* *	PUBLIC	DISCLOSURE	COPY	* 1
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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.

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



X Yes

\_\_ No

Department of the Treasury Internal Revenue Service

Form

990

A	⊦or th	e 2016 calendar year, or tax year beginning	and ending		
B	Check if applicat	le: C Name of organization		D Employer identification	ation number
	Addr chan				
	Name Name	Doing business as		52-21	48600
	Initia returi		Room/suite		
	Final	1436 U STREET, NW	100	(202)	
_	termi ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	12,282,287.
		WASHINGION, DC 20005		H(a) Is this a group ret	urn
	Appli tion pend			for subordinates?	
		SAME AS C ABOVE		H(b) Are all subordinates inc	
		empt status: $X 501(c)(3) = 501(c) ( ) \blacktriangleleft$ (insert no.) 4947(a	)(1) or 🛄 527	,	st. (see instructions)
			1	H(c) Group exemption	
		f organization: X Corporation Trust Association Other	L Year	of formation: 1999 M	State of legal domicile: DC
F	art I	Summary Briefly describe the organization's mission or most significant activities: WI		עדייסרווכי סדפי	
e	1	EDUCATION, WE DRIVE CONSUMER CHOICE AN		ACTION	
Governance	2	Check this box			ucto.
ver	3				14
ဗီ	4	Number of independent voting members of the governing body (Part VI, line 1a)			13
s S	5	Total number of individuals employed in calendar year 2016 (Part V, line 2a)		·····	87
itie	6	Total number of volunteers (estimate if necessary)			23
Activities &	-	Total unrelated business revenue from Part VIII, column (C), line 12			0.
◄		Net unrelated business taxable income from Form 990-T, line 34			0.
				Prior Year	Current Year
Ð	8	Contributions and grants (Part VIII, line 1h)		11,849,566.	10,261,640.
enu	9	Program service revenue (Part VIII, line 2g)		893,510.	533,616.
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		9,098.	13,577.
ш	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		-439,943.	-294,173.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 1		12,312,231.	10,514,660.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
ses	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-		6,900,225.	7,050,534.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		376,714.	62,827.
Щ		Total fundraising expenses (Part IX, column (D), line 25) ▶ 1,034		4 077 061	2 776 607
_		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		4,077,061. 11,354,000.	3,776,607.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		958,231.	10,889,968. -375,308.
- 2	19	Revenue less expenses. Subtract line 18 from line 12			
ance		Tatal accests (Dart V, line 10)	В	eginning of Current Year 6,868,256.	End of Year 6,327,581.
Asse	20 21	Total assets (Part X, line 16) Total liabilities (Part X, line 26)		718,889.	546,066.
Net Assets or Fund Balances	22	Net assets or fund balances. Subtract line 21 from line 20		6,149,367.	5,781,515.
P	art II			0,220,00,0	0,101,0101
Unc	ler pen	alties of perjury, I declare that I have examined this return, including accompanying sche	dules and staten	nents, and to the best of my	knowledge and belief, it is
true	, corre	ct, and complete. Declaration of preparer (other than officer) is based on all information	of which prepare	r has any knowledge.	
Sig	n	Signature of officer		Date	
He	re	SCOTT MALLAN, VP FINANCE & COO			
		Type or print name and title			
_		Print/Type preparer's name Preparer's signature	- I.	Date Check	
Pai		FRANK H. SMITH	wh	L0/13/17 self-employed	P00639053
	parer	Firm's name RAFFA, P.C.		Firm's EIN 🕨	52-1511275
USE	Only	Firm's address 1899 L STREET, NW, SUITE 850 WASHINGTON, DC 20036			2) 022 E000
		WASHINGTON, DC 20036		I Prione no. ( 20	2) 822-5000

632001 11-11-16	LHA For Paperwor	k Reduction Act Notice, see t	he separate ins	tructions.		Form <b>990</b> (2016)
						COPY
	* * *	ELECTRONICALLY	FILED O	10/13/2017	* * *	

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

orm	990 (2016) ENVIRONMENTAL WORKING GROUP	52-2148600	Page
Par	t III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		🖸
1	Briefly describe the organization's mission:		
	FOR OVER 23 YEARS THE ENVIRONMENTAL WORKING GROUP (EWG COMMITTED TO EMPOWERING PEOPLE TO LIVE HEALTHIER LIVES	) HAS BEEN	
	ENVIRONMENTS. WE ARE A NONPROFIT RESEARCH AND ADVOCACY		
	WITH A COMMUNITY MADE UP OF MILLIONS OF CONSUMERS WHO		
		STAND-UP FOR	
2	Did the organization undertake any significant program services during the year which were not listed on the		X
	prior Form 990 or 990-EZ?	Yes	
_	If "Yes," describe these new services on Schedule O.		v.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services	s?Yes	X
	If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three largest program services, a		
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to ot	hers, the total expenses,	and
	revenue, if any, for each program service reported.	260	007
1a		enue \$ <u>268</u> , E ABLE TO TRU	
			51
	THAT THE PRODUCTS THEY ARE BUYING ARE SAFE AND WON'T CA		NOT
	THEIR HEALTH OR THEIR FAMILIES. OUR SIMPLE THEORY IS UN		NOT
	THE REALITY IN TODAY'S CHEMICAL SAFETY REGULATORY ENVI		
	SCIENCE PROGRAM HAS TWO PRIMARY OBJECTIVES: FIRST, TO		TINO
	CONSUMER BEHAVIOR BY DIRECTLY INFORMING AND MOTIVATING		
	TO ADOPT HABITS OF ENVIRONMENTAL HEALTH, USING ORIGINAL		00.1
	CHEMICALS OF CONCERN FOUND IN EVERYDAY ENVIRONMENTS. SI	-	
	INFLUENCE MASS MARKET CHANGE BY DISRUPTING THE FOOD, HO AND PERSONAL CARE PRODUCT MARKETS THROUGH EVIDENCE-BAS		
			IN
	TOXIC INGREDIENTS AND CONSUMER PRESSURE FOR SAFER ALTER	KNATIVES.	
	2 147 406	11	022
4b	(Code: )(Expenses \$ 3,147,496. including grants of \$ ) (Rev. WATER AND AGRICULTURE - AT EWG WE WANT YOU TO GET TO KI		022
	ENVIRONMENT SO YOU CAN BETTER PROTECT YOUR HEALTH. EWG		ттт
	PEOPLE START WITH HEALTHY LAND. OUR CONSERVATION PROGRA		птп
	PROTECT THE SOURCE OF OUR FOOD: OUR SOIL AND WATER. THE		
	ONGOING PROJECTS TO PROTECT DRINKING WATER FROM AGRICU		
	FRACKING CHEMICALS, AND OIL AND GAS DRILLING; AND TO PI		
	PESTICIDES, EROSION AND CONTAMINATION FROM THESE SAME		E D
	THIS WORK TO PROTECT OUR NATURAL RESOURCES BECAUSE THEY		
	IRREPLACEABLE, BUT ALSO BECAUSE POLLUTION IN OUR ENVIRO		
	BECOMES POLLUTION IN OUR BODIES.		
	EWG IS WORKING TO TRANSFORM U.S. AGRICULTURAL SYSTEMS	FOR THE	
4c	(Code: ) (Expenses \$ 760, 186 • including grants of \$ ) (Rev	252	597
тс	HEALTHY CHILD HEALTHY WORLD - AS A PROGRAM OF EWG, HEAL		
	HEALTHY WORLD (HCHW) CREATES TARGETED EDUCATIONAL RESO		NTS
	AND CAREGIVERS CAN MAKE INFORMED DECISIONS TO PROTECT		
	DEVELOPMENT OF OUR MOST PRECIOUS RESOURCE-OUR CHILDREN		-
		<u> </u>	
1d	Other program services (Describe in Schedule O.)		
	(Expenses \$ 898,177 • including grants of \$ ) (Revenue \$	١	
10	Total program service expenses 8,954,891.	)	
-0		Form <b>9</b>	90.00
30000	SEE SCHEDULE O FOR CONTINUATION		20 (21
2002	2 11-11-16 SEE SCHEDULE O FOR CONTINUATION		
11	013 786783 EWG 2016.04030 ENVIRONMENTAL WORKI		
. т	UIS 100105 EWG ZUIO.U4USU ENVIKUNMENTAL WURKI	ING GROUP LWG	

Form 990 (2016)

Part IV Checklist of Required Schedules

ENVIRONMENTAL WORKING GROUP

			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	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		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	Х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		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? If "Yes," complete Schedule D, Part 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? If "Yes," complete Schedule D, Part II	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 debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.			
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	х	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
с	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000	4.41-		x
45	or more? <i>If "Yes," complete Schedule F, Parts I and IV</i> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	14b		
15		15		x
16	foreign organization? If "Yes," complete Schedule F, Parts II and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	15		
10	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		x
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	х	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G. Part III	19		x

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ENVIRONMENTAL WORKING GROUP

Part IV 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		x
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	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		X
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		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			x
~~	Schedule L, Part I	25b		_ <u> </u>
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		x
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			v
	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):	00-		x
a L	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		X
b	A family member of a current or former officer, director, trustee, or key employee? <i>If</i> "Yes," <i>complete Schedule L, Part IV</i> An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	200		
Ŭ	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? <i>If</i> "Yes," <i>complete Schedule M</i>	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified 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, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			v
05	Part V, line 1	34		X X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		
α	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)? <i>If</i> "Yes," <i>complete Schedule R, Part V, line 2</i>	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	330		
	If "Yes," complete Schedule R, Part V, line 2	36		x
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		x
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	Х	

Form **990** (2016)



Form	990 (2016) ENVIRONMENTAL WORKING GROUP 52-2148	600	Р	age 5			
Pai	t V Statements Regarding Other IRS Filings and Tax Compliance						
	Check if Schedule O contains a response or note to any line in this Part V						
-			Yes	No			
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 21						
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b						
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	-					
-	(gambling) winnings to prize winners?	1c	X				
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,						
Lu	filed for the calendar year ending with or within the year covered by this return 2a 87						
h	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	x				
D		20					
0-	<b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)	0-		x			
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a					
	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	3b					
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			v			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X			
b	If "Yes," enter the name of the foreign country:						
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).						
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X			
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X			
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c					
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			
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts						
	were not tax deductible?	6b					
7	Organizations that may receive deductible contributions under section 170(c).						
а	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	Х				
	<b>b</b> If "Yes," did the organization notify the donor of the value of the goods or services provided?						
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required						
-	to file Form 8282?	7c		x			
Ь	If "Yes," indicate the number of Forms 8282 filed during the year 7d						
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X			
		7e 7f		X			
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?						
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g					
_	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 have excess business holdings at any time during the year?	8					
9	Sponsoring organizations maintaining donor advised funds.						
	Did the sponsoring organization make any taxable distributions under section 4966?	9a	ļ				
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b					
10	Section 501(c)(7) organizations. Enter:						
а	Initiation fees and capital contributions included on Part VIII, line 12						
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b						
11	Section 501(c)(12) organizations. Enter:						
а	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.)						
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a					
	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.						
	Is the organization licensed to issue qualified health plans in more than one state?	13a					
u	<b>Note.</b> See the instructions for additional information the organization must report on Schedule O.	100					
h	Enter the amount of reserves the organization is required to maintain by the states in which the						
u	• • • • • • • • • • • • • • • • • • • •						
_	organization is licensed to issue qualified health plans 13b	-					
	Enter the amount of reserves on hand			v			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X			
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b					

ENVIRONMENTAL WORKING GROUP

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#### ENVIRONMENTAL WORKING GROUP

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Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

	tion A. Governing Body and Management				Yes	Т
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	14	4	. 03	†
	If there are material differences in voting rights among members of the governing body, or if the governing					
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.					
b	Enter the number of voting members included in line 1a, above, who are independent	1b	1	3		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	-	any other			
_	officer, director, trustee, or key employee?			2	Х	
3	Did the organization delegate control over management duties customarily performed by or under					-
	of officers, directors, or trustees, or key employees to a management company or other person?			3		
4	Did the organization make any significant changes to its governing documents since the prior Form			4		-
5	Did the organization become aware during the year of a significant diversion of the organization's a			5		-
6	Did the organization have members or stockholders?			6		-
	Did the organization have members, stockholders, or other persons who had the power to elect or			-		-
74	more members of the governing body?			7a		
b	Are any governance decisions of the organization reserved to (or subject to approval by) members.			74		-
N	persons other than the governing body?		,	7b		
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the y			15		
			-	80	х	1
	The governing body? Each committee with authority to act on behalf of the governing body?			8a 8b	X	-
ь 9				00		-
J	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be re organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9		
	tion B. Policies (This Section B requests information about policies not required by the Internal			9		-
		ic venu			Yes	_
0-	Did the exception have lead chapters, branches, or affiliates?			10a	163	-
	Did the organization have local chapters, branches, or affiliates?			104		-
b	If "Yes," did the organization have written policies and procedures governing the activities of such			104		
	and branches to ensure their operations are consistent with the organization's exempt purposes?			10b	X	_
	Has the organization provided a complete copy of this Form 990 to all members of its governing bo	ay berc	ore filling the form?	11a		_
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			10-	х	
	Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i> Were officers, directors, or trustees, and key employees required to disclose annually interests that could give ri			12a	X	_
				12b		_
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If			10	x	
~	in Schedule O how this was done			12c	X	_
	Did the organization have a written whistleblower policy?			13	X	_
4	Did the organization have a written document retention and destruction policy?			14	~	_
5	Did the process for determining compensation of the following persons include a review and appro		ndependent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision				v	
	The organization's CEO, Executive Director, or top management official			15a	X	_
b	Other officers or key employees of the organization			15b	X	_
-	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).					
6a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrang	ement v	with a			
	taxable entity during the year?			16a		
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate	-	-			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the org	anizatic	on's			
	exempt status with respect to such arrangements?			16b		_
	tion C. Disclosure	<u></u>		<u></u>	<del>.</del>	-
7	List the states with which a copy of this Form 990 is required to be filed $\blacktriangleright$ AL , AK , AZ , AR ,					-
8	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990	-T (Sect	tion 501(c)(3)s only)	availab	le	
	for public inspection. Indicate how you made these available. Check all that apply.					
	Own website Another's website X Upon request Other (expla	in in Sci	hedule O)			
9	Describe in Schedule O whether (and if so, how) the organization made its governing documents, or	onflict o	of interest policy, ar	nd finan	cial	
	statements available to the public during the tax year.					
	Otate the name address and talendance number of the name of the name of the name	ooks a	nd records:			_
20	State the name, address, and telephone number of the person who possesses the organization's to					
20	SCOTT MALLAN - (202) 667-6982					_
20	SCOTT MALLAN - (202) 667-6982	09-3	987		9 <b>90</b>	-

X

Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensate
	mployees, 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.

Name and Title         Average hours per week bit any hours for inclusted in a structure bit any hours for below line)         Depotable and bit any bit any bit any hours for bit any bit an	(A)	(B)	) (C)				-		(D)	(E)	(F)
hours per week (list any hours for pelated organizations (list set and an electronic and an electronic organizations) (list set and an electronic and an electronic organizations) (list set and an electronic and electronic organizations) (list set and an electronic organizations) (list set an electronic organizations) (list set and an electronic organizations) (list set and an electronic organizations) (list set and electronic organizations) (list set an electronic organizations) (list set an electronic organizations) (list set a			Position					000			
Week (list ary burs for line)         Week (list ary burs for line)         Inom (list ary line)         Inom (list ary line)		hours per	box	, unle	ss per	rson i	is bot	h an	compensation	compensation	amount of
(1)         KEN COOK         40.00         x         x         x         295,000.         0.         32,042.           (2)         CRACL MCDONNELL         2.00         x         x         x         0.         0.         0.           (3)         BILL ROSS         2.00         x         x         x         0.         0.         0.           (4)         DRUMMOND PIKE         2.00         x         x         0.         0.         0.           (4)         DRUMMOND PIKE         2.00         x         x         0.         0.         0.           (5)         MAI ARONSON         2.00         x         x         0.         0.         0.           (6)         DAVID BAKER         2.00         x         0.         0.         0.         0.           (7)         JENNIFER CALDWELL         2.00         x         0.         0.         0.         0.           (8)         ROB FETHERSTONHAUGH         2.00         x         0.         0.         0.         0.           (10)         MEMBER         2.00         X         0.         0.         0.         0.           (11) DR.         MARK HYMAN		week		cer an	dad	irecto	or/trus	tee)	from		
(1)         KEN COOK         40.00         x         x         x         295,000.         0.         32,042.           (2)         CRACL MCDONNELL         2.00         x         x         x         0.         0.         0.           (3)         BILL ROSS         2.00         x         x         x         0.         0.         0.           (4)         DRUMMOND PIKE         2.00         x         x         0.         0.         0.           (4)         DRUMMOND PIKE         2.00         x         x         0.         0.         0.           (5)         MAI ARONSON         2.00         x         x         0.         0.         0.           (6)         DAVID BAKER         2.00         x         0.         0.         0.         0.           (7)         JENNIFER CALDWELL         2.00         x         0.         0.         0.         0.           (8)         ROB FETHERSTONHAUGH         2.00         x         0.         0.         0.         0.           (10)         MEMBER         2.00         X         0.         0.         0.         0.           (11) DR.         MARK HYMAN			rector							•	
(1)         KEN COOK         40.00         x         x         x         295,000.         0.         32,042.           (2)         CRACL MCDONNELL         2.00         x         x         x         0.         0.         0.           (3)         BILL ROSS         2.00         x         x         x         0.         0.         0.           (4)         DRUMMOND PIKE         2.00         x         x         0.         0.         0.           (4)         DRUMMOND PIKE         2.00         x         x         0.         0.         0.           (5)         MAI ARONSON         2.00         x         x         0.         0.         0.           (6)         DAVID BAKER         2.00         x         0.         0.         0.         0.           (7)         JENNIFER CALDWELL         2.00         x         0.         0.         0.         0.           (8)         ROB FETHERSTONHAUGH         2.00         x         0.         0.         0.         0.           (10)         MEMBER         2.00         X         0.         0.         0.         0.           (11) DR.         MARK HYMAN			or di	ee			ated			(W-2/1099-MISC)	
(1)         KEN COOK         40.00         x         x         x         295,000.         0.         32,042.           (2)         CRACL MCDONNELL         2.00         x         x         x         0.         0.         0.           (3)         BILL ROSS         2.00         x         x         x         0.         0.         0.           (4)         DRUMMOND PIKE         2.00         x         x         0.         0.         0.           (4)         DRUMMOND PIKE         2.00         x         x         0.         0.         0.           (5)         MAI ARONSON         2.00         x         x         0.         0.         0.           (6)         DAVID BAKER         2.00         x         0.         0.         0.         0.           (7)         JENNIFER CALDWELL         2.00         x         0.         0.         0.         0.           (8)         ROB FETHERSTONHAUGH         2.00         x         0.         0.         0.         0.           (10)         MEMBER         2.00         X         0.         0.         0.         0.           (11) DR.         MARK HYMAN			ustee	trust		ee	npens		(W-2/1099-MISC)		-
(1)         KEN COOK         40.00         x         x         x         295,000.         0.         32,042.           (2)         CRACL MCDONNELL         2.00         x         x         x         0.         0.         0.           (3)         BILL ROSS         2.00         x         x         x         0.         0.         0.           (4)         DRUMMOND PIKE         2.00         x         x         0.         0.         0.           (4)         DRUMMOND PIKE         2.00         x         x         0.         0.         0.           (5)         MAI ARONSON         2.00         x         x         0.         0.         0.           (6)         DAVID BAKER         2.00         x         0.         0.         0.         0.           (7)         JENNIFER CALDWELL         2.00         x         0.         0.         0.         0.           (8)         ROB FETHERSTONHAUGH         2.00         x         0.         0.         0.         0.           (10)         MEMBER         2.00         X         0.         0.         0.         0.           (11) DR.         MARK HYMAN			l ual tr	tional		nploy	st con yee	_			
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(3)         BILL ROSS         2.00         X         X         X         0.         0.         0.           VICE-CHAIR         X         X         X         0.         0.         0.         0.           (14)         DRUMOND PIRE         2.00         X         X         0.         0.         0.           TREASURER         2.00         X         X         0.         0.         0.           (6)         DAVID BAKER         2.00         X         0.         0.         0.           (7)         JENNIFER CALDWELL         2.00         X         0.         0.         0.           (7)         JENNIFER CALDWELL         2.00         X         0.         0.         0.           (8)         ROB FETHERSTONHAUGH         2.00         X         0.         0.         0.           (9)         CHISTINE GARDNER         2.00         X         0.         0.         0.           MEMBER         2.00         X         0.         0.         0.         0.           (11) DR. MARK HYMAN         2.000         X         0.         0.         0.         0.           MEMBER         X         0.	(2) CAROL MCDONNELL	2.00									
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(4) DRUMMOND FIKE         2.00         X         X         X         0.         0.         0.           (5) AMI ARONSON         2.00         X         X         0.         0.         0.         0.           (5) AMI ARONSON         2.00         X         X         0.         0.         0.         0.           (6) DAVID BAKER         2.00         X         0.         0.         0.         0.           (7) JENNIFER CALDWELL         2.00         X         0.         0.         0.         0.           (8) ROB FETHERSTONHAUGH         2.00         X         0.         0.         0.         0.           (9) CHRISTINE GARDNER         2.00         X         0.         0.         0.         0.           (10) MELISSA HUGHES         2.00         X         0.         0.         0.         0.           (11) DR. MARK HYMAN         2.00         X         0.         0.         0.         0.           (12) DR. HARVEY KARP         2.00         X         0.         0.         0.         0.           (13) NINA MONTEE KARP         2.00         X         0.         0.         0.         0.           (14) LAURA T. SEYDEL <td>(3) BILL ROSS</td> <td>2.00</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>	(3) BILL ROSS	2.00									
TREASURER         X         X         X         X         0.         0.         0.           (5)         AMI ARONSON         2.00         X         0.         0.         0.         0.           MEMBER         2.000         X         0.         0.         0.         0.           MEMBER         X         0.         0.         0.         0.         0.           (11) DR. MARK HYMAN         2.000         X         0.         0.         0.           (12) DR. HARVEY KA	VICE-CHAIR		Х		Х				0.	0.	0.
(5) AMT ARONSON         2.00         X         0.         0.         0.         0.           MEMBER         2.00         X         0. <td>(4) DRUMMOND PIKE</td> <td>2.00</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>	(4) DRUMMOND PIKE	2.00									
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(6)         DAVID BAKER         2.00         X         0.         0.         0.           MEMBER         X         0.         0.         0.         0.         0.         0.           (7)         JENNIFER CALDWELL         2.00         X         0.         0.         0.         0.           MEMBER         X         0.         0.         0.         0.         0.         0.           MEMBER         X         0.         0.         0.         0.         0.         0.           (8)         ROB FETHERSTONHAUGH         2.00         X         0.         0.         0.         0.           MEMBER         X         0.         0.         0.         0.         0.         0.           (10)         MELISSA HUGHES         2.00         X         0.         0.         0.         0.           (11)         DR.         MARK HYMAN         2.000         X         0.         0.         0.         0.           (12)         DR.         HARVEY KARP         2.000         X         0.         0.         0.         0.           (13)         NINA MONTEE KARP         2.000         X         0.	(5) AMI ARONSON	2.00									
MEMBER         X         0.         0.         0.         0.           (7) JENNIFER CALDWELL         2.00         X         0.         0	MEMBER		Х						0.	0.	0.
(7) JENNIFER CALDWELL       2.00       X       0.       0.       0.         MEMBER       X       0.       0.       0.       0.       0.         (8) ROB FETHERSTONHAUGH       2.00       X       0.       0.       0.       0.         MEMBER       X       0.       0.       0.       0.       0.       0.         (9) CHRISTINE GARDNER       2.00       X       0.       0.       0.       0.         MEMBER       X       0.       0.       0.       0.       0.       0.         (10) MELISSA HUGHES       2.000       X       0.       0.       0.       0.       0.         (11) DR. MARK HYMAN       2.000       X       0.       0.       0.       0.       0.         MEMBER       X       0.0       0.       0.       0.       0.       0.       0.         (11) DR. MARK HYMAN       2.000       X       0.       0.       0.       0.       0.       0.         MEMBER       X       0.00       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.	(6) DAVID BAKER	2.00									
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(8)         ROB FETHERSTONHAUGH         2.00         X         0. </td <td>(7) JENNIFER CALDWELL</td> <td>2.00</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>_</td>	(7) JENNIFER CALDWELL	2.00									_
MEMBER         X         0.         0.         0.           (9) CHRISTINE GARDNER         2.00         X         0.         0.         0.           MEMBER         X         0.         0.         0.         0.         0.           (10) MELISSA HUGHES         2.00         X         0.         0.         0.         0.           MEMBER         X         0.         0.         0.         0.         0.           (11) MELISSA HUGHES         2.00         X         0.         0.         0.           MEMBER         X         0.         0.         0.         0.           (11) DR. MARK HYMAN         2.00         X         0.         0.         0.           MEMBER         X         0.         0.         0.         0.         0.           (12) DR. HARVEY KARP         2.00         X         0.         0.         0.         0.           (13) NINA MONTEE KARP         2.00         X         0.         0.         0.         0.           (14) LAURA T. SEYDEL         2.00         X         0.         0.         0.         0.           VP FINANCE & COO         X         165,000.         0.	MEMBER		Х						0.	0.	0.
(9) CHRISTINE GARDNER       2.00       X       0.       0.       0.         MEMBER       X       0.       0.       0.       0.       0.         (10) MELISSA HUGHES       2.00       X       0.       0.       0.       0.         MEMBER       X       0.       0.       0.       0.       0.       0.         (11) DR. MARK HYMAN       2.00       X       0.       0.       0.       0.         MEMBER       X       0.       0.       0.       0.       0.       0.         (12) DR. HARVEY KARP       2.00       X       0.       0.       0.       0.       0.         MEMBER       X       0.       0.       0.       0.       0.       0.       0.         (13) NINA MONTEE KARP       2.00       X       0.       0.       0.       0.       0.         MEMBER       X       0.0       0.       0.       0.       0.       0.       0.         (14) LAURA T. SEYDEL       2.00       X       0.       0.       0.       0.       0.         (15) SCOTT MALLAN       40.00       X       165,000.       0.       15,169.       165,000. </td <td>(8) ROB FETHERSTONHAUGH</td> <td>2.00</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>_</td>	(8) ROB FETHERSTONHAUGH	2.00									_
MEMBER         X         0.	MEMBER		Х						0.	0.	0.
(10) MELISSA HUGHES       2.00       X       0.       0.       0.         MEMBER       X       0.       0.       0.       0.       0.         (11) DR. MARK HYMAN       2.00       X       0.       0.       0.       0.         MEMBER       X       0.       0.       0.       0.       0.       0.         (12) DR. HARVEY KARP       2.00       X       0.       0.       0.       0.         (13) NINA MONTEE KARP       2.00       X       0.       0.       0.       0.         (14) LAURA T. SEYDEL       2.00       X       0.       0.       0.       0.         MEMBER       X       0.       0.       0.       0.       0.       0.         (14) LAURA T. SEYDEL       2.00       X       165,000.       0.       15,169.         (15) SCOTT MALLAN       40.00       X       165,000.       0.       15,169.         (16) SCOTT FABER       40.00       X       233,438.       0.       24,261.         (17) CRAIG COX       40.00       X       207,500.       0.       17,294.		2.00									
MEMBER         X         0.			Х						0.	0.	0.
(11) DR. MARK HYMAN       2.00       X       0.       0.       0.         MEMBER       X       0.       0.       0.       0.       0.         (12) DR. HARVEY KARP       2.00       X       0.       0.       0.       0.         MEMBER       X       0.       0.       0.       0.       0.       0.         (13) NINA MONTEE KARP       2.00       X       0.       0.       0.       0.         MEMBER       2.00       X       0.       0.       0.       0.       0.         (14) LAURA T. SEYDEL       2.00       X       0.       0.       0.       0.       0.         MEMBER       X       0.       0.       0.       0.       0.       0.       0.         (14) LAURA T. SEYDEL       2.00       X       0.       0.       0.       0.       0.         (15) SCOTT MALLAN       40.00       X       165,000.       0.       15,169.         (16) SCOTT FABER       40.00       X       233,438.       0.       24,261.         (17) CRAIG COX       40.00       X       207,500.       0.       17,294.		2.00									•
MEMBER         X         0.			х						0.	0.	0.
(12) DR. HARVEY KARP       2.00       X       0.       0.       0.       0.         MEMBER       X       X       0.       0.       0.       0.       0.       0.         (13) NINA MONTEE KARP       2.00       X       0.       0.       0.       0.       0.         MEMBER       X       2.00       X       0.       0.       0.       0.         (14) LAURA T. SEYDEL       2.00       X       0.       0.       0.       0.         MEMBER       X       0.       0.       0.       0.       0.       0.         (15) SCOTT MALLAN       40.00       X       165,000.       0.       15,169.         (16) SCOTT FABER       40.00       X       233,438.       0.       24,261.         (17) CRAIG COX       40.00       X       207,500.       0.       17,294.		2.00									0
MEMBER         X         0.			х						0.	0.	0.
(13) NINA MONTEE KARP       2.00       X       0.       0.       0.       0.         MEMBER       X       2.00       X       0.       0.       0.       0.       0.         (14) LAURA T. SEYDEL       2.00       X       0.       0.       0.       0.       0.         MEMBER       X       0.       0.       0.       0.       0.       0.       0.         (15) SCOTT MALLAN       40.00       X       165,000.       0.       15,169.         (16) SCOTT FABER       40.00       X       233,438.       0.       24,261.         (17) CRAIG COX       40.00       X       207,500.       0.       17,294.		2.00	v						0	0	0
MEMBER       X       0.       0.       0.       0.         (14) LAURA T. SEYDEL       2.00       X       0.       0.       0.       0.         MEMBER       X       0.       0.       0.       0.       0.       0.         MEMBER       X       0.       0.       0.       0.       0.       0.         (15) SCOTT MALLAN       40.00       X       165,000.       0.       15,169.         (16) SCOTT FABER       40.00       X       233,438.       0.       24,261.         (17) CRAIG COX       40.00       X       207,500.       0.       17,294.		2 00	Δ						0.	0.	0.
(14) LAURA T. SEYDEL       2.00       X       0.       0.       0.       0.         MEMBER       X       40.00       X       165,000.       0.       0.       0.         (15) SCOTT MALLAN       40.00       X       165,000.       0.       15,169.         VP FINANCE & COO       X       165,000.       0.       15,169.         (16) SCOTT FABER       40.00       X       233,438.       0.       24,261.         (17) CRAIG COX       40.00       X       207,500.       0.       17,294.		2.00	v						0	0	0
MEMBER         X         0.         15,169.         0.         15,169.         0.         15,169.         0.         15,169.         0.         24,261.         0.         24,261.         0.         24,261.         0.         24,261.         0.         17,294.         0.         17,294.		2 00	^						0.	0.	0.
(15) SCOTT MALLAN       40.00       X       165,000.       0. 15,169.         VP FINANCE & COO       40.00       X       165,000.       0. 15,169.         (16) SCOTT FABER       40.00       X       233,438.       0. 24,261.         SENIOR VP GOVERNMENT AFFAIRS       X       207,500.       0. 17,294.		2.00	v						0	0	0
VP FINANCE & COO       X       165,000.       0.       15,169.         (16) SCOTT FABER       40.00       X       233,438.       0.       24,261.         SENIOR VP GOVERNMENT AFFAIRS       X       207,500.       0.       17,294.		10 00	<u>^</u>						0.	0.	0.
(16) SCOTT FABER       40.00       X       233,438.       0.24,261.         SENIOR VP GOVERNMENT AFFAIRS       40.00       X       207,500.       0.17,294.					x				165 000	0	15 169
SENIOR VP GOVERNMENT AFFAIRS         X         233,438.         0.         24,261.           (17) CRAIG COX         40.00         X         207,500.         0.         17,294.		40.00							105,000.	••	13,105.
(17) CRAIG COX     40.00     X     207,500.     0.     17,294.						x			233 438.	0.	24 261
SENIOR VP OF AGRICULTURE         X         207,500.         0.         17,294.		40.00							233,430.		<u>2777071</u>
						x			207.500.	0.	17,294.
	632007 11-11-16	1					L		,		Form <b>990</b> (2016)

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Form 990 (2016) ENVIRONMI	ENTAL WO	DRF	KI I	NG	GI	ROT	JP		52-22	L48	600	Page <b>8</b>
Part VII Section A. Officers, Directors, Trus	tees, Key Em	ploy	ees	, and	d Hi	ghe	st C	Compensated Employe	es (continued)			
(A) Name and title	<b>(B)</b> Average hours per week	box	not c , unle	ss pe	ition more rson i	than is bot pr/trus	h an	(D) Reportable compensation from	<b>(E)</b> Reportable compensatio from related	n	Est am	(F) timated ount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organization: (W-2/1099-MIS		fro orga and	pensation form the anization I related nizations
(18) JOCELYN BABUSCIO VP DEVELOPMENT	40.00				х			192,500.		ο.	24	4,772.
(19) CHRIS CAMPBELL	40.00											
VP INFORMATION TECHNOLOGY	10.00				Х			182,250.		0.	18	3,896.
(20) MAURA WALSH VP DIGITAL STRAT. (AS OF 03/2016)	40.00					x		166,667.		0.	15	5,252.
(21) ALEX FORMUZIS	40.00					x		166,500.		ο.	25	7,221.
DIRECTOR OF COMMUNICATIONS (22) WILLIAM WALKER	40.00							100,500.		<u> </u>	2	,221•
VP AND MANAGING EDITOR	10000					x		156,250.		ο.	35	5,013.
(23) ELAINE SHANNON EDITOR IN CHIEF- UNTIL 12/2016	40.00					x		155,357.		0.		4,687.
(24) BILL ALLAYAUD	40.00							155,557.		<u> </u>		±,007•
DIRECTOR OF GOVERNMENT AFFAIRS, CA						x		148,000.		0.	-	7,400.
(25) HEATHER WHITE FORMER EXECUTIVE DIR UNTIL 12/2015	40.00						х	153,333.		ο.	12	2,880.
1b Sub-total		I						2,221,795.		0.	244	4,887.
c Total from continuation sheets to Part VI								0.		0.	0.4	0.
d Total (add lines 1b and 1c)								2,221,795.		0.	244	4,887.
<ul> <li>Total number of individuals (including but n compensation from the organization</li> </ul>	ot limited to th	iose	liste	ed al	SOVe	e) wł	io r	eceived more than \$100	,000 of reportabl	е		17
												Yes No
<b>3</b> Did the organization list any <b>former</b> officer, line 1a? <i>If</i> "Yes," <i>complete Schedule J for s</i>											3	x
<ul><li>4 For any individual listed on line 1a, is the su</li></ul>											3	
and related organizations greater than \$150	-		-								4	X
5 Did any person listed on line 1a receive or a									dual for services			
rendered to the organization? If "Yes," com	plete Schedule	e J f	or su	uch	pers	son .					5	X
Section B. Independent Contractors												
1 Complete this table for your five highest co the organization. Report compensation for	-	-								ipensa	ation fr	rom
(A)	and balendar y		onun	ng v	vieri	01 11		(B)			(C	)
Name and business								Description of s		C	•	isation
ANNE LEWIS STRATEGIES, 12				REE	ΞT			ONLINE ADVER	TISING		243	5 512
NW, SUITE 300, WASHINGTON INTERNATIONAL FULFILLMENT				אר				PLACEMENT PRODUCT STOR	AGE		543	3,513.
3570 BLADENSBURG ROAD, BI					205	722		MAILING AND			292	2,133.
CORNICOPIA, 7510 HAMILTON BETHESDA, MD 20817								EVENT PRODUC				7,303.
SALSA LABS, 11410 ISSAC N	JEWTON S	SOT	JAF	RE				DONOR TRACKI	NG		41	, , , , , , , , , , , ,
NORTH, SUITE 280, RESTON								SOFTWARE			129	9,588.
				_		_	_					

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶ 4

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Form **990** (2016)

Begend Big Stress Big Stress Bi	Form	n 990 (	2016) <b>ENVI</b> F		52-2148	8600 Page <b>9</b>			
Bit I a Fadarated campaigns         Ia I         Ia S 377,708.         Ia Fadarated campaigns         Ia I         Ia I <thia i<="" th="">         Ia I         Ia I         <th< th=""><td>Pa</td><td>rt VII</td><td>I Statement of Reve</td><td>nue</td><td></td><td></td><td></td><td></td><td></td></th<></thia>	Pa	rt VII	I Statement of Reve	nue					
Total rovenue         Relifiéd of some functional diverse in the some functional diverse in			Check if Schedule O cont	tains a response	or note to any lin	e in this Part VIII			
geogeded       2 a ADMIN/CONSULTING FEES       business Code 900099       514,211.       514,211.         b       SETTLEMENT CLAIMS       900099       19,405.       19,405.         c       -       -       -       -         d       -       -       -       -         geogeded       -       -       -       -       -         d       -       -       -       -       -         geogeded       -       -       -       -       -       -         geogeded       -						• •	Related or exempt function	Unrelated business	( <b>D)</b> Revenue excluded from tax under sections 512 - 514
george       2 a ADMIN/CONSULTING FEES       business Code 900099       514,211.       514,211.         b       SETTLEMENT CLAIMS       900099       514,211.       514,211.         george       d       d       d       d         george       d       d       d       d       d         george       d       d       d       d       d         george       d       d       d       d       d         d       d       d       d       d       d         d	nts nts	1 a	Federated campaigns	1a					
george       2 a ADMIN/CONSULTING FEES       business Code 900099       514,211.       514,211.         b       SETTLEMENT CLAIMS       900099       514,211.       514,211.         george       d       d       d       d         george       d       d       d       d       d         george       d       d       d       d       d         george       d       d       d       d       d         d       d       d       d       d       d         d	Gran								
george       2 a ADMIN/CONSULTING FEES       business Code 900099       514,211.       514,211.         b       SETTLEMENT CLAIMS       900099       514,211.       514,211.         george       d       d       d       d         george       d       d       d       d       d         george       d       d       d       d       d         george       d       d       d       d       d         d       d       d       d       d       d         d	ts, ( Am	с	Fundraising events	1c	337,708.				
george       2 a ADMIN/CONSULTING FEES       business Code 900099       514,211.       514,211.         b       SETTLEMENT CLAIMS       900099       514,211.       514,211.         george       d       d       d       d         george       d       d       d       d       d         george       d       d       d       d       d         george       d       d       d       d       d         d       d       d       d       d       d         d	Gif ilar	d	Related organizations	1d					
geogeded       2 a ADMIN/CONSULTING FEES       business Code 900099       514,211.       514,211.         b       SETTLEMENT CLAIMS       900099       19,405.       19,405.         c       -       -       -       -         d       -       -       -       -         geogeded       -       -       -       -       -         d       -       -       -       -       -         geogeded       -       -       -       -       -       -         geogeded       -	ns, Sim		•						
geogeded       2 a ADMIN/CONSULTING FEES       business Code 900099       514,211.       514,211.         b       SETTLEMENT CLAIMS       900099       19,405.       19,405.         c       -       -       -       -         d       -       -       -       -         geogeded       -       -       -       -       -         d       -       -       -       -       -         geogeded       -       -       -       -       -       -         geogeded       -	utio er {	f			000 000				
geogeded       2 a ADMIN/CONSULTING FEES       business Code 900099       514,211.       514,211.         b       SETTLEMENT CLAIMS       900099       19,405.       19,405.         c	Oth				923,932.				
geogeded       2 a ADMIN/CONSULTING FEES       business Code 900099       514,211.       514,211.         b       SETTLEMENT CLAIMS       900099       19,405.       19,405.         c	pu					10261640			
geogeneration       2 a ADMIN/CONSULTING FERS       900099       514,211.       514,211.       514,211.         b       SETTLEMENT CLAIMS       900099       19,405.       900099       19,405.         c	aC	n	I otal. Add lines 1a-11			10201040.			
Solution       c	đ		ADMIN/CONSULTI	JG FEES		514 211.	514 211.		
Bigging of the set of t	vice					19,405	19,405.		
g Total. Add lines 2a?       533, 616.         3       Investment income (including dividends, interest, and other similar amounts).       11, 257.         4       Income from investment of tax-exempt bond proceeds       11, 257.         5       Royatties       (i) Real         6 a Gross rents       (ii) Real       (ii) Personal         6 a Gross rents       (iii) Real       (iii) Personal         7 a Gross amount from sales of inventory       (iii) Securities       (iii) Cuther         a sets other than inventory       1409422.       (iii) Securities         b Less: cost or other basis and sales expenses       1407102.       2, 320.         a Gross income from fundraising events (not including § _ 337, 708. of conthibutions reported on line 1c). See Part IV, line 18       50, 650.         b Less: direct expenses       50, 650.       -309, 875.         9 a Gross income from gaming activities. See Part IV, line 18       50, 650.         b Less: direct expenses       5       5         a b Less: direct expenses       5       6         b Less: cost or goods sold       5       6         10 a Gross alaes of invertory, less returns and allowances       5       5         b Less: cost of goods sold       5       5       6, 349.         11 a TUITION REPAYMENTS <t< th=""><td>Ser</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></t<>	Ser								
g Total. Add lines 2a?       533, 616.         3       Investment income (including dividends, interest, and other similar amounts).       11, 257.         4       Income from investment of tax-exempt bond proceeds       11, 257.         5       Royatties       (i) Real         6 a Gross rents       (ii) Real       (ii) Personal         6 a Gross rents       (iii) Real       (iii) Personal         7 a Gross amount from sales of inventory       (iii) Securities       (iii) Cuther         a sets other than inventory       1409422.       (iii) Securities         b Less: cost or other basis and sales expenses       1407102.       2, 320.         a Gross income from fundraising events (not including § _ 337, 708. of conthibutions reported on line 1c). See Part IV, line 18       50, 650.         b Less: direct expenses       50, 650.       -309, 875.         9 a Gross income from gaming activities. See Part IV, line 18       50, 650.         b Less: direct expenses       5       5         a b Less: direct expenses       5       6         b Less: cost or goods sold       5       6         10 a Gross alaes of invertory, less returns and allowances       5       5         b Less: cost of goods sold       5       5       6, 349.         11 a TUITION REPAYMENTS <t< th=""><td>am</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></t<>	am								
g Total. Add lines 2a?       533, 616.         3       Investment income (including dividends, interest, and other similar amounts).       11, 257.         4       Income from investment of tax-exempt bond proceeds       11, 257.         5       Royatties       (i) Real         6 a Gross rents       (ii) Real       (ii) Personal         6 a Gross rents       (iii) Real       (iii) Personal         7 a Gross amount from sales of inventory       (iii) Securities       (iii) Cuther         a sets other than inventory       1409422.       (iii) Securities         b Less: cost or other basis and sales expenses       1407102.       2, 320.         a Gross income from fundraising events (not including § _ 337, 708. of conthibutions reported on line 1c). See Part IV, line 18       50, 650.         b Less: direct expenses       50, 650.       -309, 875.         9 a Gross income from gaming activities. See Part IV, line 18       50, 650.         b Less: direct expenses       5       5         a b Less: direct expenses       5       6         b Less: cost or goods sold       5       6         10 a Gross alaes of invertory, less returns and allowances       5       5         b Less: cost of goods sold       5       5       6, 349.         11 a TUITION REPAYMENTS <t< th=""><td>ogra</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></t<>	ogra								
g Total. Add lines 2a 21         533, 616.           3         Investment income (including dividends, interest, and other similar amounts)         11, 257.           4         Income from investment of tax-exempt bond proceeds         11, 257.           5         Royatties         (0) Real           6 a Gross rents         (0) Real         (0) Personal           b Less: rental expenses         (0) Real         (0) Personal           c Rental income or (loss)         (0) Securities         (0) Cther           7 a Gross amount from sales of         (0) Securities         (0) Cther           7 a Gross anount from sales of         (1409422.         (1409422.           1407102.         1407102.         (2, 320.           8 a Gross income from fundraising events (not including \$ 337, 708. of contributions reported on line tc). See         50, 650.           9 a Gross income from gaming activities.         50, 650.           9 a Gross income from gaming activities.         -309, 875.           9 a Gross income from gaming activities.         -309, 875.           9 a Gross income from gaming activities.         -309, 875.           9 a Gross income from gaming activities.         -           0 Less: circet expenses         b           10 a Gross alaes of inventory.         -           10 a Gross in	Pre		All other program service reve	enue					
3       Investment income (including dividends, interest, and other similar amounts)       11, 257.       11, 257.         4       Income from investment of tax-exempt bond proceeds       11, 257.       11, 257.         6 a Gross rents       0       11, 257.       11, 257.         6 a Gross rents       0       11, 257.       11, 257.         7 a Gross amount from sales of assts other than inventory       0       9 Securities       10         7 a Gross amount from sales of assts other than inventory       10. Securities       10. Other       10. Securities         a d sales expenses       1407102.       2, 320.       2, 320.       2, 320.         8 a Gross income from fundraising events (not including \$		g				533,616.			
4       Income from investment of tax-exempt bond proceeds         5       Royaties         6 a Gross rents <ul> <li>(1) Real</li> <li>(1) Personal</li> <li>(1) Personal</li></ul>		3							
5       Royatties       (i) Real       (ii) Personal         6 a Gross rents       (ii) Real       (iii) Personal         b Less: rental expenses       (iii) Real       (iii) Personal         c Rental income or (loss)       (iiii) Real       (iii) Personal         d Net rental income or (loss)       (iiii) Real       (iii) Personal         d Net rental income or (loss)       (iii) Securities       (iii) Other         assets other than inventory       (iii) Securities       (iii) Other         b Less: cost or other basis       1407102.       2,320.         c Gain or (loss)       1407102.       2,320.         d Net gain or (loss)       1407102.       2,320.         e Gain or (loss)       337,708. or       2,320.         b Less: direct expenses       b       50,650.         a forse income from gaming activities.       -309,875.         9 a Gross income from gaming activities.       -309,875.         e Net income or (loss) from gaming activities       -309,875.         ib Less: direct expenses       b         b Less: direct expenses       b         c Net income or (loss) from gaming activities.       -         ib a direct expenses       b         c Net income or (loss) from sales of inventory       -			other similar amounts)		►	11,257.			11,257.
6 a Gross rents       (i) Real       (ii) Personal         b Less: rental expenses       (iii) Other         c Rental income or (loss)       (i) Securities         7 a Gross amount from sales of assets other than inventory       (i) Securities       (ii) Other         1409422.       1407102.       1407102.         a Ket sental income or (loss)       1407102.       2,320.         6 a Gross income from fundraising events (not including \$37.708. of contributions reported on line 1c). See Part IV, line 18       50,650.         8 a Gross income from gaming activities.       50,650.       -309,875.         9 a Gross income from gaming activities.       -309,875.       -309,875.         9 a Gross alse of inventory, less returns and allowances       a       -309,875.         0 a Gross sales of inventory, less returns and allowances       a       -         0 b Less: cost of goods sold       -       -         0 a Gross sales of inventory, less returns and allowances       a       -         0 b Less: cost of goods sold       -       -         0 b Less: cost of goods sold       -       -       -         0 b SUBLEASE INCOME       900099       6,349.       -       6,349.         0 b SUBLEASE INCOME       900099       3,429.       3,429.       3,429. <td></td> <td>4</td> <td>Income from investment of ta</td> <td>x-exempt bond p</td> <td>proceeds</td> <td></td> <td></td> <td></td> <td></td>		4	Income from investment of ta	x-exempt bond p	proceeds				
6 a Gross rents       b Less: rental expenses       b Less: rental expenses       c Rental income or (loss)         7 a Gross amount from sales of assets other than inventory       b Less: cost or other basis and sales expenses       c Gain or (loss)       b Less: cost or other basis and sales expenses       c Gain or (loss)       c Gain or (loss		5	Royalties		►				
b Less: rental expenses				(i) Real	(ii) Personal				
c       Rental income or (loss)									
d       Net rental income or (loss) <ul> <li>A</li> <li>Gross amount from sales of assets other than inventory</li> <li>b</li> <li>Less: cost or other basis and sales expenses</li> <li>d</li> <li>d</li></ul>		b							
7 a Gross amount from sales of assets other than inventory       (i) Securities       (ii) Other         1409422.       1409422.         b Less: cost or other basis and sales expenses       1407102.         c Gain or (loss)       2,320.         d Net gain or (loss)       2,320.         d Net gain or (loss)       337,708. of contributions reported on line 1c). See Part IV, line 18       50,650.         9 a Gross income from fundraising events (not including \$									
assets other than inventory       1409422.         b Less: cost or other basis       1407102.         and sales expenses       2,320.         c Gain or (loss)       2,320.         d Net gain or (loss)       2,320.         s Gross income from fundraising events (not including \$									
B       Less: cost or other basis and sales expenses       1407102.       2,320.         c       Gain or (loss)       2,320.       2,320.         d       Net gain or (loss)       337,708. of contributions reported on line 1c). See       >       2,309,875.         Part IV, line 18       a       50,650.       360,525.       -309,875.       -309,875.         9 a Gross income from gaming activities. See Part IV, line 19       a       >       -309,875.       -309,875.         9 a Gross sincome from gaming activities           -309,875.         9 a Gross income from gaming activities              0 a Gross sales of inventory, less returns and allowances       a             10 a Gross sales of inventory               Miscellaneous Revenue       Musiness Code              11 a TUITTION REPAYMENTS       900099       6,349.		7 a			(II) Other				
and sales expenses       1407102.         c Gain or (loss)       2,320.         d Net gain or (loss)       > 2,320.         a Gross income from fundraising events or contributions reported on line 1c). See       50,650.         Part IV, line 18       a         a Less: direct expenses       b         b Less: direct expenses       b         c Net income or (loss) from gaming activities       > -309,875.         10 a Gross sales of inventory, less returns and allowances       a         b Less: cost of goods sold       b         c Net income or (loss) from sales of inventory       >         Miscellaneous Revenue       Business Code         11 a TUITION REPAYMENTS       900099         b SUBLEASE INCOME       900099         g 000099       3,429.         d All other revenue       900099         d All other revenue       900099         e Total. Add lines 11a:11d		h	•	14094220					
c       Gain or (loss)       2,320.       2,320.         d       Net gain or (loss)       2,320.       2,320.         8       Gross income from fundraising events (not including \$337,708.of contributions reported on line 1c). See       50,650.       50,650.         Part IV, line 18       a       50,650.       50,650.       -309,875.         9       Gross income from gaming activities. See       -309,875.       -309,875.         9 a Gross income from gaming activities. See       -309,875.       -309,875.         9 a Gross ales of inventory, less returns and allowances       a       -         10 a Gross sales of inventory, less returns and allowances       a       -         Miscellaneous Revenue       Business Code       -         Miscellaneous Revenue       900099       6,349.       6,349         b SUBLEASE INCOME       900099       3,429.       3,429         0 All other revenue       900099       3,429.       3,429         0 All other revenue       900099       2,844.       284		a		1407102					
d Net gain or (loss)       2,320.       2,320.         8 a Gross income from fundraising events (not including \$ 337,708. of contributions reported on line 1c). See Part IV, line 18       a       50,650.         b Less: direct expenses       b       50,650.       360,525.         c Net income or (loss) from fundraising events       b       -309,875.       -309,875.         9 a Gross income from gaming activities. See Part IV, line 19       a       b       b       -309,875.         9 a Gross income or (loss) from gaming activities. See Part IV, line 19       a       b       b       -309,875.         9 a Gross sales of inventory, less returns and allowances       a       b       -       -309,875.         10 a Gross sales of inventory, less returns and allowances       a       b       -       -         b Less: cost of goods sold       b       -       -       -         0 b SUBLEASE INCOME       900099       6,349.       6,349.         11 a TUITION REPAYMENTS       900099       5,640.       5,640.         c REFUNDS/REBATES       900099       3,429.       3,429.         0 All other revenue       900099       284.       284.         e Total. Add lines 11a.11d       15,702.       15,702.       50.		~							
8 a Gross income from fundraising events (not including \$						2,320.			2,320.
c       Net income or (loss) from fundraising events       -309,875.       -309,875.         9 a       Gross income from gaming activities. See Part IV, line 19       a         b       Less: direct expenses       b         c       Net income or (loss) from gaming activities       b         10 a       Gross sales of inventory, less returns and allowances       a         b       Less: cost of goods sold       b         c       Net income or (loss) from sales of inventory       b         Miscellaneous Revenue       Business Code       6, 349.         11 a       TUITION REPAYMENTS       900099       6, 349.         b       SUBLEASE INCOME       900099       3, 429.         c       REFUNDS/REBATES       900099       3, 429.         d       All other revenue       900099       284.       284	an		Gross income from fundraisin	ng events (not		_,			
c       Net income or (loss) from fundraising events       -309,875.       -309,875.         9 a       Gross income from gaming activities. See Part IV, line 19       a         b       Less: direct expenses       b         c       Net income or (loss) from gaming activities       b         10 a       Gross sales of inventory, less returns and allowances       a         b       Less: cost of goods sold       b         c       Net income or (loss) from sales of inventory       b         Miscellaneous Revenue       Business Code       6, 349.         11 a       TUITION REPAYMENTS       900099       6, 349.         b       SUBLEASE INCOME       900099       3, 429.         a       900099       3, 429.       3, 429.         d       All other revenue       900099       284.       284	ven								
c       Net income or (loss) from fundraising events       -309,875.       -309,875.         9 a       Gross income from gaming activities. See Part IV, line 19       a         b       Less: direct expenses       b         c       Net income or (loss) from gaming activities       b         10 a       Gross sales of inventory, less returns and allowances       a         b       Less: cost of goods sold       b         c       Net income or (loss) from sales of inventory       b         Miscellaneous Revenue       Business Code       6, 349.         11 a       TUITION REPAYMENTS       900099       6, 349.         b       SUBLEASE INCOME       900099       3, 429.         a       900099       3, 429.       3, 429.         d       All other revenue       900099       284.       284	Re		-		50,650,				
c       Net income or (loss) from fundraising events       -309,875.       -309,875.         9 a       Gross income from gaming activities. See Part IV, line 19       a         b       Less: direct expenses       b         c       Net income or (loss) from gaming activities       b         10 a       Gross sales of inventory, less returns and allowances       a         b       Less: cost of goods sold       b         c       Net income or (loss) from sales of inventory       b         Miscellaneous Revenue       Business Code       6, 349.         11 a       TUITION REPAYMENTS       900099       6, 349.         b       SUBLEASE INCOME       900099       3, 429.         c       REFUNDS/REBATES       900099       3, 429.         d       All other revenue       900099       284.       284	the	b							
9 a Gross income from gaming activities. See         Part IV, line 19         b Less: direct expenses         c Net income or (loss) from gaming activities         10 a Gross sales of inventory, less returns         and allowances         a         b Less: cost of goods sold         c Net income or (loss) from sales of inventory         Miscellaneous Revenue         Business Code         11 a TUITION REPAYMENTS         p SUBLEASE INCOME         c REFUNDS/REBATES         q All other revenue         e Total. Add lines 11a-11d	Ó				<b>`</b>	-309,875.			-309,875.
Part IV, line 19 a   b Less: direct expenses   c Net income or (loss) from gaming activities   10 a Gross sales of inventory, less returns   and allowances a   b Less: cost of goods sold   b Less: cost of goods sold   c Net income or (loss) from sales of inventory   Miscellaneous Revenue Business Code   11 a TUITION REPAYMENTS   900099 6,349.   6,349   b SUBLEASE INCOME   900099 3,429.   3,429   d All other revenue   e Total. Add lines 11a-11d						-			
b Less: direct expenses b   c Net income or (loss) from gaming activities   10 a Gross sales of inventory, less returns   and allowances a   b Less: cost of goods sold   b Less: cost of goods sold   c Net income or (loss) from sales of inventory   Miscellaneous Revenue Business Code   11 a TUITION REPAYMENTS   900099 6,349.   6,349   b SUBLEASE INCOME   900099 3,429.   c REFUNDS/REBATES   900099 284.   284   e Total. Add lines 11a-11d									
c       Net income or (loss) from gaming activities       ▶       ▶         10 a       Gross sales of inventory, less returns and allowances       a       ▶         b       Less: cost of goods sold       ▶       ▶         c       Net income or (loss) from sales of inventory       ▶       ▶         Miscellaneous Revenue       Business Code       >         Miscellaneous Revenue       900099       6,349.       6,349         b       SUBLEASE INCOME       900099       5,640.       5,640         c       REFUNDS/REBATES       900099       3,429.       3,429         d       All other revenue       900099       284.       284         e       Total. Add lines 11a-11d       ▶       15,702.		b							
and allowances       a         b       Less: cost of goods sold         c       Net income or (loss) from sales of inventory         Miscellaneous Revenue       Business Code         11 a       TUITION REPAYMENTS         900099       6,349.         b       SUBLEASE INCOME         900099       5,640.         c       REFUNDS/REBATES         900099       3,429.         d       All other revenue         e       Total. Add lines 11a-11d		с	Net income or (loss) from gan	ning activities	►				
b       b       b         c       Net income or (loss) from sales of inventory       b         Miscellaneous Revenue       Business Code         Miscellaneous Revenue       Business Code         11 a       TUITION REPAYMENTS       900099       6,349         b       SUBLEASE INCOME       900099       5,640       5,640         c       REFUNDS/REBATES       900099       3,429       3,429         d       All other revenue       900099       284       284         e       Total. Add lines 11a-11d       15,702       15,702		10 a	Gross sales of inventory, less	returns					
c       Net income or (loss) from sales of inventory       Image: Constraint of the second se									
Miscellaneous Revenue         Business Code         6,349           11 a         TUITION REPAYMENTS         900099         6,349.         6,349           b         SUBLEASE INCOME         900099         5,640.         5,640           c         REFUNDS/REBATES         900099         3,429.         3,429           d         All other revenue         900099         284.         284           e         Total. Add lines 11a-11d         15,702.         15         15		b	Less: cost of goods sold	b					
11 a       TUITION REPAYMENTS       900099       6,349.       6,349         b       SUBLEASE INCOME       900099       5,640.       5,640         c       REFUNDS/REBATES       900099       3,429.       3,429         d       All other revenue       900099       284.       284         e       Total. Add lines 11a-11d       115,702.       15,702.		с	Net income or (loss) from sale	es of inventory	►				
b         SUBLEASE INCOME         900099         5,640         5,640           c         REFUNDS/REBATES         900099         3,429         3,429           d         All other revenue         900099         284         284           e         Total. Add lines 11a-11d         15,702         15,702						6 240			C 240
c         REFUNDS/REBATES         900099         3,429         3,429           d         All other revenue         900099         284         284           e         Total. Add lines 11a-11d         15,702         15,702									6,349.
d All other revenue     900099     284.     284       e Total. Add lines 11a-11d     ►     15,702.									
e Total. Add lines 11a-11d									
									204.
<b>12</b> Total revenue. See instructions. ▶   10514660.   533,616.   0.   -280,596						10514660.	533,616.	0	-280,596.
	63200				₽	100110000		0.	Form <b>990</b> (2016)

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Part IX Statement of Functional Expenses

ENVIRONMENTAL WORKING GROUP

Do n	Check if Schedule O contains a response of include amounts reported on lines 6b,	se or note to any line in (A) Total expenses	(B)	(C)	(D)
7b, 8	b, 9b, and 10b of Part VIII.	l otal expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations		·		•
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
	Benefits paid to or for members				
	Compensation of current officers, directors,				
	trustees, and key employees	1,408,122.	1,205,917.	108,741.	93,464
	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	166,213.	166,213.		
	Other salaries and wages	4,306,605.	3,590,870.	445,520.	270,21
	Pension plan accruals and contributions (include	-			
	section 401(k) and 403(b) employer contributions)	208,384.	164,980.	18,693.	24,71
	Other employee benefits	528,595.	458,971.	51,817.	17,80
	Payroll taxes	432,615.	366,607.	39,616.	26,392
1	Fees for services (non-employees):				
	Management				
	Legal	37,024.	22,850.	14,104.	70
	Accounting	32,684.	28,053.	2,649.	1,982
	Lobbying	550,897.	550,897.	,	<b>,</b>
	Professional fundraising services. See Part IV, line 17	62,827.	,		62,82
	Investment management fees	97,820.	633.	10,754.	86,43
	Other. (If line 11g amount exceeds 10% of line 25,	.,			,
-	column (A) amount, list line 11g expenses on Sch O.)	978,362.	909,124.	27,317.	41,923
	Advertising and promotion	11,955.	10,886.	1,050.	19
	Office expenses	120,321.	51,891.	61,695.	6,73
	Information technology	116,929.	96,309.	11,163.	9,45
	Royalties				- /
		815,754.	697,837.	67,118.	50,799
7	Occupancy Travel	237,127.	194,196.	15,347.	27,58
	Payments of travel or entertainment expenses				27700
	for any federal, state, or local public officials				
	Conferences, conventions, and meetings	55,753.	46,977.	4,240.	4,53
		3,847.	2,795.	1,052.	4,55
0 1	Payments to affiliates	5,0110	2,755.	1,0520	
1 2	Depreciation, depletion, and amortization	157,168.	142,845.	11,528.	2 791
2 3	I	84,738.	71,620.	7,808.	2,79 5,31
	Other expenses. Itemize expenses not covered	017700	, 1,020.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	5,51
-	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 0.)				
	FULLFILLMENT/GOODS EXP.	460,581.	158,773.		301,808
a b	PUBLICATIONS	8,255.	8,255.		501,000
~	DUES & LICENSES	7,392.	7,392.		
с С		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
d	All other evenence				
	All other expenses	10,889,968.	8,954,891.	900,212.	1,034,86
5	Total functional expenses. Add lines 1 through 24e	10,009,900.	0,954,091.	900,414.	I,004,00
6	<b>Joint costs.</b> Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				

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Form **990** (2016)

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Form 990 (2016)

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Schedule D

Total liabilities. Add lines 17 through 25

and complete lines 30 through 34.

complete lines 27 through 29, and lines 33 and 34.

\_iabilities

Net Assets or Fund Balances

10a ∟

b∟

Assets

Part X Balance Sheet

	Cavings and temporary cash investments									- /		- /	• •	<u> </u>	-
	Pledges and grants receivable, net									1,2					
	Accounts receivable, net									ļ	525	ō,	65	8	•
	Loans and other receivables from current and for	ormer c	officer	rs, d	irect	tors	ί,								
	trustees, key employees, and highest compensation	ated er	nploy	/ees	. Co	mp	lete								
	Part II of Schedule L														
	Loans and other receivables from other disqualit	fied pe	ersons	s (as	s def	ine	d u	nder							
	section 4958(f)(1)), persons described in section	4958(	(c)(3)(	В), а	and	con	trib	uting	,						
	employers and sponsoring organizations of sect	ion 50	1(c)(9	)) vo	lunt	ary									
	employees' beneficiary organizations (see instr).	Comp	olete F	Part	ll of	Sc	h L								
Notes and loans receivable, net															
Inventories for sale or use															
Prepaid expenses and deferred charges									 	182	2,	81	.9	•	
I	Land, buildings, and equipment: cost or other														
	basis. Complete Part VI of Schedule D	10a						75						_	
,	Less: accumulated depreciation	10b		1	<u>,13</u>	35	, 4	92	•		391				
	Investments - publicly traded securities										517	7,	18	3	•
	Investments - other securities. See Part IV, line 1	1													
	Investments - program-related. See Part IV, line	11													
	Intangible assets														
	Other assets. See Part IV, line 11										324				_
	Total assets. Add lines 1 through 15 (must equa	al line 3	34) .						$\bot$	 6,8		-			
	Accounts payable and accrued expenses								L	 (	693	3,	85	8	•
	Grants payable								L						

#### ENVIRONMENTAL WORKING GROUP

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

Cash - non-interest-bearing

Savings and temporary cash investments

Deferred revenue

Tax-exempt bond liabilities

Escrow or custodial account liability. Complete Part IV of Schedule D

Loans and other payables to current and former officers, directors, trustees,

key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L

Secured mortgages and notes payable to unrelated third parties

Unsecured notes and loans payable to unrelated third parties

Organizations that follow SFAS 117 (ASC 958), check here 🕨 🔟 and

Unrestricted net assets

Temporarily restricted net assets

Organizations that do not follow SFAS 117 (ASC 958), check here

Capital stock or trust principal, or current funds

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

Retained earnings, endowment, accumulated income, or other funds

Total net assets or fund balances

Permanently restricted net assets

Total liabilities and net assets/fund balances

Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of

5 6 7 8 182,205. 9 353,283. 10c 685,212. 11 12 13

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25,031.

718,889.

3,106,009.

3,043,358.

6,149,367.

6,868,256.

(B)

End of year

3,152,308.

1,534,599. 315,717.

9,299.

94,958.

6,327,581.

484,795

61,271.

546,066.

3,296,128.

2,485,387.

(A)

Beginning of year

134,006.

3,495,676.

6,327,581. Form **990** (2016)

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5,781,515.



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	990 (2016) ENVIRONMENTAL WORKING GROUP	<u>52-2</u>	148600	Paç	ge <b>12</b>
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	10,51		
2	Total expenses (must equal Part IX, column (A), line 25)	2	10,889		
3	Revenue less expenses. Subtract line 2 from line 1	3	-37		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	6,149		
5	Net unrealized gains (losses) on investments	5		7,4	56.
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	5,783	1,5	15.
Pa	rt 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," explain in Schedule	e O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d 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?		<b>2</b> b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	te basis,			
	consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
с	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	ie audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Audit			
	Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits				
				000	

Form **990** (2016)



SCHEDULE A
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(Form	990	or	990-	·ΕΖ
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# Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ.

2016
Open to Public Inspection

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OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

►	Information about Schedule A (Form 990 or 990-EZ) and its instructions is at WWW.irs.gov/fo	orm9	90.
_		1_	

Name of the organization			dentification number										
		WORKING GROU		in	!		2-2148600						
						S.							
The organization is not a private found													
1 A church, convention of ch				• • •	1)(A)(i).								
2 A school described in sect													
3 A hospital or a cooperative													
4 A medical research organiz	ation operated in co	njunction with a hospital	described	d in <b>sectio</b>	on 170(b)(1)(A	.)(iii). Enter	the hospital's name,						
city, and state:													
5 An organization operated f		ollege or university owned	d or opera	ted by a g	overnmental	unit describ	bed in						
	section 170(b)(1)(A)(iv). (Complete Part II.)												
A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).													
7 X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in													
section 170(b)(1)(A)(vi). (C													
8 A community trust describe													
9 An agricultural research or													
•	or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or												
university: 10 An organization that norma		than 22 1/20/ of its our	nort from	oontributi	ono mombor		and areas respired from						
5													
activities related to its exer													
	income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See <b>section 509(a)(2).</b> (Complete Part III.)												
<b>11</b> An organization organized		ively to test for public sa	fety See	section 5(	09(a)(4)								
12 An organization organized	-	•	•			arry out the	e purposes of one or						
more publicly supported or													
lines 12a through 12d that													
a Type I. A supporting orga							/ aivina						
the supported organizati													
organization. You must o													
<b>b Type II.</b> A supporting org			tion with it	ts support	ed organizatio	on(s), by ha	iving						
control or management of													
organization(s). You mus	st complete Part IV,	Sections A and C.											
c 🔲 Type III functionally inte	egrated. A supportin	g organization operated	in connec	tion with,	and functiona	ally integrate	ed with,						
its supported organizatio	n(s) (see instructions	s). You must complete I	Part IV, Se	ections A,	D, and E.								
d Type III non-functionall	y integrated. A supp	porting organization oper	ated in co	nnection v	with its suppo	rted organi	ization(s)						
that is not functionally in	tegrated. The organiz	zation generally must sat	tisfy a dist	ribution re	quirement an	d an attent	iveness						
requirement (see instruct	tions). <b>You must cor</b>	mplete Part IV, Sections	A and D,	, and Part	<b>V</b> .								
e Check this box if the org	anization received a	written determination fro	m the IRS	6 that it is a	а Туре I, Туре	; II, Type III							
functionally integrated, o		onally integrated support	ing organi	zation.									
f Enter the number of supported	• • • • • • • • • • • • • • • • • • • •												
g Provide the following information			(iv) is the orga	anization listed	(.) A								
(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10	in your governi	ing document?	(v) Amount o support (see ii	-	(vi) Amount of other support (see instructions)						
		above (see instructions))	Yes	No									
	1												
	+												
	+												

Total

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 632021 09-21-16 Schedule A (Form 990 or 990-EZ) 2016 13

2016.04030 ENVIRONMENTAL WORKING GROUPEWG

52-2148600 Page 2

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

See	ction A. Public Support			_			
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2012	<b>(b)</b> 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	6659926.	7348926.	10459430.	11849566.	10261640.	46579488.
2	Tax revenues levied for the organ-						
_	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
5	furnished by a governmental unit to						
	the organization without charge						
	Total. Add lines 1 through 3	6659926.	7348926	10459430.	11849566	10261640	46579488
	•	0055520.	7540520.	10455450.	110495000	10201040.	103791001
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						1 0 1 6 0 0 0 0
	column (f)						12169322.
	Public support. Subtract line 5 from line 4.						34410166.
Sec	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
7	Amounts from line 4	6659926.	7348926.	10459430.	11849566.	10261640.	46579488.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources	3,776.	7,810.	8,101.	49,426.	16,897.	86,010.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)	450.	324.	10,000.		284.	11,058.
11	Total support. Add lines 7 through 10						46676556.
	Gross receipts from related activities,	etc. (see instructio	ane)				,274,783.
	First five years. If the Form 990 is for	•	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	rd fourth or fifth t			/=/ =// 000
10	organization, check this box and stop						
Sec	ction C. Computation of Publ	ic Support Pe	rcentage				
	Public support percentage for 2016 (I			colump (f)		14	73.72 %
	Public support percentage from 2015		-			15	73.02 %
	33 1/3% support test - 2016. If the c						,,
108		•				•	
	stop here. The organization qualifies						····· · · · · · · · · · · · · · · · ·
	33 1/3% support test - 2015. If the c						
<i></i>	and <b>stop here.</b> The organization qual						
17a	10% -facts-and-circumstances tes						
	and if the organization meets the "fac						
	meets the "facts-and-circumstances"	-	-				
b	10% -facts-and-circumstances tes						
	more, and if the organization meets the						e
	organization meets the "facts-and-circ	cumstances" test.	The organization	qualifies as a publi	cly supported orga	anization	▶∐
18	Private foundation. If the organization	n did not check a	box on line 13, 16	a, 16b, 17a, or 17l			
					0.1.	dulo A (Earm 990	

Schedule A (Form 990 or 990-EZ) 2016

632022 09-21-16



# Schedule A (Form 990 or 990-EZ) 2016 ENVIRONMENTAL WORKING GROUP Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Calendar year (or fiscal year beginning in) 🕨	• (a) 2012	<b>(b)</b> 2013	(c) 2014	(d) 2015	(	<b>e)</b> 2016	(f) Total
1 Gifts, grants, contributions, and							
membership fees received. (Do not							
include any "unusual grants.")							
2 Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in							
any activity that is related to the organization's tax-exempt purpose							
<b>3</b> Gross receipts from activities that							
are not an unrelated trade or bus- iness under section 513							
4 Tax revenues levied for the organ-							
ization's benefit and either paid to							
or expended on its behalf							
5 The value of services or facilities furnished by a governmental unit to							
the organization without charge							
6 Total. Add lines 1 through 5							
<b>7a</b> Amounts included on lines 1, 2, and							
3 received from disqualified persons <b>b</b> Amounts included on lines 2 and 3 received	` <b> </b>						
from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year							
c Add lines 7a and 7b							
8 Public support. (Subtract line 7c from line 6.)							
ection B. Total Support							
alendar year (or fiscal year beginning in) 🕨	• (a) 2012	<b>(b)</b> 2013	(c) 2014	(d) 2015	1	e) 2016	(f) Total
9 Amounts from line 6	(	(-)	(-/ · ·	(-)		-,	(1)
<b>IOa</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources							
<b>b</b> Unrelated business taxable income							
(less section 511 taxes) from businesses acquired after June 30, 1975							
<ul> <li>c Add lines 10a and 10b</li> <li>1 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on</li> </ul>							
<ul> <li>2 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)</li> </ul>							
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.)							
4 First five years. If the Form 990 is for	or the organization'	s first, second, thi	rd, fourth, or fifth t	ax year as a section	on 501	(c)(3) organiz	zation,
check this box and <b>stop here</b>	-			-			
Section C. Computation of Pub	lic Support Pe	ercentage					
15 Public support percentage for 2016			column (f))		15		%
16 Public support percentage from 201					16		%
Section D. Computation of Inve					1.0		
Investment income percentage for 2		¥			17		%
8 Investment income percentage for					18		%
9a 33 1/3% support tests - 2016. If th						% and line -	
more than 33 1/3%, check this box	-						
b 33 1/3% support tests - 2015. If th	e organization did i						
	•	top here. The org	anization qualifies	as a publicly supp	ported	organization	▶□
b 33 1/3% support tests - 2015. If th	eck this box and <b>s</b>						

## Part IV Supporting Organizations

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1

2

3a

3b

3c

4a

4b

4c

5a

5b

5c

6

7

8

9a

9b

9c

10a

10b

1

Yes No

#### (Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

#### Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b** Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 8 Did the organization make a loan to a disgualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
  - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

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Schedule A (Form 990 or 990-EZ) 2016

2016.04030 ENVIRONMENTAL WORKING GROOPEW

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_			Vee	Na
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in <b>Part VI</b> how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
-	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in <b>Part VI</b> the role the organization's			
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations	•		
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see instructions).			
a	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
с	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see inst	ructions	).	
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. <i>Answer (a) and (b) below.</i>			
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
-	trustees of each of the supported organizations? <i>Provide details in <b>Part VI</b>.</i>	3a		
b				
2	of its supported organizations? If "Yes," describe in <b>Part VI</b> the role played by the organization in this regard.	3b		
63202	5 09-21-16 Schedule A (Form 9		0-EZ	2016

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## Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI.) See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Secti	on A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Secti	on B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
с	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other			
	factors (explain in detail in <b>Part VI</b> ):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
	see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Secti	on C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functional		ated Type III supporting	orę

instructions).

Schedule A (Form 990 or 990-EZ) 2016

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Par	t V   Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	anizations (continued)	
Secti	on D - Distributions	Current Year		
1	Amounts paid to supported organizations to accomplish exe			
2	Amounts paid to perform activity that directly furthers exemp			
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizatior	IS	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions			
7	Total annual distributions. Add lines 1 through 6			
8	Distributions to attentive supported organizations to which the	ne organization is responsive	e	
	(provide details in Part VI). See instructions			
9	Distributable amount for 2016 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
		(i)	(ii)	(iii)
Saati	on E. Distribution Allocations (costingtructions)	Excess Distributions	Underdistributions Pre-2016	Distributable Amount for 2016
Sect	on E - Distribution Allocations (see instructions)		PTE-2010	Amount for 2010
_1	Distributable amount for 2016 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2016 (reason-			
	able cause required- explain in Part VI). See instructions			
3	Excess distributions carryover, if any, to 2016:			
a				
b				
c	From 2013			
d	From 2014			
e	From 2015			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2016 distributable amount			
i	Carryover from 2011 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2016 from Section D,			
	line 7: \$			
a	Applied to underdistributions of prior years			
	Applied to 2016 distributable amount			
C	Remainder. Subtract lines 4a and 4b from 4			
5	Remaining underdistributions for years prior to 2016, if			
	any. Subtract lines 3g and 4a from line 2. For result greater			
	than zero, explain in Part VI. See instructions			
6	Remaining underdistributions for 2016. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions			
7	Excess distributions carryover to 2017. Add lines 3j			
	and 4c			
8	Breakdown of line 7:			
<u>a</u>	Evenes from 2012			
	Excess from 2013			
	Excess from 2014			
	Excess from 2015			
e	Excess from 2016			

Schedule A (Form 990 or 990-EZ) 2016

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Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

#### SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:

2012 AM	OUNT:	\$	150.
2013 AM	OUNT:	\$	324.
2014 AM	OUNT:	\$	10,000.
2015 AM	OUNT:	\$	0.
2016 AM	OUNT:	\$	284.
GUIDES 1	PURCHA	ASES	
2012 AM	OUNT:	\$	300.
2013 AM	OUNT:	\$	0.
2014 AM	OUNT:	\$	0.
2015 AM	OUNT:	\$	0.
2016 AM	OUNT:	\$	0.
632028 09-21-16			Schedule A (Form 990 or 990-EZ) 20 2016.04030 ENVIRONMENTAL WORKING GROUPEWS

Schedule B (Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service

Name of the organization

\*\* PUBLIC DISCLOSURE COPY \*\*

## Schedule of Contributors

 Attach to Form 990, Form 990-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. OMB No. 1545-0047

2016

Employer identification number

ENVIRONMENTAL V	WORKING	GROUP
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Drganization type (check one):				
Filers of:	Section:			
Form 990 or 990-EZ	X 501(c)( 3) (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**

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

X 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).

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

08

Employer identification number

52-2148600

### ENVIRONMENTAL WORKING GROUP

Part I	Contributors (See instructions). Use duplicate copies of Part I if a	additional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$2,000,000.	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
2		\$500,000.	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
3		\$450,000.	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
4		\$350,000.	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		\$310,000.	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 On Complete Part II for noncash contributions.)
623452 10-18	22	2	990, 990-EZ, or 990-PF) (2016)
301013	786783 EWG 2016.04030 ENV	VIRONMENTAL WORKING	GROUP EWG1

Employer identification number

52-2148600

ENVIRONMENTAL WORKING GROUP

08

Part II Noncash Property (See instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
_		\$	
(a) No. rom 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
_		    \$	990, 990-EZ, or 990-PF)

anne or orga	anization		Employer identification number				
NVTRO	NMENTAL WORKING GROUP		52-2148600				
Part III	Exclusively religious, charitable, etc., cont	ributions to organizations described	in section 501(c)(7), (8), or (10) that total more than \$1,000 for				
	the year from any one contributor. Complete completing Part III, enter the total of exclusively religiou	s, charitable, etc., contributions of \$1,000 or	Inite entry. For organizations less for the year. (Enter this info. once.)				
	Use duplicate copies of Part III if addition						
a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
Part I							
-							
[ ]							
		(e) Transfer of gift	t				
	Transferee's name, address, a	, and ZIP + 4 Relationship of transferor to transfer					
			·				
-							
a) No. from							
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
.							
-							
		(e) Transfer of gift	t				
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee				
-							
a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
Part I							
-							
.							
	(e) Transfer of gift						
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee				
			·				
-							
a) No. from							
Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
.							
-							
H		(e) Transfer of gift	t i				
		and ZIP + 4 Relationship of transferor to transferee					
	Transferee's name, address, a						
-	Transferee's name, address, a						
-	Transferee's name, address, a						
	Transferee's name, address, a						
		24	Schedule B (Form 990, 990-EZ, or 990-PF) (2				

# SCHEDULE C Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. 2016

OMB No. 1545-0047

Open to Public Inspection

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

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

Department of the Treasury

Internal Revenue Service

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

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

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

<ul> <li>Section 501(c)(4), (5)</li> </ul>	), or (6) organizations: Complete Part III.
Name of organization	

Nan	ne of orga	nization			Em	ployer identification number	
		ENVIRON	MENTAL WORKING GR	OUP		52-2148600	
Pa	art I-A	Complete if the org	ganization is exempt unde	r section 501(c) o	or is a section 527	organization.	
2	Political	campaign activity expendit	zation's direct and indirect political cures ign activities		►		
Pa	art I-B	Complete if the ord	ganization is exempt unde	r section 501(c)(3	3).		
1	Enter the	e amount of any excise tax	incurred by the organization unde	r section 4955	▶ ▶	\$	
2	Enter the	e amount of any excise tax	incurred by organization manager	s under section 4955	►	\$	
			on 4955 tax, did it file Form 4720 fo				
4a	a Was a c	orrection made?				Yes No	
	lf "Yes,"	describe in Part IV.					
			panization is exempt unde				
			d by the filing organization for sect			\$	
2			ization's funds contributed to othe	•		•	
-					►	\$	
3		1 1	s. Add lines 1 and 2. Enter here an	,	•	<u>ሱ</u>	
			<b>1120-POL</b> for this year?				
- 5			nployer identification number (EIN)				
Ŭ			ition listed, enter the amount paid		-		
	•	, 0	omptly and directly delivered to a	0 0			
	political	action committee (PAC). If	additional space is needed, provic	le information in Part I	V.		
		(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -C	contributions received and	

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



Schedule C (Form 990 or 990-EZ) 2016

Schedule C (Form 990 or 990-EZ) 2010	3 ENVIRONMENTAL WORKING GROUP	52-2	148600 Page 2
	rganization is exempt under section 501(c)(3) and t	filed Form 5768 (el	ection under
section 501(h)).			
A Check 🕨 🛄 if the filing organi	zation belongs to an affiliated group (and list in Part IV each affiliate	ed group member's nam	e, address, EIN,
expenses, and sh	nare of excess lobbying expenditures).		
B Check ▶ 🛄 if the filing organi	zation checked box A and "limited control" provisions apply.	-	
	nits on Lobbying Expenditures nditures" means amounts paid or incurred.)	<b>(a)</b> Filing organization's totals	<b>(b)</b> Affiliated group totals
1a Total lobbying expenditures to ir	fluence public opinion (grass roots lobbying)		
<b>b</b> Total lobbying expenditures to ir	nfluence a legislative body (direct lobbying)		
c Total lobbying expenditures (add	d lines 1a and 1b)	550,897.	
d Other exempt purpose expendit	ures	10,276,244.	
	ires (add lines 1c and 1d)	10,827,141.	
f Lobbying nontaxable amount. E	nter the amount from the following table in both columns.	691,357.	
If the amount on line 1e, column (a	) or (b) is: The lobbying nontaxable amount is:		
Not over \$500,000	20% of the amount on line 1e.		
Over \$500,000 but not over \$1,0	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 \$1	7,000,000 \$225,000 plus 5% of the excess over \$1,500,000.		
Over \$17,000,000	\$1,000,000.	]	
g Grassroots nontaxable amount (	enter 25% of line 1f)	172,839.	
h Subtract line 1g from line 1a. If z	ave extern o	0	
i Subtract line 1f from line 1c. If ze	,	0.	
	zero on either line 1h or line 1i, did the organization file Form 4720	•••	
reporting section 4911 tax for th		[	Yes No
:	4-Year Averaging Period Under section 501(h) that made a section 501(h) election do not have to complete a See the separate instructions for lines 2a through 2f.)		elow.

	Lobbying Expen	ditures During 4-Yea	ar 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	500,677.	561,840.	698,864.	691,357.	2,452,738.
<b>b</b> Lobbying ceiling amount (150% of line 2a, column(e))					3,679,107.
<b>c</b> Total lobbying expenditures	538,701.	518,675.	687,068.	550,897.	2,295,341.
d Grassroots nontaxable amount	125,169.	140,460.	174,716.	172,839.	613,184.
e Grassroots ceiling amount (150% of line 2d, column (e))					919,776.
f Grassroots lobbying expenditures	70,187.	83,393.	131,855.	109,560.	394,995.
f Grassroots lobbying expenditures	70,187.	83,393.	131,855.	109,560.	394,99

Schedule C (Form 990 or 990-EZ) 2016

632042 11-10-16

### 52-2148600 Page 3

# 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 e	ach "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description	(a)		(b	)
of the	bbbying activity.	Yes	No	Amo	ount
1 a	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: Volunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements?				
	Mailings to members, legislators, or the public?				
	Publications, or published or broadcast statements?				
	Grants to other organizations for lobbying purposes?				
	Direct contact with legislators, their staffs, government officials, or a legislative body?				
	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities?				
j	Total. Add lines 1c through 1i				
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
	If "Yes," enter the amount of any tax incurred under section 4912				
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	on 501(c)(	5), or se	ection	
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?				
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the				
Par	t III-B Complete if the organization is exempt under section 501(c)(4), section				
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."	"No," OR	(b) Par	t III-A, lir	ne 3, is
1	Dues, assessments and similar amounts from members		1		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures)	cal			
	expenses for which the section 527(f) tax was paid).				
а	Current year		<b>2</b> a		
b	Carryover from last year		<b>2</b> b		
с	Total		2c		
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3		
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exc				
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and p	oolitical			
	expenditure next year?				
5	Taxable amount of lobbying and political expenditures (see instructions)		5		
Par	t IV Supplemental Information				
Provi	de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group	o list); Part II-	A, lines 1 a	and 2 (see	
instru	ictions); and Part II-B, line 1. Also, complete this part for any additional information.				

Schedule C (Form 990 or 990-EZ) 2016

632043 11-10-16



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



	nent of the Treasury Revenue Service	► Information about Schedule D (For	Attach to Form 990. m 990) and its instructions is at www.ir	rs aov/fo	rm990	Open to Public Inspection
-	e of the organizat			<u>0.gov//o</u>		/er identification number
Italii	or the organizat	ENVIRONMENTAL WORK	ING GROUP		p.o,	52-2148600
Par	t I Organiz	ations Maintaining Donor Advise	d Funds or Other Similar Funds	s or A	count	
		on answered "Yes" on Form 990, Part IV, lin				·
			(a) Donor advised funds	(b	) Funds	and other accounts
1	Total number at e	nd of year				
2		of contributions to (during year)				
		of grants from (during year)				
		at end of year				
		on inform all donors and donor advisors in		sed func	ls	
	-	on's property, subject to the organization's	-			Yes No
6		on inform all grantees, donors, and donor a				
	for charitable purp	poses and not for the benefit of the donor of	or donor advisor, or for any other purpose	conferr	ing	
	impermissible priv	vate benefit?				🖸 Yes 📃 No
Par	t II Conserv	vation Easements. Complete if the org	ganization answered "Yes" on Form 990,	Part IV,	line 7.	
1	Purpose(s) of con	servation easements held by the organizati	on (check all that apply).			
	Preservation	n of land for public use (e.g., recreation or e	education)	orically	importan	t land area
	Protection of	of natural habitat	Preservation of a cert	tified his	toric stru	icture
	Preservation	n of open space				
2	Complete lines 2a	a through 2d if the organization held a quali	fied conservation contribution in the form	of a cor		
	day of the tax yea	ır.			He	ld at the End of the Tax Year
а	Total number of c	onservation easements		L	2a	
	-			F	2b	
С	Number of conser	rvation easements on a certified historic str	ucture included in (a)	L	2c	
d	Number of conser	rvation easements included in (c) acquired	after 8/17/06, and not on a historic struct	ure		
		nal Register			2d	
3	Number of conser	rvation easements modified, transferred, re	leased, extinguished, or terminated by the	e organi	zation du	uring the tax
	year 🕨					
		where property subject to conservation ea				
		ation have a written policy regarding the pe				
		forcement of the conservation easements i				
6	Staff and voluntee	er hours devoted to monitoring, inspecting,	handling of violations, and enforcing con	servatio	n easem	ents during the year
_		<u> </u>				
7		ses incurred in monitoring, inspecting, hand	aling of violations, and enforcing conserva	ation eas	sements	during the year
•	►\$				(1)	
8		rvation easement reported on line 2(d) abov	•			
•		n)(4)(B)(ii)? be how the organization reports conservati				
9		•	•			
	conservation ease	ble, the text of the footnote to the organiza	tion's financial statements that describes	the orga	anization	is accounting for
Par		ations Maintaining Collections o	f Art. Historical Treasures. or O	ther S	imilar	Assets.
		if the organization answered "Yes" on Form				
1a		elected, as permitted under SFAS 116 (AS		ment an	d balanc	e sheet works of art.
	-	es, or other similar assets held for public ext				
		otnote to its financial statements that descri				,
b		elected, as permitted under SFAS 116 (AS		t and ba	lance sh	eet works of art, historical
	U U	r similar assets held for public exhibition, e				
	relating to these if		,		<i>,</i> <b>, , ,</b>	5
	-	uded on Form 990, Part VIII, line 1			▶ \$	
					► \$	
2	.,	received or held works of art, historical tre			· · -	
	-	unts required to be reported under SFAS 1		<b>2</b> / F		
	-	l on Form 990, Part VIII, line 1			▶ \$	
		n Form 990, Part X			▶ \$	

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 632051 08-29-16

Schedule D (Form 990) 2016

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Sche		MENTAL WOR						52-21			age <b>2</b>
Pa	t III Organizations Maintaining C	Collections of A	rt, Hist	torical Tr	easures,	or Othe	r Simila	ar Asse	<b>ts</b> (contir	nued)	
3	Using the organization's acquisition, access	on, and other record	ds, checl	k any of the	following the	at are a sig	gnificant	use of its	collectio	n item	S
	(check all that apply):										
а	Public exhibition	C			hange progra						
b	Scholarly research	e		Other							
С	Preservation for future generations										
4	Provide a description of the organization's c							ose in Par	t XIII.		
5	During the year, did the organization solicit of								7.2		1
Da	to be sold to raise funds rather than to be m t IV Escrow and Custodial Arran								Yes		No
Fai	<b>t IV</b> Escrow and Custodial Arran reported an amount on Form 990, Pa		ete if the	organizatio	n answered	"Yes" on I	-orm 990	), Part IV,	line 9, or		
1a	Is the organization an agent, trustee, custod		diarv for	contribution	s or other as	ssets not i	ncluded				
	on Form 990, Part X?								Yes		No
b	If "Yes," explain the arrangement in Part XIII										
			-						Amoun	t	
с	Beginning balance						1c				
	Additions during the year										
	Distributions during the year										
f	Ending balance						1f		_		-
2a	Did the organization include an amount on F	orm 990, Part X, line	21, for	escrow or cu	ustodial acco	ount liabilit	ty?	L	Yes		No
_	If "Yes," explain the arrangement in Part XIII.								<u></u>		
Pa	<b>t V</b> Endowment Funds. Complete								_		<del></del>
		(a) Current year	<b>(b)</b> P	rior year	(c) Two yea	rs back (	<b>d)</b> Three y	ears back	<b>(e)</b> Four	years	back
1a	Beginning of year balance										
b	Contributions										
	Net investment earnings, gains, and losses										
d	Grants or scholarships										
е	Other expenditures for facilities										
	and programs										
	Administrative expenses										
g 2	End of year balance Provide the estimated percentage of the cur	ront year and balance	l no (lino 1	a column (c	)) hold as:						
ے a	Board designated or quasi-endowment	rent year end balant	ر ۱۱۱۱۰ عر %	g, column (a	<i>i))</i> Heiu as.						
b	Permanent endowment	%									
	Temporarily restricted endowment	%									
-	The percentages on lines 2a, 2b, and 2c sho										
3a	Are there endowment funds not in the posse		ation tha	at are held a	nd administe	ered for th	e organiz	ation			
	by:	0					Ũ		[	Yes	No
	(i) unrelated organizations								3a(i)		
	(ii) related organizations								3a(ii)		
b	If "Yes" on line 3a(ii), are the related organization	ations listed as requi	red on S	chedule R?					3b		
_4	Describe in Part XIII the intended uses of the	e organization's endo	owment	funds.							
Pa	t VI Land, Buildings, and Equipm	nent.									
	Complete if the organization answere	d "Yes" on Form 990	0, Part I\	/, line 11a. S	See Form 990	0, Part X, I	ine 10.				
	Description of property	<b>(a)</b> Cost or o basis (investr		<b>(b)</b> Cost basis	or other (other)		cumulate reciation	ed	( <b>d)</b> Boo	k value	e
1a	Land										
b	Buildings								,		
	Leasehold improvements				8,904.		58,5			0,3	
d	Equipment				2,702.		30,10			2,5	
	Other				7,169.	3	46,7	/9.		0,3	
Tota	. Add lines 1a through 1e. (Column (d) must e	equal Form 990, Part	X, colur	nn (B), line 1	0c.)				35	3,2	<b>შ</b> ე.

Schedule D (Form 990) 2016

632052 08-29-16

Dart VII	Invostments -	Other Securities.	
	mycamenta -		

Complete if the organization answered "Yes"	on Form 990, 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)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)		

#### Part VIII Investments - Program Related.

Complete if the organization answered "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. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)		

#### Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

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

#### Other Liabilities. Part X

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1.	(a) Description of liability	(b) Book value
(1)	Federal income taxes	
(2)	DEFERRED RENT AND LEASEHOLD	
(3)	ALLOWANCES	61,271.
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total.	(Column (b) must equal Form 990, Part X, col. (B) line 25.)	61,271.

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 🚺

#### Schedule D (Form 990) 2016

632053 08-29-16



Sche	dule D (Form 990) 2016 ENVIRONMENTAL WORKING GROU	P		52-	2148600 Page 4
Pa	t XI Reconciliation of Revenue per Audited Financial Stateme	ents W	ith Revenue per F		
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a	-			
1	Total revenue, gains, and other support per audited financial statements			1	12,039,570.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a	7,456.		
b	Donated services and use of facilities	2b	1,156,929.		
с	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)		360,525.		
е	Add lines 2a through 2d			2e	1,524,910.
3	Subtract line 2e from line 1			3	10,514,660.
4	Amounts included on Form 990, Part VIII, line 12, 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			
	Add lines 4a and 4b			4c	0.
_5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	10,514,660.
Pa	rt XII Reconciliation of Expenses per Audited Financial Statem	nents W	Vith Expenses per	Retu	urn.
Pa	<b>Complete if the organization answered "Yes" on Form 990, Part IV, line 12a</b>		/ith Expenses per	-	
1 1				Retu	urn.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a			1	
1	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements			1	
1 2 a	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25:	2a		1	
1 2 a b	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities	2a 2b	1,156,929.	1	
1 2 b c	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments	2a 2b 2c		1	12,407,422.
1 2 a b c d	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses	2a 2b 2c 2d	1,156,929.	1	12,407,422.
1 2 a b c d	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.)	2a 2b 2c 2d	1,156,929.	1	12,407,422.
1 2 b c d e	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines <b>2a</b> through <b>2d</b>	2a 2b 2c 2d	1,156,929.	1 2e	12,407,422.
1 2 b c d 3	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines <b>2a</b> through <b>2d</b> Subtract line <b>2e</b> from line <b>1</b>	2a 2b 2c 2d	1,156,929.	1 2e	12,407,422.
1 2 b c d e 3 4 a	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines <b>2a</b> through <b>2d</b> Subtract line <b>2e</b> from line <b>1</b> Amounts included on Form 990, Part IX, line 25, but not on line 1:	2a 2b 2c 2d	1,156,929.	1 2e	12,407,422.
1 2 3 4 3 4 b	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines <b>2a</b> through <b>2d</b> Subtract line <b>2e</b> from line <b>1</b> Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.)	2a 2b 2c 2d 4a 4b	1,156,929.	1 2e	12,407,422. 1,517,454. 10,889,968. 0.
1 2 a b c d e 3 4 a b c 5	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines <b>2a</b> through <b>2d</b> Subtract line <b>2e</b> from line <b>1</b> Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.) Add lines <b>4a</b> and <b>4b</b> Total expenses. Add lines <b>3</b> and <b>4c.</b> ( <i>This must equal Form 990, Part I, line 18.</i> )	2a 2b 2c 2d 4a 4b	1,156,929.	1 2e 3	12,407,422.
1 2 d e 3 4 b c 5	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines <b>2a</b> through <b>2d</b> Subtract line <b>2e</b> from line <b>1</b> Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.) Add lines <b>4a</b> and <b>4b</b>	2a 2b 2c 2d 4a 4b	1,156,929.	1 2e 3 4c	12,407,422. 1,517,454. 10,889,968. 0.

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

PART X, LINE 2:

EWG PERFORMED AN EVALUATION OF UNCERTAINTY IN INCOME TAXES FOR THE YEARS

ENDED DECEMBER 31, 2016 AND 2015, AND DETERMINED THAT THERE WERE NO

MATTERS THAT WOULD REQUIRE RECOGNITION IN THE FINANCIAL STATEMENTS OR THAT

MAY HAVE ANY EFFECT ON ITS TAX-EXEMPT STATUS.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

#### SPECIAL EVENT EXPENSES

#### PART XII, LINE 2D - OTHER ADJUSTMENTS:

SPECIAL EVENT EXPENSES

632054 08-29-16

00511013 786783 EWG

360,525.

360,525.

00

Part XIII Supplemental Informati	<b>ion</b> (continued)		
			Schedule D (Form 990) 2016
632055 08-29-16		20	
511013 786783 EWG	2016.04030	32 ENVIRONMENTAL WORKIN	IG GROUP EWG 1

SCHEDULE G (Form 990 or 990-EZ) Department of the Treasury Internal Revenue Service	Complete if th	ental Information Regarding e organization answered "Yes" on organization entered more than \$1 Attach to Form 990 about Schedule G (Form 990 or 990-EZ	Form 5,000 ) or Fo	990, F on Fo rm 99	Part IV, line 17, 18, o rm 990-EZ, line 6a. 0-EZ.	or 19, or if the gov/form990.	OMB No. 1545-0047
Name of the organization		MENTAL WORKING GRO	DUP			Employer	identification number 48600
	ng Activities	Complete if the organization answer t.	ered "Y	'es" oi	n Form 990, Part IV,	line 17. Form 990	)-EZ filers are not
<ul> <li>a Mail solicitation</li> <li>b X Internet and e</li> <li>c Phone solicitation</li> <li>d In-person soli</li> <li>2 a Did the organization key employees lister</li> </ul>	ons email solicitations ations icitations in have a written o ed in Form 990, F highest paid indi	s <b>f</b> Solicita <b>g</b> X Special or oral agreement with any individua Part VII) or entity in connection with p viduals or entities (fundraisers) purs	tion of tion of fundra l (inclue profess	non-g gover aising ding o ional f	overnment grants nment grants events fficers, directors, tru undraising services?	stees, or	
(i) Name and address or entity (fundr		(ii) Activity	(iii) fundr have c or cor contrib	aiser ustody trol of	(iv) Gross receipts from activity	(v) Amount pai to (or retained b fundraiser listed in col. (i	by) to (or retained by)
ANNE LEWIS STRATEGI 1140 19TH STREET NW		CRAFT EMAIL SOLICITATIONS	Yes		0.	104,74	48104,748.
or licensing.	CA,CO,CT,	on is registered or licensed to solicit DC , FL , GA , HI , IL , KS , TN , UT , VA , WA , WV , WI					m registration

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. SEE PART IV FOR CONTINUATIONS

Schedule G (Form 990 or 990-EZ) 2016

632081 09-12-16



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

		of fundraising event contributions and gro	oss income on Form 990	-EZ, lines 1 and 6b. List	events with gross recei	pts greater than \$5,000.
			<b>(a)</b> Event #1	<b>(b)</b> Event #2	(c) Other events NONE	(d) Total events (add col. (a) through
				HCHW LA GALA		col. (c))
ne			(event type)	(event type)	(total number)	
Revenue	1	Gross receipts	292,008.	96,350.		388,358.
	2	Less: Contributions	263,058.	74,650.		337,708.
	3	Gross income (line 1 minus line 2)	28,950.	21,700.		50,650.
	4	Cash prizes				
ş	5	Noncash prizes				
Direct Expenses	6	Rent/facility costs	187,663.	68,877.		256,540.
irect E	7	Food and beverages	66,834.	33,116.		99,950.
Ō	8	Entertainment		4,035.		4,035.
	9 10	Other direct expenses Direct expense summary. Add lines 4 through			<b></b>	360,525.
	11					-309,875.
Pa	rt I	<b>Gaming.</b> Complete if the organization a		n 990, Part IV, line 19, or	reported more than	
		\$15,000 on Form 990-EZ, line 6a.	1			1
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Rev						
	1	Gross revenue				
ses	2	Cash prizes				-
Direct Expenses	3	Noncash prizes				
Direct	4	Rent/facility costs				
	5	Other direct expenses				
	6	Volunteer labor	└── Yes % └── No	└── Yes % └── No	└── Yes % └── No	
	7	Direct expense summary. Add lines 2 through	n 5 in column (d)			
	8	Net gaming income summary. Subtract line 7	from line 1, column (d)			
9	Ent	ter the state(s) in which the organization condu	icts coming activitios:			
		the organization licensed to conduct gaming a		states?		Yes No
		No," explain:				
				erminated during the tax	year?	Yes No
		ere any of the organization's gaming licenses re				
		ere any of the organization's gaming licenses re Yes," explain:				
b	lf "				Schedule G (Fo	orm 990 or 990-EZ) 2016

Sch	edule G (Form 990 or 990-EZ) 2016 ENVIRONMENTAL WORKING GROUP 52-2	21486	500	Page <b>3</b>
11	Does the organization conduct gaming activities with nonmembers?	Υ	/es	No
	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed			
	to administer charitable gaming?	Υ	/es	No No
13	Indicate the percentage of gaming activity conducted in:			
a	I The organization's facility	13a		%
k	An outside facility	13b		%
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:			
	Address			
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	🗀 Y	/es	🗌 No
k	o If "Yes," enter the amount of gaming revenue received by the organization <b>&gt;</b> \$ and the amount			
	of gaming revenue retained by the third party $\blacktriangleright$ \$			
C	If "Yes," enter name and address of the third party:			
	Name			
	Address			
16	Gaming manager information:			
	Name			
	Gaming manager compensation <b>&gt;</b> \$			
	Description of services provided 🕨			
	Director/officer Employee Independent contractor			
17	Mandatory distributions:			
	Is the organization required under state law to make charitable distributions from the gaming proceeds to			
	retain the state gaming license?	י 🗔 א	/es	🗌 No
k	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the			
_	organization's own exempt activities during the tax year 🕨 \$			
Pa	ITTIV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, li	nes 9, 9	9b, 10	b, 15b,
	15c, 16, and 17b, as applicable. Also provide any additional information. See instructions			
SC	HEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISER	lS:		
(I	) NAME OF FUNDRAISER: ANNE LEWIS STRATEGIES, LLC			
(I	) ADDRESS OF FUNDRAISER:			
11	40 19TH STREET NW, SUITE 300, WASHINGTON, DC 20036			
	I) ACTIVITY: CRAFT EMAIL SOLICITATIONS & PURCHASE SOCIAL MEDIA	A ADS	5	
<u>,                                     </u>				

632083 09-12-16

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		Schedule G (Form 990 or 99
32084 1-01-16	26	
11013 786783 EWG	36 2016.04030 ENVIRONMENTAL	WORKING GROUPEWG

SC	HEDULE J Compensation Information	ON	/IB No. <sup>-</sup>	1545-00	47
	rm 990) For certain Officers, Directors, Trustees, Key Employees, and Highest		20	16	
(, )	Compensated Employees		2016		
	Complete if the organization answered "Yes" on Form 990, Part IV, line 23.	O	oen to	Publ	ic
	tment of the Treasury al Revenue Service ► Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form99		Inspe		
		ployer identi	ficati	on nu	mber
	ENVIRONMENTAL WORKING GROUP	52-214	860	0	
Pa	rt I Questions Regarding Compensation				
				Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990	),			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.	,			
	First-class or charter travel	use			
	Travel for companions				
	Tax indemnification and gross-up payments				
	Discretionary spending account Personal services (such as, maid, chauffeur, c	hef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or				
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain		1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,				
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?		2		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization	's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization t	0			
	establish compensation of the CEO/Executive Director, but explain in Part III.				
	X         Compensation committee         Written employment contract				
	X         Independent compensation consultant         X         Compensation survey or study				
	X Form 990 of other organizations	nittee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing				
	organization or a related organization:				
а	Receive a severance payment or change-of-control payment?		4a	Х	
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?		4b		X
С	Participate in, or receive payment from, an equity-based compensation arrangement?		4c		Х
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.				
-	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.				
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation				
-	contingent on the revenues of:		<b>F</b> -		х
	The organization?		5a		X
D	Any related organization?		5b		
6	If "Yes" on line 5a or 5b, describe in Part III.				
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation				
а	contingent on the net earnings of:		6a		х
	The organization?		6b		X
D D	Any related organization? If "Yes" on line 6a or 6b, describe in Part III.		00		
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments				
'	not described on lines 5 and 6? If "Yes," describe in Part III		7		х
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the				
5	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III		8		х
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in		5		
Ŭ	Regulations section 53.4958-6(c)?		9		
LHA	For Paperwork Reduction Act Notice, see the Instructions for Form 990.	Schedule J	-	n 990)	2016

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#### 52-2148600

#### 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.

(A) Name and Title		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns	(F) Compensation in column (B)
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	Denents	(B)(i)-(D)	reported as deferred on prior Form 990
(1) KEN COOK	(i)	295,000.	0.	0.	13,146.	18,896.	327,042.	0.
PRESIDENT	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) SCOTT MALLAN	(i)	165,000.	0.	0.	8,250.	6,919.	180,169.	0.
VP FINANCE & COO	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) SCOTT FABER	(i)	233,438.	0.	0.	11,672.	12,589.	257,699.	0.
SENIOR VP GOVERNMENT AFFAIRS	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) CRAIG COX	(i)	207,500.	0.	0.	10,375.	6,919.	224,794.	0.
SENIOR VP OF AGRICULTURE	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) JOCELYN BABUSCIO	(i)	192,500.	0.	0.	9,625.	15,147.	217,272.	0.
VP DEVELOPMENT	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) CHRIS CAMPBELL	(i)	182,250.	0.	0.	0.	18,896.	201,146.	0.
VP INFORMATION TECHNOLOGY	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) MAURA WALSH	(i)	166,667.	0.	0.	8,333.	6,919.	181,919.	0.
VP DIGITAL STRAT. (AS OF 03/2016)	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) ALEX FORMUZIS	(i)	166,500.	0.	0.	8,325.	18,896.	193,721.	0.
DIRECTOR OF COMMUNICATIONS	(ii)	0.	0.	0.	0.	0.	0.	0.
(9) WILLIAM WALKER	(i)	156,250.	0.	0.	7,812.	27,201.	191,263.	0.
VP AND MANAGING EDITOR	(ii)	0.	0.	0.	0.	0.	0.	0.
(10) ELAINE SHANNON	(i)	150,438.	0.	4,919.	7,768.	6,919.	170,044.	0.
EDITOR IN CHIEF- UNTIL 12/2016	(ii)	0.	0.	0.	0.	0.	0.	0.
(11) BILL ALLAYAUD	(i)	148,000.	0.	0.	7,400.	0.	155,400.	0.
DIRECTOR OF GOVERNMENT AFFAIRS, CA	(ii)	0.	0.	0.	0.	0.	0.	0.
(12) HEATHER WHITE	(i)	0.	0.	153,333.	0.	12,880.	166,213.	0.
FORMER EXECUTIVE DIR UNTIL 12/2015	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

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 4A:

HEATHER WHITE, WHO SERVED AS EXECUTIVE DIRECTOR UNTIL DECEMBER 31, 2015,

RECEIVED A SEVERANCE PAYMENT OF \$153,333 DURING 2016.

Schedule J (Form 990) 2016



#### **SCHEDULE M** (Form 990)

# **Noncash Contributions**

OMB No. 1545-0047 2016

Department of the Treasury Internal Revenue Service

Dort

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. Attach to Form 990.

Open To Public Inspection

52-2148600

Name of the organization

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

#### ENVIRONMENTAL WORKING GROUP Types of .....

Fal								
		<b>(a)</b> Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of de noncash contribu	etermir	•	S
1	Art - Works of art			· ····································				
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities - Publicly traded	Х	12	91,201.	SALES PRICE			
10	Securities - Closely held stock			_ <b>,</b> _				
11	Securities - Partnership, LLC, or							
	trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation contribution -							
	Historic structures							
14	Qualified conservation contribution - Other							
15	Real estate - Residential							
16	Real estate - Commercial							
17	Real estate - Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other • ()							
26	Other  ( )							
27	Other  ( )							
28	Other  ( )							
29	Number of Forms 8283 received by the organized	zation durin	g the tax year for c	ontributions				
	for which the organization completed Form 828	83, Part IV, I	Donee Acknowledg	gement				
							Yes	No
30a	During the year, did the organization receive by	y contributio	on any property rep	ported in Part I, lines 1 throu	gh 28, that it			
	must hold for at least three years from the date	e of the initia	al contribution, and	l which isn't required to be u	used for			
	exempt purposes for the entire holding period?	?				30a		Х
b	If "Yes," describe the arrangement in Part II.							
31	Does the organization have a gift acceptance p	policy that re	equires the review	of any nonstandard contrib	utions?	31		Х
32a	Does the organization hire or use third parties							
-	contributions?					32a		Х
	If "Yes," describe in Part II.			<b>,</b> ,,, , ,,,, ,				
33	If the organization didn't report an amount in c	oiumn (c) fo	r a type of propert	y for which column (a) is che	ecked,			
	describe in Part II.			•	Cabadula M	( <b>-</b>		

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

Schedule M (Form 990) (2016)

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632141 08-23-16



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

SCHEDULE M, PART I, COLUMN (B):

Part II

THE NUMBER IN THIS COLUMN REPRESENTS THE NUMBER OF CONTRIBUTIONS.

Schedule M (Form 990) (2016)

632142 08-23-16

ING 1

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service Name of the organization

#### 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.

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

OMB No. 1545-0047

ENVIRONMENTAL WORKING GROUP

Employer identification number 52 - 2148600

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

HEALTHY FOOD, FARMS, WATER AND PEOPLE.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS: OUR SCIENCE PROGRAM IS WORKING TO PRODUCE CUTTING-EDGE, NEWSWORTHY RESEARCH AND CONSUMER EDUCATION PROJECTS ON ENVIRONMENTAL HEALTH TO EDUCATE CITIZEN ACTIVISTS, MOVE MARKETS AND GENERATE DEBATE ON CHEMICAL POLICY REFORM. EWG HAS A DEDICATED TEAM OF SCIENTISTS WITH EXPERTISE IN TOXICOLOGY, CHEMISTRY, PUBLIC HEALTH AND NUTRITION. OUR TEAM OF A DOZEN EXPERTS IS ONE OF THE LARGEST AND MOST RECOGNIZED IN THE ENVIRONMENTAL FIELD.

FROM THE TOP RESEARCHERS ON ENVIRONMENTAL HEALTH ISSUES, TO AN AWARD WINNING GOVERNMENT AFFAIRS SHOP, TO COPYWRITERS TO HELP US TELL OUR ENVIRONMENTAL HEALTH STORIES TO A ROBUST ONLINE COMMUNITY OF MILLIONS OF CONSUMERS - EWG IS INSPIRING CHANGE, BOTH BIG AND SMALL. THROUGH OUR HABIT CHANGING GUIDANCE, TO OUR MARKET AND POLICY MOVING SCIENCE WE ARE TRANSFORMING THE PERCEPTION THAT HEALTH AND WELLNESS IS A LUXURY AND REDEFINING IT AS A NECESSITY.

BECAUSE WE ALL HAVE A RIGHT TO LIVE IN AN "ENVIRONMENT" WE CAN TRUST.

 FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:

 BETTERMENT OF OUR FARMLAND AND ULTIMATELY OUR DINNER TABLES. OUR GOAL

 IS TO ILLUSTRATE THE CONNECTION BETWEEN THE BROKEN U.S. AGRICULTURAL

 SYSTEM, FARM SUBSIDIES, AND THE DAMAGE BEING DONE TO OUR LAND AND

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

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HEALTH, SUCH AS WATER QUALITY DEGRADATION, SOIL EROSION, AND THE
INCREASING LACK OF ACCESS TO HEALTHY FOOD AND FRESH PRODUCE FOR TODAY'S
FAMILIES. OUR TWO-TRACK STRATEGY IS DESIGNED TO ADDRESS THESE ISSUES
AND PUSH U.S. AGRICULTURE IN A MORE SUSTAINABLE DIRECTION THAT STANDS
UP FOR BOTH THE HEALTH OF OUR LAND AND OUR FOOD.
FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:
LICENSING AND MARKETING
EXPENSES \$ 734,708. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.
NATURAL RESOURCES
EXPENSES \$ 163,469. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.
FORM 990, PART VI, SECTION A, LINE 2:
NINA MONTEE KARP, DIRECTOR, IS THE SPOUSE OF DR. HARVEY KARP, DIRECTOR.
FORM 990, PART VI, SECTION B, LINE 11B:
THE VP FINANCE AND CHIEF OPERATING OFFICER OF EWG REVIEWS THE FEDERAL FORM
990 WITH THE PRESIDENT OF EWG IN ITS DRAFT FORM AND ANY REQUIRED REVISIONS
ARE SUBMITTED TO THE EXTERNAL TAX TEAM. THE FINAL DRAFT FEDERAL FORM 990 IS
DISTRIBUTED TO THE BOARD OF DIRECTORS BEFORE FILING WITH THE INTERNAL
REVENUE SERVICE.
FORM 990, PART VI, SECTION B, LINE 12C:
THE BOARD OF DIRECTORS OF EWG ANNUALLY REVIEWS THE CONFLICT OF INTEREST
POLICY (COI) AND DISCLOSES ANY POTENTIAL CONFLICT OF INTEREST. ALL EWG
STAFF AND BOARD OF DIRECTORS SIGN A CONFLICT OF INTEREST DISCLOSURE
STATEMENT ANNUALLY. THE SIGNED DOCUMENTS ARE REVIEWED BY THE PRESIDENT AND
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Employer identification number 52 - 2148600

Schedule O (Form 990 or 990-EZ) (2016)

ENVIRONMENTAL WORKING GROUP

Name of the organization

Schedule O (Form 990 or 990-EZ) (2016)	Page <b>2</b>
Name of the organization ENVIRONMENTAL WORKING GROUP	Employer identification number $52 - 2148600$
GENERAL COUNSEL OF EWG AND ARE KEPT BY THE VP FINANCE AND	CHIEF OPERATING
OFFICER OF EWG. THE COI POLICY IS ALWAYS TAKEN INTO CONSI	DERATION WHEN
THERE IS THE POTENTIAL FOR CONFLICT, PARTICULARLY WHEN SI	GNING NEW
CONTRACTS OR BEGINNING NEW RELATIONSHIPS. ANY POSSIBLE AP	PEARANCE OF
CONFLICT OF INTEREST THAT ARISES IN THE COURSE OF BUSINES	S IS RESEARCHED TO
DETERMINE THE EXISTENCE OF A CONFLICT. IF A CONTRACT IS T	O BE MADE WITH A
RELATED PARTY, IT IS DISCLOSED TO THE BOARD OF DIRECTORS	AND A VOTE IS
TAKEN PRIOR TO ENTERING INTO THE CONTRACT. IF EWG STAFF M	EMBERS IDENTIFY A
CONFLICT OF INTEREST, THE GENERAL COUNSEL OR VP FINANCE A	ND CHIEF OPERATING
OFFICER OF EWG SHARE THIS INFORMATION WITH THE EXECUTIVE	COMMITTEE OF THE
BOARD OF DIRECTORS FOR ITS ACTION. BOARD MEMBERS ARE PREC	LUDED FROM VOTING
ON MATTERS FOR WHICH A CONFLICT EXISTS.	

FORM 990, PART VI, SECTION B, LINE 15:

EWG'S OFFICERS' COMPENSATIONS WERE DETERMINED USING A REVIEW AND APPROVAL BY INDEPENDENT PERSONS, COMPARABILITY DATA, AND CONTEMPORANEOUS SUBSTANTIATION OF THE DELIBERATION AND DECISION. THE BOARD OF DIRECTORS OF EWG DESIGNATES A COMPENSATION COMMITTEE OF BOARD MEMBERS TO REVIEW THE PRESIDENT'S AND THE VP FINANCE & COO'S COMPENSATION. COMPENSATION COMPARISON DATA IS USED TO DETERMINE APPROPRIATE COMPENSATION LEVELS. EXTERNAL SALARY SURVEYS ARE PURCHASED EVERY YEAR TO COMPARE LIKE ORGANIZATIONS BY AREA OF FOCUS, GEOGRAPHIC AREA, AND FUNCTION. COMPARABLE ENVIRONMENTAL NON-PROFITS' FEDERAL FORM 990 ARE ALSO REVIEWED FOR SALARY INFORMATION.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990: AL, AK, AZ, AR, CA, CO, CT, FL, GA, HI, IL, KS, KY, MD, ME, MA, MI, MN, MS, NH, NJ, NM, NY, NC, ND OH, OK, OR, PA, RI, SC, TN, UT, VA, WA, WV, WI 632212 08-25-16 Schedule O (Form 990 or 990-EZ) (2016) 44

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Name of the organization

FORM 990, PART VI, SECTION C, LINE 19:

GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS

ARE NOT AVAILABLE TO THE PUBLIC. ANNUAL INTERNAL REVENUE SERVICE FEDERAL

FORM 990 AND THE FORM 1023 ARE PROVIDED UPON REQUEST.

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