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 black lung

benefit trust or private foundation) ▶ The organization may have to use a copy of this return to satisfy state reporting requirements. OMB No 1545-0047

Open to Public Inspection

A	ror the	20	U/ calendar year, or tax year beginning all	ina ena	ing				
В	Check if applicab	.io	Please C Name of organization			D Emp	loyer id	entification r	number
_	Addre		use IRS					12105	
Ļ	chan	ge	print or Greenpeace Fund, Inc.		T			13195	
누	chang	Number and street (or P.O. dox it mail is not delivered to street address)							1177
늗	return	1	Specific 702 H Street, NW		300		202)		
누	ation Amer		City or town, state or country, and ZIP + 4				inting methi Other specify)	On Cas	sh X Accrual
누	return	1	Washington, DC 20001	· 1				507	
L	pend	ing	must attach a completed Schedule A (Form 990 or 990-EZ).		H and I are not appl				janizations. Yes XNo
_					H(a) Is this a group r				
			>www.greenpeacefund.org ion type (check only one) ► X 501(c) (3) ◄ (insert no) 4947(a)(1) or		H(b) If "Yes," enter nu H(c) Are all affiliates i				/A]Yes □ No
_					(If "No," attach a	list.)	11. T/	1/A L_	JYes ∟No
			e Light the organization is not a 509(a)(3) supporting organization and its gross	` _ ˈ	H(d) is this a separat	e return	filed by	an or-	Yes X No
			e normally not more than \$25,000. A return is not required, but if the organization of the a complete return.	- 1	ganization cover Group Exemption				<u> Tes Lainu</u> /A
	CHOOSE	:5 II	of the a return; be sure to the a complete return.		M Check ►				
	C-000 .	-00/	eipts: Add lines 6b, 8b, 9b, and 10b to line 12 39,569,311	1	Sch. B (Form 99				quired to attach
	art I		Revenue, Expenses, and Changes in Net Assets or Fund E			70,000			
_	1		Contributions, gifts, grants, and similar amounts received:						
0007	1		Contributions to donor advised funds	1a			1		
7		_	Direct public support (not included on line 1a)	1b	38,363,3	22.			
3	1	-	Indirect public support (not included on line 1a)	1c					
≥ 20			Government contributions (grants) (not included on line 1a)	1d					
SEP			Total (add lines 1a through 1d) (cash \$37,613,544. noncash \$		749,778.)	1e	38,3	63,322.
	,		Program service revenue including government fees and contracts (from Part VII, line	e 93)			2		
	3	3 Membership dues and assessments 4 Interest on savings and temporary cash investments 5 Dividends and interest from securities							
	4								
3	5								<u>67,857.</u>
SCANNED	6	6 a Gross rents 6a							
Ų.		b	Less: rental expenses	6b	<u></u>				
a		C	Net rental income or (loss). Subtract line 6b from line 6a				6c		
Revenue	7		Other investment income (describe				7		
ě	8	_	Gross amount from sales of assets other (A) Securities		(B) Other		, }		
_			than inventory	8a			,		
	1	_	Less: cost or other basis and sales expenses	8b					
		-	Gain or (loss) (attach schedule)	8c			8d		
			Net gain or (loss). Combine line 8c, columns (A) and (B) Special events and activities (attach schedule). If any amount is from gaming, check, the second second is the second second in the second s	horo 🕨		ŀ	-00		
	9		•	9a					
			Gioss revenue (not including \$	9b	····				
		-	Net income or (loss) from special events. Subtract line 9b from line 9a				9c		
	10		·	10a					
				10b					
			Gross profit or (loss) from sales of inventory (attach schedule). Subtract line 10b from	m line 1	0a		10c		
	11		Other revenue (from Part VII, line 103)				11		38,132.
	12		Total revenue Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 1	V L_1	_ i		12		69,311.
	13		Program services (from line 44, column (B))		()8		13		74,477.
Expenses	14		Management and general (from line 44, column (C))	7008	IRS-OSC		14		<u>51,689.</u>
per	. 15		Fundraising (from line 44, column (D))		—]દ્વ	ļ	15	<u> 1,5</u>	93,750.
Ä	16		Payments to affiliates (attach schedule) OGDEN	N. U			16		10 016
	17		total expenses Add lines to and 44, column (A)	<u>., </u>	<u></u>		17		19,916.
	18		Excess or (deficit) for the year. Subtract line 17 from line 12				18		49,395. 78,935.
Net	19		Net assets or fund balances at beginning of year (from line 73, column (A)) Other changes in get assets or fund balances (attach explanation)	00 (Statomont	1	19		$\frac{78,935}{33,404}$
- <	20 21		Other changes in net assets or fund balances (attach explanation) Se Net assets or fund balances at end of year. Combine lines 18, 19, and 20	ee i	Statement	_	20		61,734.
723	001 27-07		LHA For Privacy Act and Paperwork Reduction Act Notice, see the separate instru	urtions					orm 990 (2007)
12-	27-07	L	_MA FOI FINABLY ACT AND PAPELWOIK REDUCTION ACT NOTICE, SEE THE SEPARATE HIS IT	00110118	·•			1.4	2111 000 (2001)

GPFUND_1

Part II Statement of Functional Expenses

All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others.

	, - 0-		/-// / · · ·		
Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22a Grants paid from donor advised funds					
(attach schedule)	l i				
(cash \$ 0 . noncash \$ 0 .					
If this amount includes foreign grants, check here	22a				
22b Other grants and allocations (attach schedule	F	_·		Statement 3	
(cash \$7543800 noncash \$ 0 .					
if this amount includes foreign grants, check here	22b	7,543,800.	7,543,800.		
23 Specific assistance to individuals (attach					
schedule)	23				
24 Benefits paid to or for members (attach					
schedule)	24				
25a Compensation of current officers, directors, key					
employees, etc. listed in Part V-A	25a	146,456.	3,331.	49,289.	93,836.
b Compensation of former officers, directors, key					
employees, etc. listed in Part V-B	25b	0.	0.	0.	0.
c Compensation and other distributions, not included					
above, to disqualified persons (as defined under					
section 4958(f)(1)) and persons described in					
section 4958(c)(3)(B)	25c				
26 Salaries and wages of employees not					
included on lines 25a, b, and c	26	809,803.	19,229.	288,296.	502,278.
27 Pension plan contributions not included on					
lines 25a, b, and c	27	4,282.			4,282.
28 Employee benefits not included on lines	1				
25a - 27	28	80,094.	3,257.	17,568.	59,269.
29 Payroll taxes	29	75,289.		25,674.	47,620.
30 Professional fundraising fees	30	77,393.			77,393.
31 Accounting fees	31	16,306.		16,306.	
32 Legal fees	32	228,678.		9,607.	219,071.
33 Supplies	33	13,789.		121.	13,668.
34 Telephone	34	1,876.		250.	1,626.
35 Postage and shipping	35	135,330.		739.	<u>134,591</u> .
36 Occupancy	36				
37 Equipment rental and maintenance	37				
38 Printing and publications	38	94,658.			94,658.
39 Travel	39	35,139.		9,654.	25,485.
40 Conferences, conventions, and meetings	40	25,848.		8,900.	16,948.
41 Interest	41	25,120.		25,120.	
42 Depreciation, depletion, etc. (attach schedule)	42				··· ·
43 Other expenses not covered above (itemize).					
8	43a				
b	43b				
C	43c				
d	43d				
e	43e				
f	43f				
g <u>See Statement 2</u>	43g	406,055.	2,865.	100,165.	303,025.
44 Total functional expenses Add lines 22a through					
43g. (Organizations completing columns (B)-(D),			 		4 500
carry these totals to lines 13-15)	44	9,719,916.	7,574,477.	551,689.	1,593,750.
Joint Costs. Check ▶ ☐ If you are following				_	
Are any joint costs from a combined educational campai	gn and	d fundraising solicitation re	ported in (B) Program serv	ıces? ▶ ∟	Yes X No
IA TO COME BY A MARKET CONTRACTOR OF THE CONTRAC			• •		/-
If "Yes," enter (i) the aggregate amount of these joint cos (iii) the amount allocated to Management and general \$	sts \$ _	<u>N/A</u> ;	• •	Program services \$	N/A ;

Part III Statement of Program Service Accomplishments (See the instructions)

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

Wh	at is the organization's prir	mary exempt pu	ırpose? ▶ <u>S</u>	ee	Statement 5	Program Service Expenses
clie	nts served, publications is	sued, etc Disci	uss achievemer	nts th	ents in a clear and concise manner. State the number of hat are not measurable. (Section 501(c)(3) and (4) also enter the amount of grants and allocations to others.)	(Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.)
а	See Statemer	at 4				-
	(Grants and allocations	\$ 7,	543,800.) [If this amount includes foreign grants, check here	7,574,477.
b			-			
	(Grants and allocations	\$) 1	If this amount includes foreign grants, check here	
С						
	(Grants and allocations	\$) 1	If this amount includes foreign grants, check here	
d						
	(Grants and allocations	\$)	If this amount includes foreign grants, check here	
е	Other program services (a (Grants and allocations	attach schedule \$)	\ I	If this amount includes foreign grants, check here	
f			ould equal line		column (B). Program services)	7,574,477.

Form **990** (2007)

Form **990** (2007)

9.

Part IV-A Reconciliation of Revenue per Audited Financial Statements With Revenue per Return (See the instructions.) a 40,002,715. Total revenue, gains, and other support per audited financial statements а Amounts included on line a but not on Part I, line 12: 433,404 Net unrealized gains on investments b1 2 Donated services and use of facilities b2 3 Recoveries of prior year grants b3 4 Other (specify) b4 433,404. Add lines b1 through b4 Subtract line b from line a 39,569,311. Amounts included on Part I, line 12, but not on line a: 1 Investment expenses not included on Part I, line 6b d1 đ2 2 Other (specify): Add lines d1 and d2 39 569 Total revenue (Part I, line 12) Add lines c and d Part IV-B Reconciliation of Expenses per Audited Financial Statements With Expenses per Return Total expenses and losses per audited financial statements 9,719, Amounts included on line a but not on Part I, line 17: Donated services and use of facilities b1 2 Prior year adjustments reported on Part I, line 20 b2 3 Losses reported on Part I, line 20 b3 b4 4 Other (specify): Add lines b1 through b4 9,719, 916. Subtract line b from line a Amounts included on Part I, line 17, but not on line a: d1 1 Investment expenses not included on Part I, line 6b

Part V-A Current Officers, Directors, Trustees, and Key Employees (List each person who was an officer, director, trustee, or key employee at any time during the year even if they were not compensated) (See the instructions)

d2

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
John W. Passacantando	Executive Dir	ector		
702 H Street, NW Suite 300				
Washington, DC 20001	10.00	42,191.		0.
Ellen H. McPeake	Chief Operati	ng Office	r	
702 H Street, NW Suite 300				
Washington, DC 20001	20.00	71,617.	5,043.	0.
David Chatfield	Chair			
702 H Street, NW Suite 300			_	_
Washington, DC 20001	1.00	0.	0.	0.
Daniel J. McGregor	Chief Operati	ng Office	r	
702 H Street, NW Suite 300				
washington, DC 20001	10.00	23,626.	1,878.	0.
Peggy Burks	Treasurer			
702 H Street, NW Suite 300		_	_	_
Washington, DC 20001	1.00	0.	0.	0.
John Willis	Director		l	
702 H Street, NW Suite 300		_	_	
Washington, DC 20001	1.00	0.	0.	0.
Karen Topakian	Director			
702 H Street, NW Suite 300		_	_	
Washington, DC 20001	1.00	0.	0.	0.
### TENTO TO THE TOTAL TO THE T				
702 H Street, NW Suite 300				
Washington, DC 20001	<u> </u>			form 990 (2007)

Form **990** (2007)

2 Other (specify):

Add lines d1 and d2

Total expenses (Part I, line 17) Add lines c and d

Form 990 (2007)				<u>95-33131</u>			age 6
Part V-A C	Current Officers, Directors, Trustees, and Ke	y Employees (continu	ed)			Yes	No
75 a Enter the t meetings	total number of officers, directors, and trustees permitted to .	to vote on organization bus	siness at board	4		ļ	
listed in Se Part II-A o	ficers, directors, trustees, or key employees listed in Form chedule A, Part I, or highest compensated professional an r II-B, related to each other through family or business rela luals and explains the relationship(s)	d other independent contr	actors listed in Sci	nedule A, dentifies	75b		X
listed in Se Part II-A or	ficers, directors, trustees, or key employees listed in Form chedule A, Part I, or highest compensated professional an r II-B, receive compensation from any other organizations, on? See the instructions for the definition of "related organ	d other independent contr whether tax exempt or tax	actors listed in Scl	nedule A, ed to the	75c	x	<u> </u>
d Does the	ttach a statement that includes the information described organization have a written conflict of interest policy?				75d	х	
E	Former Officers, Directors, Trustees, and Ke Benefits (If any former officer, director, trustee, or key er he year, list that person below and enter the amount of co	nployee received compens	sation or other ben	efits (described	i belov	v) dur	ing ons)
,	(A) Name and address None	(B) Loans and Advances	(C) Compensation (if not paid, enter -0-)		o (E)	Expe	nse and
					 		
					+		
					_		
			1			_	
Part VI O	ther Information (See the Instructions)	<u> </u>		<u></u>	'	Yes	No
76 Did the or	ganization make a change in its activities or methods of co	onducting activities? If "Ye	s," attach a detaile	ed	76		х
77 Were any	changes made in the organizing or governing documents attach a conformed copy of the changes.	but not reported to the IRS	S?		77		Х
78 a Did the or	ganization have unrelated business gross income of \$1,00 has it filed a tax return on Form 990-T for this year?	00 or more during the year	covered by this re	turn? N/A	78a 78b		Х
	e a liquidation, dissolution, termination, or substantial cont anization related (other than by association with a statewio				79		X
members	hip, governing bodies, trustees, officers, etc , to any other enter the name of the organization Greenpeace ,	exempt or nonexempt org	anization?		80a	<u> </u>	_
Q1 a Enter dire	ct and indirect political expenditures (See line 81 instructi	_ and check whether it is (X exemptor L 81a	nonexempt O .			
	ganization file Form 1120-POL for this year?		[418]		81b	gan	X (2007)
					LOUIII	JJV	(2001)

	990 (2007) Greenpeace Fund, Inc. 95-331	<u> 3195</u>		age 7
Pa	rt VI Other Information (continued)		Yes	No
82 a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially		1	l
	less than fair rental value?	82a	ļ	Х
b	If "Yes," you may indicate the value of these items here. Do not include this			l
	amount as revenue in Part I or as an expense in Part II			l
	(See instructions in Part III.) 82b N/A	_		i
83 a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	X	ļ
b		83b	X	
84 a		84a	.	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not			l
	tax deductible? N/A	84b	ļ	<u> </u>
	501(c)(4), (5), or (6). Were substantially all dues nondeductible by members?	85a		<u> </u>
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? N/A	85b	-	
	If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a			
	waiver for proxy tax owed for the prior year.			l
C		_		l
d	· · · · · · · · · · · · · · · · · · ·	_		l
е		_		
f	Taxable amount of lobbying and political expenditures (line 85d less 85e) 85f N/A	⊢	1	
9		85g	ļ	
h				ĺ
	to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the	056		
	following tax year? N/A	85h		
86	501(c)(7) organizations. Enter, a Initiation fees and capital contributions included on Inne 12			
_			ļ	
		┥	1	
87	501(c)(12) organizations Enter a Gross income from members or shareholders Gross income from other sources. (Do not net amounts due or paid to other sources	\dashv		
U	against amounts due or received from them) 87b N/A	İ		
۵۵ .	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership,	ㅓ		ĺ
00 a	or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3?			
	If "Yes." complete Part IX	88a		х
ь	At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of	- 552	1	
•	section 512(b)(13)? If "Yes," complete Part XI	▶ 88b	İ	х
89 a	501(c)(3) organizations. Enter. Amount of tax imposed on the organization during the year under			
UU 4	section 4911 ▶ 0 . ; section 4912 ▶ 0 . ; section 4955 ▶			
h	501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit		ĺ	
Ī	transaction during the year or did it become aware of an excess benefit transaction from a prior year?		ŀ	
	If "Yes," attach a statement explaining each transaction	89b	ŀ	х
C	Enter Amount of tax imposed on the organization managers or disqualified persons during the year under			
•	sections 4912, 4955, and 4958			1
d				1
е	All	89e		х
f	All organizations Did the organization acquire a direct or indirect interest in any applicable insurance contract?	89f		Х
g				
Ī	or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	89g		X
90 a	List the states with which a copy of this return is filed See Statement 12			
b				0
91 a	The books are in care of ▶ The Organization Telephone no. ▶ (202)	462	-11	77
	Located at ► 702 H Street, NW Suite 300, Washington, DC ZIP+4 ►			
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over		Yes	No
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	916		Х
	If "Yes," enter the name of the foreign country N/A	_		
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank		1	
	and Financial Accounts.		<u> </u>	
		Form	1 990	(2007)

· \/1	007) Green	peace Fu	nd, Ii	nc.		95-3	313195 Page
Part VI	Other Information (cor						Yes N
	time during the calendar year	_			the Unit	ed States?	91c X
	s," enter the name of the foreig on 4947(a)(1) nonexempt chant				book bor		
	nter the amount of tax-exempt	_			Heck Here	▶ 92	N/A
art VII							<u> </u>
	r gross amounts unless otherw			ed business income	Excluded	by section 512, 513, or 514	/F)
dicated	gross amounts amess otherw	ĺ	(A)	(B)	(C)	(D)	(E) Related or exempt
Program	m service revenue:		Business code	Amount	Exclu- sion code	Amount	function income
_					1		
,							
Medica	re/Medicaid payments						
Fees ar	nd contracts from government	agencies					
Membe	ership dues and assessments						
Interest	on savings and temporary cash in	vestments					
Dividen	ids and interest from securities	s			14	1,167,857.	
Net ren	ital income or (loss) from real e	estate:					
	nanced property	<u> </u>			1		
not deb	ot-financed property	L					
Net ren	ital income or (loss) from perso	onal property			 -		
	nvestment income	-			 		
	(loss) from sales of assets				1	j	
	nan inventory	. -					
	ome or (loss) from special ever			<u> </u>	 		
-	profit or (loss) from sales of inv	entory			 		
Other re	_{evenue} <u>e receivable in</u>	tomost			14	_ 38,132.	
					13		
					+ +		
					 		
· ——							·····
Subtota	al (add columns (B), (D), and (E	=))		0.	1	1,205,989.	
	add line 104, columns (B), (D),	-			<u> </u>	<u> </u>	1,205,989
	05 plus line 1e, Part I, should		t on line 12	. Part I.		-	
rt VIII	Relationship of Activ				t Purp	oses (See the instruction	18.)
e No.	Explain how each activity for which	h income is reporte	ed in column	(E) of Part VII contributed	d importan	itly to the accomplishment of	the organization's
	exempt purposes (other than by p				•	•	·
art IX	Information Regardin	<u> </u>	ubsidiari		ed Enti		
	ress, and EIN of corporation, ship, or disregarded entity o	(B) Percentage of		(C) Nature of activities	ĺ	(D) Total income	(E) End-of-year
lame, addı	ship, or disregarded entity 0	wnership interest					assets
ame, add partners		%					
lame, add partners							
lame, add partner:	N/A	%					
ame, add partners		%					
	N/A	% %					
art X	N/A Information Regardin	% % g Transfers					
art X	N/A	% g Transfers A	ectly or ındır	ectly, to pay premiums on	a persona		nstructions) Yes X N Yes X N

723163 12-27-07

	Greenpeace Fund, Inc.	Santanalland Endiki	95-331		age 9
Part		ontrolled Entiti N/A	es. Complete only if the organiz	ation is a	
	Controlling Organization as defined in section 312(b)(15).	N/A	· ·- · · · · · · · · · · · · · · ·	Yes	No
106	Did the reporting organization make any transfers to a controlled entity a	as defined in section	512(b)(13) of the Code? If "Yes."		
	complete the schedule below for each controlled entity.				
	(A)	(B) Employer	(C)	(D)	
	Name, address, of each	Employer Identification	Description of	Amount	
	controlled entity	Number	transfer	transfe	r
_				ı	
a _				ı	
\rightarrow					
. -					
p -					
\rightarrow					
c					
	Totals			150	т
					No
	Did the reporting organization receive any transfers from a controlled er	ntity as defined in sec	ction 512(b)(13) of the Code? If "	Yes,"	
	complete the schedule below for each controlled entity.	(D)	(0)	(D)	<u> </u>
	(A) Name, address, of each	(B) Employer	(C) Description of	(D) Amount	of
	controlled entity	Identification Number	transfer	transfe	
		Number	- w - · ·		
a -					
_ _					
ь _				į	
_					
c _					
					
	Tabela				
	Totals	J	<u>-</u>	Yes	No
108	Did the organization have a binding written contract in effect on August	17. 2006. covering th	ne interest, rents, royalties, and	100	1
	annuities described in question 107 above?	,,			
	Under penalties of perjury, I declare that I have examined this return, including accompany and complete Seclaration of preparer (other than officer) is based on all information of whi	ring schedules and stateme	nts, and to the best of my knowledge and b	pelief, it is true, cor	rrect,
	\mathcal{L}	cri preparer nas any knowle	, ,	_	
Pleas	· James Michego		08/27/0	8	
Sign Here	Signature of officer	20	Date		
nere	DANIEL M'GREGOR, LHIEF (PERATING (JHICER		
	Type or print name and title	I Doto I	Chook if Down and BCh	1 DTIN (C C	- IA V
Paid	Preparer's	Date	self	or PTIN (See Gen	inst A)
Prepar	er's Firm's name (or Poggan & Company DIIC	08/26/08			
Use Or	ly yours if Rogers & Company PLLC	to 600	EIN -		
	self-employed), address, and ZIP+4 8300 Boone Boulevard, Sui	Le 600	Phone no. ► (703	/ 803 ⁻ (1300
	VICINIA, VA ZZIOZ		TEHOREHO. P (703	Form 990	
					,=55.7

SCHEDULE A

(Form 990 or 990-EZ)

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n), or 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information-(See separate instructions.)

▶ MUST be completed by the above organizations and attached to their Form 990 or 990-EZ

2007

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

Greenpeace Fund, Inc.			Lingity of Identifi	ication number
			95 33131	
Part I Compensation of the Five Highest Paid E	Employees Other Than	Officers, Dire	ctors, and T	rustees
(See page 1 of the instructions. List each one. If there are nor	ne, enter "None.")			
(a) Name and address of each employee paid	(b) Title and average hours	(c) Compensation	(d) Contributions to employee benefit plans & deferred	(e) Expense
more than \$50,000	per week devoted to position	(c) Compensation	plans & deferred compensation	account and othe allowances
Marcy Bourne - 702 H St., NW	Manager			
Ste. 300, Washington, DC 20001	40.00	55,347.	ο.	
Taleen Khalili - 702 H St., NW	Manager			
Ste. 300, Washington, DC 20001	40.00	54,229	3,150.	
Diana Lee - 702 H St., NW	Manager	347225	3,130.	
Ste. 300, Washington, DC 20001	40.00	64,860.	1,946	
Mark Smith - 702 H St., NW	Manager	0 = 7 0 0 0 .	1,540.	<u> </u>
Ste. 300, Washington, DC 20001	40.00	85,268.	5,116	
	Manager	03,200	3,110	-
John Watkins - 702 H St., NW	40.00	63,080.	3,785	
Ste. 300, Washington, DC 20001	40.00	63,000	3,763	<u>· l </u>
Total number of other employees paid				
over \$50,000			innal Camia	
Part II-A Compensation of the Five Highest Paid I			ionai Servici	es
(See page 2 of the instructions. List each one (whether indivi-	iduals or firms). If there are none,	enter "None.")		
(a) Name and address of each independent contractor paid mo	ore than \$50,000	(b) Type of	service	(c) Compensation
· · · · · · · · · · · · · · · · · · ·				
Ryan, Swanson & Cleveland, PLLC		_		
1201 Third Avenue, Suite 3400, Seat	tle, WA 98101	Legal		231,501.
-			i	
	<u></u>			
Total number of others receiving over				
Total number of others receiving over \$50,000 for professional services	• 0			
\$50,000 for professional services		ors for Other S	ervices	
\$50,000 for professional services Part II-B Compensation of the Five Highest Paid I	Independent Contract		ervices	
\$50,000 for professional services Part II-B Compensation of the Five Highest Paid I (List each contractor who performed services other than pro	Independent Contractor fessional services, whether individuals		ervices	
\$50,000 for professional services Part II-B Compensation of the Five Highest Paid I (List each contractor who performed services other than prof firms. If there are none, enter "None." See page 2 of the instru	Independent Contractor fessional services, whether individuctions.)	duals or		
\$50,000 for professional services Part II-B Compensation of the Five Highest Paid I (List each contractor who performed services other than pro	Independent Contractor fessional services, whether individuctions.)			(c) Compensation
\$50,000 for professional services Part II-B Compensation of the Five Highest Paid I (List each contractor who performed services other than prof firms. If there are none, enter "None." See page 2 of the instru (a) Name and address of each independent contractor paid mo	Independent Contractor fessional services, whether individuctions.) ore than \$50,000	duals or (b) Type of	service	(c) Compensation
\$50,000 for professional services Part II-B Compensation of the Five Highest Paid I (List each contractor who performed services other than profirms. If there are none, enter "None." See page 2 of the instru (a) Name and address of each independent contractor paid mo	Independent Contractor fessional services, whether individuctions.) ore than \$50,000	(b) Type of	service	
\$50,000 for professional services Part II-B Compensation of the Five Highest Paid I (List each contractor who performed services other than profirms. If there are none, enter "None." See page 2 of the instru (a) Name and address of each independent contractor paid months. T/C Mailing, Inc. 809 Keith Lane, Owings, MD 20736	Independent Contractor fessional services, whether individuctions.) ore than \$50,000	(b) Type of Postage ar printing	service nd	
\$50,000 for professional services Part II-B Compensation of the Five Highest Paid I (List each contractor who performed services other than profirms. If there are none, enter "None." See page 2 of the instru (a) Name and address of each independent contractor paid months. T/C Mailing, Inc. 809 Keith Lane, Owings, MD 20736 Donor Services Group	Independent Contractor fessional services, whether individuctions.) ore than \$50,000	(b) Type of Postage ar printing Concierge	service nd	137,284
\$50,000 for professional services Part II-B Compensation of the Five Highest Paid I (List each contractor who performed services other than profirms. If there are none, enter "None." See page 2 of the instru (a) Name and address of each independent contractor paid months. T/C Mailing, Inc. 809 Keith Lane, Owings, MD 20736 Donor Services Group 11500 Olympic Blvd. #540, Los Angel	Independent Contractor fessional services, whether individuctions.) ore than \$50,000	(b) Type of Postage ar printing	service nd	137,284
\$50,000 for professional services Part II-B Compensation of the Five Highest Paid I (List each contractor who performed services other than prof firms. If there are none, enter "None." See page 2 of the instru (a) Name and address of each independent contractor paid mo T/C Mailing, Inc. 809 Keith Lane, Owings, MD 20736 Donor Services Group 11500 Olympic Blvd. #540, Los Angel Aria Communications, Inc.	Independent Contractor fessional services, whether individuctions.) ore than \$50,000 Les, CA 90064	(b) Type of Postage an printing Concierge calling	service nd and	137,284. 81,030.
\$50,000 for professional services Part II-B Compensation of the Five Highest Paid I (List each contractor who performed services other than prof firms. If there are none, enter "None." See page 2 of the instru (a) Name and address of each independent contractor paid mo T/C Mailing, Inc. 809 Keith Lane, Owings, MD 20736 Donor Services Group 11500 Olympic Blvd. #540, Los Angel Aria Communications, Inc.	Independent Contractor fessional services, whether individuctions.) ore than \$50,000 Les, CA 90064	(b) Type of Postage ar printing Concierge	service nd and	137,284
\$50,000 for professional services Part II-B Compensation of the Five Highest Paid I (List each contractor who performed services other than prof firms. If there are none, enter "None." See page 2 of the instru (a) Name and address of each independent contractor paid mo T/C Mailing, Inc. 809 Keith Lane, Owings, MD 20736 Donor Services Group 11500 Olympic Blvd. #540, Los Angel Aria Communications, Inc.	Independent Contractor fessional services, whether individuctions.) ore than \$50,000 Les, CA 90064	(b) Type of Postage an printing Concierge calling	service nd and	137,284. 81,030
\$50,000 for professional services Part II-B Compensation of the Five Highest Paid I (List each contractor who performed services other than prof firms. If there are none, enter "None." See page 2 of the instru (a) Name and address of each independent contractor paid mo T/C Mailing, Inc. 809 Keith Lane, Owings, MD 20736 Donor Services Group 11500 Olympic Blvd. #540, Los Angel Aria Communications, Inc.	Independent Contractor fessional services, whether individuctions.) ore than \$50,000 Les, CA 90064	(b) Type of Postage an printing Concierge calling	service nd and	137,284. 81,030.
\$50,000 for professional services Part II-B Compensation of the Five Highest Paid I (List each contractor who performed services other than prof firms. If there are none, enter "None." See page 2 of the instru (a) Name and address of each independent contractor paid mo T/C Mailing, Inc. 809 Keith Lane, Owings, MD 20736 Donor Services Group 11500 Olympic Blvd. #540, Los Angel Aria Communications, Inc.	Independent Contractor fessional services, whether individuctions.) ore than \$50,000 Les, CA 90064	(b) Type of Postage an printing Concierge calling	service nd and	137,284. 81,030.
\$50,000 for professional services Part II-B Compensation of the Five Highest Paid I (List each contractor who performed services other than prof firms. If there are none, enter "None." See page 2 of the instru (a) Name and address of each independent contractor paid mo T/C Mailing, Inc. 809 Keith Lane, Owings, MD 20736 Donor Services Group 11500 Olympic Blvd. #540, Los Angel Aria Communications, Inc.	Independent Contractor fessional services, whether individuctions.) ore than \$50,000 Les, CA 90064	(b) Type of Postage an printing Concierge calling	service nd and	137,284. 81,030
\$50,000 for professional services Part II-B Compensation of the Five Highest Paid I (List each contractor who performed services other than profirms. If there are none, enter "None." See page 2 of the instru (a) Name and address of each independent contractor paid months. T/C Mailing, Inc. 809 Keith Lane, Owings, MD 20736 Donor Services Group 11500 Olympic Blvd. #540, Los Angel	Independent Contractor fessional services, whether individuctions.) ore than \$50,000 Les, CA 90064	(b) Type of Postage an printing Concierge calling	service nd and	137,284. 81,030

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

1	During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence			
•	public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the			
	lobbying activities > \$ (Must equal amounts on line 38, Part VI-A, or	ľ		
	line j of Part VI-B.)	1	X	l
	Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations			
	checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.			
2	During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)	<u>}</u>		
8	a Sale, exchange, or leasing of property?	2a		X
t	Lending of money or other extension of credit?	2b	<u> </u>	X
	Furnishing of goods, services, or facilities?	2c		X
(Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? See Part V-A, Form 990	2d	X	
(e Transfer of any part of its income or assets?	_2e		X
3 8	Did the organization make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how	ł	l	
	the organization determines that recipients qualify to receive payments.)	3a		_ X_
t	Did the organization have a section 403(b) annuity plan for its employees?	3b_		X
(Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space,			
	the environment, historic land areas or historic structures? If "Yes," attach a detailed statement	3c		X
(d Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services?	3d		X
4 8	Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g. If "No," complete lines 4f	1	ŀ	
	and 4g	4a	<u> </u>	X
Į	b Did the organization make any taxable distributions under section 4966? N/A	4b_		
(Did the organization make a distribution to a donor, donor advisor, or related person? N/A	4c		
•	d Enter the total number of donor advised funds owned at the end of the tax year		<u>_N/</u>	<u>A</u>
(Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year		<u> N/</u>	<u>A</u>
1	Enter the total number of separate funds or accounts owned at the end of the year (excluding donor advised funds included on			
	line 4d) where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts			0.
9	g Enter the aggregate value of assets in all funds or accounts included on line 4f at the end of the tax year			0.

Schedule A (Form 990 or 990-EZ) 2007

Total

An organization organized and operated to test for public safety. Section 509(a)(4). (See page 8 of the instructions.)

28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2003 through 2006, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.

None

Schedule A (Form 990 or 990-EZ) 2007

g Public support percentage (line 27e (numerator) divided by line 27f (denominator))

h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))

N/A

27g

(To be completed ONLY by schools that checked the box on line 6 in Part IV)

29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing		Yes	No
	instrument, or in a resolution of its governing body?	29		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues,			
	and other written communications with the public dealing with student admissions, programs, and scholarships?	30		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of			
	solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known			
	to all parts of the general community it serves?	31		
	If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.)			
		_		
		_		
		-		
32	Does the organization maintain the following:	-		
a	Records indicating the racial composition of the student body, faculty, and administrative staff?	32a	ļ	ļ
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b		
C	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student			
	admissions, programs, and scholarships?	32c		
d	Copies of all material used by the organization or on its behalf to solicit contributions?	32d	<u> </u>	
	If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)			
33	Does the organization discriminate by race in any way with respect to:	-		
а	Students' rights or privileges?	33a		
b	Admissions policies?	33b	_	
C	Employment of faculty or administrative staff?	33c		
d	Scholarships or other financial assistance?	33d		
e	Educational policies?	33e		
f	Use of facilities?	33f		
	Athletic programs?	33g		
h	Other extracurricular activities?	33h		
	If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)			
		_		
34 a	Does the organization receive any financial aid or assistance from a governmental agency?	_ 34a		
Ь	Has the organization's right to such aid ever been revoked or suspended?	34b		
-	If you answered "Yes" to either 34a or b, please explain using an attached statement.			
35	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50,			
	1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation	35		

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 11 of the instructions.)

	(To be completed ONLY to	iy an eligible organization that t	illea Form 5768)			
Ch	eck a if the organization below	ngs to an affiliated group.	Check 🕨 b	ıf you chec	ked "a" and "limited contr	ol" provisions apply.
		n Lobbying Expenditu			(a) Affiliated group totals	(b) To be completed for all electing organizations
36 37 38 39 40	Total lobbying expenditures to influence Total lobbying expenditures (add lines Other exempt purpose expenditures	e a legislative body (direct lobby 36 and 37)	,	36 37 38 39	N/A	0. 0. 0. 9,719,916. 9,719,916.
41	Lobbying nontaxable amount. Enter the if the amount on line 40 is - Not over \$500,000 Over \$500,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,500,000 Over \$1,500,000 but not over \$17,000,000 Over \$17,000,000	amount from the following tab The lobbying nontaxable 20% of the amount on line 40 \$100,000 plus 15% of the excess \$175,000 plus 10% of the excess \$225,000 plus 5% of the excess \$1,000,000	e amount is - 0 cess over \$500,000 cess over \$1,000,000	41		635,996.
42 43		•		42		138,999.
44		if line 41 is more than line 38	must file Form 4720	44		0.

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 45 through 50 on page 13 of the instructions.)

	Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2006	(c) 2005	(d) 2004	(e) Total	
45 Lobbying nontaxable amount	635,996.	650,984.	627,274.	529,462.	2,443,716.	
46 Lobbying ceiling amount (150% of line 45(e))					3,665,574.	
47 Total lobbying expenditures				20,000.	20,000.	
48 Grassroots nontaxable amount	158,999.	162,746.	156,819.	132,366.	610,930.	
49 Grassroots ceiling amount (150% of line 48(e))					916,395.	
50 Grassroots lobbying expenditures				10,000.	10,000.	

Part VI-B Lobbying Activity by Nonelecting Public Charities

(For reporting only by organizations that did not complete Part VI-A) (See page 14 of the instructions.)

N/A

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:

- a Volunteers
- b Paid staff or management (Include compensation in expenses reported on lines c through h.)
- c Media advertisements
- d Mailings to members, legislators, or the public
- e Publications, or published or broadcast statements
- f Grants to other organizations for lobbying purposes
- g Direct contact with legislators, their staffs, government officials, or a legislative body
- h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means
- i Total lobbying expenditures (Add lines c through h.)

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities.

Yes	No	Amount
		0

723151

	•					
Schedule	A (Form 990 or 990-EZ) 200	Greenpeace Fund	l, Inc.	9 ! I Relationships With None	5-3313195	Page 7
Part		garding Transfers To and zations (See page 14 of the instr		i Helationships with Nonc	charitable	
51 Di		lirectly or indirectly engage in any of		organization described in section		
		section 501(c)(3) organizations) or in	-			
	-	ganization to a noncharitable exempt	organization of:		Yes	No_
-	i) Cash				51a(i) X	
•	i) Other assets ther transactions:				a(ii)	<u> </u>
		ets with a noncharitable exempt orgai	nization		b(i)	х
-	•	noncharitable exempt organization			b(ii)	X
(ii	i) Rental of facilities, equipme	ent, or other assets			b(iii)	Х
•	Reimbursement arrangeme	ents			b(iv)	<u> </u>
-	Loans or loan guarantees Desfermence of convector	mambarahin ar fundraiaine agliaitet			b(v) b(vi)	X
-	· ·	membership or fundraising solicitat mailing lists, other assets, or paid ei			c X	 ^
	-	= ' ' '		lways show the fair market value of th		
		given by the reporting organization.				
	ansaction or sharing arrangen	nent, show in column (d) the value o	f the goods, other assets, or			
(a) Line no.	(b) Amount involved	(c) Name of noncharitable ex	empt organization	(d) Description of transfers, transaction	s, and sharing arrange	ments
C	504,098.	Stichting Greenp		See Statement 13	3	
		See organization				
		related amounts	listed for			
<u>ai</u>		line "ai" in Sta	itement 3			
					·	
		<u> </u>				
		-		<u> </u>		
						
	<u> </u>		<u></u>	· · · · · · · · · · · · · · · · · · ·		
C	the organization directly or in ode (other than section 501(c "Yes," complete the following)(3)) or in section 527?	one or more tax-exempt org	anizations described in section 501(c)	of the ► X Yes	□ No
	(a Name of or)	(b) Type of organization	(c) Description of re	lationship	
Gree	npeace, Inc.	•	501(c)(4)	See Statement 14		
			-			
		- -				
						
	 -					
			· · · · -			
			_			

Schedule A (Form 990 or 990-EZ) 2007

723152 12-27-07

Form 990 Other C	hanges in Net A	assets or Fund	Balances	Statement	1
Description				Amount	
 Net unrealized gains on	investments		•	433,40) 4 .
Total to Form 990, Part	I, line 20			433,40)4.
Form 990	Other	Expenses		Statement	- 2
Description	(A) Total	(B) Program Services	(C) Management and General	(D) Fundraisi	ng
Training & recruiting Consultants Subscriptions Marketing	6,598. 150,150. 2,414. 13,015.		5,005.	6,5 145,1 2,4 13,0	45 14
Insurance Miscellaneous Fees and charges Allocated overhead Licenses & taxes	11,616. 399. 41,146. 162,610. 18,107.	2,865.	11,616. 19,019. 54,172. 10,353.	3: 22,1: 105,5	73
Total to Fm 990, ln 43	406,055.	2,865.	100,165.	303,0	 25

Form 990	Cash Grants and Allocations to Others	Statement 3
Class of Activity/Donee	's Name and Address	Amount
Oceans Campaign Greenpeace, Inc. 702 H Street, Suite 300 Washington, DC 20001		1,233,500.
Climate Campaign Greenpeace, Inc. 702 H Street, Suite 300 Washington, DC 20001		1,782,800.
Forests Campaign Greenpeace, Inc. 702 H Street, Suite 300 Washington, DC 20001		308,500.
Leadership Greenpeace, Inc. 702 H Street, Suite 300 Washington, DC 20001		77,000.
Forests Campaign Greenpeace Canada 250 Dundas St. W, Ste. Toronto, Ontario M5T 2Z		15,000.
Oceans Campaign Stichting Greenpeace Co Ottho Heldringstraat 5 1066 AZ Amsterdam, Neth		1,621,286.
Climate Campaign Stichting Greenpeace Co Ottho Heldringstraat 5 1066 AZ Amsterdam, Neth		1,971,714.
Forests Campaign Stichting Greenpeace Co Ottho Heldringstraat 5 1066 AZ Amsterdam, Neth		317,000.
Greenpeace China Stichting Greenpeace Co Ottho Heldringstraat 5 1066 AZ Amsterdam, Neth		150,000.

95-3313195

Amazon Work Stichting Greenpeace Council Ottho Heldringstraat 5 1066 AZ Amsterdam, Netherlands 67,000.

Total Included on Form 990, Part II, line 22b

7,543,800.

Form 990

Statement of Program Service Accomplishments

Statement

4

Description of Program Service One

The mission of Greenpeace Fund, Inc. is to identify, research, monitor and implement programs to aid in the protection of marine mammals, other species and the environment generally. It acts to increase public awareness and understanding of environmental issues through media and other educational programs. To this end, Greenpeace Fund, Inc. made the following grants in 2007:

Grants to Stichting Greenpeace Council:

Climate Campaign - \$1,971,714 Oceans Campaign⊕ \$1,621,286 Forests Campiagn - \$384,000

Total grants to Stichting Greenpeace Council - \$3,977,000

Grants to Greenpeace affiliates:

Greenpeace China - Climate Campaign - \$150,000 Greenpeace Canada - Forests Campaign - \$15,000

Total grants to Greenpeace affiliates - \$165,000

Grants to Greenpeace, Inc.:

Climate Campaign - \$1,782,800 Oceans Campaign@ \$1,233,500 Forests Campaign - \$308,500 Leadership Training Program - \$77,000

Total grants to Greenpeace, Inc. - \$3,401,800

Total program service grants - \$7,543,800

To Form 990, Part III, line a 7,543,800. 7,574,477.

						
Form 990	Statement of	Organization's	Primary Exe	mpt Purpose	Statement	5
		Part I	II			

Explanation

To protect and preserve the environment through the consideration and funding of grants to other organizations.

Form 990 No:	n-Government S	ecurities		Statement 6
Security Description Cost/F	Corporate MV Stocks	Corporate Bonds	Other Publicly Traded Securities	Total Non-Gov't Securities
Money market funds FMV Equity funds and FMV securities Corporate bonds FMV	8,097,175.	4,264,320.	17,701,350.	17,701,350. 8,097,175. 4,264,320.
To Form 990, line 54a, Col	B 8,097,175.	4,264,320.	17,701,350.	30,062,845.
Form 990 G	overnment Secu	rities		Statement 7
Description	Cost/FMV	U.S. Government	State and Local Gov't	Total Gov't Securities
Description Government obligations	Cost/FMV FMV			
	FMV	Government		Securities
Government obligations	FMV	Government 1,077,415. 1,077,415.		Securities 1,077,415.
Government obligations Total to Form 990, line 54a	FMV =	Government 1,077,415. 1,077,415. tments Value		1,077,415. 1,077,415.
Government obligations Total to Form 990, line 54a Form 990	FMV =	Government 1,077,415. 1,077,415. tments Value	Local Gov't	Securities 1,077,415. 1,077,415. Statement 8

Form 990	Other Liabilities		Statement 9
Description		Beginning of Year	End of Year
Grants payable to	Greenpeace affiliates	1,035,450. 112,817. 160,000. 47,589.	504,098. 304,473. 140,000.
Total to Form 990,	Part IV, line 65	1,355,856.	948,571.
Form 990	Other Securities		Statement 10
Security Descripti	on	Cost/FMV	Other Securities
Mutual funds		FMV	2,110,803.
To Form 990, line	54b. Col B		2,110,803.

Form 990 Part V-A Officer Co Related Organ		Stat	ement 11
Officer's Name	Compensation	Employee Benefit Plan Contribution	
John W. Passacantando	126,573.	6,305.	
Name of Related Organization		Employer	ID Number
Greeenpeace, Inc.		52-15	341501
Relationship Between Organizations			
Historical relationship			
miscolical relacionsmip			
Compensation Description Employee compensation			
Compensation Description Employee compensation	Compensation	Employee Benefit Plan Contribution	
Compensation Description Employee compensation Officer's Name	Compensation 71,617.	Benefit Plan Contribution	
Compensation Description Employee compensation	Compensation 71,617.	Benefit Plan Contribution 5,043.	Account
Compensation Description Employee compensation Officer's Name Ellen H. McPeake		Benefit Plan Contribution 5,043. Employer	Account
Compensation Description Employee compensation Officer's Name Ellen H. McPeake Name of Related Organization		Benefit Plan Contribution 5,043. Employer	Account ID Number
Compensation Description Employee compensation Officer's Name Ellen H. McPeake Name of Related Organization Greeenpeace, Inc.		Benefit Plan Contribution 5,043. Employer	Account ID Number
Compensation Description Employee compensation Officer's Name Ellen H. McPeake Name of Related Organization Greeenpeace, Inc. Relationship Between Organizations		Benefit Plan Contribution 5,043. Employer	Account ID Number

Expense

Account

Employee Benefit Plan Officer's Name Compensation Contribution 73,145. Daniel J. McGregor 5,813. Name of Related Organization Employer ID Number 52-1541501 Greeenpeace, Inc. Relationship Between Organizations Historical relationship Compensation Description Employee compensation

12 Form 990 List of States Receiving Copy of Return Statement Part VI, Line 90

States

AL, AK, AZ, AR, CA, CT, FL, GA, IL, KS, KY, LA, ME, MD, MA, MI, MN, MS, MO, NH, NJ, NM, NY, NC, ND OH, OK, OR, PA, RI, SC, TN, UT, VA, WA, WV, WI

Schedule A Involvement With Noncharitable Organizations
Part VII, Line 51, Column (d)

Statement

13

Name of Noncharitable Exempt Organization

Stichting Greenpeace Council

Description of Transfers, Transactions, and Sharing Arrangements

Shared expenses: Amount represents payable to affilate for shared use of facilities, equipment, employees, resources, and similar expenses that directely related to Greenpeace Fund's mission.

Name of Noncharitable Exempt Organization

See organizations and related amounts listed for line "ai" in Statement 3

Description of Transfers, Transactions, and Sharing Arrangements

Grants: In carrying out its mission as described in form 990, Greenpeace Fund, Inc. makes grants to other Greenpeace affiliates and NGOs pursuant to written grant agreements covering projects, research, education and related activities that are consistent with Greenpeace Fund, Inc.'s exempt purpose.

Schedule A Affiliation with Tax-Exempt Organizations
Part VII, Line 52, Column (c)

Statement 14

Name of Affiliated or Related Organization

Greenpeace, Inc.

Description of Relationship with Affiliated or Related Organization

Historical relationship and common officers.

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• If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this b		► X
Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously file	d Form	8868.
• If you are filing for an Automatic 3-Month Extension, complete only Part I (on page 1).		
Part II Additional (Not Automatic) 3-Month Extension of Time. You must file original an		
Type or Name of Exempt Organization	Emp	loyer identification number
print Greenpeace Fund, Inc.	9	5-3313195
File by the extended Number, street, and room or suite no. If a P O. box, see instructions.	For II	RS use only
due date for 702 H Street, NW. No. 300		•
filing the return See Instructions City, town or post office, state, and ZIP code. For a foreign address, see instructions. Washington, DC 20001		
Check type of return to be filed (File a separate application for each return)		
X Form 990 Form 990-EZ Form 990-T (sec. 401(a) or 408(a) trust) Form 1041-A	F	om 5227
Form 990-BL Form 990-PF Form 990-T (trust other than above) Form 4720		orm 6069
STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previous	usly file	ed Form 8868.
The books are in the care of ▶ The Organization		
Telephone No. ► (202) 462-1177 FAX No. ►		
If the organization does not have an office or place of business in the United States, check this box		▶ □
• If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If the second control of t	his is fo	r the whole group, check this
box If it is for part of the group, check this box and attach a list with the names and EINs of a	ll memb	ers the extension is for
4 I request an additional 3-month extension of time until November 15, 2008.		
5 For calendar year 2007, or other tax year beginning, and ending		·
6 If this tax year is for less than 12 months, check reason. Initial return Final return		Change in accounting period
7 State in detail why you need the extension		
Additional time needed to compile third party informa	tion	necessary to
file a complete and accurate return.		
8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any	1	
nonrefundable credits. See instructions.	8a	\$
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated	1	
tax payments made. Include any prior year overpayment allowed as a credit and any amount paid	L_	
previously with Form 8868.	8b	\$
c Balance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit		
with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instruction	8c	\$ N/A
Signature and Verification		
Under penalties of periury. I declare that I have examined this form, including accompanying schedules and statements, and to the it is true, correct, and complete, and that I am authorized to prepare this form.	ne best c	of my knowledge and belief,
CPA	D-4-	8-11-08

Form 8868 (Rev. 4-2008)