DLN: 93493106008209 OMB No 1545-0047 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 Open to Public Department of the ▶ Go to www.irs.gov/Form990 for instructions and the latest information. Treasury Inspection Internal Revenue Service For the 2019 calendar year, or tax year beginning 01-01-2018 , and ending 12-31-2018 C Name of organization D Employer identification number B Check if applicable Earthworks □ Address change 52-1557765 ☐ Name change Doing business as ☐ Initial return ☐ Final return/terminated Number and street (or P O box if mail is not delivered to street address) Room/suite 1612 K Street NW No 904 E Telephone number ☐ Amended return ☐ Application pending (202) 887-1872 City or town, state or province, country, and ZIP or foreign postal code Washington, DC $\,\,$ 20006 G Gross receipts \$ 3,622,116 Name and address of principal officer H(a) Is this a group return for Jennifer Krill ☐Yes ☑No subordinates? 1612 K Street NW No 904 H(b) Are all subordinates Washington, DC 20006 ☐Yes ☐No ıncluded? 4947(a)(1) or If "No," attach a list (see instructions) **H(c)** Group exemption number ▶ Website: ► https://earthworks.org/ L Year of formation 1988 M State of legal domicile DC Summary 1 Briefly describe the organization's mission or most significant activities Protect communities and the environment from the adverse impacts of mineral & energy development Activities & Governance 2 Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets 3 Number of voting members of the governing body (Part VI, line 1a) . 14 4 4 Number of independent voting members of the governing body (Part VI, line 1b) . Total number of individuals employed in calendar year 2018 (Part V, line 2a) 5 6 0 **6** Total number of volunteers (estimate if necessary) Total unrelated business revenue from Part VIII, column (C), line 12 0 **b** Net unrelated business taxable income from Form 990-T, line 34 **Prior Year** Current Year 8 Contributions and grants (Part VIII, line 1h) . 4,484,380 3,509,953 Ravenua 9 Program service revenue (Part VIII, line 2g) . 31,952 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . 3,398 66,978 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 18,690 17,097 4,538,420 3,594,028 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3). 140,528 255,104 **14** Benefits paid to or for members (Part IX, column (A), line 4) 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 1,819,567 2,289,757 Expenses 16a Professional fundraising fees (Part IX, column (A), line 11e) . 15,500 14,732 b Total fundraising expenses (Part IX, column (D), line 25) ▶360,214 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . 1,326,358 1,473,487 3,301,953 4,033,080 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) Revenue less expenses Subtract line 18 from line 12 . 1,236,467 -439,052 Net Assets or Fund Balances Beginning of Current Year **End of Year** 2,390,653 2,011,059 20 Total assets (Part X, line 16) . 21 Total liabilities (Part X, line 26) . 168,977 228,474 22 Net assets or fund balances Subtract line 21 from line 20 . 2,221,676 1,782,585 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge 2019-04-12 Signature of officer Sign Here Jennifer Krill Executive Director Type or print name and title Print/Type preparer's name Preparer's signature Check | If 2019-04-12 P00639819 Paid self-employed Firm's name Rogers & Company PLLC Firm's EIN ► 58-2676261 Preparer Use Only Firm's address ▶ 8300 Boone Boulevard Suite 600 Phone no (703) 893-0300 Vienna, VA 22182 ✓ Yes 🗆 No May the IRS discuss this return with the preparer shown above? (see instructions) . For Paperwork Reduction Act Notice, see the separate instructions. Cat No 11282Y Form 990 (2018)

Form	990 (2018)					Page 2
Pa	rt III Statemen	nt of Program Service	e Accomplis	hments		
	Check if Sch	hedule O contains a respo	onse or note to a	any line in this Part III .		🗹
1	Briefly describe the	e organization's mission				
					orks is dedicated to protecting com eking sustainable solutions	munities and the
2	the prior Form 990	on undertake any significa or 990-EZ? hese new services on Sch			nich were not listed on	□ Yes ☑ No
3	Did the organization services?	on cease conducting, or m	nake significant	changes in how it condu	icts, any program	☐ Yes ☑ No
4	Section 501(c)(3) a		ons are required	to report the amount o	largest program services, as meas f grants and allocations to others,	
4a	(Code See Additional Data) (Expenses \$	2,167,658	including grants of \$	211,030) (Revenue \$)
4b	(Code See Additional Data) (Expenses \$	690,769	including grants of \$	5,278) (Revenue \$)
4c	(Code See Additional Data) (Expenses \$	369,137	including grants of \$) (Revenue \$)
	(Code) (Expenses \$	248,685	including grants of \$	38,796) (Revenue \$)
4d	Other program ser (Expenses \$	vices (Describe in Schedi 248,685 incl	ule O) uding grants of	\$ 38,7	96) (Revenue \$)
4e	Total program se	ervice expenses >	3,476,2	49		Form 990 (2018)

Form	990 (2018)			Page 3
Par	tIV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A 2	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🕏	2	Yes	
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		No
	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 2	4	Yes	
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		No
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		No
7		7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III "J	8		No
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		No
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		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
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	11b		No
С	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 2	11c		No
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 🖢	11d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🕏	11e		No
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 🕏	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII 2	12a	Yes	
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	12b		No
13	Is the organization a school described in section $170(b)(1)(A)(II)$? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Yes	
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	Yes	
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		No
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		No
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		No
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		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	19		No

20a Did the organization operate one or more hospital facilities? *If "Yes," complete Schedule H* . .

column (A), line 2? If "Yes," complete Schedule I, Parts I and III

21

22

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

government on Part IX, column (A), line 1º If "Yes," complete Schedule I, Parts I and II

Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX,

Νo

Yes

20a

20b

21

22

Part V

Yes

Yes

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No

38

32

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1a

1b

rai	Checklist of Required Schedules (continued)			
			Yes	No
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		No
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 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		No
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		No
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		No
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? <i>If "Yes," complete Schedule L, Part III</i>	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
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		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
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		No
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		No
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		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
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		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		No
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		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note.			

1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable .

b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable

Check if Schedule O contains a response or note to any line in this Part V $% \left(A_{1}\right) =A_{1}\left(A_{2}\right) +A_{2}\left(A_{3}\right) +A_{3}\left(A_{3}\right) +$

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 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

Is the organization an educational institution subject to the section 4968 excise tax on net investment income?

c Enter the amount of reserves on hand 14a Did the organization receive any payments for indoor tanning services during the tax year?

13b 13c b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O. Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N

14a 14b

15

13a

No Nο

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Page 6

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines

	Check if Schedule O contains a response or note to any line in this Part VI			✓
Se	ction A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 14			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 14			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? .	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7 b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	ı
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
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? <i>If "Yes," provide the names and addresses in Schedule O</i>	9		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Revenue	e Code	e.)	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
	Other officers or key employees of the organization	15b	Yes	
	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			1

	Did the organization invest in, contribute assets to, or participate
	axable entity during the year?
b	f "Yes," did the organization follow a written policy or procedure

in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt

16a requiring the organization to evaluate its participation

status with respect to such arrangements? . . Section C. Disclosure

Νo

List the States with which a copy of this Form 990 is required to be filed▶

16b AL , CA , CT , FL , GA , HI , IL , KS , KY , MD , MA , MI , MN , MS , NH , NJ , NM , NY , NC , ND , OR , PA , RI , SC , TN , UT , VT ,

VA, WA, WV, WI

Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s

only) available for public inspection. Indicate how you made these available. Check all that apply ☑ 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 the public during the tax year

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State the name, address, and telephone number of the person who possesses the organization's books and records

▶Jennifer Krill 1612 K Street NW No 904 Washington, DC 20006 (202) 887-1872 Form 990 (2018) year

(17) Payal Sampat

Mining Program Director

Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

Part VII 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

- 1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax
- 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)
- organization and any related organizations • List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000

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

- 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 co	ompensation fro	m the	organ	ıızatı	ion	and ar	ny re	elated organization:	s	
List persons in the following order individual trus		rs, ınstı	itutio	nal t	rust	tees, d	offic	ers, key employees	s, highest	
compensated employees, and former such perso									-b	
Check this box if neither the organization no (A) Name and Title	(B) Average hours per week (list any hours for related	Position that persuand	on (do an on on is	(C) o not e bot both	t che ox, u n ar or/tr	eck m inless office ustee	ore er	(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the organization and
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	MISC)	MISC)	related organizations
(1) Wilma Subra Chair	3 00	х		x				0	0	0
(2) Anthony Ingraffea PhD Vice Chair	2 00	×		×				0	0	0
(3) Mark Squillace JD Secretary/ Treasurer	2 00	х		х				0	0	0
(4) Patricia Beneke Board Member	1 00	х						0	0	0
(5) Robin Broad Board Member	1 00	×						0	0	0
(6) Ken Colburn Board Member	1 00	×						0	0	0
(7) Gloria Flora	1 00	x						0	0	0

1 00 0 0 1 00 Х 0 0

Board Member (8) Jay Halfon Esq Board Member (9) Adele Hurley Board Member

1 00 (10) Jennifer McDowell Board Member 1 00 (11) Shaun McGrath Х 0 0 Board Member 1 00 (12) Bill McNeill DDS 0 0 Board Member 1 00 (13) Glenn C Miller PhD 0

0 0 0 0 Board Member 1 00 (14) Patricia Weber 0 0 Х 0 Board Member 40 00 (15) Jennifer Krill Х 120,616 23,196 Executive Director 40 00 (16) Bruce Baizel Χ 109,470 35,885 **Energy Program Director**

Х

103,483

40 00

27.629

0

Carrow C	Form 990 (2018)										Page 8
Name and Title Average hours per week (list any hours for related organizations below dotted line) Average hours per week (list any hours for related organizations below dotted line) Position (do not check more than one box, unless person is both an officer and a director/trustee) Position (do not check more than one box, unless person is both an officer and a director/trustee) Reportable compensation from the organizations (W-2/1099-MISC) 2/1099-MISC) Estimated amount of other compensation from the organizations (W-2/1099-MISC) and the provided amount of other compensation from the organization and related organizations organizations.	Part VII Section A. Officers, Direct	tors, Trustees	, Key I	Empl	loye	es,	and I	High	nest Compensate	d Employees (co	ntınued)
ি দুন্দ্র । । ত্রাক্র । । । । । । । । । । । । । । । । । । ।		Average hours per week (list any hours for related organizations below dotted	than o	one book a direct Institutional Trust	o not ox, u in off tor/ti	t che inles ficer rusti	s ae employee	on Fo	Reportable compensation from the organization (W-	Reportable compensation from related organizations (W-	Estimated amount of other compensation from the organization and related

	trustee r	าอ! Trustษะ)yee	onpensated		

1b Sub-Total													
d Total (add lines 1b and 1c)						>		333,569	0	86,710			
Total number of individuals (including of reportable compensation from the compensa			e liste	ed al	bove	e) who	rece	eived more than \$1	00,000				

1b Sub-Total	rt VII , Section	Α				* _		333,569	0		86,710
2 Total number of individuals (including of reportable compensation from the compensatio			e liste	ed al	bove	e) who	rece	eived more than \$1	00,000		
									_	Yes	No

1b 9	lb Sub-Total										
c T	c Total from continuation sheets to Part VII, Section A ▶										
d 7	otal (add lines 1b and 1c)			<u></u>			>		333,569	0	86,710
2	Total number of individuals (including of reportable compensation from the			e list	ed a	bove	e) who	rece	eived more than \$1	00,000	

	om continuation sheets to Part VII, Section A											
c Total from continuation sheets to Part VII, Section A												
1b Sub-Total	Sub-Total											
c Total from continuation sheets to Pa	art VII , Section	Α				▶						
d Total (add lines 1b and 1c)	,											
3 Total number of individuals (including	but not limited	to thes	o lieta	-d -l	have) who	rocc	awad mara than \$1	00 000			

1b	1b Sub-Total										
c '	c Total from continuation sheets to Part VII, Section A										
ď	Total (add lines 1b and 1c)						▶		333,569	0	86,710
2	Total number of individuals (including			e liste	ed al	bove	e) who	rece	eived more than	\$100,000	

				-	Vas	No.
2) wh	o received more than	\$100,000		
d T	c Total from continuation sheets to Part VII, Section A		86,710			
c T	otal from continuation sheets to Part VII, Section A	▶[
LD 3	id-lotal					

1b 9	Sub-Total						>									
c T	otal from continuation sheets to Pa	rt VII , Section	Α				▶									
d T	otal (add lines 1b and 1c)						▶ [333,5	69			0		86,710
2	Total number of individuals (including of reportable compensation from the o			se list	ed ab	oove)) wh	o rec	eived	more th	an \$1	.00,000				
															Yes	No
3	Did the organization list any former of	fficer, director	or trust	ee. k	ev er	nploy	vee.	ar hi	iahest	comper	sated	l emplove	e on			

1b 9	Sub-Total			
c 1	Total from continuation sheets to Part VII, Section A ▶			
d 1	Total (add lines 1b and 1c)	0		86,710
2	Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization \triangleright 3			
			Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employed line 1a? <i>If "Yes," complete Schedule J for such individual</i>	e on 3		No

	Total from continuation sheets to Part VII, Section A	0		86,710
2	Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization \triangleright 3			
			Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3		No
	For any individual habed on line 1s, in the come of annotable common and attendance and appearance that			

2	of reportable compensation from the organization > 3			
			Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3		No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such			

		Π,	Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual	3		No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4		No
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for	_		

3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3	No	
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4	No	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person	5	No	

		L							
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization of services rendered to the organization? If "Yes," complete Schedule J for such person		5		No				
Se	Section B. Independent Contractors								
1	Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year								
	(A)	(B)		/C	$\overline{}$				

Se	Section B. Independent Contractors								
1	Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year								
	(A) Name and business address	(B) Description of services	(C) Compensation						

1	from the organization. Report compensation for the calendar year ending with or within the organization's tax year.						
	(A) Name and business address	(B) Description of services	(C) Compensation				

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

Part	VIII Statement of	Revenue					rage 3
	Check if Schedule	O contains a re	sponse or note to any				🗆
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
(4)	1a Federated campaign	s 1	a	I	revenue		1 312 314
Gifts, Grants illar Amounts	b Membership dues .	. 1	b				
<u> </u>	c Fundraising events	1	с				
Ę,	d Related organization	ns 1	d				
nia G	e Government grants (co	ntributions) 1	e				
tributions, Gifts, Grants Other Similar Amounts	f All other contributions, and similar amounts no	A					
utic Per	above	1 included	f 3,509,953				
돌	g Noncash contribution in lines 1a - 1f \$		24,819				
Contributions, and Other Sim	h Total. Add lines 1a-:			2.500.050			
			Business	3,509,953 Code			
Program Service Revenue	2a						
Pev	b ———						
e Ce	с —						
Serv	d ————						
an.	е ———						
ogr	f All other program ser	vice revenue			L		
<u>4</u>	9 Total. Add lines 2a-2f		•	-			
	3 Investment income (in similar amounts)		s, interest, and other	4,653	3		4,653
	4 Income from investme		t bond proceeds				
	5 Royalties			•			
	6a Gross rents	(ı) Real	(II) Personal	-			
	oa Gross rents						
	b Less rental expenses						
	c Rental income or			1			
	(loss)	(1000)		_			
	d Net rental income or Γ	(i) Securities	(II) Other	1			
	7a Gross amount			-			
	from sales of assets other	25,	65,000	0			
	than inventory						
	b Less cost or other basis and	24,8	3,269	9			
	sales expenses • Gain or (loss)		594 61,733	1			
	d Net gain or (loss) .		•	62,32	5		62,325
a .	8a Gross income from fu (not including \$	ndraising events of	:				
Other Revenue	contributions reported	d on line 1c)					
eve	See Part IV, line 18		a .	-			
r R	b Less direct expensesc Net income or (loss) f		events	_			
the	9a Gross income from ga	aming activities					
0	See Part IV, line 19		a				
	b Less direct expenses		b	-			
	c Net income or (loss) f	from gamıng act	ivities >				
	10a Gross sales of invento						
	recurris and anowance	-3	a				
	b Less cost of goods so	old	b				
	c Net income or (loss) f						
	Miscellaneous F	Revenue	Business Code	9 12,088			12,088
	11a Fıscal agent fees		30003	12,000			12,000
	b Reimbursements/Refi	unds	900099	9 5,009	9		5,009
	- Reimbursements/Ref	uılus					
	с						
	d All other revenue .		+				
	e Total. Add lines 11a-	11d	•	17,09	7		
	12 Total revenue. See 1	Instructions .		·			0 04.075
			•	3,594,028	21	0	0 84,075 Form 990 (2018)

c d

All other expenses

25 Total functional expenses. Add lines 1 through 24e

26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ► ☐ If following SOP 98-2 (ASC 958-720)

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 . (B) (C) Do not include amounts reported on lines 6b, (A) (D) Program service Management and Total expenses 7b, 8b, 9b, and 10b of Part VIII. Fundraisingexpenses expenses general expenses 1 Grants and other assistance to domestic organizations and 240,924 240,924 domestic governments See Part IV, line 21 2 Grants and other assistance to domestic individuals. See Part IV, line 22 14,180 14,180 3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, line 15 and 16 4 Benefits paid to or for members 143,812 119,858 8,987 14,967 Compensation of current officers, directors, trustees, and key employees . . 6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . 1,655,562 1,383,170 102,029 170,363 7 Other salaries and wages 51,461 41,760 3,620 6,081 8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions) . **9** Other employee benefits . 294,920 243,914 19,391 31,615 144,002 120,177 8,908 14,917 10 Payroll taxes . . 11 Fees for services (non-employees) a Management . 104,649 104,012 621 16 **b** Legal . 11.240 11,240 c Accounting **d** Lobbying . 14,732 14,732 e Professional fundraising services See Part IV, line 17 f Investment management fees g Other (If line 11g amount exceeds 10% of line 25, column 428,956 418,618 10.338 (A) amount, list line 11g expenses on Schedule O) 2,447 5,240 2,788 5 12 Advertising and promotion . 184,394 123,342 13.206 47.846 13 Office expenses . 80,967 66,333 1,475 13,159 14 Information technology 15 Royalties 128,353 109,061 6,809 12,483 16 Occupancy . 4,551 267,862 263,299 12 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 1,744 127,045 125,301 19 Conferences, conventions, and meetings 20 Interest . . 21 Payments to affiliates . 2,487 22 Depreciation, depletion, and amortization 84,021 80,068 1,466 13,417 5,131 8,025 261 23 Insurance . 24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O) 22,531 13,899 356 8,276 a Dues and subscriptions **b** State registrations 14,812 414 129 14,269

4,033,080

3,476,249

196,617

360.214

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Form	990	(2018)					Page 11
Pa	art X	Balance Sheet					
		Check if Schedule O contains a response or not	e to an	y line in this Part IX			🗆
					(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing	125	1	117		
	2	Savings and temporary cash investments	1,873,429	2	1,461,037		
	3	Pledges and grants receivable, net			334,404	3	220,332
	4	Accounts receivable, net		[4	
	5 6	Loans and other receivables from current and for trustees, key employees, and highest compensa Part II of Schedule L Loans and other receivables from other disqualif	ited en	nployees Complete		5	
ts.	_	section 4958(f)(1)), persons described in section contributing employers and sponsoring organizations (voluntary employees' beneficiary organizations (Part II of Schedule L		6			
ssets	7	·	loans receivable, net				
As	8	Inventories for sale or use		•	04.544	8	2.245
	9	Prepaid expenses and deferred charges			21,541	9	3,345
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	464,445			
	ь	Less accumulated depreciation	10 b	148,867	160,563	10 c	315,578
	11	Investments—publicly traded securities .			591	11	680
	12	Investments—other securities See Part IV, line	11 .			12	
	13	Investments—program-related See Part IV, line	11 .			13	
	14	Intangible assets	•	[14	
	15	Other assets See Part IV, line 11			0	15	9,970
	16	Total assets.Add lines 1 through 15 (must equ	al line	34)	2,390,653	16	2,011,059
	17	Accounts payable and accrued expenses	•	[168,977	17	228,474
	18	Grants payable				18	
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
Si	21	Escrow or custodial account liability Complete F	art IV	of Schedule D		21	
Liabilities	22	Loans and other payables to current and former key employees, highest compensated employees					
ge		persons Complete Part II of Schedule L				22	
≟	23	Secured mortgages and notes payable to unrela	ted thi	rd parties		23	
	24	Unsecured notes and loans payable to unrelated	l thırd ı	parties		24	
	l						†

12	Investments—other securities See Part IV, line 11		12	
13	Investments—program-related See Part IV, line 11		13	
14	Intangible assets		14	
15	Other assets See Part IV, line 11	0	15	9,970
16	Total assets.Add lines 1 through 15 (must equal line 34)	2,390,653	16	2,011,059
17	Accounts payable and accrued expenses	168,977	17	228,474
18	Grants payable		18	
19	Deferred revenue		19	
20	Tax-exempt bond liabilities		20	

Other liabilities (including federal income tax, payables to related third parties, 25

and other liabilities not included on lines 17 - 24) Complete Part X of Schedule D 168.977 228.474 26 Total liabilities. Add lines 17 through 25 . . 26

Organizations that follow SFAS 117 (ASC 958), check here ▶ ☑ and complete lines 27 through 29, and lines 33 and 34.

Unrestricted net assets 549,324 27 27 28 Temporarily restricted net assets 1,672,352 28

433,438 29 Permanently restricted net assets 29

Net Assets or Fund Balances 1,349,147 Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 30 through 34.

Capital stock or trust principal, or current funds 30 30

31

32

33

34

1,782,585

2,011,059

Form **990** (2018)

2,221,676

2,390,653

Paid-in or capital surplus, or land, building or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds

Total net assets or fund balances

Total liabilities and net assets/fund balances

31

32

33 34

Form	990 (2018)				Page 12
Pa	Reconcilliation 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			,594,028
2	Total expenses (must equal Part IX, column (A), line 25)	2			,033,080
3	Revenue less expenses Subtract line 2 from line 1	3			-439,052
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		2	,221,676
5	Net unrealized gains (losses) on investments	5			-39
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	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		1	,782,585
Pa	TXII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				✓
				Yes	No
1	Accounting method used to prepare the Form 990				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed separate basis, consolidated basis, or both	on a			
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate consolidated basis, or both	basıs,			
	✓ Separate basis				
С	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche	dule O			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sii Audit Act and OMB Circular A-133?	ngle	3a		No

3b

Form **990** (2018)

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

Additional Data

Software ID:

Software Version:

shale oil and gas and hydraulic fracturing (aka fracking) and to reduce the destructive impacts of all forms of energy extraction

EIN: 52-1557765

Name: Earthworks

Form 990 (2018)

Form 990, Part III, Line 4a: The Energy Program includes the Oil & Gas Accountability Project as well as our work on other energy minerals and petrochemicals. This program works to change federal.

state, and local government policy and to support and empower communities impacted by existing and proposed energy extraction, to raise awareness about unconventional

Form 990, Part III, Line 4b:

The Mining Program includes efforts in the U.S. and internationally to reform mining policies and practices, including work to ensure that clean energy revolution does not

lead to more harmful mining. This program protects communities and special places by stopping mining where it doesn't belong, reins in the riskiest and dirtiest mining.

practices, and reforms and defends state, federal and international policies that protect communities, water, wildlife, oceans and other natural resources

General Programming includes Media and Communications, Research and Publications and Digital Engagement and Advocacy Media and Communications - Press outreach and storytelling to promote and publicize the work of Earthworks and its allies. Research and Publications - Analysis and development of policy proposals, research on impacts of mining and energy extraction. and publishing fact sheets, reports, and informationDigital Engagement and Advocacy - Outreach, engagement and advocacy using

Form 990, Part III, Line 4c:

digital tools, providing information to the public and Earthworks members, and responding to inquiries

етне	GKA	APHIC Prii	nt - DO NOT PRO	CESS	As Filed Data -			DLN: 9	3493106008209
	n 990	ULE A 0 or		f the or	Charity Statu ganization is a sect 4947(a)(1) nonexe • Attach to Form	ion 501(c)(3) e mpt charitable	organization or trust.	l l	2018
•		the Treasury	•	Go to <u>i</u>	www.irs.gov/Forms				Open to Public Inspection
me	Reven of the orks	ne Service ne organiza	tion					Employer identific	<u> </u>
								52-1557765	
	t I				is (All organization it is (For lines 1 thro			See instructions.	
			•		sociation of churches	•		(A)(i).	
<u>.</u>		·			L)(A)(ii). (Attach Sch			. , , ,	
					rice organization descr	,	• •	iii).	
		A medical r		operate	ed in conjunction with	a hospital descr	ibed in section :	170(b)(1)(A)(iii). E	nter the hospital's
		-	ation operated for the (iv). (Complete Part		of a college or univer	rsity owned or op	perated by a gov	ernmental unit descri	bed in section 170
		A federal, s	tate, or local govern	ment or	governmental unit de	scribed in sectio	on 170(b)(1)(A)(v).	
'	\checkmark		ation that normally re ' 0(b)(1)(A)(vi). (Co			s support from a	governmental u	nit or from the gener	al public described in
1		A communi	ty trust described in	section	170(b)(1)(A)(vi)	(Complete Part I	I)		
					scribed in 170(b)(1) ee instructions Enter			with a land-grant coll college or university	ege or university or
		from activit	ies related to its éxe	mpt func d busine	ctions—subject to cert ess taxable income (le	tain exceptions,	and (2) no more	is, membership fees, than 331/3% of its su ses acquired by the c	pport from gross
		•	• • •		exclusively to test for	r public safety S	ee section 509	(a)(4).	
		more public	ly supported organiz	ations d		09(a)(1) or se	ction 509(a)(2	s of, or to carry out th). See section 509(a s 12e. 12f. and 12g	
		organizatio		gularly a				zation(s), typically by of the supporting orga	
		manageme		organiza	tion vested in the san			organization(s), by having the supported orga	
								nd functionally integra	ted with, its
		Type III n	on-functionally int	egrated anization		zation operated fy a distribution	in connection wi requirement and	na E. th its supported orgar an attentiveness req	
		Check this	box if the organization	n receiv		ation from the I		pe I, Type II, Type II	I functionally
:	Enter	-	of supported organiz		3 oapporting	3			
					pported organization(
	(i) N	lame of supp organization		EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))		anization listed ling document?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (se instructions)
						Yes	No		
tal									
		vork Reduc	tion Act Notice, see	e the In	structions for	Cat No 11285	F S	Schedule A (Form 9	90 or 990-EZ) 201

organization

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Schedule A (Form 990 or 990-EZ) 2018

Page 2

	(Complete only if you ch						under Part
	III. If the organization fa	uls to qualify und	der the tests liste	ed below, please	e complete Part	III.)	
S	ection A. Public Support		T	Т	ı	1	
	Calendar year	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
	(or fiscal year beginning in) ► Gifts, grants, contributions, and						
L	membership fees received (Do not	2,239,804	2,378,281	2,584,901	4,484,380	3,509,953	15,197,319
	include any "unusual grant ")	2,233,004	2,570,201	2,504,501	4,404,500	3,303,333	13,137,313
2	Tax revenues levied for the						
	organization's benefit and either paid						
	to or expended on its behalf						
t	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
ļ	Total. Add lines 1 through 3	2,239,804	2,378,281	2,584,901	4,484,380	3,509,953	15,197,319
	The portion of total contributions by	=,===,===		_,	.,,	-,,	
•	each person (other than a						
	governmental unit or publicly						
	supported organization) included on						3,464,814
	line 1 that exceeds 2% of the						-, ,
	amount shown on line 11, column (f)						
	amount shown on the 11, column (1)						
5	Public support. Subtract line 5						700 505
	from line 4						11,732,505
S	ection B. Total Support	•	-	•		<u>.</u>	
	Calendar year	(a)2014	(b) 2015	(c)2016	(d)2017	(e)2018	(f)Total
	(or fiscal year beginning in) ▶	(a)2014	(D)2015	(C)2016	(d)2017	(e)2018	(I)Total
7	Amounts from line 4	2,239,804	2,378,281	2,584,901	4,484,380	3,509,953	15,197,319
8	Gross income from interest,						
_	dividends, payments received on	766	550	4 006	2 400	4.653	11.055
	securities loans, rents, royalties and	766	552	1,896	3,199	4,653	11,066
	income from similar sources						
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
LO	Other income Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI)						
.1	Total support. Add lines 7 through						15,208,385
	10						
.2	Gross receipts from related activities,	etc (see instruction	ns)			12	121,795
.3	First five years. If the Form 990 is fo	r the organization's	s first, second, thir	d, fourth, or fifth	tax year as a secti	on 501(c)(3) orgai	nızatıon,
	check this box and stop here					▶ □	
S	ection C. Computation of Public						_
	Public support percentage for 2018 (lir			lumn (f))		14	77 140 %
	Public support percentage for 2017 Sci					15	
				- l 12 l	14 27 4/20/		80 590 %
. 6 a	33 1/3% support test—2018. If the				14 15 33 1/3% OF	more, check this b	
	and stop here. The organization quali						▶ ☑
b	33 1/3% support test—2017. If th	e organızatıon dıd ı	not check a box on	line 13 or 16a, ai	nd line 15 is 33 1/3	3% or more, check	this
	box and stop here. The organization	qualifies as a nubl	icly supported orga	anization			ightharpoons
7-	10%-facts-and-circumstances test				13 16a or 16h	and line 14	- —
. / a	is 10% or more, and if the organization						
	in Part VI how the organization meets						

b 10%-facts-and-circumstances test—2017. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here.
Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly

Р	art IIII Support Schedule for	Organization	s Described in	Section 509(a	a)(2)		
	(Complete only if you c	hecked the box	on line 10 of Pa	art I or if the or	ganization failed		er Part II. If
	the organization fails to	qualify under	the tests listed b	pelow, please co	omplete Part II.))	
Se	ection A. Public Support		T	Г			1
	Calendar year (or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and						
-	membership fees received (Do not						
	include any "unusual grants ")						
2	Gross receipts from admissions,						
	merchandise sold or services performed, or facilities furnished in						
	any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are						
	not an unrelated trade or business						
4	under section 513 Tax revenues levied for the						
-	organization's benefit and either paid						
	to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
•	the organization without charge						
6 72	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and						
/ a	3 received from disqualified persons						
Ь	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)						
Se	ection B. Total Support						
	Calendar year	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
0	(or fiscal year beginning in) ► Amounts from line 6			. ,			
L0a	Gross income from interest,						
LUa	dividends, payments received on						
	securities loans, rents, royalties and						
	income from similar sources						
Ь	Unrelated business taxable income						
	(less section 511 taxes) from businesses acquired after June 30,						
	1975						
C	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b,						
	whether or not the business is regularly carried on						
12							
	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 is fo	r the organization	ı ı's fırst, second. th	urd, fourth, or fift	h tax vear as a se	ction 501(c)(3) o	rganization.
	check this box and stop here	.	,	,,,	,		▶ □
Se	ection C. Computation of Public	Support Perce	ntage				
15	Public support percentage for 2018 (lin	e 8, column (f) d	ıvıded by line 13,	column (f))		15	
16	Public support percentage from 2017 S	ichedule A, Part I	II, line 15			16	
Se	ection D. Computation of Investi	ment Income	Percentage				
17	Investment income percentage for 201			lıne 13, column (f))	17	
18	Investment income percentage from 2	017 Schedule A,	Part III, line 17			18	
	331/3% support tests—2018. If the		•	on line 14, and lir	ne 15 is more than		e 17 is not
	more than 33 1/3%, check this box and						▶□
	33 1/3% support tests—2017. If the						
J	not more than 33 1/3%, check this box	-			•		▶ □
20	Private foundation. If the organization	-	-				▶□

Part IV Supporting Organizations (Complete only if you checked a box on line 12 of Part I If you checked 12a of Part I, complete Sections A and B If you checked 12b of

Page 4

10a

10b

Schedule A (Form 990 or 990-EZ) 2018

Part I, complete Sections A and C If you checked 12c of Part I, complete Sections A, D, and E If you checked 12d of Part I, complete Sections A and D, and complete Part V)

answer line 10b below

the organization had excess business holdings)

Schedule A (Form 990 or 990-EZ) 2018

Section A. All Supporting Organizations Yes

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	1	
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) 2 Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below

2 За 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 3b

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 3с Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 12a or 12b in Part I, answer (b) and (c) below

4a 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 4b supervised by or in connection with its supported organizations 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 4c 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 5a amendment to the organizing document)

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? 5b

Substitutions only. Was the substitution the result of an event beyond the organization's control? 5c

Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other 6 than (1) its supported organizations. (11) individuals that are part of the charitable class benefited by one or more of its

supported organizations, or (III) 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. 6

7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a

substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ) 7

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 or 990-EZ)

8

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. 9a

Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting

organization had an interest? If "Yes," provide detail in Part VI. 9b

Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether

Did a disqualified person (as defined in line 9a) 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.

9с

Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding 10a certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes,"

Pa	rt IV Supporting Organizations (continued)				
	cupper unity or gamma units (community)		Yes	No	
11	Has the organization accepted a gift or contribution from any of the following persons?			<u> </u>	
	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the		\vdash		
u	governing body of a supported organization?	11a			
h	A family member of a person described in (a) above?	11b			
	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			
	ection B. Type I Supporting Organizations	110			
	ection b. Type I Supporting Organizations		Yes	No	
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint 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	\sqcup		
2					
	organization				
S	ection C. Type II Supporting Organizations				
			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			
_	,, , , , , , , , , , , , , , , , , , , ,			<u> </u>	
	ection 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, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	j			
		1	\vdash		
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			
S	ection E. Type III Functionally-Integrated Supporting Organizations				
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruct	ions)			
	The organization satisfied the Activities Test Complete line 2 below	-			
	b				
	c	ınstru	ctions)		
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.		\vdash		
	 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? Provide details in Part VI. 	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	26			

m\ a	
/I) See	
ıgh E	
(B) Current Year	
(optional)	

(B) Current Year

(optional)

Current Year

Schedule A (Form 990 or 990-F7) 2018

Page 6

	Check here if the organization satisfied the Integral Part Test as a qualifying trust on instructions. All other Type III non-functionally integrated supporting organizations in		
~		(A) Prior Year	

	instructions. All other Type III non-functionally integrated supporting organiza	tions i	must complete Sections A	through E
	Section A - Adjusted Net Income		(A) Prior Year	(B) C (o
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		

4 5

Add lines 1 through 3

Depreciation and depletion 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) Other expenses (see instructions)

1

5

7

Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)

Section B - Minimum Asset Amount

Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)

a Average monthly value of securities **b** Average monthly cash balances c Fair market value of other non-exempt-use assets d Total (add lines 1a, 1b, and 1c)

e Discount claimed for blockage or other factors (explain in detail in Part VI)

2 Acquisition indebtedness applicable to non-exempt use assets Subtract line 2 from line 1d

Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)

5 Net value of non-exempt-use assets (subtract line 4 from line 3) Multiply line 5 by 035 6

7 Recoveries of prior-year distributions Minimum Asset Amount (add line 7 to line 6)

Section C - Distributable Amount

8

Adjusted net income for prior year (from Section A, line 8, Column A) Enter 85% of line 1

2

4

Enter greater of line 2 or line 3

5 Income tax imposed in prior year

temporary reduction (see instructions)

instructions)

Minimum asset amount for prior year (from Section B, line 8, Column A)

Distributable Amount. Subtract line 5 from line 4, unless subject to emergency

5

Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see

2 3 4

6

7

8

1

1a

1b

1c 1d

2

3

4

5

6

7

8

1

6

(A) Prior Year

b Applied to 2018 distributable amount

c Remainder Subtract lines 4a and 4b from 4

5 Remaining underdistributions for years prior to 2018, if any Subtract lines 3g and 4a from line 2 If the amount is greater than zero, explain in Part VI See instructions 6 Remaining underdistributions for 2018 Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI See instructions

7 Excess distributions carryover to 2019. Add lines 31 and 4c 8 Breakdown of line 7

a Excess from 2014. **b** Excess from 2015. c Excess from 2016.

Schedule A (Form 990 or 990-EZ) (2018)

d Excess from 2017. e Excess from 2018.

Additional Data

instructions)

Software ID:

Software Version: **EIN:** 52-1557765

Name: Earthworks

Page 8

Schedule A (Form 990 or 990-EZ) 2018 Part VI Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, Part III, line 12, Part IV,

Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section B, lines 1 and 2, Part IV, Section C, line 1,

Part IV, Section D, lines 2 and 3, Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b, Part V, line 1, Part V, Section B, line 1e, Part V

Section D. lines 5, 6, and 8, and Part V. Section E. lines 2, 5, and 6. Also complete this part for any additional information. (See

Facts And Circumstances Test

Return Reference Explanation **SCHEDULE C**

Political Campaign and Lobbying Activities

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

DLN: 93493106008209

OMB No 1545-0047

Open to Public Inspection

▶Complete if the organization is described below. ▶Attach to Form 990 or Form 990-EZ. Department of the Treasury ▶Go to www.irs.gov/Form990 for instructions and the latest information. Internal Revenue Service

(Form 990 or 990-

EZ)

		n Form 990, Part IV, Line 3, or Form 9 nplete Parts I-A and B Do not complete		e 46 (Polit	ical Campaıg	n Activities), then
		01(c)(3)) organizations Complete Parts		Do not cor	mplete Part I-E	3
	Section 527 organizations Complet					
		n Form 990, Part IV, Line 4, or Form 9				
		t have filed Form 5768 (election under s t have NOT filed Form 5768 (election ur				
		r Form 990, Part IV, Line 5 (Proxy Tax				
	xy Tax) (see separate instruction: Section 501(c)(4), (5), or (6) organiz				·	
	ne of the organization hworks					entification number
					52-1557765	
Par	<u> </u>	nization is exempt under sectio				
1	Provide a description of the organ "political campaign activities")	ization's direct and indirect political can	npaign activities in	n Part IV (s	ee instructions	s for definition of
2	Political campaign activity expend	itures (see instructions)			>	\$
3	Volunteer hours for political camp	aign activities (see instructions)				
Par	t I-B Complete if the organ	nization is exempt under sectio	n 501(c)(3).			
1	Enter the amount of any excise ta	ax incurred by the organization under se	ection 4955		>	\$
2	Enter the amount of any excise ta	ix incurred by organization managers ui	nder section 4955		>	\$
3	•	tion 4955 tax, did it file Form 4720 for t				Yes No
4a	Was a correction made?					☐ Yes ☐ No
b	If "Yes," describe in Part IV					
Par	t I-C Complete if the organ	nization is exempt under sectio	n 501(c), exc	ept section	on 501(c)(3	3).
1	Enter the amount directly expend	ed by the filing organization for section	527 exempt function	tion activiti	es 🕨	\$
2	Enter the amount of the filing org function activities	anization's funds contributed to other o	rganizations for se	ection 527	exempt >	\$
3	Total exempt function expenditure	es Add lines 1 and 2 Enter here and or	n Form 1120-POL,	line 17b	•	\$
4	Did the filing organization file For	m 1120-POL for this year?				☐ Yes ☐ No
5	organization made payments For of political contributions received	employer identification number (EIN) of each organization listed, enter the amount that were promptly and directly deliver see (PAC) If additional space is needed,	ount paid from the ed to a separate p	filing orga political orga	inization's fund anization, such	ds Also enter the amount
	(a) Name	(b) Address	(c) EIN	filing o	ount paid from organization's 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						
For P	aperwork Reduction Act Notice, see t	the instructions for Form 990 or 990-EZ.	Cat	No 500845	Schedule (C (Form 990 or 990-EZ) 2018

	Not over \$500,000	20% of the amount on line 1e					
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000					
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000					
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000					
	Over \$17,000,000	\$1,000,000					
		•					
9	Grassroots nontaxable amount (enter 25% of line 19	7)		87,770			
า	Subtract line 1g from line 1a If zero or less, enter -	0-		0			
i	Subtract line 1f from line 1c If zero or less, enter -0)-		0			
j	If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting						

14,143

64,014

9,542

Total lobbying expenditures

Grassroots ceiling amount

Grassroots nontaxable amount

(150% of line 2d, column (e))

Grassroots lobbying expenditures

45,456

70,098

14,326

78,606

78,581

12,103

171,277

87,770

19,018

Schedule C (Form 990 or 990-EZ) 2018

309,482

300,463

450,695

54,989

Return Reference

activity

Volunteers?

1

(b)

Amount

(a)

No

Yes

Media advertisements? Mailings to members, legislators, or the public? Publications, or published or broadcast statements? Grants to other organizations for lobbying purposes? Direct contact with legislators, their staffs, government officials, or a legislative body? Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities? Total Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? If "Yes," enter the amount of any tax incurred under section 4912 If "Yes," enter the amount of any tax incurred by organization managers under section 4912 If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). Yes No Were substantially all (90% or more) dues received nondeductible by members? 1 1 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 2 Did the organization agree to carry over lobbying and political expenditures from the prior year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6)Part III-B and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes." Dues, assessments and similar amounts from members 1 1 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). 2a Current year 2b Carryover from last year С Total 2c 3 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 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) 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

Explanation

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying

Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?

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

efile GRAPHIC print - DO NOT PROCESS As Filed Data -SCHEDULE D

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

Supplemental Financial Statements

► Complete if the organization answered "Yes," on Form 990, ▶ Attach to Form 990.

Open to Public

DLN: 93493106008209 OMB No 1545-0047

Inspection

Department of the Treasury Internal Revenue Service

(Form 990)

2

5

Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ▶ Go to www.irs.gov/Form990 for the latest information.

Name of the organization **Employer identification number** 52-1557765 Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 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 are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? 🗌 Yes 🗌 No Part II Conservation Easements. Complete if the organization answered "Yes" on 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 an 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 Year Total number of conservation easements Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 7/25/06, 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 year 🕨 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, and enforcement of the conservation easements it holds? ☐ Yes Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, 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) 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 Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 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 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 on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 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 Revenue included on Form 990, Part VIII, line 1 Assets included in Form 990, Part X

Cat No 52283D

Schedule D (Form 990) 2018

Par	t III	Organizations Mainta	ining Col	lections of Art	, Histor	ical T	reası	ures, or Othe	r Similar As	sets (continued)	
3		the organization's acquisition (check all that apply)	n, accessior	n, and other recor	ds, check	any of	the fo	ollowing that are	a significant i	ise of it	s collection	
а		Public exhibition			d		Loan	or exchange pro	grams			
b		Scholarly research			е		Othe	er				
С		Preservation for future gene	rations									
4		de a description of the organi		lections and expla	ın how th	ey furtl	ner th	e organization's	exempt purpo	se in		
5	Part >	(III) q the year, did the organizati	on solicit o	r receive donation	s of art. h	ustorica	al trea	sures or other su	mılar			
_		s to be sold to raise funds rat	her than to	be maintained as					····· -	□ Ye	es 🗆 No	.
Pa	rt IV	Escrow and Custodial Complete if the organiza X, line 21.			orm 990), Part	IV, I	ine 9, or report	ted an amou	ınt on I	Form 990,	Part
1a		e organization an agent, trust ded on Form 990, Part X?	ee, custodi	an or other interm	ediary foi	r contri	bution	ns or other assets	s not	☐ Y	es 🗆 No	.
b	If "Y∈	es," explain the arrangement	ın Part XIII	and complete the	following	table			A	mount		_
С	Begin	ning balance						1c				_
d	Addıt	ions during the year						1d				_
е	Dıstrı	butions during the year						1e				_
f	Endın	g balance						1f				_
2a	Did th	ne organization include an am	nount on Fo	rm 990, Part X, lıı	ne 21, for	escrov	or cu	ustodial account l	ıabılıty?	□ Ye	es 🗆 No)
b	If "Ye	s," explain the arrangement	ın Part XIII	Check here if the	e explanat	ion has	been	provided in Part	XIII			
Pa	art V	Endowment Funds. Co	omplete ıf	the organizatio	n answe	red "Y	es" o	n Form 990, Pa	art IV, line 1	0.		
	_			(a)Current year	(b)F	Prior yea	r	(c)Two years back	(d)Three yea	rs back	(e)Four year	s back_
	-	ing of year balance					_					
		outions										
		estment earnings, gains, and	liosses				-					
		or scholarships			+		-					
е		expenditures for facilities ograms										
f	Admını	strative expenses										
g	End of	year balance										
2 a		de the estimated percentage I designated or quasi-endowr		ent year end balan	ice (line 1	g, colu	mn (a)) held as				
b		anent endowment >										
c	Temp	orarily restricted endowment	•									
·		ercentages on lines 2a, 2b, a		ld equal 100%								
3а		nere endowment funds not in	the posses	sion of the organi	zation tha	it are h	eld ar	nd administered f	or the		Yes	No
	(i) ur	nrelated organizations								3	a(i)	
	(ii) r	elated organizations								3	a(ii)	
b		s" on 3a(II), are the related o	-	•			? .			L	3b	
4		ibe in Part XIII the intended			dowment	funds						
Pa	rt VI	Land, Buildings, and I Complete if the organiza			- -orm 990) Part	TV I	ine 11a. See Fr	orm 990 Pa	rt X Iu	ne 10	
	Descri		(investme	ner basis (b) C	ost or other	•					(d) Book value	!
1a	Land											
b	Buildin	gs										
c	Leaseh	old improvements					3,723		1,634			2,089
d	Equipn	nent				42	29,354		139,391			289,963
e	Other						31,368		7,842	-		23,526
Tota	al. Add	lines 1a through 1e (Column	(d) must e	qual Form 990, Pa	rt X, colu	mn (B)	, line	10(c))	>			315,578

Part VII	Investments—Other Securities. Complete if the org	anızat	tion ansv	vered "Yes" or	Form 990, Pa	rt IV, line 11b.
	See Form 990, Part X, line 12. (a) Description of security or category (including name of security)		(b) Book value	Cos	(c) Method of votors or end-of-year	
(1) Financia (2) Closely- (3)Other	held equity interests	:				
(A)						
(B)						
(C)						
(D)						
(E)						
(F)						
(G)						
(H)						
Total. (Colum	n (b) must equal Form 990, Part X, col (B) line 12)	•				
Part VIII	Investments—Program Related. Complete if the organization answered 'Yes' on Form 9	90. P	art IV. lı	ne 11c. See Fo	orm 990. Part :	K. line 13.
			ook value		(c) Method of v	aluation
(1)				Cos	t or end-of-year	market value
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
Total. (Colum	n (b) must equal Form 990, Part X, col (B) line 13)					
Part IX	Other Assets. Complete if the organization answered 'Yes' (a) Description	on For	m 990, Pa	rt IV, line 11d	See Form 990, Pa	art X, line 15 (b) Book value
(1)						
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
	mn (b) must equal Form 990, Part X, col (B) line 15)			000 P- 1	T) / 1 == 44 = =	115
Part X	Other Liabilities. Complete if the organization answer See Form 990, Part X, line 25.	ea Y		·	IV, line IIe or	11f.
(1) Federal :	(a) Description of liability		(в) в	ook value		
(2)						
(3)						
(4)						
(5)						
(6)						
(7)		\dashv				
(8)						
(9)						
	n (b) must equal Form 990, Part X, col (B) line 25)	<u> </u>				
2. Liability fo	or uncertain tax positions In Part XIII, provide the text of the fo	otnote				_
organization	's liability for uncertain tax positions under FIN 48 (ASC 740) C	neck h	ere if the	text of the foot	note has been pr	ovided in Part XIII

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

2b b 2c c

2a

2a 2b

2c

2d

4a

4b

Explanation

-39

3,269

2e

3

4c

5

Page 4

3,597,258

-39

3,597,297

-3,269

3,594,028

4,036,349

3,269

4,033,080

4.033.080

Schedule D (Form 990) 2018

d 2d 2e e 3

3 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1

Investment expenses not included on Form 990, Part VIII, line 7b . 4a

4b -3,269 b

Add lines **4a** and **4b** 4c

c

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)

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

Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)

Part XII

Amounts included on line 1 but not on Form 990, Part IX, line 25

Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b . .

Donated services and use of facilities . . .

Other (Describe in Part XIII)

Add lines 2a through 2d

Supplemental Information

5

Net unrealized gains (losses) on investments

Schedule D (Form 990) 2018

Part XI

а

1

2

b

c

d

3 4

b

5

Part XIII

See Additional Data Table

Return Reference

Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Schedule D (Form 990) 2018	Page 5
Part XIII Supplemental Info	mation (continued)
Return Reference	Explanation

Schedule D (Form 990) 2018

Additional Data

Software ID:

Software Version: EIN: 52-1557765

Name: Earthworks

Supplemental Information

Return Reference	Explanation
•	Management has evaluated Earthworks' tax positions and has concluded that Earthworks has t aken no uncertain tax positions that qualify for either recognition or disclosure in the a ccompanying financial statements

Supplemental Information						
Return Reference	Explanation					
Part XI, Line 4b - Other Adjustments	Loss on disposal of fixed assets -3,269					

Ē

Supplemental Information						
Return Reference	Explanation					
Part XII, Line 2d - Other Adjustments	Loss on disposal of fixed assets 3,269					

efile GRAPHIC	rint - DO NOT I	PROCESS	As Filed Data	-	DLN	: 93493106008209	
SCHEDULE F (Form 990)		ement of	Activities (Outside the Uni	OMB No 1545-0047		
(► Comp	lete if the organi	ıne 14b, 15, or 16.	2018			
		- Go to www irs		o Form 990. nstructions and the latest ii	oformation	Open to Public	
Department of the Treasur Internal Revenue Service			901,101,111,100 101 1	indications and the facest in	normation.	Inspection	
Name of the organiza	ation				Employer ide	ntification number	
Earthworks					52-1557765		
	ral Information 990, Part IV, line		Outside the U	Jnited States. Comple	te if the organization	answered "Yes" to	
other assistar to award the	nce, the grantees' grants or assistan i kers. Describe in	eligibility for th	ne grants or assis	substantiate the amount stance, and the selection dures for monitoring the	criteria used	✓ Yes □ No ther assistance	
3 Activites per R	egion (The followir	ng Part I, line 3	table can be dupli	cated if additional space is	needed)		
(a) Re	gion	(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 program service, describe specific type of service(s) in region	a (f) Total expenditures for and investments in region	
(1) See Add'l Data							
(2)							
(3)							
(4)							
(5)							
3a Sub-total b Total from cont	inuation sheets to		0 3			44,733 20,628	
c Totals (add lin			0 3		No 50082W Schedu	65,361 ule F (Form 990) 2018	

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

Schedule F (Form 990) 2018

(2) (3) (4)

(5) (6) (7)

(8) (9) (10) (11) (12)

(13) (14)

(15) (16) (17) (18) Page 3

Schedule F (Form 990) 2018

Part III can be duplicated if additional space is needed. (a) Type of grant or assistance (c) Number of (b) Region (d) Amount of (e) Manner of cash (f) Amount of (g) Description (h) Method of recipients cash grant disbursement non-cash of non-cash valuation (book, FMV, assistance assistance appraisal, other)

(1)

Sche	dule F (Form 990) 2018		Page 4
Par	t IV Foreign Forms		
1	Was the organization a U S transferor of property to a foreign corporation during the tax year? If "Yes,"the organization may be required to file Form 926, Return by a U S Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes	☑ No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U S Owner (see Instructions for Forms 3520 and 3520-A, don't file with Form 990)		
		☐ Yes	✓ No
	I the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the panization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign reporations (see Instructions for Form 5471)		
	Corporations (see Instructions for Form 5471)	☐ Yes	✓ No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	☐Yes	✓ No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865)		
	(see Instructions for Form 6005)	☐ Yes	✓ No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form		
	5713, don't file with Form 990)	☐ Yes	✓ No

Schedule F (Fo	rm 990) 2018 Page 5
P a n	Supplemental Information rovide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; mounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting nethod); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide ny additional information (see instructions).
990 Schedu	le F, Supplemental Information
Return Reference	Explanation
Part Lline 2	The organization maintain records to substantiate the amount of the grants, the grantees' eligibility for the grants or assistance

The organization maintain records to substantiate the amount of the grants, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance. Earthworks Partnership Programs grants are passed through as requested and the organization then becomes responsible party for any monitoring of the use of grant funds

990 Schedule F, Supplemental Information

Return Reference	Explanation
Part Lline 3	Foreign expenses are directly tracked and accounted for on the accrual method of accounting used for books

Additional Data

North America - Canada and

Mexico, but not the United

States

Software ID: Software Version:

EIN: 52-1557765

Translation services

1,782

Name: Earthworks

_					
Form 9	90 Sched	lule F Part I	: - Activities	Outside The	United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
Europe (Including Iceland & Greenland)	0	1		Research contract- "Making Clean Energy	24,000

1 Program Services

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i e , is a program service, for region fundraising, program describe specific type of agents in region service(s) in region services, grants to region recipients located in the region) North America 1 Program Services Consulting- Review of WTP 1,000 and report preparation North America Travel expenses for 0 Program Services 1.131 Iconference

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region agents in fundraising, program describe specific type of region service(s) in region services, grants to region recipients located in the region) Europe (Including Iceland & 1.968 0 Program Services Travel expenses for Greenland) conference meetings in London North America - Canada and 0 Program Services Travel expenses for mining 1,775 Mexico, but not the United lmeetinas in BC States

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region agents in fundraising, program describe specific type of region service(s) in region services, grants to region recipients located in the region) 0 Administrative Reimbursement for board 822 North America ltravel South America 0 Program Services Filming Footage- travel 12,255 expenses to take FLIR to Argentina and work with llocal communities

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of agents in region service(s) in region services, grants to region recipients located in the region) 1.355 North America 0 Program Services Travel expenses for sponsored trip to British Columbia North America 0 Program Services Travel expenses for mining 3,347 conference in British lColumbia.

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i e , is a program service, for region fundraising, program describe specific type of agents in region service(s) in region services, grants to region recipients located in the region) Europe (Including Iceland & 0 |Program Services Travel expenses for 1.374 Greenland) conference in Italy Europe (Including Iceland & Travel expenses for 372 0 Program Services Greenland) conference in Oslo

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region agents in fundraising, program describe specific type of region service(s) in region services, grants to region recipients located in the region) Europe (Including Iceland & 0 |Grant to recipient located Sub grant for Narrative 5.000 Greenland) In the region Development South America To improve the community 5.000 0 Grant to recipient located in the region land education center of Ithe Mapuche community of Neuauen

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (e) If activity listed in (d) (d) Activities conducted (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of agents in reaion service(s) in region services, grants to region recipients located in the region) South America 0 |Grant to recipient located Support Maxima Acuna 4.180 in the region Chaupe in her legal defense against Newmont land their ongoing harassment against her as she continues to protect lher land

DLN: 93493106008209 Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing. OMB No 1545-0047 Schedule I **Grants and Other Assistance to Organizations**, (Form 990) Governments and Individuals in the United States Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22. Open to Public ▶ Attach to Form 990. Department of the Inspection ▶ Go to www.irs.gov/Form990 for the latest information. Treasurv Internal Revenue Service Name of the organization Employer identification number Earthworks 52-1557765 Part I **General Information on Grants and Assistance** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and 1 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on 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 (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant (if applicable) organization cash (book, FMV, appraisal, noncash assistance or assistance grant or government assistance other) (1) See Additional Data (2) (4)(5)(6)(7)(8)(9)(10)(11)(12)Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 2 For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 50055P Schedule I (Form 990) 2018

The organization maintain records to substantiate the amount of the grants, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance. Earthworks Partnership Programs grants are passed through as requested and the organization then becomes responsible party for any

Schedule I (Form 990) 2018

Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

Part IV

Part I, Line 2

Explanation

monitoring of the use of grant funds

Additional Data

Indigenous Environmental

Network PO Box 485 Bemidji, MN 56619 Software ID:
Software Version:
EIN: 52-1557765
Name: Earthworks

501(c)(3)

38-3653476

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(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
Oil Change International 714 G Street SE Suite 202 Washington, DC 20003	20-3272355	501(c)(3)	70,000	0	N/A	N/A	Partnership for grant deliverable

20,000

N/A

Partnership for grant deliverable

0 N/A

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

MN 350 2104 Stevens Ave Minneapolis, MN 55404	45-2754381	501(c)(3)	10,000	0	N/A	N/A	Partnership for grant deliverable
EWAF	82-3658089	501(c)(4)	83,000	0	N/A	N/A	Energy Program grant

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

1612 K Street NW Suite 904 Washington, DC 20006

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance Liveable Arlington 82-1161342 N/A 12,600 O N/A IN/A Program grant 9032 Loch Lomond Drive Arlınaton, TX 76012

O N/A

N/A

Program grant

17,000

Ethical Metalsmiths

College Corner, OH 45003

PO Box 156

81-1452882

501(c)(3)

efile GRAPHI	DLN:	93493106008209			
SCHEDULI (Form 990 or EZ) Department of the Tr	Complete to provide informat Form 990 or 990-EZ or to Attach t	nation to Form 990 or 9 ion for responses to specific questi p provide any additional informatio p Form 990 or 990-EZ. Form 990 for the latest information.	ions on on.	OMB No 1545-0047 2018 Open to Public Inspection	
Name l BE the ofge Earthworks	#ization		Employer identi 52-1557765	fication number	
Return Reference	O, Supplemental Information	Explanation			
Form 990, Part I, Line 1, Brief Summary of Organization Mission	Earthworks is a nonprofit organization dedicated to protecting communities and the environment from the adverse impact mineral and energy development while promoting sustainable solutions from the adverse impact mineral and energy development while promoting sustainable solutions from the adverse impact mineral and energy development while promoting sustainable solutions from the adverse impact mineral and energy development while promoting sustainable solutions from the adverse impact mineral and energy development while promoting sustainable solutions from the adverse impact mineral and energy development while promoting sustainable solutions from the adverse impact mineral and energy development while promoting sustainable solutions from the adverse impact mineral and energy development while promoting sustainable solutions from the adverse impact mineral and energy development while promoting sustainable solutions from the adverse impact mineral and energy development while promoting sustainable solutions from the adverse impact mineral and energy development while promoting sustainable solutions from the adverse impact mineral and energy development while promoting sustainable solutions from the adverse impact mineral and energy development while promoting sustainable solutions from the adverse impact mineral and energy development while promoting sustainable solutions from the adverse impact mineral and energy development while promoting sustainable solutions from the adverse impact mineral and energy development while promoting sustainable solutions from the adverse impact mineral and energy development while promoting sustainable solutions from the adverse impact mineral and energy development while promoting sustainable solutions from the adverse impact mineral and energy development while promoting sustainable solutions from the adverse impact mineral and energy development while promoting sustainable solutions from the adverse impact mineral and energy development while promoting sustainable solution				

Return Reference	Explanation
Form 990, Part III, Line 1, Description of Organization Mission	Earthworks stands for clean water, healthy communities and corporate accountability. We're working for solutions that protect both the Earth's resources as well as our communities. We fulfill our mission by working with communities and grassroots groups to reform government policies, improve corporate practices, influence investment decisions and encourage responsible materials sourcing and consumption. We expose the health, environmental, economic, social and cultural impacts of mining and energy extraction through work informed by sound science.

990 Schedule O, Supplemental Information

Return Reference	Explanation						
Form 990, Part III, Line 4d, Other Program Services	Earthworks Partnership Programs Earthworks provides back-office services (including payro II, accounting, and administration), a legal framework, and capacity building support to a variety of small programs (single staff, or volunteer only organizations) that share our mission of protecting communities and the environment from the negative impacts of mineral development. This year Earthworks served as the fiscal sponsor of the following projects. Ethical Metalsmiths. This project seeks to stimulate demand and supply for responsibly-so urced materials for metalsmiths and jewelers. Common Ground United. This project provides a platform allowing diverse organizations, from local to national, to express a united voi ce concerning the projection of our water, cultural, ecological, and economic resources and the health and safety of our citizens from the adverse impacts of all extractive resource edvelopments. Alaskans for Responsible Mining. A voluntary association of nongovernmental organizations working together to raise public awareness of the impacts of the extractive industry to Alaska's watersheds, wildlife, fisheries, communities and public health, and to reform Alaska's inadequate mining laws. Arizona Mining Reform Coalition. This project seeks to raise public awareness and protect indigenous sacred sites and recreational areas in the state of Arizona from irresponsible mineral development. ARO Working Group. The AR O Working Group's mission is to activate an international network of experts and change-ma kers who are operating in various capacities on the issue of environmental liabilities. Our strategy is to reveal and leverage real-time insolvency in the oil and gas industry due to severely undervalued environmental liabilities and asset retirement obligations to force. E&P companies to stop drilling new wells and building new infrastructure. Shale Test. To collect environmental data around natural gas facilities, including natural gas drilling operations, to establish baseline air and water testing, to p						

Return

Reference

Reference	
Form 990, Part III, Line 4d, Other Program Services	hold power, we are helping to grow a grassroots movement for healthy people and ecosystems, a sustainable economy, and empowerment for Shalefield communities. Beyond Extreme Energy. People taking action to retire fossil fuels. Beyond Extreme Energy's immediate demand is for no new permits by the Federal Energy Regulatory Commission for fossil fuel infrastruc ture. Beyond Extreme Energy's vision is a world powered by consumer-controlled renewable energy. Campaign to End Sacrifice. Zones. Diverse coalition of individuals, organizations, and businesses formed 1) to hear, connect, and amplify stories from New Mexico's Sacrifice Zones, 2) to grow the climate movement by inspiring imagination, possibility, & self-aware ness toward the rapid transition to a healthy, clean, and renewably- powered state. Coalli ion for Oklahoma Renewable Energy. Our mission is to facilitate a just transition within the state of Oklahoma from fossil fuels to 100% renewable energy by 2050. Resilient Communities Network. Our is helping communities stop fracking, and accelerate the necessary shift away from fossil fuels to renewable energy while building resilient and sustainable systems to rely on during the transition. Stop the Frack Attack. Our goals are to be a movement hub that acts as a centralized place to coordinate with other groups working on oil and g as drilling using the fracking process and to ensure impacted community members are given a voice in the national debate about fracking

Explanation

Return Explanation

line 11b

Form 990,
Part VI,
Section B.

A copy of the 990 is reviewed by the Audit Committee and then by the full Board prior to filing

990 Schedule O, Supplemental Information

Return

Reference Form 990, Part VI. Part VI.

Explanation

Part VI,
Section B,
line 12c
and, in the absence of resolution, refer the matter to the Board or committee action. The policy is addressed at each board meeting, and as necessary throughout the year.

Return Explanation Reference

Form 990. The process for determining compensation of officers and key employees of the organization includes a review process and Part VI. approval by the Board of Directors

Section B.

990 Schedule O, Supplemental Information

line 15

Return Explanation
Reference

line 19

Form 990,
Part VI,
Section C,
The governing documents, policies and financial statements are made available to interested parties upon request

Return Explanation
Reference

Form 990,
Part IX, line
and general expenses 10,338 Fundraising expenses 0 Total expenses 428,956

990 Schedule O, Supplemental Information

Return Explanation

Reference		
Form 990,	Earthwork's Audit Committee is responsible for oversight of the audit and selection of the independent accountant. The process is	1
Part XII, Line	consistent with previous years	ı
۱ ۵ -		