Form 330
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## **Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public.

Department of the Treasury Internal Revenue Service Do not enter social security numbers on this form as it may be made public Information about Form 990 and its instructions is at *www.irs.gov/form900* 



inter	nai rev	P information about Form 990 and its instructions		nonniggo.	Inspection			
Α	For t	he 2016 calendar year, or tax year beginning 10/01, 2016,	and ending		09/30, <b>20</b> 17			
P		C Name of organization		D Employer ident	ification number			
D	Check if a	applicable: ENVIRONMENTAL DEFENSE ACTION FUND		90-0080500				
	Addr chan							
	Nam	e change Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone num	ber			
	Initia	al return 257 PARK AVENUE SOUTH		(212) 505	-2100			
		I return/ City or town, state or province, country, and ZIP or foreign postal code						
	Ame	nded NEW YORK, NY 10010		G Gross receipts	13,059,676.			
		ication F Name and address of principal officer: ELTZABETH B THOMPSON	N	H(a) Is this a group	return for Yes X No			
		257 PARK AVENUE SOUTH, NEW YORK, NY 10010		subordinates? H(b) Are all subordina	ates included? Yes No			
I	Tax-ex	xempt status: 501(c)(3) X 501(c) (4) ◄ (insert no.) 4947(a)(1) o	or 527	If "No," attach	a list. (see instructions)			
J	Webs	ite: 🕨 WWW.EDFACTION.ORG		H(c) Group exempti	on number 🕨			
κ	Form	of organization: X Corporation Trust Association Other	L Year of form	ation: 2002 M S	tate of legal domicile: DE			
Ρ	art I	Summary						
	1	Briefly describe the organization's mission or most significant activities: TO EDU	CATE THE P	UBLIC REGAR	DING			
e		ENVIRONMENTAL & CONSERVATION ISSUES AS WELL AS AD						
Jan		POLICIES THAT PROTECT THE ENVIRONMENTAL RIGHTS OF	ALL PEOPL	Ε.				
Activities & Governance	2	Check this box 🕨 🔄 if the organization discontinued its operations or disposed	d of more than 25	% of its net assets.				
Ô	3	Number of voting members of the governing body (Part VI, line 1a)			<b>3</b> 19.			
් ර	4	Number of independent voting members of the governing body (Part VI, line 1b)			4 19.			
itie	5	Total number of individuals employed in calendar year 2016 (Part V, line 2a)			5 0.			
itivi	6	Total number of volunteers (estimate if necessary)			<b>6</b> 20.			
ĕ	7a	Total unrelated business revenue from Part VIII, column (C), line 12			' <b>a</b> 0.			
		Net unrelated business taxable income from Form 990-T, line 34			<b>b</b> 0.			
				Prior Year	Current Year			
Ð	8	Contributions and grants (Part VIII, line 1h).		11,927,929	. 13,056,202.			
Revenue	9	Program service revenue (Part VIII, line 2g)		0	. 0.			
Seve	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		486	. 3,325.			
œ		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0	. 0.			
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) .		11,928,415	. 13,059,527.			
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		1,798,900	. 1,595,987.			
	14	Benefits paid to or for members (Part IX, column (A), line 4)	. 0.					
S	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		1,517,282	. 1,682,995.			
Expenses	16 a	Professional fundraising fees (Part IX, column (A), line 11e)		0	. 0.			
xpe	b	Total fundraising expenses (Part IX, column (D), line 25) > 144, 209.						
ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		6,015,562	. 10,879,143.			
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		9,331,744				
	19	Revenue less expenses. Subtract line 18 from line 12		2,596,671				
s or			Begi	inning of Current Yea				
Net Assets or Fund Balances		Total assets (Part X, line 16)		9,786,260	. 7,660,715.			
d B		Total liabilities (Part X, line 26)		1,909,999				
	STREET, STREET	Net assets or fund balances. Subtract line 21 from line 20.		7,876,261	. 6,777,663.			
	rt II	Signature Block						
Unc	ler per	nalties of perjury, I declare that I have examined this return, including accompanying schedule act, and complete. Declaration of preparer (other than officer) is based on all information of whic	es and statements, h preparer has any	and to the best of m	y knowledge and belief, it is			
				e e	1.10			
Sig	n	Signature of officer		J	11412018			
Hei				Date				
	Ŭ	Robert Young Interim CF	. 0					
		Type or print name and title	Data					
Paid		Print/Type preparer's name Preparer's signature	Date 5/14/18	Check if	PTIN			
Prep			5/14/18	self-employed	P01384178			
	Only	Firm's name BDO USA, LLP		Firm's EIN 13				
	41	Firm's address >100 PARK AVENUE NEW YORK, NY 10017-5001		Phone no. 21:	2-885-8000			
		RS discuss this return with the preparer shown above? (see instructions)			. X Yes No			
For	Paper	work Reduction Act Notice, see the separate instructions.			Form <b>990</b> (2016)			

	ENVIRONMENTAL DEFENSE ACTION	FUND	90-0080500	_
-	m 990 (2016) art III Statement of Program Service Accomplishments		Page	_
	Check if Schedule O contains a response or note to any line in this	Part III		X
1	Briefly describe the organization's mission: TO EDUCATE THE PUBLIC REGARDING ENVIRONMENTAL AND		C	
	AS WELL AS ADVOCATE LEGISLATION AND POLICIES THAT		۵	
	ENVIRONMENTAL RIGHTS OF ALL PEOPLE.			
2	Did the organization undertake any significant program services during t			
	prior Form 990 or 990-EZ?		Yes X N	ю
2	If "Yes," describe these new services on Schedule O. Did the organization cease conducting, or make significant changes	in how it conducts a	av program	
3	services?			lo
4	Describe the organization's program service accomplishments for each	n of its three largest pro	gram services, as measured	by
	expenses. Section $501(c)(3)$ and $501(c)(4)$ organizations are required t the total expenses, and revenue, if any, for each program service reported.		rants and allocations to othe	rs,
4a	(Code:) (Expenses \$		•\$)	
	FUND (EDF ACTION) IN LEGISLATIVE CHANGE COMPLEMENT			
	SISTER ORGANIZATION, ENVIRONMENTAL DEFENSE FUND (E			—
	ORGANIZATIONS TAKE ON DIFFERENT ROLES IN ACHIEVING			
	OBJECTIVES. EDF ACTION WAS INVOLVED IN LOBBYING AN			—
	WORK WHILE EDF SUPPORTED RESEARCH, SCIENTIFIC ANAL			
	POSITIONING. EDF ACTION IS ALSO ACTIVE AT THE STAT			
	ACTION HAS WON IMPORTANT VICTORIES. IN A DRAMATIC	SENATE VOTE IN		_
	MAY 2017, WE PRESERVED NATIONAL LIMITS ON METHANE	LEAKS FROM OIL		
	AND GAS OPERATIONS ON PUBLIC LANDS, PROTECTING THE	CLIMATE FROM		
	THIS POWERFUL GREENHOUSE GAS.			
4b	(Code:) (Expenses \$ including grants of \$	) (Revenue	\$)	
				—
				—
4c	(Code: ) (Expenses \$ including grants of \$	) (Revenue	)	
				—
4d	Other program services (Describe in Schedule O.)			

4e Total program service expenses	
JSA 6E1020 1.000	
0921LR 702V	

(Expenses \$

) (Revenue \$

including grants of \$

13,857,032.

)

ENVIRONMENTAL DEFENSE ACTION FUND

	90 (2016) When the state of Dermined Schedules		P	age 3
Part	V 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.		162	x
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	1 2	Х	
2 3	Did the organization required to complete <i>Schedule B</i> , <i>Schedule of Contributors</i> (see instructions)? candidates for public office? If "Yes," complete Schedule C, Part I	2	x	
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II.	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i> .	5	x	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If</i> "Yes," <i>complete Schedule D, Part I</i> .	6		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	8		x
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			
10	debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i> Did the organization, directly or through a related organization, hold assets in temporarily restricted	9		X
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V.	10		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, 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		X
b	Did the organization report an amount for investments-other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If</i> "Yes," <i>complete Schedule D, Part VII</i>	11b		Х
с	Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more			
d	of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i> . Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets	11c		<u>X</u>
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
	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	x	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
b	Schedule D, Parts XI and XII. Was the organization included in consolidated, independent audited financial statements for the tax year? If	12a		<u>X</u>
	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E.	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
16	for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other	15		X
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i> (see instructions).	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>	19		Х

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Part	V Checklist of Required Schedules (continued)			
			Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H.	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III.	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J.	23	Х	
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		Х
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		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any			
	current or former officers, directors, trustees, key employees, highest compensated employees, or			
	disqualified persons? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		X
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? If "Yes," complete Schedule L, Part IV.	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M.	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			37
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,	~ ~		v
	Part I.	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"	2.0		х
	complete Schedule N, Part II	32		
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	22		х
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV and Part V line 1	34	х	
25 0	or IV, and Part V, line 1	34 35a		x
35a ⊾		35a		
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	555		
36	related organization? If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	50		
51	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and	<u>.</u>		
	19? <b>Note.</b> All Form 990 filers are required to complete Schedule O.	38	х	

Form **990** (2016)

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Check if Schedule O contains a response or note to any line in this Part V.       Image: Check if Schedule O contains a response or note to any line in this Part V.       Image: Check if Schedule O contains a response or note to applicable.       Image: Check if Schedule O contains a response or note to applicable.       Image: Check if Schedule O contains a response or note to applicable.       Image: Check if Schedule O contains a response or note to applicable.       Image: Check if Schedule O contains a response or note to applicable.       Image: Check if Schedule O contains a response or note to applicable.       Image: Check if Schedule O contains a response or note to applicable.       Image: Check if Schedule O contains a response or note to applicable.       Image: Check if Schedule O contains a response or note to applicable.       Image: Check if Schedule O contains a response or note to applicable.       Image: Check if Schedule O contains a response or note to applicable.       Image: Check if Schedule O contains a response or note to applicable.       Image: Check if Schedule O contains a response or note to applicable.       Image: Check if Schedule O contains a response or note to applicable.       Image: Check if Schedule O contains a response or note to applicable.       Image: Check if Schedule O contains a response or note to applicable.       Image: Check if Schedule O contains a response or note to applicable.       Image: Check if Schedule O contains a response or note to applicable.       Image: Check if Schedule O contains a response or note to applicable.       Image: Check if Schedule O contains a response or note to applicable.       Image: Check if Schedule O contains a response or note response or note response response or note response response response r	Par									
1a       1a       55         b       Enser the number of ports W-2G included in line 1a. Enser-0- if not applicable.       1b       0.         2b       Enser the number of ports W-2G included in line 1a. Enser-0- if not applicable.       1c       X         2b       Enser the number of ports W-2G included in line 1a. Enser-0- if not applicable.       1c       X         2b       Enser the number of ports W-2G included in line 1a. Enser-0- if not applicable.       0.         2b       Enser the number of ports W-2G included in line 1a. Enservice 1deeral employment tax returns?       0.         3b       If at least a form 900-T for this year? If 'No' to line 3b, provide an explanation in Ne and 2b is greater than 250, you may be required to e-file (see instructions).       3a         3b       At any time during the calendary year, dift the organization have an interest in no a signature or other authority over, a financial account in a foreign country p.       3a       X         3c       Yes' here the name of the foreign country p.       5a       X       Sb       Sa       X         3c       Yes' ho ine 5a or 5b, dift the organization have annual gress receipts that are normally greater than \$100.000, and did the organization have annual gress receipts that are normally greater than \$100.000, and did the organization have annual gress receipts that are normally greater than \$100.000, and did the organization have annual gress receipts that are normally greater than sub or the year?       5a       X <th></th> <th>Check if Schedule O contains a response or note to any line in this Part V</th> <th></th> <th></th> <th></th>		Check if Schedule O contains a response or note to any line in this Part V								
In the function reported in Use of the start of an applicable	4.5	Enter the number reported in Day 2 of Form 1000. Enter 0 if not emplicable		res	NO					
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (ambing) winnings to prize winners?       1c       X         2a Enter the number of employees reported on Form W-3, Transmital of Wage and Tax.       2a       0.         b If at least on is reported on line 2a, did the organization file all required fedral employment tax returns?       2b       3a         X testments, filed for the calendary year ending with or within the year covered by this return.       2a       3a         X to the one is reported on line 2a, did the organization have universe to thirs attractions?       3b       3a         X at a time during the calendary year, did the organization have universe to the activation?       3b       3a         X at a time during the calendary year, did the organization have an interest in or a signature or other authority over, a financial account in a foreign country p.       3a       X         See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).       5a       X         5a       X       bd was the organization have annual gross that were not tax deductible as charitable contributions?       5a       X         5a       X       bd was the organization nearby were solicitation and partly for goods and sentise provided to the approx.       5a       X         5a       X       bd was the organization nearby were solicitation and partly for goods and sentises transaction? <td></td> <td></td> <td></td> <td></td> <td></td>										
reportable gaming (gambling) winnings to prize winners?       1c       x         28 Enter the number of employees reported on Form W43, Transmital of Wage and Tax       0.       0.         b If at least one is reported on line 2a, did the organization file all required to effie (see instructions).       0.       3a         30 Dd the organization have unrelated business gross income of \$1.000 or more during the year?       3a       3a       x         31 Dd the organization have unrelated business gross income of \$1.000 or more during the year?       3a       x       3b         42 At any time during the calendar year, did the organization have an interest in, or a signature or other stubnity over, a financial account in a foreign country: b       See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bark and Financial Accounts (FBAR).       Se instructions for filing requirements for FinCEN Form 114, Report of Foreign Bark and Financial Accounts (FBAR).       Se in the comparization have annual gross receipts that are normally greater than \$100,000, and did the organization includo with every solicitation an express statement that such contributions or glifts were not tax deductible?       Se in the organization contributions that were not tax deductible as charitable contributions or glifts were not tax deductible?       Se in the organization needwork application necksos of \$75 made parity as contributions and parity for goods and services provided to the payor?       Se in the organization cervice a payment in excess of \$75 made parity as contribution and parity for goods and services provided to the payor?       Se in the organization cervice a payment in ex										
2a Etter the number of employees reported on Form W-3. Transmittal of Wage and Tax       2a       0.         bit at least one is reported on line 2a, did the organization file all required fedral employment tax returns?       2b         3a Did the organization have unrelated business gross income of \$1,000 or more during the year?       3a         3b di the organization have unrelated business gross income of \$1,000 or more during the year?       3a         3b       3b       3a         3c At any time during the classine during the organization have an interest in, or a signature or other authonity over, a financial account in a foreign country.       3a         See instructions for filing requirements for FIGEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).       5a         Sa Was the organization a party to a prohibited tax shelfer transaction at any time during the tax year?       5a         Sa U any taxelie party notify the organization file Form 8886 T7,       5a         Sa U any taxelie party notify the organization file form 8886 T7,       5a         Sa U any taxelie party notify the organization an express statement that such contributions 7       6b         Sa U any taxelie party notify the organization an express statement that such contributions 7       6b         Sa U any taxelie party notify the organization file Form 8886 T7,       7a         Sa U any taxelie party notify the organization an express statement that such contributions of gits were not tax deductible as charitable contribut	U		1c	Х						
Statements, field for the calendar year ending with or within the year covered by this return.       [28]       0.         b If at least one is reported on line 2, at dithe organization file all required federal employment tax returns?       3a       3a         3a D the organization have unrelated business gross income of \$1.000 or more during the year?       3a       3a       3a       X         3b If Yes?, this it line a Form 90-To this year?       3a       3b       3a       X         3b If Yes?, this it line a Form 90-To this year?       3a       X       3b       3a         4a At any time during the calendar year, did the organization have an interest in, or a signature or other atunbrity over, a financial account in a foreign country: >       See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).       See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).       Se       Se         5a Was the organization have annual gross receipts that are normally greater than \$100,000, and it the organization include with even solicitation cancellabe contributions?       Se       Se       Se         6a Does the organization include with every solicitation an express statement that such contributions or glits were not tax deductible contributions and express provided?       To       Ge       X         7 Organization solicit any contitibution statu enders of the yean solicitaty contitibution sthatwere solicitation and partiy for goods and s	2a									
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?       2b         3a Did the organization have unrelated business gross income of \$1,000 or more during the year?       3a         3b If Yes, 'hast filed a Form 900-T for this year? If 'No'r to line 3b, provide an explanation in Schedule 0,, '3b       3a         3b If 'Yes, 'mast filed a Form 900-T for this year? If 'No'r to line 3b, provide an explanation in Schedule 0,, '3b       3a         3c. At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country       4a         3c. Mainton 1 a foreign country       See instructions for filing requirements for FINCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).       5a         3c Was the organization a party to a prohibited tax shelfer transaction at any time during the tax year?       5a       X         3c If 'Ares' (in the far of b, did the organization that it was or is a party to a prohibited tax shelfer transaction at any time during the tax year?       5a       X         3c If 'Ares' (id the organization include with very solicitation an express statement that such contributions of the organization and express statement that such contributions of gits were not tax deductible acharitable contributions?       5a       X         3d If 'Yes,' (id the organization nearby were solicitation an express statement that such contributions of gits were not tax deductible acharitable contributions and pressstatement that such controlibutions of gits were	Zu									
Note. If the sum of lines 1 and 2 a is greater than 250, you may be required to exife (see instructions)	b		2b							
1a       Did the organization have unrelated business gross income of \$1,000 or more during the year?       3a       X         4a       At any time during the calendar year? If Work for the 3b, provide an explanation in Schedule 0										
b If "Yes," has it filed a Form 990-T for this year? If "Ub" to line 3b, provide an explanation in Schedule 0,	3a		3a		Х					
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?.         b If "Yes," enter the name of the foreign country: ▶       >>>>>>>>>>>>>>>>>>>>>>>>>>>>>>			3b							
account)?       4a       X         b If "Yes," enter the name of the loreign county: b										
b If "Ves," enter the name of the foreign country:		over, a financial account in a foreign country (such as a bank account, securities account, or other financial								
See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).       Sa         Sa Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?       Sa         b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?       Sa         vas the organization aparty to a prohibited tax shelter transaction at any time during the tax year?       Sa         vas the organization aparty to a prohibited tax shelter transaction?       Sa         vas the organization have annual gross receipts that are normally greater than \$100.000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?       Ga         c Did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?       Ga         a Did the organization neceive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?       Ta         b If "Yes," indicate the number of Forms 8282 filed during the year       Id         c Did the organization ording the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract?       Ti         f Did the organization notiput approximation or activisation fuelled intellectual propery, did th organization file form 10427       Ti         g If the organization fuelly early approximation directly or indirectly, to pay premiums on a personal benefit contract?       Ti<		account)?	4a		Х					
(FBAR).       5a       X         5a       Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?       5a       X         5b       Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?       5c       5c         6       Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization nolicid any contributions that were not tax deductible as charitable contributions?       5c       5c         6       Does the organization include with every solicitation an express statement that such contributions or glits were not tax deductible?       6b       X         7       Organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?       7b       7b       7c         7       Did the organization notify the donor of the value of the goods or services provided?       7c       7a       7b         7       Did the organization, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract?       7d       7d       7d         7       Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?       7d       7d       7d         7       Did the organization make any taxable distributions under section 4966?       9a       9a       9a       9a	b									
(FBAR).       5a       X         5a       Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?       5a       X         5b       Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?       5c       5c         6       Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization nolicid any contributions that were not tax deductible as charitable contributions?       5c       5c         6       Does the organization include with every solicitation an express statement that such contributions or glits were not tax deductible?       6b       X         7       Organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?       7b       7b       7c         7       Did the organization notify the donor of the value of the goods or services provided?       7c       7a       7b         7       Did the organization, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract?       7d       7d       7d         7       Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?       7d       7d       7d         7       Did the organization make any taxable distributions under section 4966?       9a       9a       9a       9a		See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts								
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?       2         b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?       5         c If "Yes" to line 5 or 5b, did the organization that were not tax deductible as charitable contributions?       5         c B Does the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?       6         c J Organization tat may receive adductible contributions under section 170(c).       6       6         a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided?       7         b If "Yes," did the organization notify the donor of the value of the goods or services provided?       7         b Did the organization receive any function, directly, to pay premiums on a personal benefit contract?       7         c Did the organization receive any function of cars, bast, applanes, or other values of the organization file Form 8282?       7         c Did the organization, during the year, pay premiums, directly or indirectly, to pay premiumes on a personal benefit contract?       7         f Did the organization receive any function of cars, bast, applanes, or other values di the organization file Form 8282 filed during the year?       7         g If the organization make any taxable distributions under section 4966?       9         g Did the sonsoning organization m										
b bid any taxable party from the organization file from 8886-72,	5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a							
6a       Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?       6a       X         6b       If "Yes," did the organization include with every solicitation an express statement that such contributions or grits were not tax deductible?       6b       X         7       Organizations that may receive deductible contributions under section 170(c).       7b       7b       7b         7       Did the organization notify the donor of the value of the goods or services provided?       7a       7c         7       To grainization, full equiper, or otherwise dispose of tangible personal property for which it was required to file Form 8282?       7c       7c         7       If "Yes," indicate the number of Forms 8282 filed during the year       7d       7e       7c         9       Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?       7f       7f         9       If the organization receive any funds, directly or indirectly or andirectly or andirectly error advised fund the regnaization feeded a contribution of qualified intellectual property, did the organization file a Form 1089-C?       7h       7h         8       Sponsoring organization make any taxable distributions under section 4966?       9a       9b       9b         9       Did the sponsoring organization make any taxable di			5b		Х					
organization solicit any contributions that were not tax deductible as charitable contributions?       6a       X         b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?       6b       X         7 Organizations that may receive deductible contributions under section 170(c).       a Did the organization neceive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?       7a       7b         6 Did the organization notify the donor of the value of the goods or services provided?       7c       7c         7 Did the organization notify the donor of the value of the goods or services provided?       7c       7c         7 Did the organization notify the donor of the value of the goods or services provided?       7c       7c         7 Did the organization notify the donor of the value of the goods or services provided?       7c       7c         7 Did the organization number of Forms 282?       7c       7d       7d         7 Did the organization received a contribution of qualified intellectual property, did the organization file Form 8898 as required?       7d       7d         7 Did the sponsoring organization make any taxable distributions under section 4966?       9a       9a       9b         9 Sponsoring organization make any taxable distributions under section 4966?       9a       9a       9b       9b       9b       9b <td>С</td> <td>If "Yes" to line 5a or 5b, did the organization file Form 8886-T?</td> <td>5c</td> <td></td> <td></td>	С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c							
bil "Yes," did the organization include with even valueducture as chanable commutations in the spectral statement that such contributions of gifts were not tax deductible?	6a									
gifts were not tax deductible?.       6b       X         7       Organizations that may receive deductible contributions under section 170(c).       a Did the organization neceive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?       7			<u>6a</u>	X						
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a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?       7a         b If "Yes," did the organization notify the donor of the value of the goods or services provided?       7b         c Did the organization notify the donor of the value of the goods or services provided?       7c         d If "Yes," indicate the number of Forms 8282?       7c         d If "Yes," indicate the number of Forms 8282 filed during the year       7d         f Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?       7c         f Did the organization received a contribution of qualified intellectual property. did the organization for form 8292 as required?       7f         f If the organization received a contribution of qualified intellectual property. did the organization flow form 8298 as required?       7f         g If the organization make any taxable distributions under section 4966?       9a         9 Sponsoring organization make any taxable distributions under section 4966?       9a         9 Did the sponsoring organizations. Enter:       10a         a Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)       11a         12a Section 501(c)(12) organizations. Enter:       11a         a Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)       11a <td></td> <td></td> <td>6b</td> <td>A</td> <td></td>			6b	A						
and services provided to the payor?       7a         b If "Yes," did the organization notify the donor of the value of the goods or services provided?       7a         c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?       7c         d If "Yes," indicate the number of Forms 8282 filed during the year       [7d]         e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?       7f         g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?       7g         h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1089-C?       7h         8 Sponsoring organization make any taxable distributions under section 4966?       8         9 Did the sponsoring organization make any taxable distributions under section 4966?       9a         9 Did the sponsoring organizations. Enter:       10a         a Initiation fees and capital contributions included on Part VIII, line 12.       10a         11 Section 501(c)(12) organizations. Enter:       11a         a Gross income from members or shareholders.       11a         12 Section 501(c)(2) qualified nonprofit health insurance issuers.       11b         13 Section 501(c)(2) qualified nonprofit health insurance issuers.       12b         13 a										
b       If "Yes," did the organization notify the donor of the value of the goods or services provided?       7b         c       Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?       7c         d       If "Yes," indicate the number of Forms 8282 filed during the year.       7d       7e         d       Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?       7f         f       Did the organization received a contribution of qualified intellectual property, did the organization file Form 889 as required?       7f         h       If the organization received a contribution of qualified intellectual property, did the organization file Form 889 as required?       7h         sponsoring organizations maintaining donor advised funds.       8       9         a       Did the sponsoring organization make any taxable distributions under section 4966?       9a         b       Did the sponsoring organizations. Enter:       10a         a       Initiation fees and capital contributions included on Part VIII, line 12       10a         10 Section 501(c)(12) organizations. Enter:       11a       10a         a Gross income from members or shareholders       11b       11b         11 Section 501(c)(12) roganizations. Enter:       11b       12a         b       Gross income from mem	а		7-							
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required to file Form 8282?       7c         d If "Yes," indicate the number of Forms 8282 filed during the year			10							
d If "Yes," indicate the number of Forms 8282 filed during the year	С		70							
<ul> <li>bid the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?</li> <li>f Did the organization received a contribution of qualified intellectual property, did the organization file Form 889 as required?</li> <li>f If the organization received a contribution of qualified intellectual property, did the organization file Form 889 as required?</li> <li>f If the organizations maintaining donor advised funds.</li> <li>g If the sponsoring organizations maintaining donor advised funds.</li> <li>g Sponsoring organizations maintaining donor advised funds.</li> <li>g Did the sponsoring organizations maintaining donor advised funds.</li> <li>a Did the sponsoring organization make any taxable distributions under section 4966?.</li> <li>b Did the sponsoring organizations. Enter:</li> <li>a Gross income from members or shareholders.</li> <li>b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.</li> <li>11a</li> <li>12a Section 501(c)(12) organizations. Enter:</li> <li>a Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.).</li> <li>12a Section 501(c)(12) organization therest received or accrued during the year.</li> <li>12a</li> <li>13 Section 501(c)(2) qualified nonprofit health insurance issuers.</li> <li>a Is the organization licensed to issue qualified health plans in more than one state?</li> <li>Note. See the instructions for additional information the organization must report on Schedule O.</li> <li>b Enter the amount of reserves the organization is required to maintain by the states in which the organization licensed to issue qualified health plans .</li> <li>C Enter the amount of reserves on hand .</li> <li>2 Enter the amount of reserves on hand .</li> <li>2 Enter the amount of reserves on hand .</li> <li>2 Enter the amount of reserves on hand .</li> <li>2 Enter the amount of reserves on hand .</li> <li>2 Enter the amount of reserves on hand .</li></ul>	Ь		10							
f       Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?       7f         g       If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?       7g         h       If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?       7h         8       Sponsoring organizations maintaining donor advised funds.       Did a donor advised fund maintained by the sponsoring organization make any taxable distributions under section 4966?       9a         9       Sponsoring organizations maintaining donor advised funds.       9a       9a         10       Section 501(c)(7) organizations. Enter:       10a       10a         11       Initiation fees and capital contributions included on Part VIII, line 12       10a       10b         11       Section 501(c)(7) organizations. Enter:       11a       10b       11b         12       Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?       12a         13       Section 501(c)(2) qualified nonprofit health insurance issuers.       11a       12a         13       Section 501(c)(2) qualified health plans in more than one state?       13a         13       Enter the amount of reserves the organization is required to maintain by the states in which the organizat			7e							
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h If the organization received a contribution of cars, boats, aiplanes, or other vehicles, did the organization file a Form 1098-C?       7h         8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization make a axis and time during the year?       8         9 Sponsoring organizations maintaining donor advised funds.       9a         9 Did the sponsoring organization make any taxable distributions under section 4966?       9a         9 b       9a         9 Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?       9a         9 Section 501(c)(7) organizations. Enter:       10a         10 Section 501(c)(12) organizations. Enter:       10a         a Gross income from members or shareholders.       11a         11b       11b         12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?       12a         13 Section 501(c)(29) qualified nonprofit health insurance issuers.       12b         14 Section 501(c)(29) qualified nonprofit health plans in more than one state?       13a         13a       13a         14a       14a										
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11       Section 501(c)(12) organizations. Enter:         a       Gross income from members or shareholders.         b       Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)         12a       Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?         12b       If "Yes," enter the amount of tax-exempt interest received or accrued during the year.         13       Section 501(c)(29) qualified nonprofit health insurance issuers.         a       Is the organization licensed to issue qualified health plans in more than one state?         Note. See the instructions for additional information the organization must report on Schedule O.         b       Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans         c       Enter the amount of reserves on hand.         13a       13b         13b       13c         14a       X	а									
a Gross income from members or shareholders       11a         b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)       11b         12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?       12a         b If "Yes," enter the amount of tax-exempt interest received or accrued during the year.       12b         13 Section 501(c)(29) qualified nonprofit health insurance issuers.       13a         a Is the organization licensed to issue qualified health plans in more than one state?       13a         Note. See the instructions for additional information the organization must report on Schedule O.       13a         b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans       13b         c Enter the amount of reserves on hand.       13c       14a										
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13       Section 501(c)(29) qualified nonprofit health insurance issuers.         a       Is the organization licensed to issue qualified health plans in more than one state?         13       Note. See the instructions for additional information the organization must report on Schedule O.         b       Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans         c       Enter the amount of reserves on hand         14a       X	12 a		12a							
a Is the organization licensed to issue qualified health plans in more than one state?       13a         Note. See the instructions for additional information the organization must report on Schedule O.       13a         b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans       13b         c Enter the amount of reserves on hand       13c         14a Did the organization receive any payments for indoor tanning services during the tax year?       14a	b		-							
Note. See the instructions for additional information the organization must report on Schedule O.       Image: See the instructions for additional information the organization must report on Schedule O.         b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans       Image: Im	13	Section 501(c)(29) qualified nonprofit health insurance issuers.								
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans       13b       13b         c Enter the amount of reserves on hand       13c       14a       X         14a       Did the organization receive any payments for indoor tanning services during the tax year?       14a       X	а	•	13a							
the organization is licensed to issue qualified health plans	_									
c Enter the amount of reserves on hand   13c     14a Did the organization receive any payments for indoor tanning services during the tax year?   14a	b									
14a       X										
			142		x					

Form §	990 (2016) ENVIRONMENTAL DEFENSE ACTION FUND 90-0080	)500	F	Page 6
Part	t VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule 0.			
	Check if Schedule O contains a response or note to any line in this Part VI			X
Sect	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 19	-		
	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				
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	2		х
•	any other officer, director, trustee, or key employee?	<u> </u>		21
3	Did the organization delegate control over management duties customarily performed by or under the direct	3		х
4	supervision of officers, directors, or trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization have any significant changes to its governing documents since the profile form as was med?	5		Х
6	Did the organization have members or stockholders?	6	Х	
- 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	Х	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
	stockholders, or persons other than the governing body?	7b	Х	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:	_	37	
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
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		x
Secti	ion B. Policies (This Section B requests information about policies not required by the Internal Revenue	-		
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		Х
	-			
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters.			
b		10b		
b 11a	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b 11a	X	
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?			
11a	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990.		X X	
11a b	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? . Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i>	11a 12a	X	
11a b 12a	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? . Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i>	11a		
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11a b 12a b c	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? . Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i>	11a 12a 12b 12c	x x x	
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11a b 12a b c 13 14	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?Describe in Schedule O the process, if any, used by the organization to review this Form 990.Did the organization have a written conflict of interest policy? If "No," go to line 13Were officers, directors, or trustees, and key employees required to disclose annually interests that could giverise to conflicts?Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"describe in Schedule O how this was doneDid the organization have a written whistleblower policy?Did the organization have a written document retention and destruction policy?	11a 12a 12b 12c	x x x	
11a b 12a b c	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?Describe in Schedule O the process, if any, used by the organization to review this Form 990.Did the organization have a written conflict of interest policy? If "No," go to line 13Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was doneDid the organization have a written whistleblower policy?Did the organization have a written document retention and destruction policy?Did the process for determining compensation of the following persons include a review and approval by	11a 12a 12b 12c 13	x x x x x	
11a b 12a c 13 14 15	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?         Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?         Describe in Schedule O the process, if any, used by the organization to review this Form 990.         Did the organization have a written conflict of interest policy? If "No," go to line 13         Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?         Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done         Did the organization have a written whistleblower policy?         Did the organization have a written document retention and destruction policy?         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?	11a 12a 12b 12c 13 14	x x x x x	X
11a b 12a c 13 14 15 a	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? . Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i>	11a 12a 12b 12c 13	x x x x x	x
11a b 12a c 13 14 15	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?         Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?         Describe in Schedule O the process, if any, used by the organization to review this Form 990.         Did the organization have a written conflict of interest policy? If "No," go to line 13         Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?         Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done         Did the organization have a written whistleblower policy?         Did the organization have a written document retention and destruction policy?         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?	11a 12a 12b 12c 13 14 15a	x x x x x	
11a b 12a c 13 14 15 a b	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? . Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i>	11a 12a 12b 12c 13 14 15a 15b	x x x x x	Х
11a b 12a c 13 14 15 a b	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?Describe in Schedule O the process, if any, used by the organization to review this Form 990.Did the organization have a written conflict of interest policy? If "No," go to line 13Were officers, directors, or trustees, and key employees required to disclose annually interests that could giverise to conflicts?Did the organization negularly and consistently monitor and enforce compliance with the policy? If "Yes,"describe in Schedule O how this was doneDid the organization have a written whistleblower policy?Did the organization have a written document retention and destruction policy?Did the process for determining compensation of the following persons include a review and approval byindependent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?The organization's CEO, Executive Director, or top management officialOther officers or key employees of the organizationIf "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangementwith a taxable entity during the year?	11a 12a 12b 12c 13 14 15a	x x x x x	
11a b 12a c 13 14 15 a b	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?         Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?         Describe in Schedule O the process, if any, used by the organization to review this Form 990.         Did the organization have a written conflict of interest policy? If "No," go to line 13         Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?         Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done         Did the organization have a written whistleblower policy?         Did the organization have a written document retention and destruction policy?         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?         The organization's CEO, Executive Director, or top management official         Other officers or key employees of the organization         If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).         Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?         If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its	11a 12a 12b 12c 13 14 15a 15b	x x x x x	Х
11a b 12a c 13 14 15 a b 16a	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?         Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?         Describe in Schedule O the process, if any, used by the organization to review this Form 990.         Did the organization have a written conflict of interest policy? If "No," go to line 13         Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?         Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done         Did the organization have a written whistleblower policy?         Did the organization have a written document retention and destruction policy?         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?         The organization's CEO, Executive Director, or top management official         Other officers or key employees of the organization         If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).         Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?         If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable f	11a 12a 12b 12c 13 14 15a 15b 16a	x x x x x	Х
11a b 12a c 13 14 15 a b 16a b	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? . Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i>	11a 12a 12b 12c 13 14 15a 15b	x x x x x	Х
11a b 12a c 13 14 15 a b 16a b <b>Sect</b>	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? . Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i>	11a 12a 12b 12c 13 14 15a 15b 16a	x x x x x	Х
11a b 12a c 13 14 15 a b 16a b	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? . Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i>	11a 12a 12b 12c 13 14 15a 15b 16a 16b		X X

- available for public inspection. Indicate how you made these available. Check all that apply.

   Own website
   Another's website

   X
   Upon request

   Other (explain in Schedule O)
- **19** Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20 State the name, address, and telephone number of the person who possesses the organization's books and records: ► ROBERT YOUNG, 257 PARK AVENUE SOUTH, NEW YORK, NY 10010

Page 7

Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors
	Check if Schedule O contains a response or note to any line in this Part VII
Section A.	Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

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

• List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See instructions for definition of "key employee."

• List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

\_\_\_\_ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

				(0	C)					
(A)	(B)				ition			(D)	(E)	(F)
Name and Title	Average	(do not check more than one box, unless person is both an		Reportable	Reportable	Estimated				
	hours per week (list any					is both or/trust		compensation from	compensation from related	amount of other
	hours for					1		the	organizations	compensation
	related	ndiv or di	nsti	Officer	(ey o	ligh	Former	organization	(W-2/1099-MISC)	from the
	organizations	Individual trustee or director	Institutional	er	Key employee	est o	ler	(W-2/1099-MISC)		organization
	below dotted line)	or tr	าal t		oye	l ⊕ mp				and related organizations
		stee	trustee		Ø	bens				organizatione
			ĕ			Highest compensated employee				
(1)FRANK LOY	2.00	-								
CO-CHAIRMAN	2.00	Х		Х				0.	0.	0.
(2)SUSAN FORD DORSEY	2.00	-								
CO-CHAIRMAN	2.00	Х		Х				0.	0.	0.
(3)LISE STRICKLER	2.00									
CO-CHAIRMAN (FROM 2/17)	2.00	Х		Х				0.	0.	0.
(4)CRISTOBAL ALEX	2.00									
DIRECTOR	0.	Х						0.	0.	0.
(5)BRIAN CONBOY	2.00	-						_		_
DIRECTOR	0.	Х						0.	0.	0.
(6)THOMAS F. DARDEN, II	2.00	-						_		_
DIRECTOR	0.	Х						0.	0.	0.
(7)RICHARD H. DAVIS	2.00									
DIRECTOR	0.	Х						0.	0.	0.
(8)KRISTEN J. FELDMAN	2.00									
DIRECTOR	2.00	Х						0.	0.	0.
(9)CARL FERENBACH	2.00									
DIRECTOR	8.00	Х						0.	0.	0.
(10)WILLIAM R. GOODELL	2.00									
DIRECTOR	2.00	Х						0.	0.	0.
(11) <sup>CHARLES</sup> J. HAMILTON, JR.	2.00									
DIRECTOR	2.00	Х						0.	0.	0.
(12)CODDY JOHNSON	2.00									
DIRECTOR	0.	Х						0.	0.	0.
(13) <sup>THOMAS H.</sup> KEAN	2.00									
DIRECTOR	2.00	Х						0.	0.	0.
(14)JOHN C. KERR	2.00									
DIRECTOR	0.	Х						0.	0.	0.

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### ENVIRONMENTAL DEFENSE ACTION FUND

(A)	(B)			(C	;)		(D)	(E)	(F)
Name and title	Average hours per week (list any hours for related organizations below dotted line)	box,	not ch unless er and	Posi eck i s per a di	ition more t rson is irector	than one both an r/trustee r/trustee Highest compensated	Reportable compensation from the	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
5) ABBY LEIGH DIRECTOR	2.00	X					0.	0.	
6) SUSAN MANDEL DIRECTOR	2.00	X					0.	0.	
7) SAM RAWLINGS WALTON	2.00							0.	
DIRECTOR (THRU 5/17) 8) JEFFREY F. WILLIAMS	2.00	X					0.		
DIRECTOR 9) PAUL JUNGER WITT	2.00	X					0.	0.	
DIRECTOR 0) JOANNE WITTY	0.	X					0.	0.	
DIRECTOR 1) ELIZABETH B. THOMPSON	0.	X					0.	0.	
PRESIDENT 2) FREDERIC D. KRUPP	36.00			X			0.	277,404.	23,94
EXECUTIVE DIRECTOR 3) CYNTHIA HALLENBECK	36.00			X			0.	650,591.	61,86
TREASURER (THRU 6/16) 4) JOHN MCGEEHAN	36.00			X			0.	232,503.	15,02
TREASURER (FROM 10/16)	36.00			x			0.	121,629.	14,07
1b Sub-total c Total from continuation sheets to Part V	/II. Section A						0.	0.	114,90
d Total (add lines 1b and 1c)	<u> </u>			• •	• • •		• 0.	1,282,127.	114,90
<ul> <li>2 Total number of individuals (including but reportable compensation from the organization</li> <li>3 Did the organization list any former</li> </ul>	zation ► officer, directo	0. or, or	trus	stee	e, ke	ey em	ployee, or highes	t compensated	Yes
<ul> <li>employee on line 1a? If "Yes," complete So</li> <li>For any individual listed on line 1a, is organization and related organizations individual.</li> </ul>	the sum of rep greater than	ortab \$15	le co 50,00	omj )0?	pens <i>If</i>	ation "Yes,"	and other compen complete Schedu	sation from the Ile J for such	3 4 X
5 Did any person listed on line 1a receive for services rendered to the organization?	e or accrue co	mpen	satio	n f	rom	any u	nrelated organizati	on or individual	5
Section B. Independent Contractors Complete this table for your five highest compensation from the organization. Rep year.									
(A) Name and busines	s address						<b>(B)</b> Description of se	ervices (	(C) Compensation
Indiffe allu pusifies									

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ► 8

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Form	990	(201	6

Par	t VII				willing in this Dort V	111		
		Check if Schedule O cc	mains a respon	se or note to ar	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a b d f g h	Federated campaigns Membership dues Fundraising events	1b           1c           1d           titions)         1e           grants,         1f           above         1f	1,154,693. 4,570,238. 7,331,271.	13,056,202.			
Program Service Revenue	2a b c d f g	All other program service rev	/enue	Business Code	0.			
<u> </u>	3 4 5		cluding divident	ds, interest, ▶ proceeds	3,474. 0. 0.			3,474.
	6a b c d 7a	Gross rents Less: rental expenses Rental income or (loss) Net rental income or (loss) . Gross amount from sales of	(i) Securities	(ii) Other	0.			
	b	assets other than inventory Less: cost or other basis and sales expenses Gain or (loss)			-149.			-149.
Other Revenue		Net gain or (loss) Gross income from fundra events (not including \$ of contributions reported on See Part IV, line 18	lising  line 1c).	0.				
Oth	c	Less: direct expenses Net income or (loss) from fu Gross income from gaming	ndraising events.		0.			
	b	See Part IV, line 19 Less: direct expenses Net income or (loss) from g	a b	0.	0.			
		Gross sales of inventor returns and allowances	ory, less	0.				
	b c	Less: cost of goods sold Net income or (loss) from sa Miscellaneous Revenu	les of inventory	0.  Business Code	0.			
	11a							
	b							
	c b							
	d	All other revenue						
	e	Total. Add lines 11a-11d			0.			
	12	Total revenue. See instructio			13,059,527.			3,325.

JSA 6E1051 1.000

### ENVIRONMENTAL DEFENSE ACTION FUND

Do 8b,	tion 501(c)(3) and 501(c)(4) organizations mus Check if Schedule O contains a response check if Schedule O contains a response continuity of the term of term				
8b,					X
1	9b, and 10b of Part VIII.	(A) Total expenses	<b>(B)</b> Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraising expenses
	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21	1,595,987.	1,595,987.		
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22	0.			
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign	0.			
4	individuals. See Part IV, lines 15 and 16 Benefits paid to or for members	0.			
	Compensation of current officers, directors,				
5	trustees, and key employees	0.			
6	Compensation not included above, to disqualified				
Ů	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	0.			
7	Other salaries and wages	1,323,418.	1,213,586.	44,402.	65,430
	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	0.			
9	Other employee benefits	258,336.	237,134.	8,558.	12,644
10	Payroll taxes	101,241.	92,932.	3,354.	4,955
11	Fees for services (non-employees):				
а	Management	0.	10.500		01
	Legal	17,605.	17,526.	58.	21
	Accounting	27,997.	27,870.	93.	34
	Lobbying	0.			
	Professional fundraising services. See Part IV, line 17.	0.			
	Investment management fees	0.			
g	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.) ATCH 3	3,601,600.	3,585,333.	11,932.	4,335
12	Advertising and promotion	5,745,623.	5,737,478.	5,430.	2,715
13	Office expenses	539,523.	518,952.	12,192.	8,379
14	Information technology	84,133.	81,609.	1,683.	841
15	Royalties	0.			
16	Occupancy	108,617.	38,016.	46,705.	23,896
	Travel	180,811.	180,687.	84.	40
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	0.			
19	Conferences, conventions, and meetings	353,440.	350,491.	1,966.	983
20	Interest	0.			
21	Payments to affiliates	0.			
22	Depreciation, depletion, and amortization	0.			
		0.			
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.)				
<b>_</b>	SUBSCRIPTIONS & DUES	68,643.	68,639.	3.	1
	MISCELLANEOUS EXPENSES	151,151.	110,792.	20,424.	19,935
c c		-			-
d					
	All other expenses				
	Total functional expenses. Add lines 1 through 24e	14,158,125.	13,857,032.	156,884.	144,209
	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				

Page **11** 

	rt X	Balance Sheet			Page I
a		Check if Schedule O contains a response or note to any line in this P	art X.		
			(A)		(B)
			Beginning of year		End of year
	1	Cash - non-interest-bearing	213,186.	1	963,401
	2	Savings and temporary cash investments	9,404,865.	2	6,413,767
	3	Pledges and grants receivable, net	35,000.	3	140,000
	4	Accounts receivable, net	0.	4	(
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees.			
		Complete Part II of Schedule L	0.	5	C
	6	Loans and other receivables from other disqualified persons (as defined under section			
		4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary			
<i>~</i>		organizations (see instructions). Complete Part II of Schedule L	0.	6	(
šet	7	Notes and loans receivable, net	0.	7	(
ASSetS	8	Inventories for sale or use	0.	8	(
	9	Prepaid expenses and deferred charges	133,209.	9	143,547
	10 a	Land, buildings, and equipment: cost or			
		other basis. Complete Part VI of Schedule D 10a			
	b	Less: accumulated depreciation 10b		10c	C
	11	Investments - publicly traded securities	0.	11	(
	12	Investments - other securities. See Part IV, line 11	0.	12	(
	13	Investments - program-related. See Part IV, line 11	0.	13	(
	14	Intangible assets	0.	14	(
	15	Other assets. See Part IV, line 11	0.	15	(
	16	Total assets. Add lines 1 through 15 (must equal line 34)	9,786,260.	16	7,660,715
	17	Accounts payable and accrued expenses	1,749,494.	17	408,093
	18	Grants payable	0.	18	19,000
	19	Deferred revenue	0.	19	(
	20	Tax-exempt bond liabilities	0.	20	(
	21	Escrow or custodial account liability. Complete Part IV of Schedule D	0.	21	(
es	22	Loans and other payables to current and former officers, directors,			
LIADIIITIES		trustees, key employees, highest compensated employees, and	_		
lab		disqualified persons. Complete Part II of Schedule L	0.	22	(
┛	23	Secured mortgages and notes payable to unrelated third parties	0.	23	(
	24	Unsecured notes and loans payable to unrelated third parties	0.	24	(
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X			455.050
		of Schedule D	160,505.	25	455,959
	26	Total liabilities. Add lines 17 through 25	1,909,999.	26	883,052
s		Organizations that follow SFAS 117 (ASC 958), check here ► X and			
Fund Balances	07	complete lines 27 through 29, and lines 33 and 34.	200 072		2 1 2 0 2 5 2
alar	27	Unrestricted net assets	298,873. 7,577,389.	27	3,120,253 3,657,410
ŏ	28	Temporarily restricted net assets	0.	28	3,057,410
	29	Permanently restricted net assets	0.	29	
5		Organizations that do not follow SFAS 117 (ASC 958), check here  and complete lines 30 through 34.			
2	30	Capital stock or trust principal, or current funds		30	
Net Assets	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
ζ	32	Retained earnings, endowment, accumulated income, or other funds		32	
S	33	Total net assets or fund balances	7,876,262.	33	6,777,663
	34	Total liabilities and net assets/fund balances	9,786,261.	34	7,660,715

ENVIRONMENTAL	DEFENSE	ACTION	FUND

	00 (2016)			Pa	ge <b>12</b>	
Part						
	Check if Schedule O contains a response or note to any line in this Part XI	<u>.</u>				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	13,0			
2	Total expenses (must equal Part IX, column (A), line 25)	2	14,1			
3	3 Revenue less expenses. Subtract line 2 from line 1				98. 262.	
4						
5						
6						
7	Investment expenses	7			0.	
8	Prior period adjustments	8			-1.	
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	6,7	77,6	63.	
Part	XII 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: Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," e	xplain in				
	Schedule O.					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?.		2a		Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were cor	npiled or				
	reviewed on a separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?		2b	Х		
	If "Yes," check a box below to indicate whether the financial statements for the year were aud					
	separate basis, consolidated basis, or both:					
	Separate basis X Consolidated basis Both consolidated and separate basis					
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for	oversight				
•	of the audit, review, or compilation of its financial statements and selection of an independent ac	-	2c	Х		
	If the organization changed either its oversight process or selection process during the tax year, e					
	Schedule O.					
30	As a result of a federal award, was the organization required to undergo an audit or audits as se	t forth in				
Ja	the Single Audit Act and OMB Circular A-133?		3a		Х	
h	If "Yes," did the organization undergo the required audit or audits? If the organization did not und	lerao the				
b	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such au	0	3b			
	require a same of addite, explain may in concerne of and accorded any otopo taken to undergo such at					

## Schedule B

(Form 990, 990-EZ, or 990-PF) Department of the Treasury

## **Schedule of Contributors**

OMB No. 1545-0047

2016

Attach to Form 990, Form 99	0-EZ, or Form 990-PF.
▶ Information about Schedule B (Form 990, 990-EZ, or 990-	PF) and its instructions is at www.irs.gov/form990.

Internal Revenue Service Inf

ENVIRONMENTAL DEFENSE ACTION FUND

Employer identification number

90-0080500

Organization type (check one):

Filers of:	Section:
Form 990 or 990-EZ	X 501(c)( <sup>4</sup> ) (enter number) organization
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation
	527 political organization
Form 990-PF	501(c)(3) exempt private foundation
	4947(a)(1) nonexempt charitable trust treated as a private foundation
	501(c)(3) taxable private foundation

Check if your organization is covered by the General Rule or a Special Rule.

**Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

## General Rule

Solution For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

## **Special Rules**

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year

**Caution:** An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

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

Employer identification number 90-0080500

art I Contri	butors (See instructions). Use duplicate cop	bies of Part I if additional space is n	eeded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>    1                                </u>		\$4,570,238.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$750,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$750,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6		\$500,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

Employer identification number 90-0080500

(d)
Type of contribution
Person
Pavroll
000. Noncash
(Complete Part II for
noncash contributions.)
(d)
ns Type of contribution
Person
Payroll
000. Noncash
(Complete Part II for noncash contributions.)
(d) ns Type of contribution
Person
Payroll       000.     Noncash
(Complete Part II for
noncash contributions.)
(d)
ns Type of contribution
Person
Payroll
000. Noncash
(Complete Part II for
(Complete Part II for noncash contributions.)
(Complete Part II for noncash contributions.) (d)
(Complete Part II for noncash contributions.) (d) Type of contribution
(Complete Part II for noncash contributions.) (d) Type of contribution Person
(Complete Part II for noncash contributions.) (d) Type of contribution Person Payroll
(Complete Part II for noncash contributions.)       (d) Type of contribution       Person Payroll Noncash     X
(Complete Part II for noncash contributions.) (d) Type of contribution Person Payroll
(Complete Part II for noncash contributions.)       (d) Type of contribution       000.       Person Payroll Noncash       (Complete Part II for noncash contributions.)
000.     (Complete Part II for noncash contributions.)         (d)       Type of contribution       X       Payroll       Noncash       (Complete Part II for
(Complete Part II for noncash contributions.)         (d)         Type of contribution         000.         Person         Noncash         (Complete Part II for noncash contributions.)         (Complete Part II for noncash contributions.)         (d)         (d)         (d)         (complete Part II for noncash contributions.)
(Complete Part II for noncash contributions.)       (d)       Type of contribution       000.       Person       X       Payroll       Noncash       (Complete Part II for noncash contributions.)       (Complete Part II for noncash contributions.)       (d)       Type of contribution       (d)       Type of contribution
(Complete Part II for noncash contributions.)       (d) Type of contribution       000.     Person Payroll Noncash       (Complete Part II for noncash contributions.)       (Complete Part II for noncash contributions.)       (d) Type of contribution       (d) Type of contribution       Person Payroll
(Complete Part II for noncash contributions.)       (d) Type of contribution       000.       Person       Noncash       (Complete Part II for noncash contributions.)       (complete Part II for noncash contributions.)       (d) Type of contribution       Person       (d) Type of contribution       Person       X       Payroll

Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

Part I

JSA 6E1253 1.000	
0921LR	702V

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$50,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$50,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$49,475.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$37,210.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$29,960.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$\$.	Person X Payroll Noncash (Complete Part II for noncash contributions.) B (Form 990, 990-EZ, or 990-PF) (2016

Contributors (See instructions). Use duplicate copies of Part I if additional space is needed.

Employer identification number 90-0080500

JSA 6E1253 1.000	
0921LR	702V

Employer identification nu	mber
90-0080500	

Part I	Contributors (See instructions). Use duplicate copi	cs of Fart fill additional space is the	eeueu.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$15,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
20		\$15,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$10,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
22		\$10,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
23			Porson
		\$10,000.	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	\$10,000. (c) Total contributions	Payroll Noncash (Complete Part II for

PAGE 18

Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

Employer identification number 90-0080500

art I Contril	butors (See instructions). Use duplicate cop	bies of Part I if additional space is n	eeded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
25		\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
26		\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

Name of organization ENVIRONMENTAL DEFENSE ACTION FUND

Employer identification number 90-0080500

Part II Nonc	ash Property (See instructions). Use duplicate copies	of Part II if additional space is ne	eded.
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		   \$	

Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

Deut III	Freehook and the state of a state of a			90-0080300		
Part III	<i>Exclusively</i> religious, charitable, etc. (10) that total more than \$1,000 for					
	the following line entry. For organizati	ions completing Par	t III, enter the total	of exclusively religious, charitable, etc.,		
	contributions of <b>\$1,000 or less</b> for the Use duplicate copies of Part III if addit			ee instructions.) ► \$		
(a) No. from	(b) Purpose of gift	·		(d) Description of how gift is hold		
Part I	(b) Purpose of gift	(c) Use	orgin	(d) Description of how gift is held		
		(e) Transf	er of gift			
	Transferee's name, address, ar	nd ZIP + 4	Relatio	nship of transferor to transferee		
(a) No. from	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held		
Part I	(b) Fulpose of gift	(c) 05e	orgin	(d) Description of now girt is neid		
		(e) Transf	er of gift			
	Transferee's name, address, ar	nd ZIP + 4	Relatio	nship of transferor to transferee		
				· · · · · · · · · · · · · · · · · · ·		
(a) No. from	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held		
Part I		(0) 036	orgin			
		(e) Transf	er of gift			
	Transferee's name, address, ar	nd ZIP + 4	Relatio	nship of transferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held		
		(e) Transfer of gift				
				nchin of transforor to transforoa		
	Transferee's name, address, ar	IQ 4IF T 4	Relatio	nship of transferor to transferee		
JSA				Schedule B (Form 990, 990-EZ, or 990-PF) (2016)		

SCHEDULE C		Political Campaign a	nd Lobbying	g Activit	ies	OMB No. 1545-0047
(Form 990 or 990-EZ)		organizations Exempt From Incom	ne Tax Under sectio	on 501(c) an	d section 52	<sup>7</sup> 20 <b>16</b>
Department of the Treasury Internal Revenue Service		lete if the organization is described be tion about Schedule C (Form 990 or 9			or Form 990-I w.irs.gov/form	
•		on Form 990, Part IV, line 3, or Form Complete Parts I-A and B. Do not complete		6 (Political Ca	npaign Activi	ties), then
	0	on 501(c)(3)) organizations: Complete F		Do not comple	e Part I-B	
<ul> <li>Section 527 organiz</li> </ul>		()()) <b>e</b>	and i A and O below. E	o not comple	or artr b.	
0		on Form 990, Part IV, line 4, or Form	990-EZ, Part VI, line 47	7 (Lobbying A	ctivities), ther	n
<ul> <li>Section 501(c)(3) o</li> </ul>	rganizations	that have filed Form 5768 (election un	der section 501(h)): Co	mplete Part II-	A. Do not com	plete Part II-B.
	vered "Yes,"	that have NOT filed Form 5768 (election on Form 990, Part IV, line 5 (Proxy	( )			•
• Section 501(c)(4), (	(5), or (6) org	anizations: Complete Part III.				
Name of organization				I	Employer ide	ntification number
ENVIRONMENTAL D					90-0080	
		organization is exempt under				
<ol> <li>Provide a description</li> <li>of "political camp</li> </ol>		organization's direct and indirect p ies")	oolitical campaign ac	ctivities in Pa	art IV. (see i	nstructions for definition
2 Political campaig	n activity e	xpenditures (see instructions)			.►\$	2,506,515.
3 Volunteer hours	for political	campaign activities (see instruction	ns)			
Part I-B Comple	ete if the c	organization is exempt under s	section 501(c)(3).			
1 Enter the amoun	t of any exc	cise tax incurred by the organizatio	n under section 495	5	▶\$	
		cise tax incurred by organization m				
-		a section 4955 tax, did it file Form				
				• • • • • •		Yes No
b If "Yes," describe		organization is exempt under	$\overline{contion 501(c)}$ or	cont conti	-501(a)/2	<u>\</u>
-		• ·		•		<u>).</u>
activities		expended by the filing organization			▶\$	2,485,830.
		ng organization's funds contributed				20,685.
		enditures. Add lines 1 and 2. En				2,506,515.
<ul> <li>4 Did the filing orga</li> <li>5 Enter the names organization made the amount of period</li> </ul>	anization fil , addresses de payment olitical cont	e Form 1120-POL for this year? and employer identification numb s. For each organization listed, en tributions received that were prom nd or a political action committee (I	er (EIN) of all section ter the amount paid aptly and directly de	on 527 polit d from the f livered to a	ical organiza iling organiz separate po	X Yes No ations to which the filing ation's funds. Also enter litical organization, such
<b>(a)</b> Name		<b>(b)</b> Address	(c) EIN	filing org	t paid from anization's ne, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0
	т	257 PARK AVENUE SOUTH				
(1) EDAF POLITICA ACTION COMMIT		NEW YORK, NY 10010	90-0080500		0.	7,205.
(2)					0.	7,203.
(3)						
(4)						
(5)						
(6)						
(·)			· · · · · · · · · · · · · · · · · · ·			- 0 (E

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

Schedule C (Form 990 or 990-EZ) 2016

-	(101110000100022)2010	MMENIAL DEFENSE ACTION FUND		080300 Page Z
Part II-	Complete if the organizati section 501(h)).	on is exempt under section 501(c)(3) and	filed Form 5768 (elec	tion under
A Chec		belongs to an affiliated group (and list in Pa enses, and share of excess lobbying expend		oup member's
B Chec	k ▶ 🦳 if the filing organizatior	checked box A and "limited control" provisi	ons apply.	
		ying Expenditures	(a) Filing	(b) Affiliated
		eans amounts paid or incurred.)	organization's totals	group totals
1a Tota	I lobbying expenditures to influence	public opinion (grass roots lobbying)		
		a legislative body (direct lobbying)		
		a and 1b)		
		d lines 1c and 1d)		
		e amount from the following table in both		
colui				
If the	amount on line 1e, column (a) or (b) is	The lobbying nontaxable amount is:		
Not c	ver \$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.		
g Gras	sroots nontaxable amount (enter 25	5% of line 1f)		
h Subt	ract line 1g from line 1a. If zero or le	ess, enter -0-		
i Subt	ract line 1f from line 1c. If zero or le	ss, enter -0-		
		on either line 1h or line 1i, did the organiza	tion file Form 4720	
repo	rting section 4911 tax for this year?			Yes No
		4-Year Averaging Period Under section 501(h)		

# (Some organizations that made a section 501(h) election do not have to complete all of the five columns below.

See the separate instructions for lines 2a through 2f.)

	Lobbying Expen	ditures During 4-Ye	ear Averaging Period		
Calendar year (or fiscal year beginning in)	<b>(a)</b> 2013	<b>(b)</b> 2014	<b>(c)</b> 2015	<b>(d)</b> 2016	<b>(e)</b> Total
2a Lobbying nontaxable amount					
<b>b</b> Lobbying ceiling amount (150% of line 2a, column (e))					
c Total lobbying expenditures					
<b>d</b> Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2016

	-
Deme	2
Page	J

Schedule C (Fo	orm 990 or 990-EZ) 2016
Part II-B	Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For	each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed	(a	1)	(b)
	cription of the lobbying activity.	Yes	No	Amount
1	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:			
а	Volunteers?			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?.			
С	Media advertisements?			
d	Mailings to members, legislators, or the public?			
е	Publications, or published or broadcast statements?			
f	Grants to other organizations for lobbying purposes?			
g	Direct contact with legislators, their staffs, government officials, or a legislative body?			
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i	Other activities?			
j	Total. Add lines 1c through 1i			
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b	If "Yes," enter the amount of any tax incurred under section 4912			
с	If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			
Da	$\pm 111$ A Complete if the examplement of example under section $E(1/2)(4)$ section $E(1/2)(4)$	(-)/F)		action

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
1	Were substantially all (90% or more) dues received nondeductible by members?	1	Х	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			Х
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?			Х

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) 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."

1	Dues, assessments and similar amounts from members	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).		
а	Current year	2a	
	Carryover from last year.		
	Total		
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the		
	excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying		
	and political expenditure next year?	4	
5	Taxable amount of lobbying and political expenditures (see instructions)	5	

### Part IV Supplemental Information

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

SEE PAGE 4

Page 4

## Schedule C (Form 990 or 990-EZ) 2016

### Part IV Supplemental Information (continued)

#### PART I-A:

THE AMOUNT REPORTED ON SCHEDULE C, PART I-A, LINE 2 REFLECTS THE TOTAL AMOUNT OF POLITICAL EXPENDITURES THAT ENVIRONMENTAL DEFENSE ACTION FUND ("EDAF") SPENT ON WORK RELATED TO LIMITED POLITICAL ACTIVITIES ON ENVIRONMENTAL ISSUES IN FY2017. THESE POLITICAL EXPENDITURES WERE DIRECTED TOWARD THE 2016 ELECTIONS. SPECIFICALLY, EDAF INVESTED IN TARGETED MAIL, TELEPHONE, PRINT, RADIO, BROADCAST AND CABLE TELEVISION, AND DIGITAL ADVERTISING CAMPAIGNS FOR CONGRESSIONAL RACES.

OF THE TOTAL AMOUNT OF POLITICAL EXPENDITURES, \$101,760 WAS SPENT ON STAFF SALARIES (INCLUDING BENEFITS AND OVERHEAD), \$20,685 WAS SPENT ON ADMINISTRATIVE COSTS OF THE EDAF PAC, AND THE REMAINING \$2,384,070 WAS SPENT ON DISCRETIONARY EXPENSES, INCLUDING CONSULTANTS, ADVERTISING AND OTHER VENDORS.

THE TOTAL AMOUNT OF POLITICAL EXPENDITURES REPRESENTS APPROXIMATELY 18% OF EDAF'S OVERALL EXPENDITURES FOR THE YEAR.

POLITICAL EXPENDITURES: \$2,506,515. VOLUNTEER HOURS: -0-

SCHEE	DULE	D
(Form	990)	

## Supplemental Financial Statements

Complete if the organization answered "Yes" on Form 990,

Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

Open to Public Department of the Treasury Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990. Inspection Internal Revenue Service Name of the organization Employer identification number ENVIRONMENTAL DEFENSE ACTION FUND 90-0080500 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Part I 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 1 2 Aggregate value of contributions to (during year) 3 Aggregate value of grants from (during year) Aggregate value at end of year 4 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised 5 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 6 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 **Conservation Easements.** Part II Complete if the organization answered "Yes" on Form 990, Part IV, line 7. 1 Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation 2 Held at the End of the Tax Year easement on the last day of the tax year. Total number of conservation easements ..... 2a а 2b b Total acreage restricted by conservation easements 2c Number of conservation easements on a certified historic structure included in (a) С d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 3 tax year 🕨 Number of states where property subject to conservation easement is located **b** 4 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of 5 violations, and enforcement of the conservation easements it holds? No Yes Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 6 7 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) 8 No and section 170(h)(4)(B)(ii)? Yes In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and q balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III 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. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet b works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included in Form 990, Part VIII, line 1..... ▶ \$ \_ If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the 2 following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: Revenue included in Form 990, Part VIII, line 1 а ▶ \$ Assets included in Form 990, Part X..... b ▶ \$ Schedule D (Form 990) 2016

OMB No. 1545-0047

ENVIRONMENTAL DEFENSE ACTION FUND

90-0080500

Schoo	ule D (Form 990) 2016	ENIAL DEI	CENSE AC	JITON L	OND				0-000	0000	Page <b>2</b>
Par		ections of	Art Hist	orical T	reasur		or Oth	er Similar		ts (conti	0
3	Using the organization's acquisition, acce										
Ū	collection items (check all that apply):				c any o		10110111	ng mar are	s a oigi	intourit ut	
а	Public exhibition		d	Loan c	or excha	ande r	orogram	าร			
b	Scholarly research		e	Other		• •					
С	Preservation for future generations										
4	Provide a description of the organization'	s collections	and expla	ain how t	hev fur	ther t	the ora	anization's	exempt	t purpose	in Part
-	XIII.										
5	During the year, did the organization solicit	or receive d	donations o	f art, histo	orical tr	easur	es. or c	ther similar			
-	assets to be sold to raise funds rather than								_	Yes	No
Par	IV Escrow and Custodial Arrangen				0						
	Complete if the organization and		s" on Forn	n 990, Pa	art IV, I	ine 9	, or rep	ported an a	amoun	t on Forn	n
	990, Part X, line 21.			,	,		, I				
1a	Is the organization an agent, trustee, custo	odian or othe	er intermed	iary for c	ontribut	tions o	or other	assets not			
	included on Form 990, Part X?								[	Yes	No
b	If "Yes," explain the arrangement in Part X	III and comp	olete the fol	lowing tab	ole:				••• -		
				0				Am	ount		
с	Beginning balance					1c					
	Additions during the year					1d					
е	Distributions during the year					1e					
f	Ending balance					1f					
2a	Did the organization include an amount on	Form 990.	Part X. line	21. for e	scrow		stodial a	account liabi	litv?	Yes	No
	If "Yes," explain the arrangement in Part X								-		
Par											
	Complete if the organization ans	wered "Yes	s" on Form	n 990, Pa	art IV, I	ine 1	0.				
		urrent year	<b>(b)</b> Prio		(c) Tw			(d) Three yea	rs back	<b>(e)</b> Four y	ears back
1.5	Beginning of year balance	_		-							
	Contributions										
	Net investment earnings, gains,										
С	and losses										
Ь	Grants or scholarships										
	Other expenditures for facilities										
e											
f	Administrative expenses										
	End of year balance										
g	Provide the estimated percentage of the c		and halana	o (lino 1a	column	(a)) k					
2 a	Board designated or quasi-endowment			e (iirie rg,	Column	(a)) I	ieiu as.				
b	Permanent endowment		_/0								
c	Temporarily restricted endowment	%									
•	The percentages on lines 2a, 2b, and 2c s		100%.								
3a	Are there endowment funds not in the pos			tion that	are hel	d and	admini	stered for th	ne		
	organization by:									Y	es No
	(i) unrelated organizations									3a(i)	
	(ii) related organizations									3a(ii)	
b	If "Yes" on line 3a(ii), are the related organ									3b	
4	Describe in Part XIII the intended uses of t		•								
_	VI Land, Buildings, and Equipment	_									
	Complete if the organization and	<u>swered "Ye</u>									
	Description of property	(a) Cost or (invest		(b) Cost o (ot	r other ba ther)	asis		umulated ciation	(c	I) Book valu	9
1a	Land		- /	(0)	- /						
	Buildings										
	Leasehold improvements										
	Equipment										
	Other										
Tota	. Add lines 1a through 1e. (Column (d) mu	st equal Form	n 990, Part	X, columr	n (B), lir	ne 10c	.)				

Schedule D (Form 990) 2016

Schedule D (Form 990) 2016		Page 3
Part VII Investments - Other Securities.		
		, Part IV, line 11b. See Form 990, Part X, line 12.
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F) (G)		
(B) (H)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) ►		
Part VIII Investments - Program Related.		
	"Yes" on Form 990	, Part IV, line 11c. See Form 990, Part X, line 13.
(a) Description of investment	(b) Book value	(c) Method of valuation:
		Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.)		
Part IX Other Assets.	l "Vaa" op Earm 000	, Part IV, line 11d. See Form 990, Part X, line 15.
		(b) Book value
	scription	(b) BOOK Value
(1) (2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col. (B) I	ine 15.)	· · · · · · · · · · · · · · · · · · ·
Part X Other Liabilities.		
	I "Yes" on Form 990	, Part IV, line 11e or 11f. See Form 990, Part X,
line 25.		
1. (a) Description of liability	(b) Book valu	e
(1) Federal income taxes		
(2) DUE TO AFFILIATES	455,9	. 222
(3)		
(4)		
(5)		
(6)		
(7) (8)		
(9)		
\-/	1	

 Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ►
 455,959.

 2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Х

Schedu	le D (Form 990) 2016		Page <b>4</b>
Part	XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Retur Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	n.	
1	Total revenue, gains, and other support per audited financial statements	1	13,059,527.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments		
b	Donated services and use of facilities	1	
c	Recoveries of prior year grants		
d	Other (Describe in Part XIII.)		
e	Add lines 2a through 2d	2e	
3	Subtract line <b>2e</b> from line <b>1</b>	3	13,059,527.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII.)	1	
c	Add lines 4a and 4b	4c	
5	Total revenue. Add lines <b>3</b> and <b>4c</b> . ( <i>This must equal Form 990, Part I, line 12.</i> )	5	13,059,527.
Part	XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Retu Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	ırn.	
1	Total expenses and losses per audited financial statements	1	14,158,125.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities		
b	Prior year adjustments		
c	Other losses. 2c		
d	Other (Describe in Part XIII.)		
e	Add lines 2a through 2d	2e	
3	Subtract line <b>2e</b> from line <b>1</b>	3	14,158,125.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII.) 4b		
c	Add lines 4a and 4b	4c	
5	Total expenses. Add lines <b>3</b> and <b>4c</b> . ( <i>This must equal Form 990, Part I, line 18.</i> )	5	14,158,125.
	XIII Supplemental Information.		
Provid	e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Pa	art V, li	ne 4; Part X, line

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

SEE PAGE 5

#### PART X, LINE 2:

IN ACCORDANCE WITH U.S. GAAP, ENVIRONMENTAL DEFENSE ACTION FUND (THE "REPORTING ORGANIZATION") MUST RECOGNIZE A TAX LIABILITY ASSOCIATED WITH TAX POSITIONS TAKEN FOR TAX RETURN PURPOSES WHEN IT IS MORE LIKELY THAN NOT THAT THE POSITION WILL NOT BE SUSTAINED UPON EXAMINATION BY A TAXING AUTHORITY. THE REPORTING ORGANIZATION DOES NOT BELIEVE IT HAS TAKEN ANY MATERIAL UNCERTAIN TAX POSITIONS AND, ACCORDINGLY, IT HAS NOT RECORDED ANY LIABILITY FOR UNRECOGNIZED TAX BENEFITS.

SCHEDULE I (Form 990)	Grants and Other Assistance to Organizations,		OMB No. 1545-0047
	Governments, and Individuals in the United States		2016
Department of the Treasury	Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. ► Attach to Form 990.		Open to Public
Internal Revenue Service	Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.		Inspection
Name of the organization		Employer ide	entification number
ENVIRONMENTAL DEFE	NSE ACTION FUND	90-008	80500

ENVIRONMENTAL DEFENSE ACTION FUND

#### Part I **General Information on Grants and Assistance**

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and X Yes the selection criteria used to award the grants or assistance? No

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

Part II Grants and Other Assistance to 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.

<b>1 (a)</b> 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 noncash assistance	(h) Purpose of grant or assistance
(1) MAJORITY FORWARD							ENVIRONMENTAL
700 13TH ST., WASHINGTON, DC 20005	47-4368320	501(C)4	200,000.				RIGHTS
(2) PARTNERSHIP PROJECT ACTION FUND							ENVIRONMENTAL
1501 M ST. NW, WASHINGTON, DC 20005	81-0606786	501(C)4	150,000.				RIGHTS
(3) LATINO VICTORY PROJECT							ENVIRONMENTAL
700 14TH ST. NW, WASHINGTON, DC 20005	46-4651149	OTHER	100,000.				RIGHTS
(4) NATIONAL WILDLIFE FEDERATION							ENVIRONMENTAL
11100 WILDLIFE CENTER DR., RESTON, VA 20190	53-0204616	501(C)3	70,000.				RIGHTS
(5) MI FAMILIA VOTA							ENVIRONMENTAL
1710 E INDIAN SCHOOL RD., PHOENIX, AZ 85016	81-0668995	501(C)4	61,338.				RIGHTS
(6) ENVIRONMENTAL WORKING GROUP							ENVIRONMENTAL
1436 U ST. NW, WASHINGTON, DC 20009	52-2148600	501(C)3	50,000.				RIGHTS
(7) PENNSYLVANIA ENVIRONMENTAL COUNCIL, INC.							REFORM OF
22 TERMINAL WAY, PITTSBURGH, PA 15219	23-7286159	501(C)3	38,000.				NATURAL GAS
(8) CLEAR WATER ACTION							ENVIRONMENTAL
1444 I ST. NW, WASHINGTON, DC 20005	23-7128611	501(C)4	37,500.				RIGHTS
(9) PARTNERSHIP FOR RESPONSIBLE BUSINESS							ENVIRONMENTAL
P.O. BOX 1821, SANTA FE, NM 87504	27-3975486	501(C)3	35,250.				RIGHTS
(10) CONSERVATION FOR RESPONSIBLE STEWARDSHIP							ENVIRONMENTAL
11705 SUMACS ST. , OAKTON, VA 22124	31-1683604	501(C)3	30,000.				RIGHTS
(11) BLUE GREEN ALLIANCE							BGA EVENT
1300 GODWARD ST. NE, MINNEAPOLIS, MN 55413	26-4086284	501(C)4	25,000.				SPONSORSHIP
(12) CALIFORNIA LEAGUE OF CONSERVATION VOTERS							ANNUAL
350 FRANK H. OGAWA PLAZA, OAKLAND, CA 94612	94-3169564	501(C)4	25,000.				CONTRIBUTION
2 Enter total number of section 501(c)(3) and	government	organizations lis	sted in the line 1 tak	ble			
3 Enter total number of other organizations list	ted in the line	1 table					

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

Schedule I (Form 990) (2016)

JSA 6E1288 1.000

SCHEDULE I (Form 990)	Grants and Other Assistance to Organizations, Governments, and Individuals in the United States		OMB №. 1545-0047
Department of the Treasury Internal Revenue Service	Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. ► Attach to Form 990. ► Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.		20 <b>16</b> Open to Public Inspection
Name of the organization		Employer id	entification number
ENVIRONMENTAL DEFEN	SE ACTION FUND	90-008	30500

Part I **General Information on Grants and Assistance** 

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? X Yes No

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

Part II Grants and Other Assistance to 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.

<b>1 (a)</b> 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 noncash assistance	(h) Purpose of grant or assistance
(1) LEAGUE OF CONSERVATION VOTERS							ENVIRONMENTAL
1920 L ST. NW, WASHINGTON, DC 20036	52-1379661	501(C)3	25,000.				RIGHTS
(2) PROGRESSNOW NEW MEXICO							ENVIRONMENTAL
625 SILVER AVE. SW, ALBUQUERQUE, NM 87102	45-4130072	501(C)4	25,000.				RIGHTS
(3) FARMERS EDUCATIONAL & CO-OPERATIVE UNION							ENVIRONMENTAL
7900 E UNION AVE., DENVER, CO 80237	84-6025998	501(C)5	24,750.				RIGHTS
(4) MAKE NORTH CAROLINA FIRST							ENVIRONMENTAL
P.O. BOX 648, RALEIGH, NC 27602	46-3981642	OTHER	20,000.				RIGHTS
(5) SEAFOOD HARVESTERS OF AMERICA EDUCATION FUN							ENVIRONMENTAL
3033 WILSON BLVD, ARLINGTON, VA 22201	46-5539528	501(C)3	20,000.				RIGHTS
(6) VOTEVETS ACTION FUND							ENVIRONMENTAL
303 PARK AVE. S, NEW YORK, NY 10010	51-0696352	OTHER	17,000.				RIGHTS
(7) TAXPAYERS FOR COMMON SENSE							ENVIRONMENTAL
651 PENNSYLVANIA AVE. SE ,	52-1941122	501(C)3	16,000.				RIGHTS
(8) NATIONAL COUNCIL OF LA RAZA ACTION FUND							ENVIRONMENTAL
1126 16TH ST. NW, WASHINGTON, DC 20036	45-5341145	501(C)4	15,000.				RIGHTS
(9) NATURAL RESOURCES COUNCIL OF MAINE							ENVIRONMENTAL
3 WADE ST., AUGUSTA, ME 04330	01-0270690	501(C)3	12,000.				RIGHTS
(10) CONSEVATION VOTERS NEW MEXICO							ENVIRONMENTAL
200 W DEVARGAS ST., SANTA FE, NM 87501	20-0016255	501(C)4	10,000.				RIGHTS
(11) WYOMING OUTDOOR COUNCIL							REFORM OF
262 LINCOLN ST., LANDER, WY 82520	83-0259411	501(C)3	7,500.				NATURAL GAS
(12) FARMERS EDUCATIONAL & CO-OPERATIVE UNION							ENVIRONMENTAL
5655 S YOSEMITE,	84-0406381	501(C)5	5,039.				RIGHTS
<ul> <li>2 Enter total number of section 501(c)(3) and</li> <li>3 Enter total number of other organizations list</li> </ul>							<u> </u>

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

Schedule I (Form 990) (2016)

JSA 6E1288 1.000

Page 2

#### Schedule I (Form 990) (2016)

## Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	<b>(b)</b> Number of recipients	(c) Amount of cash grant	<b>(d)</b> Amount of non-cash assistance	<b>(e)</b> Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
4					
5					
6					
7					
art IV Supplemental Information. Provid information.	e the information re	quired in Part I,	line 2, Part III, c	column (b); and any o	ther additional

PART I, LINE 2:

ENVIRONMENTAL DEFENSE ACTION FUND ("EDAF") HAS A NUMBER OF GRANTS AND

OTHER ASSISTANCE IT PROVIDES TO ORGANIZATIONS IN THE UNITED STATES. THE

MAJORITY OF THESE GRANTS ARE TO OTHER LIKE-MINDED ENTITIES THAT PERFORM

WORK ALONGSIDE OF EDAF IN THE ACCOMPLISHMENT OF ITS MISSION. EDAF

MONITORS THE PERFORMANCE OF THE GRANT RECIPIENTS BY WRITTEN REPORTS, SITE

VISITS, VERBAL COMMUNICATION AND REVIEW. PARTIAL PAYMENTS ARE TYPICALLY

MADE ON A GRANT UNTIL A PATTERN OF PROVEN ACHIEVEMENTS ON OBJECTIVES IS

DEMONSTRATED. IN THE END, THE GRANTEE TYPICALLY PREPARES A REPORT TO EDAF

ON THE USE OF GRANT FUNDS, BOTH BY ITSELF AND BY ANY SUB-GRANT

# Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	<b>(e)</b> Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
,					
art IV Supplemental Information. Provide the i information.	nformation re	equired in Part I,	line 2, Part III, c	column (b); and any of	ther additional

RECIPIENTS.

(Forr	SCHEDULE J (Form 990)       Compensation Information         Department of the Treasury Internal Revenue Service       For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees         Department of the Treasury Internal Revenue Service       Complete if the organization answered "Yes" on Form 990, Part IV, line 23.         Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.				OMB No. 1545-0047 20 <b>16</b> Open to Public Inspection					
	of the organization	,		Employer identification						
ENVI	IRONMENTAL	DEFENSE ACTION FUND		90-0080500						
Part		s Regarding Compensation								
i ai t						Yes	No			
1a	990, Part VII, First-cla Travel fo Tax inde		ovided any of the following to or for a person         provide any relevant information regarding         Housing allowance or residence for         Payments for business use of person         Health or social club dues or initiation         Personal services (such as, maid, ch	g these items. personal use nal residence on fees						
	or reimburse explain	ement or provision of all of the ex	ne organization follow a written policy re penses described above? If "No," com	plete Part III to	1b					
2	directors, trus		to reimbursing or allowing expenses D/Executive Director, regarding the items	-	2					
3	organization's related organ Comper Indepen	CEO/Executive Director. Check all that	nization used to establish the compensation at apply. Do not check any boxes for method e CEO/Executive Director, but explain in P Written employment contract Compensation survey or study Approval by the board or compensation	ds used by a art III.						
4	organization of	or a related organization:	Part VII, Section A, line 1a, with respect to	-	4.2	X				
a L			ayment?		4a	A	x			
b	-		ental nonqualified retirement plan?		4b		X			
C	If "Yes" to an	y of lines 4a-c, list the persons and p	ased compensation arrangement?		4c		X			
5	For persons l compensation	isted on Form 990, Part VII, Section A, n contingent on the revenues of:	rganizations must complete lines 5-9. , line 1a, did the organization pay or accrue							
					5a		X			
b	If "Yes" on lin	e 5a or 5b, describe in Part III.			5b		X			
6	compensation	n contingent on the net earnings of:	, line 1a, did the organization pay or accrue	-						
а	•				6a		X			
b	•	rganization? e 6a or 6b, describe in Part III.			6b		X			
7	payments not	described on lines 5 and 6? If "Yes," d	on A, line 1a, did the organization prov escribe in Part III		7		x			
8	to the initia	I contract exception described in I	paid or accrued pursuant to a contract the Regulations section 53.4958-4(a)(3)? If	"Yes," describe						
9	If "Yes" on I	ine 8, did the organization also foll	low the rebuttable presumption proced	lure described in	8		X			
Ear D					9					
r of Pa	aperwork Reduc	ction Act Notice, see the Instructions for Fo	UIII 330.	Schedu	.ne J (F0	nuu 880	JJZU16			

Schedule J (Form 990) 2016

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

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

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

		(B) Breakdown of	W-2 and/or 1099-MIS	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	<b>(iii)</b> Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	in column (B) reported as deferred on prior Form 990
ELIZABETH B. THOMPSON	(i)	0.	0.	0.	0.	0.	0.	0.
1PRESIDENT	(ii)	242,404.	35,000.	0.	22,751.	1,191.	301,346.	0.
FREDERIC D. KRUPP	(i)	0.	0.	0.	0.	0.	0.	0.
2EXECUTIVE DIRECTOR	(ii)	545,591.	105,000.	0.	39,200.	22,665.	712,456.	0.
CYNTHIA HALLENBECK	(i)	0.	0.	0.	0.	0.	0.	0.
3TREASURER (THRU 6/16)	(ii)	107,716.	0.	124,787.	11,361.	3,665.	247,529.	0.
	(i)							
4	(ii)							
	(i)							
5	(ii)							
	(i)							
6	(ii)							
	(i)							
7	(ii)							
	(i)							
8	(ii)							
	(i)							
9	(ii)							
	(i)							
10	(ii)							
	(i)							
	(ii)							
	(i)							
12	(ii)							
	(i)							
13	(ii)							
	(i)							
14	(ii)							
	(i)							
15	(ii)							
	(i)							
16	(ii)							

Schedule J (Form 990) 2016

Schedule J (Form 990) 2016

#### Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

PART I, LINE 3:

ENVIRONMENTAL DEFENSE FUND, INC. ("EDF"), A RELATED 501(C)(3)

ORGANIZATION, PAID COMPENSATION TO THE REPORTING ORGANIZATION'S TOP

MANAGEMENT OFFICIAL. EDF HAS ESTABLISHED THE COMPENSATION OF THE TOP

MANAGEMENT OFFICIAL USING COMPENSATION COMMITTEE, INDEPENDENT

COMPENSATION COMMITTEE, FORM 990 OF OTHER ORGANIZATIONS, COMPENSATION

SURVEY OR STUDY, AND APPROVAL BY THE BOARD OR COMPENSATION COMMITTEE.

PART I, LINE 4A:

CYNTHIA HALLENBECK, CFO THRU JUNE 30, 2016, RECEIVED A SEVERANCE PAYMENT OF \$124,787. FROM ENVIRONMENTAL DEFENSE FUND, INC. ("EDF"), A RELATED 501(C)(3) ORGANIZATION, WHICH IS REPORTED ON PART II, COLUMN B(III). Page 3

## SCHEDULE O (Form 990 or 990-EZ)

## Supplemental Information to Form 990 or 990-EZ

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



Department of the Treasury Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. Internal Revenue Service Name of the organization ENVIRONMENTAL DEFENSE ACTION FUND

FORM 990, PART VI, SECTION A, LINE 6: ENVIRONMENTAL DEFENSE ACTION FUND HAS TWO CLASSES OF MEMBERS, THE

DIRECTORS-MEMBERS AND THE DONOR-MEMBERS.

FORM 990, PART VI, SECTION A, LINE 7A:

UNDER THE BYLAWS OF ENVIRONMENTAL DEFENSE ACTION FUND ("EDAF") THE BOARD OF DIRECTORS OF ENVIRONMENTAL DEFENSE FUND, INC. ("EDF"), A RELATED 501(C)(3) ORGANIZATION, HAS THE RIGHT TO APPOINT CANDIDATES TO BE ELECTED BY THE EDAF BOARD TO REPLACE DIRECTORS WHOSE TERMS HAVE EXPIRED AND THE RIGHT TO APPOINT DIRECTORS TO FILL VACANCIES.

```
FORM 990, PART VI, SECTION A, LINE 7B:
```

UNDER THE BYLAWS OF ENVIRONMENTAL DEFENSE ACTION FUND ("EDAF") THE BOARD OF DIRECTORS OF ENVIRONMENTAL DEFENSE FUND, INC. ("EDF"), A RELATED 501(C)(3) ORGANIZATION, HAS THE RIGHT TO FIX THE NUMBER OF DIRECTORS ON THE EDAF BOARD FROM TIME TO TIME AND THE RIGHT TO REMOVE DIRECTORS FROM THE EDAF BOARD.

FORM 990, PART VI, SECTION B, LINE 11B:

THE FORM 990 IS PREPARED BY A NATIONALLY RENOWNED ACCOUNTING FIRM IN CONJUNCTION WITH THE ORGANIZATION'S FINANCIAL DEPARTMENT AND MEMBERS OF SENIOR MANAGEMENT. THE AUDIT COMMITTEE THEN REVIEWS ANY SIGNIFICANT ISSUES OR JUDGEMENTS RELATING TO DISCLOSURES IN THE REPORTING ORGANIZATION'S FORM 990. AFTERWARDS, A COPY OF THE DRAFT FORM 990 IS

Schedule O (Form 990 or 990-EZ) 2016					
Name of the organization	Employer identification number				
ENVIRONMENTAL DEFENSE ACTION FUND	90-0080500				

CIRCULATED TO THE FULL BOARD OF DIRECTOR FOR DISCUSSION AND COMMENT PRIOR TO ITS FILING WITH THE IRS.

FORM 990, PART VI, SECTION B, LINE 12C:

IT IS THE RESPONSIBILITY OF ALL DIRECTORS AND EMPLOYEES OF THE ORGANIZATION TO FAMILIARIZE THEMSELVES WITH THE CONFLICTS OF INTEREST POLICY AND TO ENSURE COMPLIANCE OF RELATED PARTIES WITH IT. IN ADDITION TO THE DISCLOSURES REQUIRED BY THIS POLICY, EACH DIRECTOR AND KEY EMPLOYEE WAS PROVIDED WITH A STATEMENT TO COMPLETE AND RETURN INDICATING THAT THEY HAVE READ, UNDERSTAND AND ARE IN COMPLIANCE WITH THIS POLICY. DIRECTORS WHO KNOWINGLY OR UNKNOWINGLY VIOLATE THE POLICY ARE SUBJECT TO CENSURE OR REMOVAL AT THE DISCRETION OF THE BOARD OF DIRECTORS. EMPLOYEES WHO KNOWINGLY OR UNKNOWINGLY VIOLATE THE POLICY WILL BE SUBJECT TO DISCIPLINARY ACTION, INCLUDING POSSIBLE DISMISSAL. ALL NEW BOARD MEMBERS ARE REQUIRED MAKE CONFLICT OF INTEREST DISCLOSURES.

FORM 990, PART VI, SECTION B, LINES 15A AND 15B: THE ORGANIZATION DOES NOT COMPENSATE ANY OFFICER OR KEY EMPLOYEE.

FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST.

Name of the organization ENVIRONMENTAL DEFENSE ACTION FUND Employer identification number 90-0080500 ATTACHMENT 1

Page 2

FORM 990, PART VI, LINE 17 - STATES

AL, AK, AR, CA, CO, CT,

FL,GA,IL,KS,KY,LA,ME,MA,MI,

MN, MS, MO, NV, NH, NJ, NY, ND, OH, OK, OR, PA,

RI,SC,TN,UT,VA,WA,WV,WI,

			-

ATTACHMENT	2	

## 990, PART VII- COMPENSATION OF THE FIVE HIGHEST PAID IND. CONTRACTORS

NAME AND ADDRESS	DESCRIPTION OF SERVICES	COMPENSATION
SKDKNICKERBOCKER LLC 1150 18TH STREET NW, SUITE 800 WASHINGTON, DC 20036	MEDIA ADVERTISING	1,410,687.
BRASS TACTICS, LLC 1140 CONNECTICUT AVE, NW SUITE 800 WASHINGTON, DC 20001	CONSULTING FEES	476,017.
MERCURY PUBLIC AFFAIRS, LLC 250 GREENWICH STREET, 36 FL NEW YORK, NY 10007	MEDIA ADVERTISING	192,317.
GLOBAL STRATEGY GROUP, LLC 895 BROADWAY, 5TH FLOOR NEW YORK, NY 10003	PUBLIC RELATIONS	186,708.
K&L GATES LLP 210 SIXTH AVENUE PITTSBURGH, PA 15222	LEGAL COUNSEL	156,550.

		-	ATTACHMENT	3							
FORM 990, PART IX - OTHER FEES											
	(A) TOTAL	(B) PROGRAM	(C) MANAGEMENT	(D) FUNDRAISING							
DESCRIPTION	FEES	SERVICE EXP.	AND GENERAL	EXPENSES							
OTHER PROFESSIONAL FEES	3,601,600.	3,585,333.	11,932.	4,335.							

Schedule O (Form 990 or 990-EZ) 2016

Schedule O (Form 990 or 990-EZ) 2016				Page <b>2</b>						
Name of the organization	ame of the organization									
ENVIRONMENTAL DEFENSE ACTION FUND			90-0080	500						
		1	ATTACHMENT	3 (CONT'D)						
FORM 990, PART IX - OTHER FEES										
	(A)	(B)	(C)	(D)						
	TOTAL	PROGRAM	MANAGEMENT	FUNDRAISING						
DESCRIPTION	FEES	SERVICE EXP.	AND GENERAL	EXPENSES						
TOTALS	3,601,600.	3,585,333.	11,932.	4,335.						

OMB No. 1545-0047

Open to Public

Inspection

6

2

Employer identification number

90-0080500

## **Related Organizations and Unrelated Partnerships**

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

Attach to Form 990.

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

Department of the Treasury Internal Revenue Service Name of the organization

SCHEDULE R

(Form 990)

ENVIRONMENTAL DEFENSE ACTION FUND

## Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	<b>(b)</b> Primary activity	<b>(c)</b> Legal domicile (state or foreign country)	<b>(d)</b> Total income	(e) End-of-year assets	(f) Direct controlling entity
(1)	-				
(2)	-				
(3)	-				
(4)	-				
(5)					
(6)	-				

Part II

## Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	Section 5 cont	<b>3)</b> 512(b)(13) rolled ity?
						Yes	No
(1) ENVIRONMENTAL DEFENSE FUND, INC. 11-6107	128						
275 PARK AVENUE SOUTH NEW YORK, NY 10010	ENVIRONMENTAL	NY	501(C)(3)	7	N/A		Х
(2) CALIFORNIA FISHERIES FUND, INC. 26-0873	3741						
123 MISSION STREET, 28TH FLOOR SAN FRANCISCO, CA 941	<sup>.05</sup> REFORM	CA	501(C)(3)	12A	N/A		Х
(3) ENVIRONMENTAL DEFENSE FUND DE MEXICO, AC							
REVOLUCIÓN NO. 345 LA PAZ, MX CP 23000	OCEAN PRESER.	MX	N/A	N/A	N/A		Х
(4) ENVIRONMENTAL DEFENSE FUND EUROPE							
6-10 BOROUGH HIGH STREET LONDON, UK SE1 9QQ	OCEANS/ENERGY	UK	N/A	N/A	N/A		Х
(5)							
(6)							
(7)							

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

Schedule R (Form 990) 2016

JSA

Schedule R (Form 990) 2016

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

(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	<b>(d)</b> Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	<b>(g)</b> Share of end-of- year assets	1 .	h) nortionate ations?	(i) Code V - UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene man	j) eral or aging ther?	<b>(k)</b> Percentage ownership
		country)					Yes	No		Yes	No	
(1)												
(0)												
(2)												
(3)												
(4)												
(5)												
(6)												
(7)												

# Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	<b>(c)</b> Legal domicile (state or foreign country)	<b>(d)</b> Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	<b>(f)</b> Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b) control entity	)(13) olled
(1)								Yes N	10
(2)									
(3)									_
(4)									_
(5)									
(6)									
(7)									

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Page **3** 

Schedule R (Form 990) 2016

Part V	Transactions With Related Organizations. Complete if the organization answered "Ye	es" on Form 990, Par	t IV, line 34, 35b, or 36.										
Note: (	Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.					Yes	No						
	ring the tax year, did the organization engage in any of the following transactions with one or more i						X						
<b>a</b> Re	(1)												
<b>b</b> Gi	b Gift, grant, or capital contribution to related organization(s)												
<b>c</b> Gi	it, grant, or capital contribution from related organization(s)				1c	Х							
d Lo	ans or loan guarantees to or for related organization(s)				1d		Х						
e Lo	ans or loan guarantees by related organization(s)				1e	Х							
6 D.							v						
f Di	vidends from related organization(s)		• • • • • • • • • • • • • • • • • • • •		1f		X X						
	le of assets to related organization(s)				1g		X						
h Pu	rchase of assets from related organization(s)		•••••	• • • • •	1h		X						
I EX	change of assets with related organization(s)		•••••	• • • • •	1i		X						
j Le	ase of facilities, equipment, or other assets to related organization(s)		• • • • • • • • • • • • • • • • • • • •	• • • • •	1j	_							
<b>k</b>	as a of facilities againment or other assets from related arganization(c)				1k		Х						
	ase of facilities, equipment, or other assets from related organization(s)		•••••	• • • • •	1K 1I		X						
n Pe	<ul> <li>Performance of services or membership or fundraising solicitations for related organization(s)</li> <li>m Performance of services or membership or fundraising solicitations by related organization(s)</li> </ul>												
	aring of paid employees with related organization(s)				1n 1o	X X							
0 31				• • • • •	10								
p Re	imbursement paid to related organization(s) for expenses.				1p		Х						
	imbursement paid by related organization(s) for expenses				1q		X						
9 100					- 4								
<b>r</b> Ot	her transfer of cash or property to related organization(s)				1r		Х						
s Ot	her transfer of cash or property from related organization(s).				1s		Х						
2 If t	he answer to any of the above is "Yes," see the instructions for information on who must complete t	his line, including cove	red relationships and transa	action thres									
	(a)	(b)	(c)		(d)								
	Name of related organization	Transaction type (a-s)	Amount involved	Method c amour			g						
		iypo (u o)		anou	10 11100	wou							
(1)													
(2)													
(3)													
(4)													
<i>(</i> <b>-</b> )													
(5)													
$(\mathbf{c})$													
(6)			0-6	edule R (F	orm 0	001	2016						
JSA 6E1309 1.00	00		3ch	ieuule K (F	orm a	30) 4	1010						

Page 4

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V - UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No		Yes	No		Yes	No	<u> </u>	
1)	_												
2)													
3)	_												
4)													
5)													
6)													
7)													
8)													
9)													
0)													
1)													
2)													
3)													
4)													
5)													
6)													<u> </u>

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Schedule R (Form 990) 2016

 Part VII
 Supplemental Information

 Provide additional information for responses to questions on Schedule R. See instructions.