990, Part VIII, line 7b	4 a	Alexander of the state of the s	
b Other (Describe in Part XIII.)	. 4b		
c Add lines 4a and 4b .		4 c	
5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line	121	5	
Total for the control of the control	12)	j j	
			· · · · · ·
Part XII Reconciliation of Expenses per Audited Financial State Complete if the organization answered 'Yes' to Form 99	ements With Exper	ses per Return. N/A	
Pant:XII Reconciliation of Expenses per Audited Financial State	ements With Exper	ses per Return. N/A	
Part:XII Reconciliation of Expenses per Audited Financial State Complete if the organization answered 'Yes' to Form 99	ements With Exper	ses per Return. N/A	
Part:XII Reconciliation of Expenses per Audited Financial State Complete if the organization answered 'Yes' to Form 99 1 Total expenses and losses per audited financial statements	ements With Exper	ses per Return. N/A	
Part:XII Reconciliation of Expenses per Audited Financial State Complete if the organization answered 'Yes' to Form 99 1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25:	ements With Exper 0, Part IV, line 12a	ses per Return. N/A	
Part:XII Reconciliation of Expenses per Audited Financial State Complete if the organization answered 'Yes' to Form 99 1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities.	ements With Exper 0, Part IV, line 12a 	ses per Return. N/A	
Part: XII Reconciliation of Expenses per Audited Financial State Complete if the organization answered 'Yes' to Form 99 1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities. b Prior year adjustments	ements With Exper 0, Part IV, line 12a 	ses per Return. N/A	
Part: XII Reconciliation of Expenses per Audited Financial State Complete if the organization answered 'Yes' to Form 99 1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities. b Prior year adjustments c Other losses	ements With Exper 0, Part IV, line 12a 2a 2b 2c	ses per Return. N/A	
Part: XII Reconciliation of Expenses per Audited Financial State Complete if the organization answered 'Yes' to Form 99 1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities. b Prior year adjustments c Other losses d Other (Describe in Part XIII)	ements With Exper 0, Part IV, line 12a 2a 2b 2c	nses per Return. N/A	
Part: XII Reconciliation of Expenses per Audited Financial State Complete if the organization answered 'Yes' to Form 99 1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities. b Prior year adjustments c Other losses d Other (Describe in Part XIII) e Add lines 2a through 2d	ements With Exper 0, Part IV, line 12a 2a 2b 2c	nses per Return. N/A	
Part:XII Reconciliation of Expenses per Audited Financial State Complete if the organization answered 'Yes' to Form 99 1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities. b Prior year adjustments c Other losses d Other (Describe in Part XIII) e Add lines 2a through 2d 3 Subtract line 2e from line 1	ements With Exper 0, Part IV, line 12a 2a 2b 2c	nses per Return. N/A	
Part: XII Reconciliation of Expenses per Audited Financial State Complete if the organization answered 'Yes' to Form 99 1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities. b Prior year adjustments c Other losses d Other (Describe in Part XIII) e Add lines 2a through 2d 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part IX, line 25, but not on line 1:	ements With Exper 0, Part IV, line 12a	nses per Return. N/A	
Part XII Reconciliation of Expenses per Audited Financial State Complete if the organization answered 'Yes' to Form 99 1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities. b Prior year adjustments c Other losses d Other (Describe in Part XIII) e Add lines 2a through 2d 3 Subtract line 2e from line 1 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 b Other (Describe in Part XIII) c Add lines 4a and 4b	ements With Exper 0, Part IV, line 12a 2a 2b 2c 2d	2e 3	
Part XII Reconciliation of Expenses per Audited Financial State Complete if the organization answered 'Yes' to Form 99 1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities. b Prior year adjustments c Other losses d Other (Describe in Part XIII) e Add lines 2a through 2d 3 Subtract line 2e from line 1 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 b Other (Describe in Part XIII)	ements With Exper 0, Part IV, line 12a 2a 2b 2c 2d	eses per Return. N/A 1 2e 3	

Part XIII Supplemental Information.

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, lines 2d and 4b; and Part XII, lines 2d and 4b Also complete this part to provide any additional information.

BAA

Schedule F (Form 990)

Statement of Activities Outside the United States

Complete if the organization answered 'Yes' on Form 990, Part IV, line 14b, 15, or 16.

► Attach to Form 990.

► Information about Schedule F (Form 990) and its instructions is

OMB No 1545-0047 2014

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

at www.irs.gov/form990.

Employer identification number

CAKIN TOTAMO INSTITUTE INC	EARTH	ISLAND	INSTITUTE	INC
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94-2889684

General Information on Activities Outside the United States. Complete if the organization answered 'Yes' on Form 990, Part IV, line 14b.

For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eliqibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

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) PART V

(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
RUSSIA & THE NEWLY (1) INDEPE			GRANT MAKING		15,275.
(2) NORTH AMERICA		_	GRANT MAKING		5,000.
EAST ASIAN & THE					
(3) PACIFIC			GRANT MAKING		4,525.
(4) SUB-SAHARAN AFRICA			GRANT MAKING		43,750.
				SUPPLEMENTAL	
(5) SUB-SAHARAN AFRICA			PROGRAM SERVICES	INFO	20,185.
				SUPPLEMENTAL	
(6) SUB-SAHARAN AFRICA			PROGRAM SERVICES	INFO	91,336.
				SUPPLEMENTAL	
(7) EUROPE			PROGRAM SERVICES	INFO	30,049.
				SUPPLEMENTAL	
(8) SOUTH ASIA			PROGRAM SERVICES	INFO	7,000.
RUSSIA & NEIGHBORING				SUPPLEMENTAL	
(9) STATES			PROGRAM SERVICES	INFO	1,200.
EAST ASIA & THE				SUPPLEMENTAL	·
(10) PACIFIC			PROGRAM SERVICES	INFO	15,650
CENTRAL AMERICA & THE				SUPPLEMENTAL	
(11) CARIBBEA			PROGRAM SERVICES	INFO	37,199
		-	FOREIGN IND.		
(12) SUB-SAHARAN AFRICA			CONTRACTOR		254
			FOREIGN IND.		
(13) SOUTH ASIA			CONTRACTOR		963
			FOREIGN IND.		
(14) NORTH AMERICA			CONTRACTOR		1,507
			FOREIGN IND.		<u>.</u>
(15) EUROPE			CONTRACTOR		1,200
EAST ASIA & THE	-		FOREIGN IND.		,
(16) PACIFIC			CONTRACTOR		26,518.
CENTRAL AMERICA & THE			FOREIGN IND.		
(17) CARIBBEA			CONTRACTOR		2,300
3 a Sub-total			The state of the s		303,911.
b Total from continuation sheets to Part I					
c Totals (add lines 3a and 3b)	0	0			303,911.

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

Schedule F (Form 990) 2014

Schedule F (Form 990) 2014 EARTH ISLAND INSTITUTE INC.

Part. | Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered 'Yes' on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1 come(N/c)	to transfer of	Spool SQI (4)	(c) Basion	oscario (P)	(a) Amount of	(A) Manner of	(a) Amount of		(i) Method of
(a) Natine O	(a) radile oi oiganization	(if applicable)	iolay (2)	of grant	cash grant	disbursement	non-cash assistance	non-cash assistance	valuation (book, FMV, appraisal, other)
			NORTH AMERICA	GEN. SUPPORT	5,000.	WIRE			
(2)		The second secon	RUSSIA	GEN. SUPPORT	6,500.	WIRE			
(3)		charge Charges and	RUSSIA	GEN. SUPPORT	6,500. WIRE	WIRE			
		SUB-	-SAHARAN	GEN. SUPPORT	10,000. WIRE	WIRE			
S. middle year gryssyll		SUB-SAE	SUB-SAHARAN AFR	GEN. SUPPORT	15,450. WIRE	WIRE			
200			SUB-SAHARAN AFR	GEN. SUPPORT	8,200. WIRE	WIRE			
(A) 10 (A									
(8)	642								
(6)		Ž							
) - -	And the second s								
(11)									
	The state of the s								
(13)									
1									
(ST)									
(16)									
2 Enter total number	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	ons listed above that ar	re recognized as cha	rities by the foreig	n country, recognize	ed as tax-exempt by	the IRS, or for which	5	

Schedule F (Form 990) 2014 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

9

3 Enter total number of other organizations or entities

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Schedule F (Form 990) 2014 EARTH ISLAND INSTITUTE INC.

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered 'Yes' on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.

(h) Method of valuation (book, FMV, appraisal, other) Schedule F (Form 990) 2014 (g) Description of non-cash assistance (f) Amount of non-cash assistance (e) Manner of cash disbursement (d) Amount of cash grant (c) Number of recipients (b) Region (a) Type of grant or assistance (18) BA A (11) (13) (14) 0 8 (3) 3 (2) (9) 8 8 6 (<u>1</u>0) (12) (12)(16) (1)

Sche	edule F (Form 990) 2014 EARTH ISLAND INSTITUTE INC.	94-2889684	Page 4
Pa	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	X 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 C 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; do not file with Form 990)	Certain . Yes	X 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 C. Foreign Corporations (see Instructions for Form 5471)	Certain Yes	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a quelecting 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)	alified	X 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)	gn Yes	X 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, do not file with Form 990)	∏Yes	X No

TEEA3505L 06/16/13

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Schedule **F** (Form 990) 2014

Part V Supplemental Information

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 (see instructions).

PART I - ADDITIONAL SUPPLEMENTAL INFORMATION

PART I #2 WHILE SOME OF OUR GRANTING INTERNATIONALLY INVOLVES FORMAL APPLICATION PROCEDURES, FORMAL AWARD PROCEDURES, AND/OR FORMAL REPORTING FROM RECIPIENT ORGANIZATIONS REGARDING THE RESULTS ASSOCIATED WITH THE GRANT, NOT ALL DOES.

PART I #3 METHOD OF ACCOUNTING - ACCOUNTING METHOD USED ON THIS SCHEDULE IS THE SAME METHOD USED IN THE ORGANIZATION'S FINANCIAL STATEMENTS WHICH IS ON ACCRUAL BASIS.

THE FOLLOWING ARE PROGRAMS THAT HAVE ACTIVITIES IN FOREIGN COUNTRIES:

- # 01-EIJ THE EARTH ISLAND JOURNAL COMBINES INVESTIGATIVE JOURNALISM
 THOUGHT-PROVOKING ESSAYS THAT MAKE THE SUBTLE BUT PROFOUND CONNECTIONS BETWEEN
 ENVIRONMENT & OTHER CONTEMPORARY ISSUES.
- # 7 INTERNATIONAL MARINE MAMMAL PROJECT IS LEADING THE GLOBAL EFFORT TO STOP THE SLAUGHTER OF DOLPHINS, TO END COMMERCIAL WHALING, & TO END THE USE OF DRIFT NETS AND OTHER DESTRUCTIVE FISHING PRACTICES.
- # 12 SACRED LAND FILM PROJECT IS A COMMUNITY DEDICATED TO PROTECTING EARTH'S SACRED PLACES THROUGH MEDIA AND ACTION.
- #21 THE ALTAI PROJECT PROTECTS THE NATURAL AND CULTURAL HERITAGE OF ALTAI- A UNIQUELY DIVERSE & MOUNTAINOUS REGION OF SOUTHERN SIBERIA.

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Rartty Supplemental Information

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 (see instructions).

PART I - ADDITIONAL SUPPLEMENTAL INFORMATION (CONTINUED)

INDIGENOUS RIGHTS AND CONSERVE THE FOREST IN THE INDONESIAN AND MALAYSIAN BORNEO.

- #30 WOMEN'S EARTH ALLIANCE INVESTS IN GRASSROOTS WOMEN'S LEADERSHIP TO DRIVE SOLUTIONS TO OUR MOST PRESSING ECOLOGICAL CONCERNS - WATER, FOOD, LAND AND CLIMATE.
- # 41 GLOBAL SERVICE CORPS CREATES OPPURTUNITIES FOR ADULT VOLUNTEERS TO LIVE AND WORK ON ENVIRONEMENTAL & SOCIAL JUSTICE PROJECTS IN TANZANIA & CAMBODIA.
- 49 SUSTAINABLE WORLD COALITION IS A COALTION OF INDIVIDUALS & ORGANIZATIONS WHO WORK TOWARD A WORLD THAT IS ENVIRONMENTALLY SUSTAINABLE, SOCIALLY JUST, & SPIRITUALLY FULLFILLING.
- # 55 PLASTIC POLLUTOIN COALITION IS A GLOBAL ALLIANCE WORKING TOWARDS A WORLD FREE OF PLASTICS.
- #59 COALSWARM: A COLLABORATIVE INFORMATIVE CLEARINGHOUSE ON COAL CONTAINING OVER 4,000 ARTICLES.
- 68 PROJECT SURVIVAL MEDIA IS A GLOBAL YOUTH NETWORK DEDICATED TO BROADCASTING STORIES OF SURVIVAL & INGENUITY IN THE FACE OF CLIMATE CHANGE
- #76 ARMENIAN ENVIRONMENTAL NETWORK IS A NETWORK OF GROUPS AND INDIVIDUALS AIMED AT PROMOTING AWARENESS OF ENVIRONMENTAL AND ENERGY CONCERNS FOR ARMENIA'S DEVELOPMENT THROUGH INFORMATION SHARING, RESEARCH AND SUPPORT FOR ENVIRONMENTAL CONSERVATION INITIATIVES IN ARMENIA.

Partive Supplemental Information

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 (see instructions).

PART I - ADDITIONAL SUPPLEMENTAL INFORMATION (CONTINUED)

79 THE RESILIENCE FUND LINKS COFFEE ROASTING COMPANIES AND THEIR CUSTOMERS WITH THEIR FARMING PARTNERS AT ORIGIN. THE FUND PROVIDES FINANCIAL INVESTMENT AND KNOWLEDGE SHARING TO SUPPORT LOCAL FARMERS AND THEIR COMMUNITIES IN ADAPTING TO CLIMATE CHANGE.

#88 FRIENDS OF MUONDE SUPPORTS EDUCATION, RESEARCH AND LOCAL TRAINING IN AGRICULTURE AROUND INDIGENOUS INNOVATIONS IN WATER, SOIL MANAGEMENT, HYGIENE AND SANITATION FOR COMMUNITIES IN ZIMBABWE.

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

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

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

Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2014

Employer identification number

94-2889684

		Assistance
	INC.	Part General Information on Grants and Assistance
	EARTH ISLAND INSTITUTE INC	Information
organization	ISLAND	General
Name of the organization	EARTH	Part

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?

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

SEE PART IV

% □

X Yes

Rantill Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered 'Yes' to Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) CENTRO POR LA JUSTICA PO BOX 830706 CONTROL RAY AND ONTO THE CONTROL OF THE C	(5) (7) (03 0110,010,10)	501 (7) (3)	223	U			GENERAL SUPPORT
(2) DEEP SOUTH CENTER FOR ENV	07/07/7-6/	301 (0) (3)					
1631_ELYSTAN_FIELDS_AVE_#165_ NEW ORLEANS, LA 70117	56-2466977 501 (C) (3)	501 (C) (3)	7,333.	0			GENERAL SUPPORT
(3) GREAT WHALE CONVERVANCY							
HAINES, AK 98827	80-0851949 501 (C) (3)	501 (C) (3)	20,000.	0.			GENERAL SUPPORT
(4) GREEN VILLAGE GREEN FUTURE							
	26-3681669[501 (C) (3)	501 (C) (3)	9.870	0			GENERAL SUPPORT
(5) POLARIS INSTITUTE							
PO_BOX_485							Edoddin I kaanaa
BEMIDJI, MN 56619	74-3099465 (501) (3)	(501) (3)	7, 333.	0.			GENERAL SUPPORT
<u>6</u>							
		_					
(8)							
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table) and government o	rganizations listed i	in the line 1 table			A	5

Schedule I (Form 990) (2014)

TEEA3901L 06/19/14

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 3 Enter total number of other organizations listed in the line 1 table

94-2889684

Partill Crants and Other Assistance to Domestic Individuals. 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
2					
m					
4					
•					
S.					
v					
7					
Partive Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.	de the information	required in Part I,	line 2, Part III, co	umn (b), and any othe	er additional information.

PART I, LINE 2 - PROCEDURES FOR MONITORING USE OF GRANTS FUNDS IN U.S.

GENERAL SUPPORT GRANTS TO ESTABLISHED 501(C)(3) AGENCIES. EARTH ISLAND PROJECTS ARE RESULTS ASSOCIATED WITH THE GRANT, NOT ALL DOES. EARTH ISLAND INSTITUTE DOES MAKE WHILE SOME OF OUR GRANTING INVOLVES FORMAL APPLICATION PROCEDURES, FORMAL AWARD PROCEDURES, AND/OR FORMAL REPORTING FROM RECIPIENT ORGANIZATIONS REGARDING THE RESPONSIBLE FOR TRACKING THE GRANTS THAT THEY AWARD. Schedule I (Form 990) (2014)

SCHEDULE M (Form 990)

Noncash Contributions

► Complete if the organizations answered 'Yes' on Form 990, Part IV, lines 29 or 30.

► Attach to Form 990.

Department of the Treasury Internal Revenue Service Name of the organization

Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047



EARTH ISLAND INSTITUTE INC

Employer identification number

94-2889684

Pai	Types of Property						_
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	Metho noncash	(d) od of determin contribution a	ning amounts
1	Art — Works of art					· · · -	
2	Art — Historical treasures .						
3	Art — Fractional interests			-			·
4	Books and publications						
5	Clothing and household goods		Z.J.A.				-
6	Cars and other vehicles.		<u></u>				
7	Boats and planes						
8	Intellectual property						
9	Securities - Publicly traded						
10	Securities - Closely held stock			_			
11	Securities - Partnership, LLC, or trust interests						
12	Securities - Miscellaneous						
13	Qualified conservation contribution — Historic structures						
14	Qualified conservation contribution — Other						
15	Real estate - Residential						
16	Real estate — Commercial						
17	Real estate – Other .						_
18	Collectibles .						
19	Food inventory .						
20	Drugs and medical supplies .						
21	Taxidermy						
22	Historical artifacts .						
23	Scientific specimens						
24	Archeological artifacts						
25	Other ► (CAMPING EQUIPME)			98,302.	FMV		_
26	Other ► (
27	Other • ()						
28	Other ► ()						
29	Number of Forms 8283 received by the organization organization completed Form 8283, Part IV, Done	luring the tax e Acknowle	year for contributions for dgement	r which the	29	Yes	No

- 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?
 - b If 'Yes,' describe the arrangement in Part II
- 31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?
- 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?
 - b If 'Yes,' describe in Part II.
- 33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.

30 a 31

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

Schedule M (Form 990) (2014)

Part II Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

SCHEDULE O (Form 990 or 990-EZ)

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.

at www.irs.gov/form990.

Information about Schedule O (Form 990 or 990-EZ) and its instructions is

OMB No 1545-0047 2014

Open to Public Inspection .

Department of the Treasury Internal Revenue Service Name of the organization

EARTH ISLAND INSTITUTE INC

Employer identification number

94-2889684

FORM 990, PART IV, LINE 12A - AUDITED FINANCIAL STATEMENTS

DURING 2014, EARTH ISLAND INSTITUTE ADPOTED A FISCAL YEAR ENDING ON JUNE 30. THTS FORM 990 COVERS THE SIX MONTHS FROM JANUARY 1, 2014 THROUGH JUNE 30, 2014. THIS SIX MONTH PERIOD WILL BE INCLUDED IN OUR NEXT CPA AUDIT WHICH WILL COVER THE 18 MONTH PERIOD JANUARY 1, 2014 THROUGH JUNE 30, 2015.

FORM 990, PART III, LINE 4A - PROGRAM SERVICE ACCOMPLISHMENTS

PROJECT SUPPORT PROGRAM

OUR PROJECT SUPPORT PROGRAM PROVIDES AN ORGANIZATIONAL HOME IN WHICH ACTIVISTS CAN DEVELOP CAMPAIGNS AND PROGRAMS WITH A MINIMUM OF BUREAUCRACY. SINCE OUR FOUNDING IN 1982, WE HAVE HELPED LAUNCH MORE THAN 150 CAMPAIGNS.IN 2014, OUR PROJECT SUPPORT PROGRAM SUPPORTED 62 PROJECTS - PROVIDING FINANCIAL MANAGEMENT, ADMINISTRATION, TECHNICAL ASSISTANCE, AND TRAINING.EARTH ISLAND PROJECTS ARE LOCATED ACROSS THE UNITED STATES AND THE IMPACT OF THEIR WORK REACHES AROUND THE GLOBE - ADVANCING THE CAUSES OF WILDLIFE PROTECTION, ENVIRONMENTAL EDUCATION AND LEADERSHIP DEVELOPMENT, ENERGY AND CLIMATE CHANGE, INTERNATIONAL AND INDIGENOUS COMMUNITIES, ENVIRONMENTAL RESTORATION AND PRESERVATION, AND SUSTAINABILITY AND COMMUNITY RESILIENCE.IN THE FIRST HALF OF 2014, THE PROJECT SUPPORT PROGRAM ADOPTED TWO NEW SPONSORED PROJECTS AND "GRADUATED" ONE TO INDEPENDENT 501(C)(3) STATUS.WE INTRODUCED SEVERAL NEW SUPPORT PROGRAMS, INCLUDING: WEBINAR TRAININGS, FACILITATED PEER SUPPORT CALLS FOR PROJECT DIRECTORS, AN UPDATED PROJECT RESOURCE WEB SITE, AND A WEEKLY PROJECT NEWSLETTER.

NEW LEADERS INITIATIVES

NEW LEADERS INITIATIVE IDENTIFIES, HONORS, SUPPORTS AND SUSTAINS OUTSTANDING ENVIRONMENTAL YOUTH LEADERS IN NORTH AMERICA, AND CONFERS THE PREMIERE ENVIRONMENTAL YOUTH PRIZE, THE BROWER YOUTH AWARDS. SINCE 2000, THE BROWER YOUTH AWARD HAS

Employer identification number

94-2889684

FORM 990, PART III, LINE 4A - PROGRAM SERVICE ACCOMPLISHMENTS

RECOGNIZED OUTSTANDING YOUTH LEADERS WHO ARE MAKING STRIDES IN THE ENVIRONMENTAL MOVEMENT. EACH YEAR, SIX YOUNG PEOPLE BASED IN NORTH AMERICA ARE AWARDED THE PRIZE, JOINING A GROWING AND DIVERSE CADRE OF GREEN LEADERS WHO ARE PUBLICLY RECOGNIZED FOR THEIR SUSTAINABLE PROJECTS, INNOVATIVE IDEAS AND INFORMED ANALYSES. YEAR-ROUND COACHING IS PROVIDED TO AWARD WINNERS, AND ADDITIONAL SERVICES ARE OFFERED TO A BROADER SPECTRUM OF YOUTH ENVIRONMENTAL LEADERS THROUGH THE MOVEMENT IN GREEN STRATEGIC SUPPORT AND MICRO-GRANT PROGRAM. A REGULAR SPEAKER SERIES, ROOTED AND RISING, COMPLIMENTS THE AWARD AND SUPPORT PROGRAMS BY OFFERING AN INTERGENERATIONAL FORUM TO DISCUSSION SOLUTIONS TO PRESSING ENVIRONMENTAL ISSUES.

RESTORATION INITIATIVES

OUR RESTORATION INITIATIVES SMALL GRANTS PROGRAM PROVIDES SUPPORT TO COMMUNITY-BASED GROUPS THAT ARE BRINGING BACK TO LIFE ONCE POLLUTED STREAMS, WETLANDS, AND OPEN SPACE. WE BELIEVE THAT ECOLOGICAL RESTORATION IS A CORE TASK OF TWENTY-FIRST-CENTURY ENVIRONMENTALISM.

EARTH ISLAND JOURNAL

EARTH ISLAND JOURNAL IS AN AWARD-WINNING QUARTERLY MAGAZINE THAT GOES BEYOND THE DAILY HEADLINES WITH INVESTIGATIVE REPORTING, INCISIVE COMMENTARY, AND ART. EARTH ISLAND JOURNAL COVERS THE ENVIRONMENT FROM DIVERSE ANGLES, INCLUDING: WILDERNESS PROTECTION, ANIMALS RIGHTS, ENERGY AND CLIMATE CHANGE, EXTRACTIVE INDUSTRIES, CHEMICALS AND POLLUTION, FOOD AND FARMING, ENVIRONMENTAL INJUSTICE, AND SUSTAINABLE DEVELOPMENT. WE EXPLORE ENVIRONMENTAL CONCERNS FROM A WIDE RANGE OF PERSPECTIVES — FROM THE PERSONAL TO THE POLITICAL, THE LOCAL TO THE GLOBAL — AND PRODUCE THE TYPE OF INVESTIGATIVE REPORTING FOUND IN FEW OTHER ENVIRONMENTAL MAGAZINES. WE PUT OUR PRINCIPLES NEXT TO OUR REPORTING AND WE MARSHAL THE FACTS TO MAKE A PASSIONATE

Name of the organization

EARTH ISLAND INSTITUTE INC.

Employer identification number

94-2889684

FORM 990, PART III, LINE 4A - PROGRAM SERVICE ACCOMPLISHMENTS

ARGUMENT FOR DEFENDING EARTH.

FORM 990, PART VI, LINE 2 - BUSINESS OR FAMILY RELATIONSHIP OF OFFICERS, DIRECTORS, ETC.

BARBARA AND KEN BROWER ARE BOARD MEMBERS AND SISTER AND BROTHER.

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

A COPY OF THE DRAFT TAX RETURN IS E-MAILED TO MEMBERS OF THE BOARD FOR REVIEW BEFORE FILING.

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

WE REQUIRE OUR BOARD AND EXECUTIVE DIRECTORS TO UPDATE THEIR DECLARATIONS RELATIVE

TO CONFLICT OF INTEREST ANNUALLY OR WHEN THEIR STATUS CHANGES, WHICHEVER COMES

FIRST. IF A CONFLICT BECOMES EVIDENT IN THE OPERATIONS OF THE ORGANIZATION, OUR

PROCEDURES PROVIDE FOR THE BOARD PRESIDENT TO ACT TO ASSURE THAT ANY POTENTIAL

CONFLICT IS RECOGNIZED AND MINIMIZED WHERE POSSIBLE.

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

GOVERNING DOCS, POLICIES AND FINANCIAL STATEMENTS ARE AVAILABLE UPON REQUEST AT OUR

ADMINISTRATIVE OFFICE.

SCHEDULE R (Form 990) Department of the Treasury Internal Revenue Service Name of the organization

Related Organizations and Unrelated Partnerships

Complete if the organization answered 'Yes' on Form 990, Part IV, line 33, 34, 35b, 36, or 37.Attach to Form 990.

► Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

2014

OMB No 1545-0047

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> Part Solution of Disregarded Entities Complete of the organization answered 'Yes' on Form 990, Part IV, line 33. EARTH ISLAND INSTITUTE INC.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)		(d) Total income	(e) End-of-year assets	Direct ((f) Direct controlling entity
<u></u>							
(2)							
(3)	1						
Partilal Identification of Related Tax-Exempt Organizations Complete if the organization answered 'Yes' on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.	nizations Complete	if the organization ar.	answered 'Yes'	on Form 990,	Part IV, line 34 t	ecanse	t had
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	atus Direct controlling entity		6 000
							Yes No
(1) DAVID BROWER CENTER	OFFICE RENTAL TO OTHER NPOS	CA	501 (C) (3)	11A	N/A		×
<u>(2)</u>							
<u>(3)</u>							
(b)					<u> </u>		_
BAA For Paperwork Reduction Act Notice, see the Instructions for Form	is for Form 990.		TEEA5001L 08/22/14		Sche	dule R (For	Schedule R (Form 990) 2014

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Schedule R (Form 990) 2014 EARTH ISLAND INSTITUTE INC.

Parill Identification of Related Organizations Taxable as a Partnership Complete if the organization answered 'Yes' on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)		Share of total Share ncome end-	(g) Share of end-of-year assets	(h) Disproportionate allocations?	Code V-UBI Code V-UBI Code V-UBI Code V-UBI Code Code Code Code Code Code Code Code	General or managing partner?	ownership	c) intage irship
(I)												
(2)												
							- .					
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		 -								· · · · ·		
(3)												
		-							-			
PartiV Identification o	Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answine 34 because it had one or more related organizations treated as a corporation or trust during the tax year.	iizations nore relat	Taxable as ed organiza	a Corporatio	n or Trust Cass as a corpora	s a Corporation or Trust Complete if the organization answered 'Yes' on Form 990, Part IV, zations treated as a corporation or trust during the tax year.	organization	on answe ax year.	red 'Yes' on F	orm 990,	Part IV,	
(a) Name, address, and EIN of related organization	of related organizatı		(b) Primary activity	Legal domicile (state or foreign	(d) Direct controlling	Type of entity (C corp, S corp,	Share of total income		(g) Share of end-of- year assets	(h) Percentage ownership	(i) Sec 512(b)(13) controlled entity?	(13) antity?
				country)		(leni)					Yes	ş
(1)		- -										
		-										
		 					<u></u>	<u> </u>				
(2)					į							
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1 1 1 1 1 1 1 1 1		 -									,	
(3)												
								•				
		 									_	
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Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.			•	Yes	<u>و</u>
	led in Parts II-IV?			*	* ************************************
a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity	•		- 1	<u></u>	×
b Gift, grant, or capital contribution to related organization(s)			. 1b		×
c Gift, grant, or capital contribution from related organization(s).	:		1c	-	×
d Loans or loan guarantees to or for related organization(s)	:	: : : : : : : : : : : : : : : : : : : :	19	_	×
e Loans or loan guarantees by related organization(s)	: : : : : : : : : : : : : : : : : : : :				×
f Dividends from related organization(s).					×
			10		×
Purchase of assets from related organization(s).	:		구 :	-	×
i Exchange of assets with related organization(s)		:	=	_	×
j Lease of facilities, equipment, or other assets to related organization(s)		: : : : : : : : : : : : : : : : : : : :	=		×
k Lease of facilities, equipment, or other assets from related organization(s)	:	:	: - - -	×. ×.	
I Performance of services or membership or fundraising solicitations for related organization(s).		:		-	×
m Performance of services or membership or fundraising solicitations by related organization(s)			E	E	×
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	:		1,0	=	×
o Sharing of paid employees with related organization(s)	:		10	0	×
p Reimbursement paid to related organization(s) for expenses				<u>،</u> و	×
q Reimbursement paid by related organization(s) for expenses.		: : :	19	Б	×
r Other transfer of cash or property to related organization(s)	:	· :		, ; <u>-</u>	×
s Other transfer of cash or property from related organization(s)			18	5	×
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.	d relationships and trans	action thresholds.			
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved	deter of deter nt invo	rmınıng Ived
(1)					
(2)					
(3)					
(4)				}	
(5)					
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Schedule R (Form 990) 2014 EARTH ISLAND INSTITUTE INC.

Part VI | Unrelated Organizations Taxable as a Partnership Complete if the organization answered 'Yes' on Form 990, Part IV, line 37.

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

(a)	(9)	(a) (b) (c) (d) (e)	(9)	(3)	9	(5)	(4)	9	6	3
Name, address, and EIN of entity	Primary activity	Legal domicile (state or foreign	Predominant income (related incre-	Are all partners section	Share of total income	Share of end-of-year	Dispropor- tionate	Code V-UBI amount in box	General of managing	Percentage ownership
		(fundo	lated, excluded from tax under	organization	ls?	633669	anocarons	K-1 Form (1065)		•
			section 512-514)	Yes No	٥		Yes No		Yes No	•
(1)										
(2)				-					-	
 				_	_					
(3)				-						
			_							
(4)				-						
	- ,		-	_						
(5)										
									_	
(9)				-						
				_						
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				_						
(8)									-	
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Partiville Supplemental Information

Provide additional information for responses to questions on Schedule R (see instructions).