# Form 9 (Rev. January 2020) Department of the Treasury Internal Revenue Service

# **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.

► Go to www.irs.gov/Form990 for instructions and the latest information.

and ending MAR 31, 2020

OMB No. 1545-0047 Open to Public Inspection

AF	or the	2019 calendar year, or tax year beginning APR 1, 2019 and ending	MAR 31, 2020					
B	Check if	C Name of organization	D Employer identifi	cation number				
	Addres			4.6				
	lchang		52-16607					
_	return Final	Number and street (or P.O. box if mail is not delivered to street address)  Room/su	The second secon					
	return/		202-872-					
	termin ated Amend	The state of the second of the	G Gross receipts \$	8,161,853.				
_	⊒return ∃Applic	WASHINGTON, DC 20000	H(a) Is this a group re					
L	tion pendir	F Name and address of principal officer:ALISA GRAVITZ  SAME AS C ABOVE	for subordinates	· · · · · · · · · · · · · · · · · · ·				
1 7	Toy ov			ncluded? Yes No				
		e: WWW.GREENAMERICA.ORG	H(c) Group exemption					
				A State of legal domicile: DC				
	art I	Summary	out of formation.	e data of logal dofficials, — —				
		Briefly describe the organization's mission or most significant activities: GREEN AMI	ERICA IS A NO	N-PROFIT				
Activities & Governance		CHARITABLE AND MEMBERSHIP ORGANIZATION THAT I	EDUCATES ITS	MEMBERS AND				
rna	2	Check this box if the organization discontinued its operations or disposed of m	ssets.					
ove	1	Number of voting members of the governing body (Part VI, line 1a)		14				
Ö	1	Number of independent voting members of the governing body (Part VI, line 1b)		10				
65		Total number of individuals employed in calendar year 2019 (Part V, line 2a)		. 51				
7	6	Total number of volunteers (estimate if necessary)	6	5				
Acti	7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	28,878.				
	b	Net unrelated business taxable income from Form 990-T, line 39	7b	-358,842.				
Revenue		,	Prior Year	Current Year				
	1	Contributions and grants (Part VIII, line 1h)	13,194,558.	4,530,619.				
		Program service revenue (Part VIII, line 2g)	312,819.	369,773.				
Re	1	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	786,377.	24,695.				
	1	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	83,696.	88,730.				
-	-	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	14,377,450.	5,013,817. 491,705.				
	1	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	109,373.	491,703.				
		Benefits paid to or for members (Part IX, column (A), line 4)	2,665,955.	2,629,455.				
Expenses		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	0.	0.				
Den	loa	Professional fundraising fees (Part IX, column (A), line 11e)  Total fundraising expenses (Part IX, column (D), line 25)  464,407.	0.6					
EX		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	1,601,822.	1,627,546.				
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	4,437,152.					
	1	Revenue less expenses. Subtract line 18 from line 12	9,940,298.	265,111.				
or		Total de les de de la constant de la	Beginning of Current Year	End of Year				
sets	20	Total assets (Part X, line 16)	12,091,027.	12,303,429.				
ASS	21	Total liabilities (Part X, line 26)	543,643.	929,676.				
Net Assets or Fund Balances	22	Net assets or fund balances. Subtract line 21 from line 20	11,547,384.	11,373,753.				
Pa	art II	Signature Block						
		lties of perjury, I declare that I have examined this return, including accompanying schedules and stat		y knowledge and belief, it is				
true	, correc	t, and complete. Declaration of preparer (other than officer) is based on all information of which prepare	the state of the s					
	201	Alixa thant	12/11/2 Date	020				
Sig		Signature of officer DDFIGURE (CFO	Date					
Her	е	ALISA GRAVITZ, PRESIDENT/CEO  Type or print name and title						
			Date Check	II PTIN				
Paid	4	Print/Type preparer's name  NEIL E. BERGER  NEIL E. BERGER	12/08/20 Check Life self-employ					
	parer	Firm's name ADEPTUS PARTNERS LLC	Firm's EIN	20-1835208				
	Only	Firm's address 3311 OLNEY SANDY SPRING RD	Limpeni	24 700000				
OLNEY, MD 20832-1411 Phone no. (301)929-9700								
May	the I	RS discuse this raturn with the preparer shown above? (see instructions)	17 110110 1107 ( 0	X Yes No				

Par	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:
	TO HARNESS ECONOMIC POWERTHE STRENGTH OF CONSUMERS, INVESTORS,
	BUSINESSES, AND THE MARKETPLACETO CREATE A SOCIALLY JUST AND
	ENVIRONMENTALLY SUSTAINABLE SOCIETY.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue if any favorab program continue reported
 4а	(Code:) (Expenses \$1, 286, 006 • _ including grants of \$ 491, 705 • ) (Revenue \$ 20, 109 • )
	CONSUMER EDUCATION:
	GREEN LIVING - THROUGH PUBLICATIONS, WEBSITES, EMAIL NEWSLETTERS AND
	SOCIAL MEDIA, PROVIDES PUBLIC EDUCATION ON GREEN LIVING, INCLUDING
	REDUCING ENERGY AND RESOURCE USE, AVOIDING TOXINS REUSING AND
	RECYCLING, INCLUDING:
	GREEN AMERICAN - A MAGAZINE COVERING THE SOCIAL AND ENVIRONMENTAL
	ISSUES OF OUR TIME.
	ISSUES OF OUR TIME.
	ACTION E NEWSLETTER - PROVIDES GREEN LIVING INFORMATION AND
	OPPORTUNITIES TO TAKE ACTION FOR A GREEN ECONOMY AND CORPORATE
4b	(Code:) (Expenses \$
	INNOVATIVE GREEN BUSINESS PROGRAMS:
	GREENPAGES.ORG - A DIRECTORY OF GREEN BUSINESSES TO HELP CONSUMERS FIND
	BUSINESSES THAT HELP GROW THE GREEN ECONOMY.
	GREEN BUSINESS NETWORK - HELPS GREEN BUSINESSES GROW, THRIVE, AND LEARN
	HOW TO ADOPT THE MOST RIGOROUS SUSTAINABILITY PRACTICES.
	TOW TO TEST THE MOST KICOKOOD SOSTILIMESTELLI TRACTICES.
	GREEN BUSINESS WEBINARS - GREEN BUSINESS WEBINARS ARE HELD THROUGHOUT
	THE YEAR FOR OUR BUSINESS MEMBERS AND ALLIES.
	PEOPLE & PLANET AWARD - THIS AWARD PROGRAM HIGHLIGHTS A DIFFERENT
4c	(Code:) (Expenses \$1,844,057. including grants of \$) (Revenue \$) (Revenue \$)
	CENTER FOR SUSTAINABILITY SOLUTIONS:
	WORKS ON BRINGING INNOVATIVE GREEN ECONOMY SOLUTIONS TO SCALE,
	INCLUDING SUPPLY CHAIN SOLUTIONS. INNOVATION NETWORKS INCLUDE:
	INCLUDING BOTTET CHILLY BOLDTICHES INTO THE CONTROL OF THE CONTROL
	CLEAN ELECTRONICS PRODUCTION NETWORK: WORKS TO REMOVE TOXIC CHEMICALS
	FROM THE ELECTRONIC SUPPLY CHAIN.
	SOLAR CIRCLE: WORKS TO ACCELERATE THE ADOPTION OF SOLAR ENERGY TO BE
	50% OF ENERGY BY 2050.
	OLIMANDE CARE LENDING. MODUC DO ACCELEDADE DAMENC CECTOR DUACE COM CE
	CLIMATE SAFE LENDING: WORKS TO ACCELERATE BANKING SECTOR PHASE OUT OF
4d	Other program services (Describe on Schedule O.) (Expenses \$ 468,975 • including grants of \$ ) (Revenue \$ 7,332 •)
	Total program service expenses 4,119,588.
	Form <b>990</b> (2019)

52-1660746 Page 3

# Form 990 (2019) GREEN AMERICA Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?  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			X
	public office? If "Yes," complete Schedule C, Part I  Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	3		
4	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		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		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 donor-restricted endowments			<del></del>
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	Х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable.			
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		Х
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		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	Х	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete 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		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	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			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	X	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	х	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		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		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			,
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			_ v
00	complete Schedule G, Part III	19		X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		<u> </u>
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		$\vdash$
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	
	democra government out at ix, column (x), mic 1: ii 100, complete comedia i, i atto i and ii	~ 1	-	1

Form 990 (2019) GREEN AMERICA

Part IV Checklist of Required Schedules (continued)

			Yes	No	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		103	140	
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current				
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete				
	Schedule J	23		Х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the				
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete	24a		X	
h	Schedule K. If "No," go to line 25a	24b		<u> </u>	
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease				
	any tax-exempt bonds?	24c			
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d			
25 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit				
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		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			v	
00	Schedule L, Part I	25b		Х	
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current				
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If</i> "Yes," complete Schedule L, Part II	26		х	
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,				
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled				
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		Х	
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV				
	instructions, for applicable filing thresholds, conditions, and exceptions):				
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If				
	"Yes," complete Schedule L, Part IV	28a	X		
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b	Х	-	
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If "Yes," complete Schedule L, Part IV	28c	х		
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X		
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation				
	contributions? If "Yes," complete Schedule M	30		Х	
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			l	
	Schedule N, Part II	32		Х	
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations				
24	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 Part V, line 1	34		X	
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X	
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity				
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?				
	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	37		x	
00	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI				
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	20	х		
Pai	Note: All Form 990 filers are required to complete Schedule 0 It V Statements Regarding Other IRS Filings and Tax Compliance	38	22		
	Check if Schedule O contains a response or note to any line in this Part V				
			Yes	No	
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable				
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable				
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming		-		
	(gambling) winnings to prize winners?	1c	X		

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Form **990** (2019)

#### Statements Regarding Other IRS Filings and Tax Compliance (continued) Part V

2a Striter the number of employees reported on Form W.3. Transmittal of Wage and Tax Statements. 2a 51 b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note: If the sum of lines 1 and 2a is greater than 2C0, you may be required to e-file (see instructions)  3a Did the organization have unrelated business gross income of \$1,000 or more during the year?  3b If Yes,* has it filed a Form 990-T for this year? If YiPo* to line 3b, provide an explanation or other authority over, a financial account in a foreign country. But If Yes, and the comment of the co				Yes	No
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  30 bit the organization have unique sizes than 250, you may be required to effects either structions)  31 bit mover and a six of the struction of t	2a				
Note: if the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)  3a IX  b If Yes, has it filed a Form 990°T for this year? If Yes 10 file is 30, provide an explanation or Schedule 0  3b IX  4a Al any threa during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account; securities account, or other financial account)?  4a IX  5b 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).  5a Was the organization a party to a prohibited tax shelter transaction at year?  5a Was the organization a party to a prohibited tax shelter transaction?  5b IV Yes *to line Sa or 5b, clid the organization file Form 8888 17  6c IV Yes *to line Sa or 5b, clid the organization file Form 8889 17  6d Does the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  6d If Yes, *did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  6d If Yes, *did the organization include with every solicitation and express provided?  7 Organizations that may receive deductible contributions under section 170(c).  8 If Yes, *did the organization include with every solicitation and express provided?  7 Organizations that may receive deductible on the solicitation of the property for which it was required to the Form 8282?  8 If Yes, *did the organization include with every solicitation and express provided?  7 The X IV Yes, *did the organization notity the donor of the value of the goods or services provided?  7 The X IV Yes, *did the organization notity the donor of the value of the goods or services provided?  7 The Yes, *did the organization organization organization organization organization organization organization organization organization organiz		filed for the calendar year ending with or within the year covered by this return			
3a bit the organization have unrelated business gross income of \$1,000 or more during the year?  4b if "Yes," has it filed a Form 900T for this year? I "No' to line 3b, provide an explanation on Schedule O  4c At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial accounts (FBAR).  5c In "Yes," and the freelign country (such as a bank account, securities account, or other financial accounts (FBAR).  5c In "Yes to the freelign country (such as a bank account, securities account, or other financial accounts (FBAR).  5c In "Yes to the freelign country (such as a bank account, securities account, or other financial Accounts (FBAR).  5c In "Yes to the financial account in a freelign country to a prohibitod tax shelter transaction?  5c In "Yes to the financial account in a freelign country to a prohibitod tax shelter transaction?  5c In "Yes," did the organization that it was or is a party to a prohibited tax shelter transaction?  5c In "Yes," did the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that when or tax deductible as charitable contributions?  6c In "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  6c In "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  6c In "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible.  6c In "Yes," did the organization include deductible contributions under solicitation and party for goods and services provided to the payor?  7c In "Yes," indicate the number of forms 8882 filed during the year  9c In "Yes," indicate the number of forms 8882 filed during the year  1 In	b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
b if "Yes," has it flied a Form 990-T for this year? if "No" to line 3b, provide an explanation on Schedule O  4a At any time during the calendar year, did the organization have an interest in, or a signature on their authority over, a financial account in a foreign country [section as a bank account, securities account, or other financial accountry of "Yes," enter the name of the foreign country [section 5 or "Interest" in the section of the graph of the provision of the provision of the provision of the graph of the provision of the graph of the provision of the graph		Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial accounts (an interest in a foreign country (such as a bank account, securities account, or other financial accounts (FBAR).  5a Was the organization for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).  5b Was the organization to part by a prohibited tax shelter transaction?  5c If I've's to line Sao rsb., did the organization file Form 888-17.  6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that when to tax deductible is achiratible contributions?  6b Was the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that when to tax deductibles achiratible contributions?  6c Was the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that may receive deductible contributions under section 170(s).  8b If 'Yes', 'did the organization include with every solicitation an express statement that such contributions or grits were not tax deductible?  9c Organizations that may receive deductible contributions under section 170(s).  8b If 'Yes', 'did the organization include deductible contributions under section 170(s).  9c If I'ves', 'indicate the number of Forms 8282 filed during the year.  9c Did the organization received an ornity the donor of the value of the goods or services provided?  7c X  7d I'ves', 'indicate the number of Forms 8282 filed during the year.  9c Did the organization received a contribution of qualified intellectual property, did the organization file Form 1098-07  8c Sponsoring organizations encounted a contribution of the sponsoring organization received an contribution of the sp	За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		
financial account in a foreign country (such as a bank account, securities account, or other financial account)?  See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).  Sae Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  Sa Was the organization aparty to a prohibited tax shelter transaction at any time during the tax year?  Sa Was the organization aparty to a prohibited tax shelter transaction at any time during the tax year?  Sa Usa the organization and the organization file Form 8888-17?  Sa Usa the organization and the organization file Form 8888-17?  Organization start were not tax deductible as charitable contributions?  If "Yes," did the organization include with every solicitation an express statement that such contributions or gift were not tax deductibles?  Organization start many receive deductible contributions under section 170(c).  If "Yes," did the organization neither apment in excess of \$75 made party as a contribution and party for goods and services provided to the payor?  To ganization start many receive deductible contributions under section 170(c).  If "Yes," did the organization neithy apment in excess of \$75 made party as a contribution of under section 170(c).  If "Yes," did the organization neithy apment in excess of \$75 made party as a contribution of the value of the goods or services provided?  To Use the Form 8282?  If "Yes," indicate the number of Forms 8282 filed during the year  Did the organization received a contribution of cultification of the year  Did the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1990 as required?  If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1990.  Section \$50((x) Y organizations. Effort:  In initiation fees and capital contributions included on Part VIII, line 12, for public use of club faci	b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b	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).  Sa	4a				
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a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year  13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state?  Note: See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13c  14a Did the organization receive any payments for indoor tanning services during the tax year? b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O  15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?  15 X  If "Yes," see instructions and file Form 4720, Schedule N.  16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? 16 X  If "Yes," complete Form 4720, Schedule O.					
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16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income?  If "Yes," complete Form 4720, Schedule O.			15		X
If "Yes," complete Form 4720, Schedule O.	40				v
	16		16		
		IT "Yes," complete Form 4/20, Schedule O.	Eorm	990	(2010

GREEN AMERICA 52-1660746 Form 990 (2019)

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 on Schedule O. See instructions.

	Check if Schedule O contains a response or note to any line in this Part VI					X		
Sec	tion A. Governing Body and Management							
					Yes	No		
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	14					
	If there are material differences in voting rights among members of the governing body, or if the governing							
	body delegated broad authority to an executive committee or similar committee, explain on Schedule 0.							
b	Enter the number of voting members included on line 1a, above, who are independent	1b	10					
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationsh	ip with any other						
	officer, director, trustee, or key employee?			2		X		
3	Did the organization delegate control over management duties customarily performed by or under the							
	of officers, directors, trustees, or key employees to a management company or other person? $\dots$			3		X		
4	Did the organization make any significant changes to its governing documents since the prior Form			5		X		
5								
6	Did the organization have members or stockholders?			6	X			
7a	Did the organization have members, stockholders, or other persons who had the power to elect or a							
	more members of the governing body?			7a	Х			
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,	*				77		
	persons other than the governing body?			7b		X		
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year							
а	The governing body?			8a	X			
b	Each committee with authority to act on behalf of the governing body?			8b	Х			
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be re					37		
<u> </u>	organization's mailing address? If "Yes," provide the names and addresses on Schedule O			9		X		
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal F	Revenue Code.)						
			Г		Yes	No X		
	Did the organization have local chapters, branches, or affiliates?			10a				
b	If "Yes," did the organization have written policies and procedures governing the activities of such of			401				
44-	and branches to ensure their operations are consistent with the organization's exempt purposes?			10b	Х			
	Has the organization provided a complete copy of this Form 990 to all members of its governing boo	ay before filing the	torm?	11a	^			
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			12a	Х			
12a								
b	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "		·····	12b	Х			
С				12c	х			
10	in Schedule O how this was done  Did the organization have a written whistleblower policy?			13	X			
13 14	Did the organization have a written document retention and destruction policy?			14	X			
15	Did the process for determining compensation of the following persons include a review and approx			17				
15	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		١					
а	The organization's CEO, Executive Director, or top management official			15a	х			
	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).			.00				
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	ement with a						
	taxable entity during the year?			16a		Х		
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluation							
-	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organisms.							
	exempt status with respect to such arrangements?			16b				
Sec	tion C. Disclosure							
17	List the states with which a copy of this Form 990 is required to be filed AK, AL, AR, CA, C	CT,FL,GA,	HI,IL	, KS	, KY	, LA		
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, a							
	for public inspection. Indicate how you made these available. Check all that apply.	-		•				
		n on Schedule O)						
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, or	conflict of interest	policy, and	d finar	ncial			
	statements available to the public during the tax year.							
20	State the name, address, and telephone number of the person who possesses the organization's be	ooks and records	<b></b>					
	BOB BULIK - 202-872-5341							
	1612 K STREET, N.W. #600, WASHINGTON, DC 20006							
02200	SEE SCHEDULE O FOR FULL LIST OF STATES			Form	990	(2019		

Form 990 (2019) GREEN AMERICA 52-1660746 Page 7

# Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

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

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

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

See instructions for the order in which to list the persons above.

(A) Name and title	(B) Average hours per	box	not c , unle	ss pe	ition more rson i	than is bot	h an	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	week (list any hours for related organizations below line)	stee or director	Institutional trustee	Officer		Highest compensated employee	Ĺ	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) B. ATHREYA	2.00	7,							0	0
BOARD MEMBER	2 00	Х						0.	0.	0.
(2) J. DOWDELL	2.00							0.	0.	0
BOARD MEMBER	2 00	Х						0.	0.	0.
(3) P. FREUNDLICH BOARD MEMBER	2.00	x						0.	0.	0.
(4) D. PANJWANI	2.00	^				$\vdash$		0.	0.	0.
BOARD MEMBER	2.00	Х						0.	0.	0.
(5) C. PARRS	2.00							0.	0.	0.
BOARD MEMBER	2.00	Х						0.	0.	0.
(6) B. QUIRK-GARVAN	2.00								•	
BOARD MEMBER		х						0.	0.	0.
(7) E. GREENE	50.00							-		
EDITOR IN CHIEF		х						51,239.	0.	11,770.
(8) S. KARIMI	50.00									-
DIRECTOR DIGITAL COMMUNICATION		Х						61,549.	0.	14,138.
(9) J. LINEBERGER	3.00									
BOARD CO-CHAIR		Х		Х				0.	0.	0.
(10) S. NEWMARK	3.00									
BOARD CO-CHAIR		Х		Х				0.	0.	0.
(11) D. MOMSEN-HUDSON	2.00									
BOARD VICE CHAIR		Х		Х				0.	0.	0.
(12) M. FLORES	25.00								_	
SECRETARY		Х		Х				32,786.	0.	7,531.
(13) A. GRAVITZ	60.00								_	
PRESIDENT/CEO		Х		Х				68,951.	0.	15,838.
(14) D. BURNS	2.00									
TREASURER		Х		Х				0.	0.	0.
(15) S. KITSON	50.00	,						40.054		11 006
MEMBERSHIP MARKETING MANAGER		Х		Х				48,871.	0.	11,226.
000007 04 00 00										Earm <b>990</b> (2019)

Form **990** (2019)

Form 990 (2019) GREEN AMERICA 52-1660746 Page 8

Part VIII Section A Officers Directors Trustees Key Employees and Highest Compensated Employees (continued)

Section A. Officers, Directors, Trus	tees, Key Em	ploy	ees.	, and	<u>a Hi</u>	gnes	it C	compensated Employe	es (continuea)				
(A)	(B)	(B) (C)						(D)	(E)			(F)	
Name and title	Average	(do	Position (do not check more than one box, unless person is both an officer and a director/trustee)		Reportable	Reportable		Es	timate	d			
	hours per	box			compensation	compensatio			nount c	of			
	week	-	CCI AII	uau	liecic	)/ ii usi	CC)	from	from related		l	other .	
	(list any hours for	irecto						the organization				pensat	
	related	e or d	tee			sated		organization (W-2/1099-MISC)	(W-2/1099-MIS	· I		om the anizatio	
	organizations	ruste	ıl trus		ee ee	mpen		(** 27 1033 141100)			·	d relate	
	below	Individual trustee or director	Institutional trustee	ı	Key employee	est co oyee	e					anizatio	
	line)	Indiv	Instit	Officer	Key e	Highest compensated employee	Former						
		<u> </u>											
		_											
		-											
1b Subtotal		<u></u>				Щ	_	263,396.		0.	6	0,50	13.
1b Subtotal c Total from continuation sheets to Part VI								0.		0.	igcup	0,50	0.
d Total (add lines 1b and 1c)								263,396.		0.	6	0,50	
2 Total number of individuals (including but n								eceived more than \$100	,000 of reportabl	e		-	
compensation from the organization						•							0
												Yes	No
3 Did the organization list any former officer,	director, trust	ee, ł	кеу е	emp	loye	e, or	hig	hest compensated emp	loyee on				
line 1a? If "Yes," complete Schedule J for s	uch individual										3		X
4 For any individual listed on line 1a, is the su	-		-					•	the organization				
and related organizations greater than \$150											4		X
5 Did any person listed on line 1a receive or a	-				-		elat	ed organization or indivi	dual for services		_		х
rendered to the organization? If "Yes," com Section B. Independent Contractors	piete Scheaui	e J r	or si	ıcn	pers	son .					5		
Complete this table for your five highest co	mnensated in	den	ende	nt c	onti	racto	re t	that received more than	\$100 000 of com	nens	ation f	rom	
the organization. Report compensation for										ропо	ationi	10111	
(A)	<u></u>						Ī	(B)	,		(0	<u> </u>	
Name and business	address							Description of s	ervices	С		nsation	ı
PATTON-KIEHL GROUP, INC.								PRINTING AND	MAIL				
P.O. BOX 590, THORNBURG,	VA 2256	<u> 55</u>					_	SHOP SERVICE	S		17	0,28	32.
							$\dashv$						
							$\dashv$						
2 Total number of independent contractors (i	noludina but s	ot II	mita	d +c	the	oo lia	+00	d abovo) who received =	oro than				

Form **990** (2019)

\$100,000 of compensation from the organization

52-1660746 Page 9

GREEN AMERICA

Form 990 (2019) GREEN A

			Check if Schedule O	conta	ins a response	or note to any lin	ne in this Part VIII			
						,	(A)	(B)	(C)	(D)
							Total revenue	Related or exempt	Unrelated	Revenue excluded from tax under
								function revenue	business revenue	sections 512 - 514
ts ts	1	<u>а</u>	Federated campaigns		1a					
Contributions, Gifts, Grants and Other Similar Amounts			Membership dues			504,123.				
ه ق						301,123.				
rts r A			Fundraising events							
nia Big			Related organizations							
Sir			Government grants (contr		· <del></del>					
iğ je		T	All other contributions, gifts,			4 026 406				
			similar amounts not included			4,026,496.				
ng p		_	Noncash contributions included in			696,544.	4 520 610			
9 0		h	Total. Add lines 1a-1f				4,530,619.			
						Business Code				
Program Service Revenue	2		CONSULTING			900099	276,579.			276,579.
er Per		-	PUBLICATION SPONSOR			511120	68,813.	39,935.	28,878.	
n S		С	ADMINISTRATIVE SERV	ICE	REVENUE	900099	24,381.	24,381.		
ev ev		d								
S		е								
ھ ا		f	All other program service	rever	nue					
		g	Total. Add lines 2a-2f			<b>&gt;</b>	369,773.			
	3		Investment income (include	ding o	dividends, inter	est, and				
			other similar amounts)			<b>&gt;</b>	137,847.			137,847.
	4		Income from investment of	of tax	exempt bond	oroceeds <b>&gt;</b>				
	5		Royalties				56,542.			56,542.
					(i) Real	(ii) Personal				
	6	а	Gross rents	6a						
			Less: rental expenses	6b						
			Rental income or (loss)	6c						
			Net rental income or (loss			<b>•</b>				
			Gross amount from sales of		(i) Securities	(ii) Other				
	-	-	assets other than inventory	7a	3,034,884					
		h	Less: cost or other basis		, ,					
ē		-	and sales expenses	7b	3,147,287	749.				
ē		c	Gain or (loss)	7c	-112,403					
Other Revenue			Net gain or (loss)			•	-113,152.			-113,152.
e			Gross income from fundraising							
동	Ü	u	including \$	19 0 0	of					
			contributions reported on	lino :						
			·		<i>'</i>					
		<b>L</b>	Part IV, line 18							
			Less: direct expenses		·····					
			Net income or (loss) from			<b>_</b>				
	9	d	Gross income from gamin							
			Part IV, line 19							
			Less: direct expenses							
			Net income or (loss) from			<b>D</b>				
	10	а	Gross sales of inventory,			100				
			and allowances							
			Less: cost of goods sold							
$\rightarrow$		С	Net income or (loss) from	sales	of inventory		100.	100.		
ရှ						Business Code	_			
Miscellaneous Revenue	11	а	MISCELLANEOUS REVEN	ŰΕ		511140	32,088.			32,088.
lan		b								
3e		С								
SiS -			All other revenue							
		е	Total. Add lines 11a-11d				32,088.			
	12		Total revenue. See instruction	ns			5,013,817.	64,416.	28,878.	389,904.

932009 01-20-20

52-1660746 Page 10

Form 990 (2019)

GREEN AMERICA

## Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

	Check if Schedule O contains a respon	(A)	(B)	(C)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations	21 440	21 440		
	and domestic governments. See Part IV, line 21	31,440.	31,440.		
2	Grants and other assistance to domestic				
_	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign	460,265.	460,265.		
	individuals. See Part IV, lines 15 and 16	400,203.	400,203.		
4	Benefits paid to or for members				
5	trustees, and key employees	326,664.	278,369.	11,539.	36,756
6	Compensation not included above to disqualified	320,004.	270,303.	11,333.	30,730
O	persons (as defined under section 4958(f)(1)) and				
	paragna described in section 40E0(a)(2)(D)				
7	Other salaries and wages	1,866,989.	1,591,629.	65,998.	209,362
8	Pension plan accruals and contributions (include	_, ,	_, _, _, _,	32,3300	_00,002
-	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	260,927.	221,951.	9,185.	29,791
10	Payroll taxes	174,875.	149,083.	6,182.	19,610
11	Fees for services (nonemployees):	,	,	,	. ,
 а					
b					
c					
	Lobbying				
e	D ( ' 1( 1 ' ' ' O D ' N' I' 47				
f	Investment management fees				
g	// //				
_	column (A) amount, list line 11g expenses on Sch O.)	400,867.	383,134.	5,407.	12,326
12	Advertising and promotion	54,137.	29,024.	1,263.	23,850
13	Office expenses	9,035.	8,144.	293.	598
14	Information technology	100,516.	80,482.	3,381.	16,653
15	Royalties				
16	Occupancy	240,675.	209,751.	7,136.	23,788
17	Travel	96,679.	86,884.	4,055.	5,740
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	107,092.	107,092.		
20	Interest	24,836.	21,586.	750.	2,500
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	39,438.	34,438.	1,000.	4,000
23	Insurance				
24	Other expenses. Itemize expenses not covered				
	above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A)				
	amount, list line 24e expenses on Schedule 0.)	244 242	244 222		0.4.004
а		244,019.	211,230.	7,958.	24,831
b	PRINTING AND PUBLICATIO	204,841.	178,859.	6,341.	19,641
С	BANK AND CREDIT CARD FE	48,636.	128.	24,547.	23,961
d	TELEPHONE AND INTERNET	26,430.	22,993.	807.	2,630
	All other expenses	30,345.	13,106.	8,869.	8,370
25	Total functional expenses. Add lines 1 through 24e	4,748,706.	4,119,588.	164,711.	464,407
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.	25/ 102	205 062	14 101	44 100
	Check here if following SOP 98-2 (ASC 958-720)	354,183.	295,863.	14,191.	44,129

932010 01-20-20

52-1660746 Page **11** 

GREEN AMERICA

# Form 990 (2019) Part X Balance Sheet

Part X	Balance Sheet					
	Check if Schedule O contains a response or n	ote to any	y line in this Part X			
				<b>(A)</b> Beginning of year		<b>(B)</b> End of year
1	Cash - non-interest-bearing			263,390.	1	741,772
2	Savings and temporary cash investments		94,428.	2	561,252	
3	Pledges and grants receivable, net		1,038,174.	3	1,036,982	
4	Accounts receivable, net			476,974.	4	663,630
5	Loans and other receivables from any current					
	trustee, key employee, creator or founder, sub					
	controlled entity or family member of any of th		5			
6	Loans and other receivables from other disqua	alified per	sons (as defined			
	under section 4958(f)(1)), and persons describ	ed in sec	tion 4958(c)(3)(B)		6	
<b>္</b> 7	Notes and loans receivable, net				7	
Assets 8 8 8	Inventories for sale or use				8	
9 🏅	Prepaid expenses and deferred charges			39,278.	9	51,841
10a	a Land, buildings, and equipment: cost or other					
	basis. Complete Part VI of Schedule D	10a	277,148.			
t	Less: accumulated depreciation	10b	211,746.	89,741.	10c	65,402
11	Investments - publicly traded securities			6,809.	11	12,047
12	Investments - other securities. See Part IV, line		12			
13	Investments - program-related. See Part IV, lin		13			
14	Intangible assets			14		
15	Other assets. See Part IV, line 11			10,082,233.	15	9,170,503
16	Total assets. Add lines 1 through 15 (must ed	ual line 3	3)	12,091,027.	16	12,303,429
17	Accounts payable and accrued expenses			212,409.	17	249,639
18	Grants payable		18			
19	Deferred revenue			949.	19	5,332
20	Tax-exempt bond liabilities				20	
21	Escrow or custodial account liability. Complete	Part IV	of Schedule D		21	
စ္ခ 22	Loans and other payables to any current or fo	rmer offic	er, director,			
Liabilities 22	trustee, key employee, creator or founder, sub	stantial c	ontributor, or 35%			
<u> </u>	controlled entity or family member of any of the				22	
23	Secured mortgages and notes payable to unre			206 501	23	667 020
24	Unsecured notes and loans payable to unrelate			326,501.	24	667,839
25	Other liabilities (including federal income tax, p					
	parties, and other liabilities not included on lin	es 17-24).	. Complete Part X	2 704		6 066
	of Schedule D			3,784.		6,866
26	Total liabilities. Add lines 17 through 25			543,643.	26	929,676
န္	Organizations that follow FASB ASC 958, cl	neck here				
وَ ا	and complete lines 27, 28, 32, and 33.			248,680.	07	686,877
$\frac{\mathbf{g}}{\mathbf{g}}$   27				11,298,704.	27	10,686,876
<u>n</u>   28	Net assets with donor restrictions			11,290,704.	28	10,000,070
Ī	Organizations that do not follow FASB ASC	958, cne	ck nere			
p   ~	and complete lines 29 through 33.				20	
29	Capital stock or trust principal, or current fund				29	
30	Paid-in or capital surplus, or land, building, or				30 31	
Net Assets or Fund Balances 2 2 2 2 3 1 3 2 3 2 3 2 3 2 3 2 3 3 2 3 3 3 3	Retained earnings, endowment, accumulated		11,547,384.	31	11,373,753	
ž   32   33	Total net assets or fund balances  Total liabilities and net assets/fund balances			12,091,027.	33	12,303,429
	Total liabilities and het assets/fully balances			, · · · · · · · · · · · · · · · · · ·	33	Form <b>990</b> (2019

Form **990** (2019)

52-1660746 Page **12** GREEN AMERICA

	990 (2019) GREEN AMERICA	52-1	<u>.660746</u>	Pa	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	5,01					
2	Total expenses (must equal Part IX, column (A), line 25)	2	4,74					
3	Revenue less expenses. Subtract line 2 from line 1	3		55,1				
4	1 Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) 4 1							
5	Net unrealized gains (losses) on investments	5	-43	38,7	<u>42.</u>			
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 on Schedule O)	9			0.			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,							
	column (B))	10	11,37	73,7	<u>53.</u>			
Pa	rt XII Financial Statements and Reporting							
	Check if Schedule O contains a response or note to any line in this Part XII				X			
				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 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?		2b	X				
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,						
	consolidated basis, or both:							
	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							
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X				
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch	nedule O.						
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	-	t					
	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 required	ired audit	:					
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits							
			Forn	n <b>990</b>	(2019)			

#### **SCHEDULE A**

(Form 990 or 990-EZ)

\_\_\_\_

Department of the Treasury

Internal Revenue Service

# **Public Charity Status and Public Support**

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

► Attach to Form 990 or Form 990-EZ.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization Employer identification number GREEN AMERICA 52-1660746 Reason for Public Charity Status (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 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). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college 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 normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV. Sections A and C. ☐ Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) Is the organization listed (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other in your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) Yes No above (see instructions))

Total

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

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	ction A. Public Support			,			
Cale	ndar year (or fiscal year beginning in)	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
	Gifts, grants, contributions, and	` ,	` ,	. ,	. ,	, ,	.,
	membership fees received. (Do not						
	include any "unusual grants.")	3,539,624.	3,842,802.	3,952,255.	3,685,706.	4,530,619.	19,551,006.
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						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	3,539,624.	3,842,802.	3,952,255.	3,685,706.	4,530,619.	19,551,006.
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						2,783,831.
	Public support. Subtract line 5 from line 4.						16,767,175.
	ction B. Total Support					1	
	ndar year (or fiscal year beginning in)	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	<b>(e)</b> 2019	(f) Total
7	Amounts from line 4	3,539,624.	3,842,802.	3,952,255.	3,685,706.	4,530,619.	19,551,006.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
9	and income from similar sources Net income from unrelated business	61,423.	61,837.	62,513.	130,930.	194,389.	511,092.
	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.)	10,986.	8,919.	17,696.	35,508.	32,088.	105,197.
11	<b>Total support.</b> Add lines 7 through 10						20,167,295.
12	Gross receipts from related activities,	etc. (see instruction	ons)			12	235,861.
13	First five years. If the Form 990 is for	r the organization's	first, second, third	, fourth, or fifth tax	x year as a sectio	n 501(c)(3)	
_	organization, check this box and stor		·····				<b>&gt;</b>
	ction C. Computation of Publ						02.14
	Public support percentage for 2019 (					14	83.14 %
	Public support percentage from 2018					15	83.26 %
16a	33 1/3% support test - 2019. If the o	· ·		,		•	
	stop here. The organization qualifies	as a publicly supp	orted organization				<u> </u>
k	33 1/3% support test - 2018. If the o	· ·		,		•	
	and stop here. The organization qual	ifies as a publicly s	upported organiza	tion			▶□
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						
	organization meets the "facts-and-circ						
<u>18</u>	Private foundation. If the organization	n did not check a l	oox on line 13, 16a	, 16b, 17a, or 17b,		nd see instructions	

Scriedule A (Form 990 or 990-EZ) 20 is

## 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.)

Se	ction A. Public Support	, 1	,				
Cale	endar year (or fiscal year beginning in) 🕨	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	(e) 2019	(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						
3	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						
	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
ŀ	Amounts included on lines 2 and 3 received						
	from other than disqualified persons that						
	exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
(	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
	ction B. Total Support				•	•	
Cale	endar year (or fiscal year beginning in)	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
	Amounts from line 6		, ,	, ,	<b>,</b> ,	, ,	( )
	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties, and income from similar sources						
ŀ	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b						
	Net income from unrelated business						
	activities not included in line 10b,						
	whether or not the business is regularly carried on						
12	Other income. Do not include gain						
	or loss from the sale of capital						
13	assets (Explain in Part VI.)						
	First five years. If the Form 990 is for	r the organization	s first second this	rd fourth or fifth t	ax vear as a section	n 501(c)(3) organi:	zation
•		-			-		
Se	ction C. Computation of Publ						
	Public support percentage for 2019 (			column (f))		15	%
	Public support percentage from 2018					16	<del>/</del> 6
	ction D. Computation of Inves						70
	Investment income percentage for 20					17	%
	Investment income percentage from					18	<del></del>
	a 33 1/3% support tests - 2019. If the					$\overline{}$	
.50	more than 33 1/3%, check this box a						
	o 33 1/3% support tests - 2018. If the						
•	line 18 is not more than 33 1/3%, che						
20	Private foundation If the organization						

# Part IV | Supporting Organizations

(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 (as 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 disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 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.)

	Yes	No
1		
2		
_		
3a		
3b		
3с		
4-		
4a		
4b		
4c		
5a		
5b		
5c		
6		
7		
8		
9a		
9b		
00		
9c		
10a		
10b		

Par	rt IV   Supporting Organizations <sub>(continued)</sub>			
	·		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		
b	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		<u></u>
Sect	tion B. Type I Supporting Organizations			
			Yes	No
	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
	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		
Seci	tion C. Type II Supporting Organizations		V	
_	When a section to the		Yes	No
	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		
	tion D. All Type III Supporting Organizations		ш	
000	tion 5.7th Type in Supporting Siguinzations		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		100	110
	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		
	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
	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 instruc	ctions).		
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. <i>Complete line 3 below.</i>		,	
C	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (s	see instructions	$\overline{}$	
2	Activities Test. Answer (a) and (b) below.		Yes	No
	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 <b>Part VI</b> 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		
	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 <b>Part VI</b> 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		
	Parent of Supported Organizations. Answer (a) and (b) below.			
	trustees of each of the supported organizations? <i>Provide details in Part VI</i> .	3a		
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supportin	g Orgar	izations			
1	1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instruction					
	other Type III non-functionally integrated supporting organizations must co	mplete Se	ctions A through E.			
Sect	ion 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				
Sect	ion 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 Part VI):					
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				
Sect	ion 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	ly integrate	ed Type III supporting org	ganization (see		
	instructions)					

Schedule A (Form 990 or 990-EZ) 2019

Par	↑ V   Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	anizations <sub>(continued)</sub>	
Secti	ion D - Distributions		<u> </u>	Current Year
1	Amounts paid to supported organizations to accomplish exe			
2	Amounts paid to perform activity that directly furthers exemple			
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpos	ns		
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in <b>Part VI</b> ). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which t	he organization is responsive	Э	
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2019 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
Secti	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1	Distributable amount for 2019 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2019 (reason-			
	able cause required- explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2019			
а	From 2014			
b	From 2015			
С	From 2016			
d	From 2017			
е	From 2018			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2019 distributable amount			
i	Carryover from 2014 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2019 from Section D,			
	line 7: \$			
а	Applied to underdistributions of prior years			
b	Applied to 2019 distributable amount			
С	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2019, 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 2019. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2020. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
а	Excess from 2015			
b	Excess from 2016			
С	Excess from 2017			
d	Excess from 2018			
е	Excess from 2019			

Schedule A (Form 990 or 990-EZ) 2019

Scriedule A	((FOIII) 990 (F2) 2019 CILLLIN THERETET				
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 B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Organization type (check one):

# **Schedule of Contributors**

➤ Attach to Form 990, Form 990-EZ, or Form 990-PF.

➤ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2019

Filers of:	Section:					
Form 990 or 990-EZ	$\boxed{X}$ 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					
, ,	s covered by the <b>General Rule</b> or a <b>Special Rule.</b> (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						
sections 509(a)(1) any one contribute	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 <b>General Rule</b> 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) (2019)

Name of organization

Employer identification number

52-1660746

Part I	Contributors (see instructions). Use duplicate copies of Part I if a	dditional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions Type of	(d) of contribution
1			<b></b>
(a)	(b)	(c)	(d)
No. 2	Name, address, and ZIP + 4	\$ 100,000. Person Payro Nonce (Complete	<b></b>
(a)	(b)	(c) Total contributions Type of	(d) of contribution
No. 3	Name, address, and ZIP + 4	Perso Payro Nonc: (Complet	on 🔲
(a)	(b)	(c)	(d)
No. 4	Name, address, and ZIP + 4	Perso Payro Nonc: (Complet	<b></b>
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions Type o	(d) of contribution
5	italie, audiess, and LIF T T	Perso Payro Nonc: (Complete	on X
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions Type of	(d) of contribution
NO.	Name, audress, and ZIP + 4	Perso Payro Nonc: (Complet	on 🔲

Name of organization

Employer identification number

52-1660746

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			
1	STOCK					
		\$ 389,141.	04/24/19			
(a) No. from	(b)  Description of noncash property given	(c) FMV (or estimate)	(d) Date received			
Part I		(See instructions.)				
3	STOCK					
		\$\$	05/10/19			
(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			
		\$				

Employer identification number

Name of organization

GREEN	AMERICA			52-1660746
Part III	Exclusively religious, charitable, etc., contribut from any one contributor. Complete columns (a) completing Part III, enter the total of exclusively religious, or Use duplicate copies of Part III if additional	through <b>(e)</b> and the following line en charitable, etc., contributions of <b>\$1,000</b> or	try For organizations	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held
	Transferee's name, address, ar	(e) Transfer of gif		nsferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held
	Transferee's name, address, ar	(e) Transfer of gif		nsferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held
	Transferee's name, address, ar	(e) Transfer of gif		nsferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held
		(e) Transfer of gif	t	
	Transferee's name, address, ar	nd ZIP + 4	Relationship of tran	nsferor to transferee

### **SCHEDULE C**

(Form 990 or 990-EZ)

# **Political Campaign and Lobbying Activities**

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ. ► Go to www.irs.gov/Form990 for instructions and the latest information.

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.

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				
•	Section 501(c)(4), (5), or (6) organiza	tions: Complete Part III.			
Nan	ne of organization			Emp	loyer identification number
	GREEN A				52-1660746
Pa	art I-A Complete if the org	ganization is exempt und	ler section 501(c)	or is a section 527 of	organization.
1	Provide a description of the organization	zation's direct and indirect politic	al campaign activities	in Part IV.	
	Political campaign activity expendit				<b></b>
3	Volunteer hours for political campa	ign activities			
Pa	art I-B Complete if the org	ganization is exempt und	ler section 501(c)	(3).	
1	Enter the amount of any excise tax				\$
	Enter the amount of any excise tax				
	If the organization incurred a section				
	Was a correction made?				
	If "Yes," describe in Part IV.				
Pa	art I-C Complete if the org	ganization is exempt und	ler section 501(c)	, except section 501	(c)(3).
1	Enter the amount directly expended	d by the filing organization for se	ction 527 exempt fund	ction activities	\$
2	Enter the amount of the filing organ	nization's funds contributed to ot	her organizations for s	section 527	
	exempt function activities			<b></b> ▶	\$
3	Total exempt function expenditures				
	line 17b			<b></b> ▶	\$
4	Did the filing organization file Form				
5	Enter the names, addresses and er	mployer identification number (El	N) of all section 527 p	olitical organizations to whi	ch the filing organization
	made payments. For each organiza	tion listed, enter the amount paid	d from the filing organ	ization's funds. Also enter t	he amount of political
	contributions received that were pr	omptly and directly delivered to	a separate political orç	ganization, such as a separ	ate segregated fund or a
	political action committee (PAC). If	additional space is needed, prov	vide information in Par	t IV.	
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
				filing organization's	contributions received and
				funds. If none, enter -0-	promptly and directly delivered to a separate
					political organization.
					If none, enter -0
	_				

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

Schedule C (Form 990 or 990-EZ) 2019

LHA

932041 11-26-19

P	art II	-A	Complete if the organization	n is exempt under section 501(c)(3) and fil	ed Form 5768 (el	ection under
			section 501(h)).			
Α	Check		if the filing organization belong	gs to an affiliated group (and list in Part IV each affiliated	group member's nam	e, address, EIN,
			expenses, and share of exces	s lobbying expenditures).		
В	Check		if the filing organization check	ed box A and "limited control" provisions apply.		
				oying Expenditures eans amounts paid or incurred.)	(a) Filing organization's totals	<b>(b)</b> Affiliated group totals
1	a Tot	al lol	bbying expenditures to influence publ	lic opinion (grassroots lobbying)	1,233.	
	<b>b</b> Tot	al lol	bbying expenditures to influence a leg	gislative body (direct lobbying)		
	c Tot	al lol	bbying expenditures (add lines 1a and	d 1b)	1,233.	
	<b>d</b> Oth	ner e	xempt purpose expenditures		4,747,473.	
	e Tot	al ex	cempt purpose expenditures (add line	s 1c and 1d)	4,748,706.	
	f Lol	byir	ng nontaxable amount. Enter the amo	unt from the following table in both columns.	387,435.	
	If ti	ie an	nount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	No	t ove	er \$500,000	20% of the amount on line 1e.		
	Ov	er \$5	500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.		
	Ov	er \$1	,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.		
	Ov	er \$1	,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.		
	Ov	er \$1	7,000,000	\$1,000,000.		
	<b>a</b> Gr	eero	oots nontaxable amount (enter 25% of	fline 1fl	96,859.	
	•		et line 1g from line 1a. If zero or less, e	,	0.	
			ct line 1f from line 1c. If zero or less, en	0.		
				r line 1h or line 1i, did the organization file Form 4720		
	-			Time fit of line fit, and the organization met offit 4720	Γ	Yes No
	100	J1 1.11 1	•	4-Year Averaging Period Under Section 501(h)		
				a section 501(h) election do not have to complete all	of the five columns h	alow

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

Lobbying Expenditures During 4-Year Averaging Period									
Calendar year (or fiscal year beginning in)	<b>(a)</b> 2016	<b>(b)</b> 2017	<b>(c)</b> 2018	<b>(d)</b> 2019	(e) Total				
2a Lobbying nontaxable amount	346,213.	371,628.	371,858.	387,435.	1,477,134.				
<b>b</b> Lobbying ceiling amount (150% of line 2a, column(e))					2,215,701.				
c Total lobbying expenditures	1,920.	1,257.	4,926.	1,233.	9,336.				
d Grassroots nontaxable amount	86,553.	92,907.	92,965.	96,859.	369,284.				
e Grassroots ceiling amount (150% of line 2d, column (e))					553,926.				
f Grassroots lobbying expenditures	1,920.	1,257.	4,926.	1,233.	9,336.				

Schedule C (Form 990 or 990-EZ) 2019

# 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)	)	(k	o)
of th	e lobbying activity.	Yes	No	Amo	ount
1	During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:				
а	Volunteers?				
	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				
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?t III-A Complete if the organization is exempt under section 501(c)(4), section	n 501(c)(	5) or se	ection	
ı uı	501(c)(6).	311 00 1(0)(	0), 01 00	,011011	
				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?		2		
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the				
_	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) Part		e 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 (do not include amounts of political expenditures).	cai			
_	expenses for which the section 527(f) tax was paid).		0-		
	Current year				
D	Carryover from last year		l _		
2	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues				
<u>ح</u>	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exc				
7	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and				
	expenditure next year?		4		
5	Taxable amount of lobbying and political expenditures (see instructions)		5		
Par					
	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	list)· Part II-	A lines 1 :	and 2 (see	
	uctions); and Part II-B, line 1. Also, complete this part for any additional information.	, 110t), 1 art 11	, , · ·	and 2 (000	
	socione), and that it b, into 1.7 too, complete the part of any additional information.				

### **SCHEDULE D** (Form 990)

Department of the Treasury Internal Revenue Service

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.

►Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

GREEN AMERICA

Employer identification number 52-1660746

Pai	rt I Organizations Maintaining Donor Advise	ed Funds or Other Similar Funds or	Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, lin	ne 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advised for	unds
	are the organization's property, subject to the organization's	exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor a	advisors in writing that grant funds can be use	d only
	for charitable purposes and not for the benefit of the donor of	or donor advisor, or for any other purpose con	ferring
Pai	rt II Conservation Easements. Complete if the org	ganization answered "Yes" on Form 990, Part	IV, line 7.
1	Purpose(s) of conservation easements held by the organizat		
	Preservation of land for public use (for example, recrea		storically important land area
	Protection of natural habitat	Preservation of a ce	ertified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form of a	
	day of the tax year.		Held at the End of the Tax Year
	Total number of conservation easements		
	Total acreage restricted by conservation easements		· <del>                                    </del>
	Number of conservation easements on a certified historic str		. 2c
a	Number of conservation easements included in (c) acquired		
•	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by the org	lanization during the tax
4	year	coment is leasted	
4 5	Number of states where property subject to conservation ea	<del></del>	
3	Does the organization have a written policy regarding the pe violations, and enforcement of the conservation easements i		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,		
Ū	b	Thanding of Violations, and emoroting conserve	ation casements during the year
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and enforcing conservation	easements during the year
-	<b>▶</b> \$	aming of the latter, and emercing content and	cacemente aaning inc year
8	Does each conservation easement reported on line 2(d) above	ve satisfy the requirements of section 170(h)(4	)(B)(i)
	and section 170(h)(4)(B)(ii)?	* * * * * * * * * * * * * * * * * * * *	
9	In Part XIII, describe how the organization reports conservation		
	balance sheet, and include, if applicable, the text of the footi	•	
	organization's accounting for conservation easements.		
Pai	rt III Organizations Maintaining Collections o	f Art, Historical Treasures, or Othe	r Similar Assets.
	Complete if the organization answered "Yes" on Form	n 990, Part IV, line 8.	
1a	If the organization elected, as permitted under FASB ASC 95	58, not to report in its revenue statement and b	palance sheet works
	of art, historical treasures, or other similar assets held for pul	blic exhibition, education, or research in furthe	rance of public
	service, provide in Part XIII the text of the footnote to its final	ncial statements that describes these items.	
b	If the organization elected, as permitted under FASB ASC 95	58, to report in its revenue statement and bala	nce sheet works of
	art, historical treasures, or other similar assets held for public	exhibition, education, or research in furtherar	nce of public service,
	provide the following amounts relating to these items:		
	(i) Revenue included on Form 990, Part VIII, line 1		•
	(ii) Assets included in Form 990, Part X		
2	If the organization received or held works of art, historical tre	asures, or other similar assets for financial gai	n, provide
	the following amounts required to be reported under FASB A	ASC 958 relating to these items:	
	Revenue included on Form 990, Part VIII, line 1		· · · · · · · · · · · · · · · · · · ·
	Assets included in Form 990, Part X		
LHA	For Paperwork Reduction Act Notice, see the Instruction	s for Form 990.	Schedule D (Form 990) 2019

Pai	t III Organizations Maintaining C	ollections of Ar	t, Historical Tr	easures, c	or Other	Similar As	sets(continue	ed)
3	Using the organization's acquisition, accessi	on, and other record	s, check any of the	following tha	t make sigr	nificant use of	its	
	collection items (check all that apply):							
а	Public exhibition	d	Loan or exc	hange progra	am			
b	Scholarly research	е	Other					
С	Preservation for future generations							
4	Provide a description of the organization's co	ollections and explain	n how they further th	ne organizati	on's exemp	ot purpose in	Part XIII.	
5	During the year, did the organization solicit o	r receive donations o	of art, historical trea	sures, or oth	er similar a	ssets		
	to be sold to raise funds rather than to be ma	aintained as part of t	he organization's co	llection?			Yes	No_
Pai	t IV Escrow and Custodial Arran		te if the organizatio	n answered '	'Yes" on Fo	orm 990, Part	IV, line 9, or	
	reported an amount on Form 990, Par	t X, line 21.						
1a	Is the organization an agent, trustee, custodi	an or other intermed	iary for contribution	s or other as	sets not in	cluded		
	on Form 990, Part X?						Yes	L No
b	If "Yes," explain the arrangement in Part XIII	and complete the fol	lowing table:					
							Amount	
С	Beginning balance					1c		
d	Additions during the year					1d		
е	Distributions during the year					1e		
f	Ending balance					1f		
2a	Did the organization include an amount on Fe	orm 990, Part X, line	21, for escrow or cu	ustodial acco	unt liability	?	Yes	└─ No
	If "Yes," explain the arrangement in Part XIII.							
Pai	t V Endowment Funds. Complete in	f the organization an	swered "Yes" on Fo	rm 990, Part	IV, line 10.			
		(a) Current year	(b) Prior year	(c) Two year	s back (d)	Three years ba	ick (e) Four ye	ears back
1a	Beginning of year balance	10,082,233.						
b	Contributions		9,508,852.					
	Net investment earnings, gains, and losses	-411,730.	784,381.					
d	Grants or scholarships							
е	Other expenditures for facilities							
	and programs	500,000.	211,000.					
f	Administrative expenses							
g	End of year balance	9,170,503.	10,082,233.					
2	Provide the estimated percentage of the curr	ent year end balanc	e (line 1g, column (a	ı)) held as:				
а	Board designated or quasi-endowment		_%					
b	Permanent endowment	%						
С	Term endowment ▶ 100.00 g	%						
	The percentages on lines 2a, 2b, and 2c sho	uld equal 100%.						
За	Are there endowment funds not in the posse	ssion of the organiza	ation that are held a	nd administe	red for the	organization		
	by:						Y	es No
	(i) Unrelated organizations						3a(i)	X
	(ii) Related organizations							X
b	If "Yes" on line 3a(ii), are the related organiza	tions listed as requir	ed on Schedule R?				3b	
4	Describe in Part XIII the intended uses of the		wment funds.					
Pai	t VI Land, Buildings, and Equipm	ent.						
	Complete if the organization answered	d "Yes" on Form 990	, Part IV, line 11a. S	See Form 990	, Part X, lin	ie 10.		
	Description of property	(a) Cost or ot basis (investm		or other (other)		umulated ciation	(d) Book v	/alue
1a	Land							
	Buildings							
	Leasehold improvements							
d	Equipment			0,276.		22,656.		,620.
<u>e</u>	Other			6,872.	18	39,090.		,782.
Tota	. Add lines 1a through 1e. (Column (d) must e	qual Form 990, Part	X, column (B), line 1	0c.)		<b>&gt;</b>	65	,402.

Schedule D (Form 990) 2019

Schedule D (Form 990) 2019 GREEN AMERI	CA	52	1-1660746 Page
Part VII Investments - Other Securities.			Ŭ
Complete if the organization answered "Yes"			
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or en	d-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"			d of year market value
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or en	d-or-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)	+		
(8)			
(9) Total (Col. (h) must squal Form 000, Part V. col. (P) line 12 \	+		
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 V line 15	
	Description	Tru. See Form 390, Fart X, line 13.	(b) Book value
(1) ENDOWMENT FUND			9,170,503
(2)			3,2,0,000
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) lin	ne 15.)	<b>&gt;</b>	9,170,503
Part X Other Liabilities.	,	-	•
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11e or 11f. See Form 990, Part X, line 25	5.
1. (a) Description of liability			(b) Book value
(1) Federal income taxes			
(2) GIFT ANNUITY LIABILITY			6,866
(3)			
(4)			

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) 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 FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII... X

Schedule D (Form 990) 2019

(5) (6) (7) (8)

6,866.

	dule D (Form 990) 2019 GREEN AMERICA				1000/40 Page 4
Pai	t XI Reconciliation of Revenue per Audited Financial Stateme	ents Wit	th Revenue per R	eturr	١.
	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	4,644,255.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a	-438,742.		
b	Donated services and use of facilities	2b	68,431.		
	Recoveries of prior year grants				
	Other (Describe in Part XIII.)				
	Add lines 2a through 2d			2e	-370,311.
3	Subtract line 2e from line 1			3	5,014,566.
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	-749.		
С	Add lines 4a and 4b			4c	-749.
	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	5,013,817.
Pa	t XII Reconciliation of Expenses per Audited Financial Statem	nents W	ith Expenses per	Retu	rn.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a				
1	Total expenses and losses per audited financial statements			1	4,817,886.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	. 2a	68,431.		
b	Prior year adjustments	2b			
С	Other losses	_ 2c			
d	Other (Describe in Part XIII.)	. 2d	749.		
е	Add lines 2a through 2d			2e	69,180.
3	Subtract line 2e from line 1			3	4,748,706.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	. 4a			
b	Other (Describe in Part XIII.)	. 4b			
С	Add lines 4a and 4b			4c	0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	4,748,706.
Pa	t XIII Supplemental Information.				
Prov	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part	t IV, lines 1	b and 2b; Part V, line	4; Part	X, line 2; Part XI,
ines	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any add	ditional info	ormation.		

PART X, LINE 2:

ACCOUNTING PRINCIPLES GENERALLY ACCEPTED IN THE UNITED STATES OF AMERICA REQUIRE THE ORGANIZATION'S MANAGEMENT TO EVALUATE TAX POSITIONS TAKEN BY THE ORGANIZATION AND RECOGNIZE A TAX LIABILITY IF THE ORGANIZATION HAS TAKEN AN UNCERTAIN POSITION THAT MORE LIKELY THAN NOT WOULD NOT BE SUSTAINED UPON EXAMINATION BY THE INTERNAL REVENUE SERVICE. THE ORGANIZATION'S MANAGEMENT HAS ANALYZED ITS TAX POSITIONS, AND HAS CONCLUDED THAT AS OF MARCH 31, 2020, THERE ARE NO UNCERTAIN TAX POSITIONS TAKEN OR EXPECTED TO BE TAKEN THAT WOULD REQUIRE RECOGNITION OR DISCLOSURE IN THE FINANCIAL STATEMENTS. THE ORGANIZATION IS SUBJECT TO ROUTINE AUDITS BY TAXING JURISDICTIONS; HOWEVER, THERE ARE CURRENTLY NO AUDITS FOR ANY

TAX PERIODS IN PROGRESS.

Schedule D (Form 990) 2019

### SCHEDULE F (Form 990)

Department of the Treasury Internal Revenue Service

## **Statement of Activities Outside the United States**

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

► Attach to Form 990.

► Go to www.irs.gov/Form990 for instructions and the latest information.

2019
Open to Public Inspection

Name of the organization

Employer identification number

וקב	EEN AMERICA					52-16607	46
Pa		rmation on A	ctivities Ou	tside the United States. Comple	te if the organ		
	Form 990, Part I\	/, line 14b.					
1				ds to substantiate the amount of its gra the selection criteria used to award the			Yes No
2	For grantmakers. Desc United States.	ribe in Part V the	e organization's	procedures for monitoring the use of its	s grants and of	ther assistance ou	tside the
3				an be duplicated if additional space is n			
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, pro- gram services, investments, grants to recipients located in the region)	is a prod describe	vity listed in (d) gram service, e specific type (s) in the region	(f) Total expenditures for and investments in the region
	ELOPING UNTRIES	0	0	GRANTS TO TREE SISTERS			457,385.
3 a	Subtotal	0	0				457,385.
b	Total from continuation sheets to Part I	0	0				0.
С	Totals (add lines 3a and 3b)	0	0				457,385.

932071 10-12-19

Schedule F (Form 990) 2019

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

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

1 (a) Name of organization	<b>(b)</b> IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EUROPE	REFORESTATION	457,385.	CASH PAYMENT	0.		FMV-CASH
			recognized as charities by the					

Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter
 Enter total number of other organizations or entities

Page 2

Schedule F (Form 990) 2019

Schedule F (Form 990) 2019	GREEN AMERICA	A		5	2-1660746		Page
Part III Grants and Other Assi			t <b>ates.</b> Complete i	f the organization answered "Yes"	on Form 990, Par	t IV, line 16.	
Part III can be duplicate	ed if additional space is need				1		
(a) Type of grant or assistance	e <b>(b)</b> Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)

# Schedule F (Form 990) 2019 Part IV Foreign Forms

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

Schedule F (Form 990) 2019

# SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

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

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

► Attach to Form 990.

► Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047 **2019** 

Open to Public Inspection

Name of the organization  GREEN AME	יפדרמ						Employer identification number 52-1660746
Part I General Information on Grants a							JZ-1000/40
<ol> <li>Does the organization maintain records criteria used to award the grants or assi</li> <li>Describe in Part IV the organization's pr</li> </ol>	stance?						ction X Yes No
Part II Grants and Other Assistance to	_				anization answered "	Yes" on Form 990, Par	t IV, line 21, for any
recipient that received more than		·	1		(f) Method of	1	T
1 (a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
BEYOND GREEN, LLC 2 RANCHO CIRCLE							TO FULFILL THE PEOPLE AND
LAKE FOREST, CA 92630	83-2132738		5,000.	0.	FMV - CASH		PLANET AWARD PROGRAM
BEE'S WRAP 383 EXCHANGE STREET MIDDLEBURY , VT 05763	46-1603709		5,000.	0.	FMV - CASH		TO FULFILL THE PEOPLE AND
BENNETT COMPOST, INC. 2901 W. HUNTING PARK AVE. PHILADELPHIA, PA 19129	45-4747512		5,000.	0.	FMV - CASH		TO FULFILL THE PEOPLE AND
PLANTED TABLE 3128 FOX CREEK DRIVE DANVILE, CA 94506	82-3441656		5,000.	0.	FMV - CASH		TO FULFILL THE PEOPLE AND
2 Enter total number of section 501(c)(3)	and government or	ganizatione lietod in t	ho lino 1 tablo	•	•	•	

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

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

Schedule I (Form 990) (2019)

Part III Grants and Other Assistance to Domestic Individuals Part III can be duplicated if additional space is needed.	. Complete if the	organization answe	ered "Yes" on Form 9	990, Part IV, line 22.							
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance						
Part IV   Supplemental Information. Provide the information req	uired in Part I, lin	e 2; Part III, column	(b); and any other a	dditional information.							
PART I, LINE 2:											
THESE GRANTS ARE MADE AS AWARDS BY	GREEN A	MERICA'S P	EOPLE & PL	ANET PROGRAM							
FOR LOCALLY BASED ORGANIZATIONS EX	EMPLIFYI	NG OUTSTAN	DING SUSTA	INABILITY							
PRACTICES. TO PARTICIPATE, AWARD A	PPLICANT	S MUST DEM	ONSTRATE T	HAT THEY (1)							
ARE SMALL, LOCALLY-BASED BUSINESSE	S OR NON	-PROFITS,	AND (2) ME	ET PROGRAM							
CRITERIA FOR SOCIAL JUSTICE AND EN	VIRONMEN	TAL SUSTAI	NABILITY P	RACTICES.							
FROM A QUALIFIED FIELD OF APPLICAN	TS, AN I	NDEPENDENT	PANEL OF	JUDGES							
SELECTS THE FINALISTS FOR THE AWAR	DS AND T	HE PUBLIC	MAKES THE	FINAL							
SELECTION FOR THE AWARDS. ORGANIZATIONS THAT WIN THE AWARDS, GRANTS OF											

Part IV   Supplemental Information
\$5,000, MAY USE THEM AS THEY CHOOSE. PROCEDURES TO MONITOR AND REPORT ON
THE USE OF THE FUNDS DO NOT EXIST BECAUSE THE AWARDS GIVEN ARE RECOGNITION
FOR OUTSTANDING SUSTAINABILITY PRACTICES AND ARE NOT REQUIRED TO BE USED
FOR A SPECIFIC PURPOSE.

## **SCHEDULE L**

Department of the Treasury

Internal Revenue Service

# **Transactions With Interested Persons**

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

➤ Attach to Form 990 or Form 990-EZ.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

**Open To Public** Inspection

Name of the organization

Employer identification number

	G	REEN A	ME	RICA						52	-16	607	46		
Part I	Excess Bene	fit Transa	actio	ons (section 50	01(c)(3	3), sect	ion 501(c)(4), and se	ectio	n 501(c)(29) orga	anizati	ons o	nly).			
	Complete if the o	organization	answ	vered "Yes" on	Form	990, Pa	art IV, line 25a or 25	b, or	r Form 990-EZ, P	art V, I	ine 40	Ob.			
1 ,,,,,,			<b>(b)</b> R	elationship bet	ween	disqua	lified ,	- \ D					(d)	Corre	cted?
( <b>a)</b> Na	me of disqualified p	person		person and or	rganiz	ation	(4	<b>c)</b> De	escription of tran	isactio	n		Y	es	No
2 Enter		,		•	•		qualified persons du	_	,						
section	on 4958									1	<b>&gt;</b> \$				
3 Enter	the amount of tax,	if any, on line	e 2, a	above, reimburs	sed by	the or	ganization				<b>&gt;</b> \$				
<u> </u>		., =													
Part II	Loans to and	d/or From	Inte	erested Per	sons	<b>S.</b>									
	Complete if the c	organization	answ	vered "Yes" on	Form	990-EZ	, Part V, line 38a or	Forn	n 990, Part IV, Iir	ie 26; (	or if th	ne orga	anizati	on	
	reported an amo				6, or 2	2.						VI-V Ani	nrovod		
	a) Name of	(b) Relations with organiza		(c) Purpose of loan	( <b>d)</b> Lo	oan to or m the	(e) Original	(f	) Balance due	(g) defa	In	(h) App by bo	ard or	(i) W	ritten ment?
inter	rested person	With Organiza	alion	oi ioan	organ	ization?	principal amount					comm			
					То	From				Yes	No	Yes	No	Yes	No
					-			_							
					-										
					-										
Fotal Part III	Grants or As	eietanca	Ren	efiting Inte	roete	d Da	\$								
ı artın	J			-											
(a) N	Complete if the clame of interested p						(c) Amount of		(d) Type	of		10	\ Dura	000.01	
(a) N	iame of interested p	Derson	(	<ul><li>b) Relationship interested pers</li></ul>			assistance		(d) Type assistan				) Purp assista	ose of ance	
				the organiza											
											-+				
											$\dashv$				
											$\dashv$				
											$\neg \dagger$				
											$\dashv$				
											$\dashv$				
											$\dashv$				
											$\neg$				
											$\neg \uparrow$				
											$\neg \dagger$				

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

Schedule L (Form 990 or 990-EZ) 2019

# Schedule L (Form 990 or 990-EZ) 2019 GREEN AMERICA 52-1660746 Page 2 Part IV Business Transactions Involving Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c. (e) Sharing of (b) Relationship between interested (c) Amount of (d) Description of (a) Name of interested person òrganization's person and the organization transaction transaction revenues? No Yes PAUL FREUNDLICH EX OFFICIO BOARD ME 3,000.PAYMENT FOR X DENISE HAMLER FORMER BOARD MEMBER 10,000.CONSULTING X KATHY HARGET FORMER BOARD MEMBER 78,274.SALARY COMP X Supplemental Information. Provide additional information for responses to questions on Schedule L (see instructions). SCH L, PART IV, BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS: (A) NAME OF PERSON: PAUL FREUNDLICH (B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION: EX OFFICIO BOARD MEMBER, EXECUTIVE DIRECTOR OF FAIR TRADE FOUNDATION (D) DESCRIPTION OF TRANSACTION: PAYMENT FOR TECHNICAL ASSISTANCE (A) NAME OF PERSON: DENISE HAMLER (D) DESCRIPTION OF TRANSACTION: CONSULTING FEES (A) NAME OF PERSON: KATHY HARGET DESCRIPTION OF TRANSACTION: SALARY COMPENSATION FOR FULL-TIME STAFF POSITION

# SCHEDULE M (Form 990)

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service ► Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

**Noncash Contributions** 

Attach to Form 990.

► Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization GREEN AMERICA

Employer identification number 52-1660746

Pai		Types of Property									
			(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contri amounts report Form 990, Part VI	ted on		(d) ethod of de sh contribu		0	s
1	Art -	Works of art									
		Historical treasures									
		Fractional interests									
		s and publications									
		ning and household goods									
		and other vehicles									
		s and planes									
		ectual property									
		ırities - Publicly traded	X	18	696	,544.	FMV ON	I DATE	OF	GI:	$\overline{ ext{FT}}$
		ırities - Closely held stock									
		ırities - Partnership, LLC, or									
		interests									
12	Secu	ırities - Miscellaneous									
13		ified conservation contribution -									
	Histo	oric structures									
		ified conservation contribution - Other									
15	Real	estate - Residential									
16	Real	estate - Commercial									
		estate - Other									
		ectibles									
19	Food	l inventory									
		s and medical supplies									
21	Taxio	dermy									
22	Histo	orical artifacts									
23	Scie	ntific specimens									
24	Arch	eological artifacts									
25	Othe	er <b>&gt;</b> ()									
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		ber of Forms 8283 received by the organiz									
	for w	hich the organization completed Form 828	33, Part IV, I	Donee Acknowled	gement	29					
										Yes	No
		ng the year, did the organization receive by					-	it			
		t hold for at least three years from the date									37
		npt purposes for the entire holding period?	)						30a		X
		es," describe the arrangement in Part II.								v	
		s the organization have a gift acceptance p							31	Х	
32a		s the organization hire or use third parties or the organization hire or use third parties or the organization hire or use third parties or use the order or use the o		•					32a		Х
		es," describe in Part II.									
33	If the	e organization didn't report an amount in c	olumn (c) fo	r a type of propert	y for which column	(a) is che	cked,				
		ribe in Part II.									
111	<b>-</b> -	" Denominant Dedication Ast Notice and	the leature	tions for Form OO	^			abadula N	I / E	~ 000	2010

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

Schedule M (Form 990) 2019

932142 09-27-19

# **SCHEDULE 0**

Internal Revenue Service

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

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. ► Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047 Open to Public

Inspection

Name of the organization

GREEN AMERICA

**Employer identification number** 52-1660746

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
THE PUBLIC ABOUT THE ROLE THAT PUBLIC AND PRIVATE ENTERPRISE CAN PLAY
IN SOLVING TODAY'S SOCIAL AND ENVIRONMENTAL PROBLEMS. TO SERVE THIS
PURPOSE, GREEN AMERICA CONDUCTS A NUMBER OF ACTIVITIES DESIGNED TO
EDUCATE THE AMERICAN PUBLIC ABOUT THE IMPORTANT ROLE THAT BUSINESSES
AND INDIVIDUALS CAN PLAY IN CREATING AN ECONOMY BASED ON JUSTICE,
COOPERATION, ENVIRONMENTAL HEALTH, AND SOCIAL RESPONSIBILITY. GREEN
AMERICA CARRIES OUT ITS MISSION WITHIN THREE KEY AREAS: CONSUMER
EDUCATION, INNOVATIVE GREEN BUSINESS PROGRAMS, AND THE CENTER FOR
SUSTAINABILITY SOLUTIONS, A PROGRAM FOCUSED ON SUPPLY CHAIN SOLUTIONS
TO SOCIAL AND ENVIRONMENTAL PROBLEMS. GREEN AMERICA'S PRIMARY
PUBLICATIONS ARE: GREEN AMERICAN MAGAZINE, YOUR GREEN LIFE, AND THE
GUIDE TO SOCIAL INVESTING & BETTER BANKING (A DIGITAL RESOURCE).
FORM 990, PAGE 1. PART I, LINE 8
IN FISCAL YEAR 2019(PRIOR YEAR), GREEN AMERICA RECEIVED A UNUSUAL
ENDOWMENT GIFT OF APPROXIMATELY \$9.5M, WHICH IS THE MAIN PART OF THE
VARIANCE FROM THE PRIOR YEAR TO THE CURRENT YEAR.
FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:
RESPONSIBILITY.

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

MAKE GREEN INVESTING AND BANKING DECISIONS.

Schedule O (Form 990 or 990-EZ) (2019)

GUIDE TO SOCIAL INVESTING & BETTER BANKING - A GUIDE TO HELP PEOPLE

Schedule O (Form 990 or 990-EZ) (2019) Page 2 Name of the organization **Employer identification number** GREEN AMERICA 52-1660746 YOUR GREEN LIFE - TIPS AND STRATEGIES FOR GREENING YOUR LIFE, PURCHASES, AND INVESTMENTS. CLIMATE & ENERGY - THE CLIMATE & ENERGY PROGRAM GIVES PEOPLE TOOLS TO REDUCE THEIR OWN CARBON FOOTPRINT WHILE ENCOURAGING THE MOST POLLUTING CORPORATIONS TO DO THE SAME. THE PROGRAM MOBILIZES CONSUMERS, INVESTORS, BUSINESSES, AND INDUSTRY EXPERTS TO ENCOURAGE KEY STATE, LOCAL, FEDERAL AND BUSINESS DECISION MAKERS TO ADOPT THE POLICIES AND REGULATIONS NEEDED TO BRING SOLAR AND WIND ENERGY TO SCALE AND INSTITUTE ENERGY EFFICIENCY MEASURES EVERYWHERE. THE PROGRAM ENCOURAGES MAJOR CORPORATIONS TO REDUCE FOSSIL FUEL USE AND OTHER CLIMATE POLLUTANTS SUCH AS REFRIGERANTS AND SWITCH TO CLEAN ENERGY AND OTHER CLIMATE-FRIENDLY ALTERNATIVES. THE PROGRAM HAS ALSO DEVELOPED THE IDEA OF CLEAN ENERGY VICTORY BONDS AND EDUCATES THE PUBLIC ABOUT THE IMPORTANCE OF NEW FINANCING MECHANISMS FOR RENEWABLE ENERGY AND ENERGY EFFICIENCY. SKIP THE SLIP - SKIP THE SLIP WORKS TO ENCOURAGE RETAILERS TO SHIFT

FROM OFFERING CONSUMERS TOXIC PAPER RECEIPTS THAT SHOULD NOT BE RECYCLED TO PROVIDING DIGITAL RECEIPTS OR NO RECEIPT OPTIONS, AND PROVIDING NON-TOXIC PAPER RECEIPTS TO CUSTOMERS THAT REQUEST THEM.

SOCIALLY AND ENVIRONMENTALLY RESPONSIBLE INVESTING AND BANKING - THE SOCIALLY AND ENVIRONMENTALLY RESPONSIBLE INVESTING AND BANKING PROGRAM EXPOSES BANKS THAT PREY ON CONSUMERS THROUGH HIGH-INTEREST CREDIT CARDS AND OTHER PREDATORY LOAN PRACTICES, AND THAT FINANCE THE FOSSIL FUEL INDUSTRY. THE COMMUNITY INVESTING PROGRAM SUCCESSFULLY PROMOTES COMMUNITY INVESTING SOLUTIONS THAT PROVIDE FINANCIAL SERVICES AND

932212 09-06-19

Name of the organization

**Employer identification number** 

GREEN AMERICA 52-1660746

OPPORTUNITIES TO ECONOMICALLY DISADVANTAGED COMMUNITIES THAT ARE

UNDERSERVED BY TRADITIONAL FINANCIAL INSTITUTIONS. THE BREAK UP WITH

YOUR MEGA-BANK AND GET A BETTER BANK CAMPAIGNS ARE CONDUCTED TO EDUCATE

CONSUMERS ABOUT THE IMPACT BANKS AND CREDIT CARDS HAVE ON PEOPLE AND

THE PLANET. THE ORGANIZATION ALSO PROVIDES EDUCATION ON FOSSIL FUEL

DIVESTMENT AND CLEAN ENERGY INVESTMENT FOR CONSUMERS INTERESTED IN

USING INVESTMENT STRATEGIES TO MITIGATE CLIMATE CHANGE.

LABOR JUSTICE - THE LABOR JUSTICE PROGRAM REACHES OUT TO CONSUMERS

ACROSS THE NATION THROUGH OUR PUBLICATIONS, WEBSITES, AND EVENTS TO

SPUR DEMAND FOR FAIR TRADE AND RESPONSIBLY-PRODUCED PRODUCTS. GREEN

AMERICA ALSO OPPOSES THE WORST LABOR CONDITIONS THROUGH ITS CAMPAIGNS.

GREEN AMERICA CONDUCTS THE TOXIC TEXTILES AND END SMARTPHONE SWEATSHOP

CAMPAIGNS TO EDUCATE THE PUBLIC ABOUT WORKER AND ENVIRONMENTAL EXPOSURE

TO TOXINS IN SUPPLY CHAINS AND TO PUT PRESSURE ON COMPANIES TO END THIS

EXPOSURE. THE PROGRAM ALSO CALLS OUT LABOR ABUSES IN THE COCOA SECTOR

AND AT AMAZON.COM AND ENCOURAGES MANUFACTURERS AND RETAILERS TO IMPROVE

LABOR CONDITIONS IN THEIR SUPPLY CHAINS.

FOOD CAMPAIGN - THE PURPOSE OF THIS PROGRAM IS TO ACCELERATE THE SHIFT

OF THE FOOD SYSTEM FROM INDUSTRIAL AGRICULTURE TO REGENERATIVE,

ORGANIC, LOCAL, SUSTAINABLE FOODS. THE CURRENT FOCUS OF THIS PROGRAM

IS ON PROMOTING REGENERATIVE AGRICULTURE THAT NOURISHES THE SOIL AND

SEQUESTERS CARBON EMISSIONS. THE CLIMATE VICTORY GARDENS CAMPAIGN

ENCOURAGES ALL AMERICANS TO PLANT A GARDEN USING REGENERATIVE

AGRICULTURE PRACTICES.

POLICY & ADVOCACY - THIS PROGRAM EDUCATES AND ENGAGES THE PUBLIC AND

Name of the organization **Employer identification number** GREEN AMERICA 52-1660746 POLICYMAKERS ON KEY GREEN ECONOMY ISSUES SUCH AS ENERGY AND CLIMATE CHANGE, TOXIC CHEMICAL CONTROL, SUPPORT FOR MINIMUM WAGE INCREASES, AND UPHOLDING AND STRENGTHENING FEDERAL REGULATIONS THAT PROTECT HUMAN AND ENVIRONMENTAL HEALTH. , AMONG OTHER ISSUES. FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS: ASPECT OF THE GREEN ECONOMY SUCH AS ENERGY EFFICIENCY, WASTE REDUCTION, FAIR SUPPLY CHAIN, AND SUSTAINABLE FOODS. THIS PROGRAM ENDED IN OCTOBER, 2019. FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS: FOSSIL FUEL LENDING AND FOCUS ON RENEWABLE ENERGY AND REGENERATIVE AGRICULTURE LENDING. REGENERATIVE SUPPLY WORKING GROUP: WORKS TO INCREASE THE SUPPLY OF NON-GMO AND ORGANIC, REGENERATIVE INGREDIENTS AS A PATHWAY TO A MORE DIVERSE, RESILIENT AND SUSTAINABLE FOOD SYSTEMS THAT CREATES BETTER LONG-TERM OUTCOMES FOR FARMERS, CONSUMERS AND THE ENVIRONMENT. CARBON FARMING: WORKS TO ACCELERATE FARMING PRACTICES THAT INCREASE SOIL HEALTH AND CARBON SEQUESTRATION AS PART OF THE GLOBAL CLIMATE CHANGE SOLUTION. THE AGRICULTURE NETWORKS JOINTLY LEAD INITIATIVES WHICH INCLUDE: ADVANCED SOIL HEALTH MANAGEMENT SYSTEMS: VALIDATION AND STRATEGIES FOR ADOPTION OF INNOVATIVE SOIL SOLUTIONS TO SPEED SOIL REGENERATION.

IMPROVEMENT STRATEGIES.

Name of the organization

GREEN AMERICA

GREEN AMERICA

Employer identification number 52-1660746

REWARDING FARMERS: ADVANCING EFFECTIVE INSTRUMENTS TO SUPPORT THE

FINANCIAL TRANSITION TO INNOVATIVE SOIL HEALTH PRACTICES.

SOIL CARBON INITIATIVE: STANDARD PROTOCOL TO VERIFY SOIL HEALTH

OUTCOMES AND FACILITATE INVESTMENT IN AND ADOPTION OF SOIL HEALTH

REGIONAL REGENERATIVE SUPPLY COLLABORATION (FORMERLY THE MIDWEST GRAINS

INITIATIVE): WORKS TO INCREASE THE SUPPLY OF GRAINS THAT ARE PRODUCED

WITH BEST PRACTICES FOR WATER QUALITY, SOIL HEALTH AND CARBON

SEQUESTRATION.

SOIL SUPERHEROES: PUBLIC CAMPAIGN TO BUILD THE NARRATIVE THAT SOIL HEALTH IS ESSENTIAL FOR CLIMATE AND FOOD SYSTEM SOLUTIONS.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

SOLAR CIRCLE

SOLAR CIRCLE IS A NATIONAL NETWORK OF EXPERTS IN THE FIELDS OF SOLAR

ENERGY AND LARGE-SCALE SYSTEMS CHANGE WHO CONVENE ON A REGULAR BASIS TO

SHARE INFORMATION AND STRATEGIES TO MAKE SOLAR POWER AN INCREASINGLY

AFFORDABLE RENEWABLE ENERGY OPTION. SOLAR CIRCLE WORKS TO ACCELERATE

THE ADOPTION OF SOLAR ENERGY TO BE 50% OF ENERGY BY 2050.

TREESISTERS

TREESISTERS IS A GLOBAL NETWORK OF WOMEN WHO DONATE MONTHLY TO FUND THE

RESTORATION OF TROPICAL FORESTS AS A COLLECTIVE EXPRESSION OF PLANETARY

CARE.

Name of the organization

GREEN AMERICA

Employer identification number
52-1660746

KINS

KINS INNOVATION NETWORKS ARE SELF-ORGANIZING NETWORKS OF KEY,

COLLABORATIVE, HIGH-INTEGRITY LEADERS IN WIDELY DIVERSE FIELDS WHO COME

TOGETHER BY INVITATION TO ACHIEVE INSPIRING INNOVATIONS WHILE ENJOYING

THEIR KINDRED SPIRITS. THESE NETWORKS LEVERAGE EXISTING 'CONSCIOUS

SUSTAINABILITY' INITIATIVES WITH POWERFUL NEW ONES TO MANIFEST

INNOVATIONS FASTER, CHEAPER, WITH HIGHER IMPACT AND WITH MORE FUN.

EXPENSES \$ 468,975. INCLUDING GRANTS OF \$ 0. REVENUE \$ 7,332.

FORM 990, PART VI, SECTION A, LINE 6:

THE ORGANIZATION HAS THREE CLASSES OF MEMBERS: INDIVIDUAL, ORGANIZATIONAL, AND WORKER. EACH MEMBER HAS ONE VOTE.

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

THE ORGANIZATION'S MEMBERS HAVE CERTAIN LIMITED VOTING RIGHTS. MEMBERS

ELECT THE BOARD OF DIRECTORS (EXCEPT IN THE EVENT OF A VACANCY, IN WHICH

CASE THE VACANCY IS FILLED BY A MAJORITY VOTE OF THE REMAINING MEMBERS OF

THE BOARD OF DIRECTORS). THE GENERAL DIRECTOR(CEO) OF THE STAFF IS ONE OF

THE DIRECTORS BUT ONLY HAS A VOTE IN THE EVENT OF A TIE. OF THE REMAINING

DIRECTORS, FIFTY PERCENT ARE ELECTED BY WORKER MEMBERS, TWENTY FIVE PERCENT

BY THE INDIVIDUAL MEMBERS, TWENTY FIVE PERCENT BY THE ORGANIZATIONAL

MEMBERS. IN THE EVENT THAT THE DIRECTORSHIPS TO BE ELECTED BY INDIVIDUAL

AND ORGANIZATIONAL MEMBERS ARE AN ODD NUMBER, INDIVIDUAL MEMBERS WILL ELECT

THE ODD SEAT. THE BOARD OF DIRECTORS HAS THE RIGHT TO VOTE ON ALL OTHER

MATTERS RELATED TO THE ORGANIZATION WITHOUT BEING SUBJECT TO MEMBER

APPROVAL.

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

Name of the organization GREEN AMERICA

Employer identification number 52-1660746

A DRAFT OF THE FORM 990 GOES THROUGH TWO LEVELS OF REVIEW. FIRST, THE DRAFT IS REVIEWED BY THE EXECUTIVE DIRECTORS AND CEO AND ANY NECESSARY CHANGES ARE MADE AT THIS POINT. LASTLY, THE FINAL DRAFT IS REVIEWED BY THE BOARD OF DIRECTORS BEFORE IT IS FILED.

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

IN CONNECTION WITH ANY ACTUAL OR POSSIBLE CONFLICT OF INTEREST, AN INTERESTED PERSON MUST DISCLOSE THE EXISTENCE OF THE FINANCIAL INTEREST AND BE GIVEN THE OPPORTUNITY TO DISCLOSE ALL MATERIAL FACTS TO THE DIRECTORS AND MEMBERS OF COMMITTEES WITH GOVERNING BOARD DELEGATED POWERS CONSIDERING THE PROPOSED TRANSACTION OR ARRANGEMENT. AFTER DISCLOSURE OF THE FINANCIAL INTEREST AND ALL MATERIAL FACTS, AND AFTER ANY DISCUSSION WITH THE INTERESTED PERSON, HE/SHE SHALL LEAVE THE GOVERNING BOARD OR COMMITTEE MEETING WHILE THE DETERMINATION OF A CONFLICT OF INTEREST IS DISCUSSED AND VOTED UPON. THE REMAINING BOARD OR COMMITTEE MEMBERS SHALL DECIDE IF A CONFLICT OF INTEREST EXISTS. PROCEDURES FOR ADDRESSING THE CONFLICT OF INTEREST: AN INTERESTED PERSON MAY MAKE A PRESENTATION AT THE GOVERNING BOARD OR COMMITTEE MEETING, BUT AFTER THE PRESENTATION, HE/SHE SHALL LEAVE THE MEETING DURING THE DISCUSSION OF, AND THE VOTE ON, THE TRANSACTION OR ARRANGEMENT INVOLVING THE POSSIBLE CONFLICT OF INTEREST. THE CHAIRPERSON OF THE GOVERNING BOARD OR COMMITTEE SHALL, IF APPROPRIATE, APPOINT A DISINTERESTED PERSON OR COMMITTEE TO INVESTIGATE ALTERNATIVES TO THE PROPOSED TRANSACTION OR ARRANGEMENT. AFTER EXERCISING DUE DILIGENCE, THE GOVERNING BOARD OR COMMITTEE SHALL DETERMINE WHETHER GREEN AMERICA CAN OBTAIN WITH REASONABLE EFFORTS A MORE ADVANTAGEOUS TRANSACTION OR ARRANGEMENT FROM A PERSON OR ENTITY THAT WOULD NOT GIVE RISE TO A CONFLICT OF INTEREST. IF A MORE ADVANTAGEOUS TRANSACTION OR ARRANGEMENT IS NOT REASONABLY POSSIBLE UNDER

Name of the organization **Employer identification number** GREEN AMERICA 52-1660746 CIRCUMSTANCES NOT PRODUCING A CONFLICT INTEREST, THE GOVERNING BOARD OR COMMITTEE SHALL DETERMINE BY A MAJORITY VOTE OF THE DISINTERESTED DIRECTORS WHETHER THE TRANSACTION OR ARRANGEMENT IS IN GREEN AMERICA'S BEST INTEREST, FOR ITS OWN BENEFIT, AND WHETHER IT IS FAIR AND REASONABLE. IN CONFORMITY WITH THE ABOVE DETERMINATION IT SHALL MAKE ITS DECISION AS TO WHETHER TO ENTER INTO THE TRANSACTION OR ARRANGEMENT. VIOLATIONS OF THE CONFLICT OF INTEREST POLICY: IF THE GOVERNING BOARD OR COMMITTEE HAS REASONABLE CAUSE TO BELIEVE A MEMBER HAS FAILED TO DISCLOSE ACTUAL OR POSSIBLE CONFLICTS OF INTEREST, IT SHALL INFORM THE MEMBER OF THE BASIS FOR SUCH BELIEF AND AFFORD THE MEMBER AN OPPORTUNITY TO EXPLAIN THE ALLEGED FAILURE TO DISCLOSE. IF, AFTER HEARING THE MEMBER'S RESPONSE AND AFTER MAKING FURTHER INVESTIGATION AS WARRANTED BY THE CIRCUMSTANCES, THE GOVERNING BOARD OR COMMITTEE DETERMINES THE MEMBER HAS FAILED TO DISCLOSE AN ACTUAL OR POSSIBLE CONFLICT OF INTEREST, IT SHALL TAKE APPROPRIATE DISCIPLINARY AND CORRECTIVE ACTION. RECORDINGS AND PROCEDINGS: THE MINUTES OF THE GOVERNING BOARD AND ALL COMMITTEES WITH BOARD DELEGATED POWERS SHALL CONTAIN: A)THE NAMES OF THE PERSONS WHO DISCLOSED OR OTHERWISE WERE FOUND TO HAVE A FINANCIAL INTEREST IN CONNECTION WITH AN ACTUAL OR POSSIBLE CONFLICT OF INTEREST, THE NATURE THE FINANCIAL INTEREST, ANY ACTION TAKEN TO DETERMINE WHETHER A CONFLICT INTEREST WAS PRESENT, AND THE GOVERNING BOARD'S OR COMMITTEES DECISION AS TO WHETHER A CONFLICT OF INTEREST IN FACT EXISTED. B) THE NAMES OF THE PERSONS WHO WERE PRESENT FOR DISCUSSIONS AND VOTES RELATING TO THE TRANSACTION OR ARRANGEMENT, THE CONTENT OF THE DISCUSSION, INCLUDING ANY ALTERNATIVES TO THE PROPOSED TRANSACTION OR ARRANGEMENT, AND A RECORD OF ANY VOTES TAKEN IN CONNECTION WITH THE PROCEEDINGS. COMPENSATION: A VOTING MEMBER OF THE GOVERNING BOARD WHO RECEIVES

COMPENSATION, DIRECTLY OR INDIRECTLY, FROM GREEN AMERICA FOR SERVICES IS

Name of the organization **Employer identification number** GREEN AMERICA 52-1660746 PRECLUDED FROM VOTING ON MATTERS PERTAINING TO THAT MEMBER'S COMPENSATION. A VOTING MEMBER OF ANY COMMITTEE WHOSE JURISDICTION INCLUDES COMPENSATION MATTERS AND WHO RECEIVES COMPENSATION, DIRECTLY OR INDIRECTLY, FROM GREEN AMERICA FOR SERVICES IS PRECLUDED FROM VOTING ON MATTERS PERTAINING TO THAT MEMBER'S COMPENSATION. NO VOTING MEMBER OF THE GOVERNING BOARD OR ANY COMMITTEE WHOSE JURISDICTION INCLUDES COMPENSATION MATTERS AND WHO RECEIVES COMPENSATION, DIRECTLY OR INDIRECTLY, FROM THE ORGANIZATION, EITHER INDIVIDUALLY OR COLLECTIVELY, IS PROHIBITED FROM PROVIDING INFORMATION TO ANY COMMITTEE REGARDING COMPENSATION. EACH DIRECTOR, PRINCIPAL OFFICER AND MEMBER OF A COMMITTEE WITH GOVERNING BOARD DELEGATED POWERS SHALL ANNUALLY SIGN A STATEMENT WHICH AFFIRMS SUCH PERSON: HAS RECEIVED A COPY OF THE CONFLICT OF INTEREST POLICY, HAS READ AND UNDERSTANDS THE POLICY, HAS AGREED TO COMPLY WITH THE POLICY, AND UNDERSTANDS GREEN AMERICA IS CHARITABLE AND IN ORDER TO MAINTAIN ITS FEDERAL TAX EXEMPTION IT MUST ENGAGE PRIMARILY IN ACTIVITIES WHICH ACCOMPLISH ONE OR MORE OF ITS TAX-EXEMPT PURPOSES. TO ENSURE GREEN AMERICA OPERATES IN A MANNER CONSISTENT WITH CHARITABLE PURPOSES AND DOES NOT ENGAGE IN ACTIVITIES THAT COULD JEOPARDIZE ITS TAX-EXEMPT STATUS, PERIODIC REVIEWS SHALL BE CONDUCTED. THE PERIODIC REVIEWS SHALL, AT A MINIMUM, INCLUDE THE FOLLOWING SUBJECTS: WHETHER COMPENSATION ARRANGEMENTS AND BENEFITS ARE REASONABLE, BASED ON COMPETENT SURVEY INFORMATION AND THE RESULT OF ARM'S LENGTH BARGAINING. WHETHER PARTNERSHIPS, JOINT VENTURES, AND ARRANGEMENTS WITH MANAGEMENT ORGANIZATIONS CONFORM TO GREEN AMERICA'S WRITTEN POLICIES, ARE PROPERLY RECORDED, REFLECT REASONABLE INVESTMENT OR PAYMENTS FOR GOODS AND SERVICES, FURTHER CHARITABLE PURPOSES AND DO NOT RESULT IN INUREMENT, IMPERMISSIBLE PRIVATE BENEFIT OR IN AN EXCESS BENEFIT TRANSACTION.

Schedule O (Form 990 or 990-EZ) (2019) Page 2 Name of the organization **Employer identification number** GREEN AMERICA 52-1660746 FORM 990, PART VI, SECTION B, LINE 15A: SALARY REVIEW PROCESS: AN ANNUAL SALARY REVIEW OCCURS FOR ALL ELIGIBLE REGULAR STAFF AT THE COMPLETION OF THE ANNUAL OPERATING PLAN PROCESS. THE SALARY REVIEW PROCESS EMPHASIZES CHANGES, INCREASES AND UPDATES IN THE WORKLIFE RESPONSIBILITIES OF STAFF MEMBERS AND THE DURATION OF ONE'S SATISFACTORY PERFORMANCE. THE PROCESS BEGINS EARLIER IN THE YEAR WITH THE ANNUAL ASSESSMENT LED BY THE FINANCE TEAM OF GREEN AMERICA'S CURRENT FINANCIAL SITUATION AND A DETERMINATION OF WHAT FUNDS ARE AVAILABLE FOR SALARY INCREASES IN THE COMING YEAR. ONCE THE STAFF AND THEN THE BOARD OF DIRECTORS HAVE APPROVED THE FINAL OPERATING PLAN, THE SALARY ADJUSTMENT PROCESS BEGINS. FINANCES PERMITTING, EACH REGULAR STAFF PERSON WHO HAS BEEN AT GREEN AMERICA FOR A MINIMUM PERIOD DETERMINED BY MANAGEMENT WILL BE ELIGIBLE FOR A COST OF LIVING ADJUSTMENT (COLA). THE COLA IS A SET PERCENT OF SALARY DETERMINED BY THE CONSUMER PRICE INDEX OR OTHER FACTOR, WHICH VARIES EACH YEAR AND IS INTENDED TO ADJUST FOR INFLATION. ANNUAL PAY INCREASES ARE DETERMINED ACCORDING TO THE SALARY ADJUSTMENT POLICY. ONCE THE OPERATING PLAN IS APPROVED, THE SENIOR MANAGEMENT TEAM WILL ALLOCATE THE FUNDS IN THE SALARY POOL. IN ADDITION TO THIS ANNUAL REVIEW, ADJUSTMENTS BASED ON MAJOR JOB DESCRIPTION CHANGES WILL BE CONSIDERED AT ANY TIME DURING THE YEAR. ANY STAFF MEMBER WHO HAS MADE A MAJOR CHANGE IN THEIR JOB DESCRIPTION MAY BE REHIRED INTO A NEW POSITION BASED ON THOSE CHANGES. USUALLY OCCURS DUE TO A DEPARTURE OF STAFF OR A RESTRUCTURING OF DUTIES. ANY CHANGE IN THE PRESIDENT & CEO'S SALARY, OUTSIDE OF A COST OF LIVING ADJUSTMENT, IS DETERMINED BY A COMMITTEE OF THE BOARD OF DIRECTORS. THE COMMITTEE RESEARCHES COMPARABLE SALARIES, CONSIDERS THE BUDGET, AND RECOMMENDS A SALARY AMOUNT TO THE BOARD OF DIRECTORS. THE BOARD REVIEWS THE RECOMMENDATION AND MAKES A DECISION. THIS PROCESS IS DOCUMENTED IN THE

Schedule O (Form 990 or 990-EZ) (2019)

MINUTES OF THE BOARD MEETING. THE ORGANIZATION DETERMINES COMPENSATION IN

Name of the organization GREEN AMERICA Employer identification number 52-1660746

ACCORDANCE WITH THEIR CONFLICT OF INTEREST POLICY.

FOR OTHER OFFICERS AND KEY EMPLOYEES: ANY COMPENSATION RECEIVED BY OFFICERS IS RELATED TO SERVICES PROVIDED TO THE ORGANIZATION AS AN EMPLOYEE OF THE ORGANIZATION. OFFICERS ARE NOT PAID FOR THEIR DUTIES AND SERVICES PROVIDED AS OFFICERS OF THE ORGANIZATION. THE ORGANIZATION DOES NOT HAVE ANY KEY EMPLOYEES AS DEFINED IN IRS 2018 FORM 990 INSTRUCTIONS (PAGES 26 AND 27). IF APPROVED, THE NEW SALARY IS PUT INTO EFFECT.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:

AK,AL,AR,CA,CT,FL,GA,HI,IL,KS,KY,LA,MA,MD,MI,MN,MS,NC,NH,NJ,NM,NY,OK,OR,PA

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

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

THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS AND CONFLICT OF INTEREST

POLICY AVAILABLE UPON REQUEST. THE AUDITED FINANCIAL STATEMENTS AND FORM

990 ARE AVAILABLE ON THE ORGANIZATION'S WEBSITE AND/OR UPON REQUEST. THE

FORM 990 IS ALSO AVAILABLE ON GUIDESTAR.COM.

FORM 990, PAGE 11, PART XI, LINE 2C

THE ORGANIZATION HAS A SEPARATE AUDIT COMMITTEE THAT ASSUMES

RESPONSIBILITY FOR OVERSIGHT OF THE AUDIT OF ITS FINANCIAL STATEMENTS

AND THE SELECTION OF AN INDEPENDENT ACCOUNTANT.

SCHEDULE M, PART I, LINE 25, COLUMN (D)

PLEDGES RECEIVABLE: THE REVENUE RECORDED WAS THE TOTAL DOLLAR AMOUNT
OF THE PLEDGES MADE, IRRESPECTIVE OF THE YEAR IN WHICH THE DONOR

SPECIFIED THEY WOULD PAY.

GREEN AMERICA	52-1660746
SCHEDULE M, PART I, LINE 31	
GREEN AMERICA ACCEPTS GIFTS OF CASH, CHECKS, CREDIT CARD	CHARGES,
STOCK, BONDS AND MUTUAL FUNDS. GIFTS OF AUTOS, LAND, BUI	LDINGS, AND
OTHER MATERIAL ITEMS ARE ONLY ACCEPTED UPON APPROVAL BY T	THE SENIOR
MANAGEMENT TEAM.	
GIFTS OF STOCK/BONDS/MUTUAL FUNDS:	
GENERALLY, GREEN AMERICA IMMEDIATELY SELLS THE STOCK OR M	MUTUAL FUNDS
RECEIVED AND DEPOSITS THE CASH INTO THE REGULAR OPERATING	G CASH ACCOUNT.
ANY RESTRICTIONS ON THE GIFT ARE RECORDED VIA THE USE OF	A DEPARTMENT
NUMBER, WHICH IDENTIFIES THE PROGRAM THE GIFT IS TO BE US	SED FOR.
FORM 990, PAGE 7, SECTION A.	
ALL BOARD MEMBERS ARE VOLUNTEERS AND ARE NOT COMPENSATED	FOR THEIR
BOARD SERVICES. ALL COMPENSATION LISTED IN PART VII COMPE	ENSATION OF
OFFICERS, DIRECTORS, TRUSTEES, KEY EMPLOYEES, AND HIGHEST	COMPENSATED
EMPLOYEES IS COMPENSATION FOR SERVICES PROVIDED AS EMPLOY	EES OF THE
ORGANIZATION OR CONSULTANTS TO THE ORGANIZATION, AND NOT	FOR BOARD OR
OFFICER DUTIES.	

FORM 990 PAGE 10 990

Asset No.	Description	Date Acquired	Method	Life	C o n v	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
	EQUIPMENT														
1	LARGE FRIDGE	07/24/03	SL	5.00	1	16	688.				688.	688.		0.	688.
33	CONFERENCING EQUIPMENT	04/30/17	SL	5.00	1	16	1,300.				1,300.	390.		260.	650.
34	ALLIED TELECOMM EQUIPMENT	06/30/17	SL	5.00	1	16	969.				969.	291.		194.	485.
53	AV EQUIPMENT	08/31/18	SL	5.00	1	16	949.				949.	190.		190.	380.
54	AV EQUIPMENT	10/31/18	SL	5.00	1	16	779.				779.	78.		156.	234.
55	AV EQUIPMENT	01/31/19	SL	5.00	1	16	922.				922.	92.		184.	276.
	* 990 PAGE 10 TOTAL - EQUIPMENT						5,607.				5,607.	1,729.		984.	2,713.
	COMPUTERS														
9	LAPTOP	11/21/13	SL	5.00	1	16	825.				825.	825.		0.	825.
10	5 DESKTOP COMPUTERS	11/21/13	SL	5.00	1	16	2,997.				2,997.	2,997.		0.	2,997.
11	DESKTOP COMPUTER	07/01/13	SL	5.00	1	16	599.				599.	599.		0.	599.
12	DESKTOP COMPUTER	07/01/13	SL	5.00	1	16	599.				599.	599.		0.	599.
13	DESKTOP COMPUTER	07/01/13	SL	5.00	1	16	599.				599.	599.		0.	599.
14	DESKTOP COMPUTER	07/01/13	SL	5.00	1	16	599.				599.	599.		0.	599.
15	DESKTOP COMPUTER	07/01/13	SL	5.00	1	16	599.				599.	599.		0.	599.
16	DELL LAPTOP	07/01/13	SL	5.00	1	16	850.				850.	850.		0.	850.
21	DELL COMPUTER FOR TRACY	03/01/14	SL	5.00	1	16	1,000.				1,000.	1,000.		0.	1,000.

<sup>(</sup>D) - Asset disposed

<sup>\*</sup> ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

FORM 990 PAGE 10 990

Asset No.	Description	Date Acquired	Method	Life	Conv	ine No. (	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
22	DELL HARDWARE	04/01/14	SL	5.00	1	.6	4,295.				4,295.	4,295.		0.	4,295.
25	DELL MARKETING COMPUTERS	06/01/15	SL	5.00	1	.6	3,227.				3,227.	2,580.		647.	3,227.
27	DELL FOR DENNIS	04/01/16	SL	5.00	1	.6	899.				899.	540.		180.	720.
28	APPLE FOR MONICA	06/01/16	SL	5.00	1	.6	1,427.				1,427.	855.		285.	1,140.
29	DELL - 4PC'S	09/01/16	SL	5.00	1	.6	2,596.				2,596.	1,039.		519.	1,558.
30	DELL 2 LAPTOPS	09/01/16	SL	5.00	1	.6	1,803.				1,803.	801.		361.	1,162.
31	DELL 1 PC	09/01/16	SL	5.00	1	.6	853.				853.	516.		171.	687.
35	DELL MARKETING LAPTOP	06/30/17	SL	5.00	1	.6	849.				849.	255.		170.	425.
36	DELL MARKETING LAPTOP	06/30/17	SL	5.00	1	.6	451.				451.	135.		90.	225.
37	DELL MARKETING LAPTOP	06/30/17	SL	5.00	1	.6	519.				519.	156.		104.	260.
38	DELL MARKETING LAPTOP	06/30/17	SL	5.00	1	.6	950.				950.	285.		190.	475.
39	DELL MARKETING LAPTOP	06/30/17	SL	5.00	1	.6	945.				945.	283.		189.	472.
40	DELL MARKETING LAPTOP	06/30/17	SL	5.00	1	.6	493.				493.	148.		99.	247.
41	DELL MARKETING LAPTOP	10/31/17	SL	5.00	1	.6	840.				840.	252.		168.	420.
42	DELL MARKETING LAPTOP	10/31/17	SL	5.00	1	.6	872.				872.	261.		174.	435.
43	DELL MARKETING LAPTOP	10/31/17	SL	5.00	1	.6	799.				799.	240.		160.	400.
44	DELL MARKETING LAPTOP	10/31/17	SL	5.00	1	.6	576.				576.	173.		115.	288.
45	DELL MARKETING LAPTOP	12/31/17	SL	5.00	1	.6	797.				797.	239.		159.	398.

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FORM 990 PAGE 10 990

Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
46	DELL MARKETING LAPTOP	02/28/18	SL	5.00	:	16	1,001.				1,001.	300.		200.	500.
47	DELL MARKETING LAPTOP	02/28/18	SL	5.00	:	16	1,060.				1,060.	318.		212.	530.
48	SERVER	03/31/18	SL	5.00	ŀ	16	5,413.				5,413.	1,624.		1,083.	2,707.
56	SPRING LAPTOPS	05/31/18	SL	5.00	:	16	4,758.				4,758.	952.		952.	1,904.
57	FALL LAPTOPS	10/31/18	SL	5.00	:	16	3,567.				3,567.	356.		713.	1,069.
	* 990 PAGE 10 TOTAL - COMPUTERS						47,657.				47,657.	25,270.		6,941.	32,211.
	SOFTWARE														
2	AUDIT ADJUSTMENT AT 12/31/06	12/31/06	SL	.000	į	16						1,413.		0.	1,413.
23	RAISERS EDGE SOFTWARE	10/01/14	SL	5.00	-	16	81,503.				81,503.	73,353.		8,150.	81,503.
24	ADDITIONAL RAISERS EDGE MODULE	10/01/14	SL	5.00	ź	16	7,300.				7,300.	6,570.		730.	7,300.
	* 990 PAGE 10 TOTAL - SOFTWARE						88,803.				88,803.	81,336.		8,880.	90,216.
	WEBSITE														
3	TRADEMARK	09/01/91	SL	15.00	í	16	11,500.				11,500.	11,500.		0.	11,500.
4	WEBSITE	06/01/10	SL	5.00	1	16	23,840.				23,840.	23,840.		0.	23,840.
5	WEBSITE	08/01/10	SL	5.00	í	16	2,040.				2,040.	2,040.		0.	2,040.
6	WEBSITE	10/01/10	SL	5.00	:	16	1,020.				1,020.	1,020.		0.	1,020.
7	WEBSITE	10/27/10	SL	5.00	:	16	1,500.				1,500.	1,500.		0.	1,500.
8	BUSINESS LISTINGS	10/01/11	SL	5.00		16	2,500.				2,500.	2,500.		0.	2,500.

<sup>(</sup>D) - Asset disposed

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FORM 990 PAGE 10 990

Asset No.	Description	Date Acquired	Method	Life	Conv	_ine No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
26	NEW CENTER WEBSITE	09/01/15	SL	5.00	1	L6	17,237.				17,237.	11,031.		3,447.	14,478.
32	NEW CENTER WEBSITE	03/31/17	SL	5.00	1	L6	42,350.				42,350.	16,940.		8,470.	25,410.
49	MAAN	05/31/17	SL	5.00	1	L 6	3,475.				3,475.	1,390.		695.	2,085.
50	MAAN	07/31/17	SL	5.00	1	L6	4,079.				4,079.	1,632.		816.	2,448.
51	RED SEQUOIA	07/31/17	SL	5.00	1	L6	275.				275.	110.		55.	165.
52	MAAN	08/31/17	SL	5.00	1	L6	3,450.				3,450.	1,380.		690.	2,070.
58	DIRECTORY DATA ENTRY GAAB	05/31/18	SL	5.00	1	L6	764.				764.	153.		153.	306.
59	MAAN WEBSITE DEVELOPMENT	07/31/18	SL	5.00	1	L6	9,720.				9,720.	1,944.		1,944.	3,888.
60	MAAN WEBSITE DEVELOPMENT	08/31/18	SL	5.00	1	L6	5,130.				5,130.	513.		1,026.	1,539.
61	MAAN WEBSITE DEVELOPMENT	03/31/19	SL	5.00	1	L6	5,160.				5,160.	516.		1,032.	1,548.
	* 990 PAGE 10 TOTAL - WEBSITE						134,040.				134,040.	78,009.		18,328.	96,337.
	* GRAND TOTAL 990 PAGE 10 DEPR						276,107.				276,107.	186,344.		35,133.	221,477.

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