GLOBAL 08/12/2009 12/02 PM

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

Α	For the 2008 ca	lendar year, or tax year beginning , and ending	tung rademen	TOTAL .	mspection
	Check if applicable:	Please C Name of organization , and ending			
ň	Address change	use IRS USE IRS GLOBAL GREENGRANTS FUND		D Empl	oyer identification number
\vdash	*	14061 01		0.4	1610400
\sqcup	Name change	print or Doing Business As		84	-1612422
	Initial return	type. Number and street (or P.O. box if mail is not delivered to street address) See 2840 WILDERNESS PLACE SUITE A	om/suite		hone number
	Termination	Specific Instruct City or town, state or country, and ZIP + 4			3-939-9866
	Amended return	tions. BOULDER CO 80301		G Gross rec	eipts \$ 7,355,491
$\overline{\Box}$	Application pending	F Name and address of principal officer:	1.	H(a) Is this	a group return for
	pprocessor panding			affiliat	
				H(b) Are al	Il affiliates
				includ	" attach a list. (see instructions)
1	Tax-exempt status	s: X 501(c) (3) ◀ (insert no.) 4947(a)(1) or 527		II NO.	attach a hat. (See matructions)
J	Website: ▶ W	ww.greengrants.org	·	Hick Cour	exemption number
	Type of organization:		of formation: 2		
		Immary	orionnation: 24	<u> </u>	M State of legal domicile: CO
		scribe the organization's mission or most significant activities:			
		TRENGTHEN THE GRASSROOTS ENVIRONMENTAL MOVEMENT IN		· • • • •	• • • • • • • • • • • • • • • • • • • •
ည		LOPING REGIONS BY MAKING SMALL GRANTS TO GROUPS	· · · · · · · · · · · · · · · · · · ·		• • • • • • • • • • • • • • • • • • • •
Governance		VING FOR ENVIRONMENTAL STABILITY.			
ě		* * * * * * * * * * * * * * * * * * *			
ô	2 Check thi	is box if the organization discontinued its operations or disposed of more than 25% of	of its assets.		
ಳ		of voting members of the governing body (Part VI, line 1a)		3	8
Activities	4 Number o	of independent voting members of the governing body (Part VI, line 1b)		4	0
<u>:</u>	5 Total num	nber of employees (Part V, line 2a)		5	19
Ac	l o Loral Bull	iber of volunteers (estimate if necessary)		6	0
	/a rotal gros	ss unrelated business revenue from Part VIII, line 12, column (C)		7a	
	b Net unrela	ated business taxable income from Form 990-T, line 34	· · · · · · · · · · · · · · · · · · ·	. 7b	0
			Prior Yea	r	Current Year
ë		ons and grants (Part VIII, line 1h)	<u>5,224</u>	223	7,184,540
Revenue		service revenue (Part VIII, line 2g)			
₹e,	10 Investmer	nt income (Part VIII, column (A), lines 3, 4, and 7d)	,919	75,229	
_	11 Other rev	enue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			95,722
	12 Total reve	enue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	5,298	,142	7,355,491
	13 Grants an	d similar amounts paid (Part IX, column (A), lines 1-3)	3,494	.,583	3,912,142
	14 Benefits p	paid to or for members (Part IX, column (A), line 4)		··	
Se	15 Salaries,	other compensation, employee benefits (Part IX, column (A), lines 510)	712	,579	687,372
Expenses	16a Profession	other compensation, employee benefits (Part IX, column (A), lines 510) nal fundraising fees (Part IX, column (A), line 11e) Iraising expenses (Part IX, column (D), line 25) 507,770	<u>.</u>		
g	b Total fund	Iraising expenses (Part IX, column (D), line 25) ► 507,770			
ш	17 Other exp	enses (Part IX, column (A), lines 11a-11d, 11f-24f)	830	,520	1,114,874
	18 Total expe	enses. Add lines 13-17 (must equal Part IX, column (A), line 25)	5,037		5,714,388
	19 Revenue	less expenses. Subtract line 18 from line 12		,460	1,641,103
s or			Beginning of		End of Year
Net Assets or Fund Balances	20 Total asse	ets (Part X, line 16)	3,045	,476	4,496,952
et P	21 Total liabil	lities (Part X, line 26)	271	400	81,773
		s or fund balances. Subtract line 21 from line 20	2,774	,076	4,415,179
P:	art II Sig	nature Block			
	Und	er penalties of perjury, I declare that I have examined this return, including accompanying schedules and sta	tements, and to	o the best of	my knowledge
	1.	belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information	of which prepa	arer has any	knowledge.
Sig	n h	Villa & Wolvedon		181	152109
Her	re 📝	Signature of officer	1 /	Date	al. Abil
		leresa de ndeman (M)	it 41	1011	Azne 1810
		Type or print name and title	7	The state of the s	- WY
	. Pred	parer's Date	Check if		Preparer's identifying number
Pai	d signa	ature P HAM CMURTICIA 8/12/0	self-	П	(see instructions)
	parer's	Peakview Accounting Services BC	9 employed	T	<u> </u>
Use		s harte (or yours		EIN	<u> </u>
	i i	ess, and ZIP+4 Boulder, CO 80304-2264		Phone	202 442 1200
May		this return with the preparer shown above? (see instructions)		no. 🕨	303-442-1390
		ct and Paperwork Reduction Act Notice, see the separate instructions.	<u> </u>	<u> </u>	Yes No
J. 1/7	. Ut i mady M	as and a applicable mediction Act Motice, see the separate instructions.			Form 990 (2008)

Form **8868**

(Rev. April 2008)

Department of the Treasury

Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

Internal Revenue S	Service		► File a se	parate application for	each return.				
 If you are 	filing for an Auto	omatic 3-Mon	th Extension, co	mplete only Part I	and check this	box		e detale	▶ X
				nth Extension, con ed an automatic 3-r					8868.
Part Auto	omatic 3-Mon	th Extension	of Time. Only	submit original (r	o copies need	ded).			
			nd requesting ar	n automatic 6-mon	h extension - c	heck this l	oox and compl	ete 	▶ □
	orations (includ	-	ers), partnerships	, REMICs, and trus	's must use Fori	m 7004 to	request an ex	tensi	on of
Electronic Fili	ing (e-file) Gen	erally you car	n electronically t	file Form 8868 if	vou want a 3-	month aut	omatic exten	sion	of time to file
one of the re electronically returns, or a c	eturns noted be if (1) you want composite or co	low (6 mont) the additionant nsolidated Fro	ns for a corpora al (not automation om 990-T. Instea	ation required to to to 3. 3-month extensing, you must submit is to the submit is the	ile Form 990- on or (2) you t the fully com	T). Howey file Forms pleted and	er, you cann 990-BL, 606 d signed page	ot fi 9, o 2 (F	le Form 8868 r 8870, group Part II) of Form
Type or	Name of Exem	pt Organization					Employer id	entific	cation number
print	GLOBAL GRE	Ramon Time and a second	FUND				84-16124	22	
			uite no. If a P.O. bo	x. see instructions			v. 1011.		
File by the due date for	areasenes SVADESES	After Resident and the	1000000 Carlotter	x, soo msiractions.					
filing your	2840 WILDE			- (: (·				
return See	A PERSON NAMED AND DESCRIPTIONS		, and ZIP code. For	a foreign address, see	instructions.				
instructions	BOULDER, CO	80301							
Check type o	of return to be f	iled (file a sep	arate application	n for each return):					
X Form 990	0		Form 990-T (corp	poration)		For	rm 4720		
Form 990	D-BL		Form 990-T (sec.	401(a) or 408(a) trus)	For	rm 5227		
Form 990				it other than above)	<i>5.3</i>	10,000	m 6069		
Form 990			Form 1041-A	a out or analy aborto,			rm 8870		
Full 990)-F F		FOIII 1041-A				111 0070		
If the organ If this is for for the whole on the manner and Ell I request until AUG	r a Group Return group, check thi Ns of all member an automatic 3 SUST 17 ganization's ret	et have an office of the enter the organism of the extension of the extens	ganization's four If it is for pa ion will cover. onths for a corpor	usiness in the Unite digit Group Exemp art of the group, ch ation required to fil apt organization rel	tion Number (G eck this box • e Form 990-T)	EN) extension		list v	
▶ <u>X</u>	calendar year_ tax year begin		_	,, and	ending				_n ²
2 If this tax	year is for less	than 12 mont	hs, check reason	: Initial retur	n Final	return	Change in	acco	unting period
	oplication is for idable credits. S			, 4720, or 6069,	enter the tent	ative tax,	2000	3a \$	
				any refundable cre	dits and estim	ated tax r	ayments	1.11	
72.40 AL 19.77 AMERICAN			ent allowed as a				196	3b \$	·
				your payment with	this form, or, i	f required	, deposit		
				S (Electronic Fede					
instructio		roquirou,	-,y = 11 \	- (=::::::::::::::::::::::::::::::::::::		0,510		3c \$	
AMERICAN AND DESCRIPTION	10000000		ooser saa g aaragagaa ah a aga araa s oo o		0000 5	- 0450 5	_		
		ake an electro	onic fund withdra	wal with this Form	odbo, see For	m 8453-E	o and Form 8	o/9-1	
for payment in		12 1 5	F 51 14	30.25 22			<u></u>		69 15 1 2022
For Privacy A	ct and Paperwo	ork Reduction	Act Notice, see	Instructions.			For	m 88	68 (Rev. 4-2008)

40 Total program service expenses > \$ 4,899,909 (Must equal Part IX, Line 25. column (B).)

Form 990 (2008)

4d Other program services. (Describe in Schedule O.)

Part IV Checklist of Required Schedules

<u>. F</u>	art 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,"		1	,,,,
	complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			1000
	candidates for public office? If "Yes," complete Schedule C, Part I	3	ļ.,,	Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete			
	Schedule C. Part II	4		X
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e)			
	notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any accounts where 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,			37,670
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21; 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 hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D,			
	Parts VI, VII, VIII, IX, or X as applicable	11	Х	
12	Did the organization receive an audited financial statement for the year for which it is completing this return			
	that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12	X	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E			X
14a	Did the organization maintain an office, employees, or agents outside of the U.S.?	14a	Х	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,			
	business, and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I	14b	X	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any			
	organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15	X	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance			
	to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16		X
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17		х
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		х
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		х
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		X
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete			-1-
	Schedule J	23		X
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 questions			
	24b-24d and complete Schedule K. If "No," go to question 25.	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	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	1000	
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction	11.4)		
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified		-48	
	6 Olf My - I I I I - I - O - I - I	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or			
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or			
±10	substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		X
1000	additional definition of to a policin related to dear an interface. If Test dempite defined by the in-		990	

			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee:			
a	Have a direct business relationship with the organization (other than as an officer, director, trustee, or	8		
	employee), or an indirect business relationship through ownership of more than 35% in another entity		C.	193
	(individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes." complete Schedule L,			2,75
	Pan IV	28a		X
b	Have a family member who had a direct or indirect business relationship with the organization? If "Yes,"			
	complete Schedule L, Part IV	28b		X
C	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a			
	professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV	28c		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	100	100	W Es
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes." complete Schedule N,	1000		
	Part I	31		х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,			
	III, IV, and V, line 1	34		х
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete			
	Schedule R, Part V, line 2	35		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related	S - 31000	1	
	organization? If "Yes," complete Schedule R, Part V, line 2	36		х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	2		
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part			
	VI	37		X

Form 990 (2008)

Part V Statements Regarding Other IRS Filings and Tax Compliance No 1a Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of 15 U.S. Information Returns. Enter -0- if not applicable 1a Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1h 0 Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1c Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax 2a 19 Statements, filed for the calendar year ending with or within the year covered by this return 2a If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? 3a If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O b 3b 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 X account)? 4a b If "Yes," enter the name of the foreign country: See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b c If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? 5c X 6a Did the organization solicit any contributions that were not tax deductible? 6a If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6b Organizations that may receive deductible contributions under section 170(c). a Did the organization provide goods or services in exchange for any quid pro quo contribution of more than Х 7a If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was X required to file Form 8282? 7c 7d If "Yes." indicate the number of Forms 8282 filed during the year Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal х 7e benefit contract? Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f 7g For all contributions of qualified intellectual property, did the organization file Form 8899 as required? For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as 7h Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 8 509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring X 8 organization, have excess business holdings at any time during the year? Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds. Did the organization make any taxable distributions under section 4966? 9a X 9b Did the organization make a distribution to a donor, donor advisor, or related person? b 10 Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII. line 12 10a 10b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 11 Section 501(c)(12) organizations. Enter: 11a Gross income from members or shareholders Gross income from other sources (Do not net amounts due or paid to other sources against b 11b amounts due or received from them.) Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a 12b If "Yes." enter the amount of tax-exempt interest received or accrued during the year

Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

Section A. Governing Body and Management

90.	Mon A. Governing Dody and Managomon.		100	
	For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the		Yes	No
	circumstances, processes, or changes in Schedule O. See instructions.		10.5	
1.			236	1
1a	Strain and the strain	\dashv	15:00	34
ь	The state of the s	-	e - 120	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with		1000	v
,	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 direct		1	
	supervision of officers, directors or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		X
6	Does the organization have members or stockholders?	6		
7a	Does the organization have members, stockholders, or other persons who may elect one or more members			v
	of the governing body?	7a	_	X
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	1000	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			ge.
1000	the year by the following:	W 1000	v	500 July 1
a	The governing body?	8a	X	_
ь	Each committee with authority to act on behalf of the governing body?	_8b	Λ.	x
9a	Does the organization have local chapters, branches, or affiliates?	9a		
Ь	If "Yes." does the organization have written policies and procedures governing the activities of such chapters.	-		
	affiliates, and branches to ensure their operations are consistent with those of the organization?	9b		_
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations		v	
	must describe in Schedule O the process, if any, the organization uses to review the Form 990	10	Х	-
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at	0.000		v
_	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	11	_	<u>x</u>
<u>5ec</u>	ction B. Policies			100
		T40	Yes	No
12a		12a	Х	
b	So with the control of the state of the control of	400		v
	rise to conflicts?	12b		<u>x</u>
C				v
127221	describe in Schedule O how this is done	12c		$\frac{x}{x}$
13	Does the organization have a written whistleblower policy?	13	-	X
14	Does the organization have a written document retention and destruction policy?	14	1 1000	
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision:	1.	v	100
а	The organization's CEO, Executive Director, or top management official?	15a	X	
b	Other officers or key employees of the organization?	15b	Х	-
	Describe the process in Schedule O. (see instructions)			
16a		8. 1	4	v
	with a taxable entity during the year?	16a		<u> </u>
ь	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate			
	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard	1000	1722	
	the organization's exempt status with respect to such arrangements?	16b		
Sec	etion C. Disclosure		_	
17	List the states with which a copy of this Form 990 is required to be filed CA, CO, CT, FL, GA, MA, NY, OH, OR, PA, VA,	WA, W	· seco	
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only)			
	available for public inspection. Indicate how you make these available. Check all that apply.			
-00150	Own website Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest			
7735354	policy, and financial statements available to the public.			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the			
DOM:	organization. > GLOBAL GREENGRANTS FUND 2840 WILDERNESS PL #A	2 02	0 0	066
_B	OULDER CO 80301 303	3-93	9-9	000

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

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

1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed.

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest <u>compensated employees</u>; and former such persons.

(A) Name and Title	(B) Average	Posi	ition ((C check		hat ap	ply)	(D) Reportable	(E) Reportable	(F) Estimated
nanc sile inic	hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
CHET TCHOZEW			1							
EXEC DIR	40	X		V007 -01	Č			96,126	0	
CHINA BROTSK	Y									
TREASURER		X	8 9		_		_	0	0	
CATHERINE PO	RTER	11 250		i i				ACCEPTAGE AND PRODUCTION OF THE PROPERTY OF TH	55 T	
BOARD CHAIR		X						0	0	
LEANNE GROSS EXEC CHAIR	MAN	x						О	0	
BETO BORGES										-
DIRECTOR		X						0	0	
HELEN SEIDLE	R		9							
DIRECTOR		X		- 9		e .		0	0	
MELE LAU SMI DIRECTOR	TH	x						o	О	S
DAVID CHATFI VICE CHAIR	ELD	х	BECV.					0	0	
emperate Kombonskom	-									
		Ne.								
55 - 15 - 53 178.1										
60 O	!	st. s	::- ::			i c				
:=:0										
	<u> </u>									
-		246				-				
2006 1800 9 NII 19 19 19 19 19 19 19 19 19 19 19 19 19									<u></u>	
8		40000		10	0 275	S 781				

Form 990 (2008)

(A) Name and title	(B) Average	(C) Position (check all that						(D) Reportable	(E) Reportable	(F) Estimated			
	hours per week	or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	cor or a	other other other offen the ganiza offen rela	of ation tion ted	
THE THE STREET			100-		1,50								
NX NX U 42 883										-			
							_		-	-			
													-
S THE PERMANENCE									-				
199 19 13 199 696 189													
	7	-											
iss x						-E29	10					_	_
n concorre		П											
7000 - 1 000007												9 8	
1b Total		1 44			2011	957	•	96,126					
2 Total number of individed organization ▶ 0	duals (including those in	la) wh	no re	ceive	ed m	ore th	nan (\$100,000 in reportable comp	pensation from the				
employee on line 1a? I For any individual lister the organization and re individual Did any person listed of services rendered to the	If "Yes." complete Sched d on line 1a, is the sum of elated organizations grea on line 1a receive or accr the organization? If "Yes."	ule J f if repo ter that ue cor	or su ortable an \$1	e co 50,0	mpe 000?	dual nsati If "Ye om a	on a es," o				3 4 5	Yes	X X X
Section B. Independent C Complete this table for		nsate	d ind	eper	nden	t con	tract	ors that received more than	\$100,000 of				
compensation from the	e organization.						00001		(B) on of services			(C)	_
	(A) Name and business address							Descripti	on of services		Comp	(C) pensali	on.
													_
				-	· <u>, </u>						_		

compensation from the organization ▶

Pi	art V	III Statement of Rev	/enu	θ		(A) Total revenue	(B) Related or	(C) Unrelated	(D) Revenue
						/314/13/34/34	exempt function revenue	business	excluded from tax under sections 512, 513, or 514
ts st	1a	Federated campaigns	1a			Former Profession			
Contributions, gifts, grants and other similar amounts	b	Membership dues	1b						
s, g	С	Fundraising events	1c					v ²⁰ 0.	
gift	d	Related organizations	1d					2.77	
SE	0	Government grants (contributions)	10	is a second					
rtio er s	f	All other contributions, gifts, grants,				2 2			
4		and similar amounts not included above	1f	7	,184,540	5 C S	1 10 10 10 10 10 10 10 10 10 10 10 10 10	2 2 6 2	
out	g	Noncash contributions included in lines '	1a-1f	\$	40,800	785 Ng	assis for a life.	8 = -	
ŭ r	h	Total. Add lines 1a-1f			>	7,184,540			
e					Busn. Code	and and		130	
Program Service Revenue	2a								
å	b								
Š	С								VIVAL
Ş	d		-722.5				co ununque;		
E	0	The second second second second							
.go	f	All other program service sev	enue						
<u>~</u>	9	Total. Add lines 2a-2f		Q1 51 V22	>_				
	3	Investment income (including	divid	ends, inter	rest, and				
		other similar amounts)			>	75,229			75,229
	4	Income from investment of ta	x-exe	mpt bond	proceeds >				
	5	Royalties	1000		> _				
		(i) Real		(i	i) Personal				
	6a	Gross Rents							
	b	Less: rental exps.						_	
	С	Rental inc. or (loss)							
	_d	Net rental income or (loss)	2000	_ 10000000			2.200.00		7 . 1
	/ a	Gross amount from sales of assets (i) Securit	ies		(ii) Other				
		other than inventory							
	ь	Less cost or other				Fig. (Lawrie M		io statical	
		basis & sales exps.							
	С	Gain or (loss)				14		g = 6	
	d	Net gain or (loss)			>	Mente a serenava or socia		40.61	
	8a	Gross income from fundraising ev	ents					0.5 9.5	
Jue		(not including \$						1962	
Ver		of contributions reported on line 1	c).						
8	-10	See Part IV, line 18		a					
Other Revenue		Less: direct expenses		b					
ö		Net income or (loss) from fun		ng events	>			F 15 0 1478/48/40/80	578 (C. 1984) 1 "No. (1925)
	9a	Gross income from gaming activit	ies.						
		See Part IV, line 19		а					
	l	Less direct expenses		b					
	1000000	Net income or (loss) from gar	5500	ctivities	5				BROKET TO LEASE FOR LAND
	10a	Gross sales of inventory, less	6						
	2	returns and allowances		a					
	200000	Less: cost of goods sold		b				100 P. 180 P.	Resident 1
	С	Net income or (loss) from sal		nventory	Busn. Code	194 As 36 As 60A	ethy approxim		THE TOTAL STATE
		Miscellaneous Reven	9		Busii. Code	95,722	Employed Physical Inc.	10 A 10 A	95,722
	11a	CASUALTY LOSS PROCE	EDS			35,122			33,122
	ь					= =====================================	1000 m		
	C	***			-	- 7		25	NECTOR ST
	d	All other revenue				95,722			
	9	Total. Add lines 11a-11d	2= 6	1 4 5 00	-	33,122	T S S S S S S S S S S S S S S S S S S S		
	12	Total Revenue. Add lines 1h 9c. 10c. and 11e	, 2y, 3	, 4, 5, 6d.	ru, oc,	7,355,491	0	0	170,951

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

Do	All other organizations must	(A)	(B)	(C)	(D)
	, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and				e
	organizations in the U.S. See Part IV, line 21	57,580	57,580	the second second	
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	U.S. See Part IV, lines 15 and 16	3,854,562	3,854,562		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	222 211	100 515		
	trustees, and key employees	332,211	193,715	61,115	77,381
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and		i		
ş	persons described in section 4958(c)(3)(B)	285,467	150 555		125 012
7	Other salaries and wages	285,407	159,555		125,912
8	Pension plan contributions (include section 401(k)	20,267	11 227	2 247	6 702
	and section 403(b) employer contributions)	20,267	11,237	2,247	6,783
9 10	Other employee benefits Payroll taxes	49,427	27,061	5,138	17,228
11	Fees for services (non-employees):	13,121	27,001	3,138	17,220
a					
b	Legal	4,727	2,750		1,977
c	27.7.2010-0.10111111111111111111111111111111	8,649	27,30	8,649	
d	growth and a second state of the second state of	0,015		3,015	
	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other	358,143	163,863	90,298	103,982
12	Advertising and promotion				
13	Office expenses	29,096	5,637	10,902	12,557
14	Information technology				
15	Royalties				
16	Occupancy	108,957	24,158	58,932	25,867
17	Travel	131,825	85,260	2,810	43,755
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	27,085	9,478		17,607
20	Interest				William -
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	14,760	5,286	6,661	2,813
23	Insurance	125,652	62,142	22,899	40,611
24	Other expenses. Itemize expenses not				
	covered above. (Expenses grouped together				
	and labeled miscellaneous may not exceed				
	5% of total expenses shown on line 25 below.)	195,203	195,203		an a Scheme
	PROGRAM SUPPORT	31,069	16,895	7,296	6,878
ь	STAFF RECRUITMENT BANK CHARGES	24,626	14,972	8,276	1,378
c	DUES & SUBSCRIPTIONS	16,757	2,960	664	13,133
d	STAFF TRAINING	11,958	1,340	9,546	1,072
		26,367	6,255	11,276	8,836
25	All other expenses Total functional expenses. Add lines 1 through 24f	5,714,388	4,899,909	306,709	507,770
25	Joint Costs. Check here Inf following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and	57.217330	., ., ., .,	330,733	201,110
_	fundraising solicitation				

P	art X	Balance Sheet			,		-		ugo 11
	_				(A) Beginning of year		(E End o		
	1	Cash—non-interest bearing			1,414,510	1	6	26,	063
	2	Savings and temporary cash investments	1401 34040		190,243	2			210
	3	Pledges and grants receivable, net		Name to 187		3		d :	
	4	Accounts receivable, net			367,791	4		60,	000
	5	Receivables from current and former officers, directors, tru	istees, key						43)
		employees, or other related parties. Complete Part II of Sc	hedule L			5			
	6	Receivables from other disqualified persons (as defined un			Contractor .				100
		4958(f)(1)) and persons described in section 4958(c)(3)(B)	. Complete						
		Part II of Schedule L				6			
sts	7	Notes and loans receivable, net		5 54069 SERVICES		7			_
Assets	8	Inventories for sale or use	10000472		<u> </u>	8	=2		
ä	9	Prepaid expenses and deferred charges			The Argument of the Argument o	9			
		Land, buildings, and equipment: cost basis	10a	120,301					
	ь	Less: accumulated depreciation. Complete							
		Part VI of Schedule D	10b	69,754	57,960	10c			547
	11	Investments—publicly traded securities		*******	1,014,972	11	2,6	35,	132
	12	Investments—other securities. See Part IV, line 11				12			
	13	Investments—program-related. See Part IV, line 11				13		9.0	
	14	Intangible assets		7 Y Y T T T T T T T T T T T T T T T T T		14	_		
	15	Other assets See Part IV, line 11			3 045 476	15		0.6	050
_	16	Total assets. Add lines 1 through 15 (must equal line 34)			3,045,476	16	4,4		
	17	Accounts payable and accrued expenses	*******	2 11 1 2 12	11,880	17			210
	18	Grants payable		emmoseves a 3	255,715	18		14,	450
	19 20	Deferred revenue Tax-exempt bond liabilities		19		_			
S	100000000			00000000 1034		20			
iţie	21	Escrow account liability. Complete Part IV of Schedule D Payables to current and former officers, directors, trustees	kov.			21		100	20057
Liabilities	22	employees, highest compensated employees, and disquali	Salar Salar	li i					
<u>ia</u>		persons. Complete Part II of Schedule L	neu	*	26, 82201-29, 80004 (9.1581-004	22	S1610 1 53	N. Errosso	the extension
200	23	Secured mortgages and notes payable to unrelated third pa	arties			23			
		Unsecured notes and loans payable	artics	*******		24	7 3		
		Other liabilities. Complete Part X of Schedule D		******	3,805	25	3-10-51	6.	113
		Total liabilities. Add lines 17 through 25	VI. 1111 .		271,400	26		81,	
es		Organizations that follow SFAS 117, check here ▶ X	and		tua ya Vadio wa Sw		1. 6.5° 3.		
		complete lines 27 through 29, and lines 33 and 34.	KS-721-733						
lan		Unrestricted net assets			1,719,074	27	2,1	50,	641
Balanc	28	Temporarily restricted net assets			1,055,002	28	2,2		
٦	29	Permanently restricted net assets				29			
Fund		Organizations that do not follow SFAS 117, check here	▶ □				1127		
5		and complete lines 30 through 34.							
	30	Capital stock or trust principal, or current funds			The second secon	30			
Assets	31	Paid-in or capital surplus, or land, building, or equipment fu	nd			31			
As	32	Retained earnings, endowment, accumulated income, or of	ther funds			32			
Net	33	Total net assets or fund balances	1 2000	2012 TT 6 200 =	2,774,076	33	4,4		
Z	34	Total liabilities and net assets/fund balances	22.7		3,045,476	34	4,4	96,	952
Pa	art X	Financial Statements and Reporting							
			5-2					Yes	No
1		, , , , , , , , , , , , , , , , , , ,	sh X	Accrual Oth					v
2a		e the organization's financial statements compiled or review			2	100	2a	v	_ <u>x</u> _
		e the organization's financial statements audited by an inde			warnahi of		2b	Х	
С		es" to lines 2a or 2b, does the organization have a committe					3-	x	
		audit, review, or compilation of its financial statements and					2c	A	
sa		result of a federal award, was the organization required to					3a	1	x
E		Single Audit Act and OMB Circular A-133? es," did the organization undergo the required audit or <u>audi</u>					3b		
ū	11 1	es, and the organization undergo the required addit of addit						990	(2008)

SCHEDULE A

(Form 990 or 990-EZ)

Public Charity Status and Public Support

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

➤ Attach to Form 990 or Form 990-EZ. ➤ See separate instructions.

OMB No 1545-0047

2008

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

GLOBAL GREENGRANTS FUND

Employer identification number 84 - 1612422

Pa	art I	Reas	on for Public Charity	Status (All organization	s must c	omplete	this p	art.) (see in	structio	ons)		
The	orgar	nization is not	a private foundation because	it is: (Please check only one o	rganization	.)		,					
1		A church, co	nvention of churches, or asso	ociation of churches described in	section	170(b)(1)(A)(i).						
2			cribed in section 170(b)(1)(
3		A hospital or	a cooperative hospital service	e organization described in sec	tion 170(b)(1)(A)(iii)	. (Attach	Sched	ule H.)				
4				in conjunction with a hospital d						he hospit	al's name.		
	NAMES OF	city, and state											
5		An organizati	on operated for the benefit o	f a college or university owned o	or operated	by a gove	ernmenta	al unit de	escribed	in			
	NO.		b)(1)(A)(iv). (Complete Part										
6				overnmental unit described in se	ction 170	(b)(1)(A)(v	r).						
7		An organizati	ion that normally receives a s	substantial part of its support from	m a govern	mental ur	nit or from	n the ge	neral p	ublic			
	discip.	described in	section 170(b)(1)(A)(vi). (Co	omplete Part II.)	50%			-	.56				
8		A community	trust described in section 1	70(b)(1)(A)(vi). (Complete Part	II.)								
9	X	An organizati	on that normally receives: (1	more than 33 1/3 % of its supp	ort from co	ntribution	s, memb	ership f	ees, an	d gross			
		receipts from	activities related to its exem	pt functions—subject to certain	exceptions	, and (2) r	o more	than 33	1/3 % 0	f its			
		support from	gross investment income an	d unrelated business taxable inc	come (less	section 5	11 tax) fr	om bus	inesses				
		acquired by the	he organization after June 30	, 1975. See section 509(a)(2).	(Complete	Part III.)	100 FALSO X 1.00						
10		An organizati	on organized and operated e	xclusively to test for public safe	ty. See sec	tion 509(a)(4). (se	ee instru	uctions)				
11		An organizati	on organized and operated e	xclusively for the benefit of, to p	erform the	functions	of, or to	carry ou	ut the				
		purposes of c	one or more publicly supporte	d organizations described in se	ction 509(a	a)(1) or se	ction 509	a)(2).	See sec	tion			
		509(a)(3). Ch	eck the box that describes th	e type of supporting organization	n and com	plete lines	11e thr	ough 11	h.				
		a Type	b Type II	c Type III-Function	ally integra	ated	d	Тур	e III-Ot	her			
8		By checking t	his box, I certify that the orga	inization is not controlled directly	y or indired	tly by one	or more	disqual	ified				
		persons other	r than foundation managers a	and other than one or more publ	licly suppo	ted organ	izations	describe	ed in se	ction			
		509(a)(1) or s	section 509(a)(2)				5						
f		If the organiza	ation received a written deter	mination from the IRS that it is a	Type I, T	pe II, or T	ype III s	upportin	ng				
			check this box				000000000000000000000000000000000000000						
g		Since August	17, 2006, has the organizati	on accepted any gift or contribu	tion from a	ny of the							
		following per	sons?										
		(i) A persor	who directly or indirectly con	ntrols, either alone or together w	ith person	s describe	d in (ii)					Yes	No
		and (iii) b	below, the governing body of	the supported organization?				4144000			11g(i)	-	
		(ii) A family	member of a person describ	ed in (i) above?						**************************************	11g(ii)	4	
		(iii) A 35% c	ontrolled entity of a person d	escribed in (i) or (ii) above?						or - 32 no	11g(iii)	
h		Provide the f	ollowing information about th	e organizations the organization	supports.								
(i)	Name	of supported	(ii) EIN	(iii) Type of organization	(iv) Is the	organization	(v) Did y	ou notify	(vi)	Is the	(vii) Am	ount of	
	orga	anization	The state of the s	(described on lines 1-9	100000000000000000000000000000000000000	isted in your	**************	nization in	3507 ST 100 PS	tion in col.	sup	port	
				above or IRC section (see instructions))	governing	document?		of your oort?		ized in the			
				CNEED OUR TOUR TOUR TOUR	Yes	No	Yes	No	Yes	No			
	_												
									1000		25-1-072		D = 540
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			l constant										
- 5						es that the		Late					
0.22	é		ľ.	Γ.	A.	E .	1	1	1	т 1			

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (Complete only if you checked the box on line 5, 7, or 8 of Part I.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2004(b) 2005 (c) 2006 (d) 2007 (e) 2008 (f) Total Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1-3 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) Public support. Subtract line 5 from line 4 Section B. Total Support . Calendar year (or fiscal year beginning in) (a) 2004 (b) 2005 (c) 2006 (d) 2007 (e) 2008 (f) Total Amounts from line 4 8 Gross income from interest, dividends, payments received on securities loans. rents, royalties and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) 11 Total support. Add lines 7 through 10 12 12 Gross receipts from related activities, etc. (see instructions) 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f)) 14 14 15 Public support percentage from 2007 Schedule A, Part IV-A, line 26f 15 33 1/3 % support test-2008. If the organization did not check the box on line 13, and line 14 is 33 1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3 % support test—2007. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization 10%-facts-and-circumstances test-2008. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or 17a more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

b 10%-facts-and-circumstances test—2007. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

Schedule A (Form 990 or 990-EZ) 2008

Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I.)

Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2004 (b) 2005 (c) 2006 (d) 2007 (e) 2008 (f) Total Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") 2,467,600 4,234,510 5,430,423 5,224,223 7,184,540 24,541,296 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1-5 2,467,600 4,234,510 5,430,423 5,224,223 7,184,540 24,541,296 Amounts included on lines 1, 2, and 3 5,900 received from disqualified persons 12,344 7,075 5,600 1,350 32,269 Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000 c Add lines 7a and 7b 12,344 5,900 7,075 5.600 1,350 32,269 Public support (Subtract line 7c from 2,455,256 4,228,610 5,423,348 5,218,623 7,183,190 line 6) 24,509,027 Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2004 (b) 2005 (c) 2006 (d) 2007 (e) 2008 (f) Total Amounts from line 6 2,467,600 4,234,510 5,430,423 5,224,223 7,184,540 24,541,296 Gross income from interest, dividends. payments received on securities loans, rents, royalties and income from similar 6,082 23,622 68,836 73,919 75,229 247,688 sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b 6,082 23,622 68,836 73,919 75,229 247,688 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) 95,722 95,722 13 Total support. (Add lines 9, 10c, 11, 7,355,491 2,473,682 4,258,132 5,499,259 5,298,142 and 12.) 24,884,706 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) 14 organization, check this box and stop here Section C. Computation of Public Support Percentage Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f)) 15 98.4903 % Public support percentage from 2007 Schedule A, Part IV-A, line 27g 16 99.0486 % Section D. Computation of Investment Income Percentage Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f)) 17 0.9953 % 17 18 0.7450 % 18 Investment income percentage from 2007 Schedule A, Part IV-A, line 27h 33 1/3 % support tests—2008. If the organization did not check the box on line 14, and line 15 is more than 33 1/3 %, and line ■ X 17 is not more than 33 1/3 %, check this box and stop here. The organization qualifies as a publicly supported organization 33 1/3 % support tests—2007. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3 %, check this box and stop here. The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions 20

Schedule A (Form 990 or 990-EZ) 2008 GLOBAL GREENGRANTS FUND 84-1612422 Page 4 Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. (see instructions) Part III, Line 12 - Other Income Detail CASUALTY LOSS PROCEEDS \$ 95,722

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

▶ Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12. OMB No 1545-0047

2008 Open to Public Inspection

Name of the organization

iame of the of	gameaton		Employer	identification nu	imber
GLOBAL	GREENGRANTS FUND		84-16	12422	
Part I	Organizations Maintaining Donor Advised Funthe organization answered "Yes" to Form 990, P	ds or Other Similar Funds or Adart IV, line 6.			
		(a) Donor advised funds	(b) F	unds and other ac	counts
1 Total nu	Imber at end of year	8	7,01		
2 Aggrega	ate contributions to (during year)	2,590,150			
3 Aggrega	ate grants from (during year)	1,345,874			
4 Aggrega	ate value at end of year	1,965,703			
5 Did the	organization inform all donors and donor advisors in writing that th	e assets held in donor advised			
funds ar	e the organization's property, subject to the organization's exclusive	ve legal control?	(XX) (C	X Yes	No
6 Did the	organization inform all grantees, donors, and donor advisors in wri	ting that grant funds may be			
used on	ly for charitable purposes and not for the benefit of the donor or do	onor advisor or other		1221	
	ssible private benefit?	en e		X Yes	No
Part II	Conservation Easements. Complete if the organ		990, Pa	rt IV, line 7.	
	e(s) of conservation easements held by the organization (check all	that apply).			
Pres	servation of land for public use (e.g., recreation or pleasure)	Preservation of an historically impo	ortant land	area	
	lection of natural habitat	Preservation of certified historic str	ucture		
☐ Pres	servation of open space				
	te lines 2a-2d if the organization held a qualified conservation con	tribution in the form of a conservation ease	ement		
on the la	ast day of the tax year.				a 9700 vare
				Held at the End	of the Year
			2a		
			2b		
	of conservation easements on a certified historic structure include	ed in (a)	2c		
	of conservation easements included in (c) acquired after 8/17/06		2d		
	of conservation easements modified, transferred, released, exting	guished, or terminated by the organization	during		
	ble year	V 10 42			
	of states where property subject to conservation easement is local				
	e organization have a written policy regarding the periodic monitori	ing, inspection, violations, and		\Box	П.,
	ment of the conservation easements it holds?			Yes	No
	volunteer hours devoted to monitoring, inspecting, and enforcing e				
	of expenses incurred in monitoring, inspecting, and enforcing ease			100	
	ch conservation easement reported on line 2(d) above satisfy the	requirements of section		П у	П.,
1,000	I)(B)(i) and section 170(h)(4)(B)(ii)?			Yes	☐ No
	(IV. describe how the organization reports conservation easement				
	sheet, and include, if applicable, the text of the footnote to the org	anization's financial statements that descri	bes		
	nization's accounting for conservation easements. Organizations Maintaining Collections of Art, H	listorical Traceuros or Other Si	milar As	eate	
Part III	Complete if the organization answered "Yes" to F		illiai As	.sets.	100200
g (gasa)				- ET	
	ganization elected, as permitted under SFAS 116, not to report in it				
	orical treasures, or other similar assets held for public exhibition, ed		iic service,		
provide,	in Part XIV, the text of the footnote to its financial statements that	describes triese items.			
The second secon	ganization elected, as permitted under SFAS 116, to report in its re				
historica	I treasures, or other similar assets held for public exhibition, educa-	ation, or research in furtherance of public s	ervice,		
provide t	the following amounts relating to these items:				
(i) Rev	enues included in Form 990, Part VIII, line 1	00 00 10004444 00 10 14444		\$	
	ets included in Form 990, Part X	9 4497 99 14 1		\$	
	ganization received or held works of art, historical treasures, or oth		the		
tollowing	amounts required to be reported under SFAS 116 relating to thes	se items:			
a Revenue	es included in Form 990, Part VIII, line 1	T 185 5 55 811 15 A - 81 - 5 1 WW		\$ _ _ _ _ _ -	
h Assets in	ncluded in Form 990, Part X		•	\$	

		EENGRANTS FUN			12422	Page
Part II						s (continued)
3 Usir	ng the organization's accession and other ross (check all that apply):	ecords, check any of the fo	llowing that are a sig	gnificant use of its co	llection	
a	Public exhibition	d Loan o	r exchange program	ns		
ьП	Scholarly research	e Other		935		
c \Box	Preservation for future generations	- L - CC.				
				S 2		
	vide a description of the organization's colle XIV	ections and explain how the	y further the organiz	zation's exempt purpo	ose in	
	ing the year, did the organization solicit or reets to be sold to raise funds rather than to be				[Yes No
Part IV	/ Trust, Escrow and Custodi Part IV, line 9, or reported a				ed "Yes" to For	m 990,
	ne organization an agent, trustee, custodian	or other intermediary for co	ontributions or other	assets not	Г	Yes No
	es," explain the arrangement in Part XIV ar	nd complete the following ta				
						Amount
c Beg	inning balance				1c	
d Add	itions during the year				4.4	
e Dist	ributions during the year				1000000	
					2012	0 05 05 = 5
2a Did	the organization include an amount on Form	n 990. Part X. line 21?				Yes No
	es," explain the arrangement in Part XIV.		#1. 21 12 HA			
Part V		ete if organization an	swered "Yes" to	Form 990, Par	t IV. line 10.	
		(a) Current year	(b) Prior year	(c) Two years back	(d) Three years bar	ck (e) Four years back
1a Rec	inning of year balance					1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
			and the second	Autor To	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	74554
b Con	tributions					
	stment earnings or losses					
	nts or scholarships				-	
	er expenditures for facilities				grand in the	E 555.
	programs			71 21 2	200	
f Adm	ninistrative expenses		2.20			
	of year balance					-
2 Prov	ride the estimated percentage of the year e	nd balance held as:				
a Boa	rd designated or quasi-endowment	%				
b Perr	manent endowment %					
	n endowment ▶ %					
3a Are	there endowment funds not in the possessi	on of the organization that	are held and admini	stered for the		
	inization by:	en er ekkilika kirak kirak inger				Yes No
	unrelated organizations					3a(i)
	related organizations		**********			3a(ii)
30,59	es" to 3a(ii), are the related organizations li	stad as required on Schedu	de P2			3b
	cribe in Part XIV the intended uses of the o	- C		*********		11
				Part Y line 10		
Part V		(a) Cost or other basis	(b) Cost or oth		CS-20-1 VA (-C)	(d) Book value
	Description of investment	(investment)	basis (other	. 512 0	preciation	(u) Book value
a Land				-		-
b Build					17 176	14 224
	sehold improvements	31,510			17,176	14,334
d Equi	pment	88,791	1	J 0.555	52,578	36,213
e Othe	er					1200 CF 1000 C
tal. Add	lines 1a-1e. (Column (d) should equal For	m 990, Part X, column (B),	line 10(c).)	SET D. PRODES BEEN DE	•	50,547

Schedule D (Form 990) 2008

Schedule D (Form 990) 2008 GLOBAL GREENGRANT		84-1612422	Page
Part VII Investments—Other Securities. See Fo	orm 990, Part X, line 12.		
(a) Description of security or category	(b) Book value	(c) Method of valuation	12
(including name of security)		Cost or end-of-year market	value
inancial derivatives and other financial products	KORIGI -4		
Closely-held equity interests	0		
Other			
		+	
	(5 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 	 	
		 	
		1	3 3 3
Total. (Column (b) should equal Form 990, Part X, col. (B) line 12.)	-		
Part VIII Investments—Program Related. See F		<u> </u>	
(a) Description of investment type	(b) Book value	(c) Method of valuation	
1-1	(0),200,100	Cost or end-of-year market	
		#####################################	11 (1 (1 (1 (1 (1 (1 (1 (1 (1 (1 (1 (1 (
		 	
			
			44
Total. (Column (b) should equal Form 990, Part X, col. (B) line 13.)	>		114
Part IX Other Assets. See Form 990, Part X, lin		- Innertal	
(a) Desci		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col. (B) line 15.)			
Part X Other Liabilities. See Form 990, Part X,	line 25		
(a) Description of liability	(b) Amount	1	
Federal income taxes			
OTHER LIABILITIES	6,113		
		M N	
	1		
Total. (Column (b) should equal Form 990, Part X, col. (B) line 25.)	▶ 6,113	A Pa del	
n Part XIV, provide the text of the footnote to the organization's finance	ial statements that reports the organ	ization's liability for	
uncertain tax positions under FIN 48.			

84-1612422

GLOBAL GREENGRANTS FUND

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Schedule F (Form 990)

Statement of Activities Outside the United States

2008

2008

Department of the Treasury Internal Revenue Service

► Attach to Form 990. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, line 15, or line 16.

Open to Public Inspection

Name of the org		AL GREENGRAN	ITS FUND	84 - 161	ntification number 2422
Part I	General Information		Outside the United States. (
assistance the grants For grant United Sta	makers. Does the orga e, the grantees' eligibilit or assistance? makers. Describe in Pa ates.	anization maintain recordly for the grants or assist art IV the organization's	ds to substantiate the amount of the gatance, and the selection criteria used procedures for monitoring the use of additional space is needed.)	to award	X Yes No
(a) Region	(b) Number of offices in the region	(C) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures in region
CENTRAL	AMERICA	1	GRANTMAKING	GRANTMAKING	7,120
	A & THE PACIF	1C 2	GRANTMAKING	GRANTMAKING	7,850
RUSSIA &		2	GRANTMAKING	GRANTMAKING	14,601
SOUTH AM		2	GRANTMAKING	GRANTMAKING	20,670
SOUTH AS	IA	2	GRANTMAKING	GRANTMAKING	3,610
SUB-SAHA	RAN AFRICA	3	GRANTMAKING	GRANTMAKING	13,521
			-	-	
		_			
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<u> </u>			-	-	
i.			-		
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67,372

Totals

Part II Grants an	d Other Assistan	ice to Organiz	ations or Entities Outside the	United States, Co	omplete if the	organization ans	wered "Yes" to F	Page orm 990.
			eived more than \$5,000. Check					▶ □
			Il space is needed.				Decay of the country of the	
(a) Name of organization	(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 non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			see exempt purpose	15,000	Cash disb	ırse	8	
		Central A	merica and the Caribbean			_		
		Central A	see exempt purpose merica and the Caribbean	5,500	Cash disb	ırse		
			see exempt purpose	8,750	Cash disb	ırse		
		East Asia	and the Pacific					
		East Asia	see exempt purpose and the Pacific	30,000	Cash disb	ırse		
41 B		East Asia	see exempt purpose and the Pacific	15,000	Cash disb	ırse		
		East Asia	see exempt purpose and the Pacific	15,000	Cash disb	ırse		
20 10000 Note 10		East Asia	see exempt purpose and the Pacific	5,188	Cash disb	ırse		
			see exempt purpose and the Pacific	15,000	Cash disb	ırse		
		East Asia	see exempt purpose and the Pacific	15,000	Cash disb	ırse		
		East Asia	see exempt purpose and the Pacific	25,000	Cash disb	ırse		
		East Asia	see exempt purpose and the Pacific	67,500	Cash disb	ırse		
		East Asia	see exempt purpose and the Pacific	20,000	Cash disb	ırse		
		East Asia	see exempt purpose and the Pacific	25,000	Cash disb	ırse		
		East Asia	see exempt purpose and the Pacific	67,500	Cash disb	ırse		
		East Asia	see exempt purpose and the Pacific	6,000	Cash disb	ırse		
N-			see exempt purpose	21,000	Cash disb	ırse		

2	Enter total number of organizations that are recognized as charities by the foreign country or for which the grantee or counsel has
	provided a section 501(c)(3) equivalency letter
3	Enter total number of other organizations or entities

Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Part III Use Schedule F-1 (Form 990) if additional space is needed. (e) Manner of (f) Amount of (g) Description (h) Method of (d) Amount of (a) Type of grant or assistance (b) Region (c) Number of cash non-cash of non-cash valuation cash grant recipients disbursement assistance assistance (book FMV appraisal, other) Part IV Supplemental Information

Complete this part to provide the information required in Part I, line 2, and any other additional information.

Part I, Line 2 - Procedures for Monitoring the Use of Grant Funds
THE ORGANIZATION RECEIVES RECOMMENDATIONS FOR GRANT RECIPIENTS FROM A
NETWORK OF VOLUNTEER ADVISORS OVERSEAS. THE ORGANIZATION RECEIVES
APPLICATIONS FROM THE PROSPECTIVE GRANT RECIPIENTS, INCLUDING A 501(C)(3)
EQUIVALENCY FORM. THE ORGANIZATION DOES OTHER DUE DILIGENCE WORK BEFORE
APPROVING THE GRANT. GRANT RECIPIENTS ARE REQUIRED TO REPORT TO THE
ORGANIZATION ON THE USE OF THE FUNDS RECEIVED WITHIN CERTAIN TIME PERIODS
OF RECEIVING THE GRANT.

SCHEDULE F-1

Continuation Sheet for Schedule F (Form 990)

(Form 990)

Department of the Treasury internal Revenue Service

Name of the organization

Attach to Form 990 to list additional information for Part I, line 3; Part II, line 1; or Part III.

OMB No 1545-0047

2008

Open to Public Inspection

GLOBAL GREENGRANTS FUND

Employer identification number 84 - 1612422

Part I		Activities per Reg	ion. (Schedule F (Form 990),	Part I, line 3)	
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures in region
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Totals •					

, 10.2			tance or Entities Outside the		(f) Manner of	(g) Amount of	(h) Description	(i) Method of
(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	cash disbursement	non-cash assistance	of non-cash assistance	valuation (book FMV appraisal othe
		East Asia	see exempt purpose and the Pacific	15,000	Cash disb	ırse		ĺ
		East Asia	see exempt purpose and the Pacific	25,000	Cash disb	ırse		83
		East Asia	see exempt purpose and the Pacific	25,000	Cash disb	ırse		
		East Asia	see exempt purpose and the Pacific	30,000	Cash disb	ırse		
(i) 85 Part 8		71.04	see exempt purpose and the Pacific	6,000	Cash disb	rse		
1 44 A			see exempt purpose and the Pacific	6,900	Cash disb	ırse		
		East Asia	see exempt purpose and the Pacific	6,500	Cash disb	irse		
		Europe	see exempt purpose	30,000	Cash disb	ırse		
		Europe	see exempt purpose	50,000	Cash disb	ırse		
		Europe	see exempt purpose	50,000	Cash disb	ırse	3)	
		Europe	see exempt purpose	20,000	Cash disb	urse		
	35,371,371,11	source sections of the	see exempt purpose	25,000	Cash disb	urse		
		North Ame	see exempt purpose	25,000	Cash disb	urse		-
V V V V V V		North Ame	see exempt purpose	9,200	Cash disb	urse		
		North Ame	see exempt purpose	25,000	Cash disb	urse		
6		North Ame	see exempt purpose	67,500	Cash disb	urse		
2 00 2/ - 0		North Ame	see exempt purpose	15,000	Cash disb	urse		
		North Ame	see exempt purpose	40,000	Cash disb	urse		
0 2		North Ame	see exempt purpose	25,000	Cash disb	urse		(-)

1 (a) Name of organization	(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 non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV appraisal, other
e ii		North Ame:	see exempt purpose	67,500	Cash disb	irse		±1
	A modern	North Ame	see exempt purpose rica	35,000	Cash disb	urse		
2 B 97. 2 NS		North Ame	see exempt purpose	50,000	Cash disb	ırse		5*•
60 100 to 100 at		North Ame	see exempt purpose	20,000	Cash disb	urse		
		Russia an	see exempt purpose the Newly Independent	25,000 States	Cash disb	urse		
		Russia and	see exempt purpose I the Newly Independent	5,500 States	Cash disb	urse		
		Russia and	see exempt purpose the Newly Independent	25,000 States	Cash disb	urse		
		South Ame	see exempt purpose	40,000	Cash disb	urse		
		South Ame	see exempt purpose	28,200	Cash disb	urse		
		South Ame	see exempt purpose	30,000	Cash disb	urse		
		South Ame	see exempt purpose	50,000	Cash disb	urse		
0		South Ame	see exempt purpose	71,000	Cash disb	urse		
V		South Ame	see exempt purpose	36,000		3		
		South Ame	see exempt purpose	6,200	Cash disb	urse		
11 11		South Ame	see exempt purpose	20,000	Cash disb	urse		
		South Ame	see exempt purpose	36,000				4
- T 10 W		South Ame		56,000	and the second property and the second secon	**************************************		
du jour er s		South Ame	S to statistical and a second	16,900				
	442	South Ame	see exempt purpose	7,600	Cash disb	urse		

(a) Name of organization	(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 non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other
		South Ame		25,000	Cash disb			
		South Ame	see exempt purpose rica	9,400	Cash disb	Stan telepetic		
		South Ame		6,500	Cash disb	and the second second		
		South Ame		100,000	Cash disb			
		South Ame		6,517	Cash disb			
		South Ame	13 5 14 15 15 16 16 16 16 16 16 16 16 16 16 16 16 16	5,079	Cash disb	ent e contratación		
and her		South Ame		6,902	Cash disb	3 3 4		
		South Ame		5,156	Cash disb	5550		57
1,00		South Ame	A CONTRACTOR OF THE PROPERTY O	6,032	Cash disb	and Patrick Trans		
		South Ame		5,079				
		South Ame		6,349	Cash disb			
		South Ame		6,476	A REPORT OF THE PROPERTY OF TH	en de de meso. En	1	
		South Ame		5,213	Cash disb	3 2 200 0 2000		
		South Ame		5,213	Cash disb			
		South Ame		6,165	Cash disb		1	
		South Ame	see exempt purpose rica see exempt purpose	6,843	Cash disb	200		
		South Ame	PACE TO THE PACE T	5,213	Cash disb			_
		South Ame		6,517	Cash disb			
		South Ame		0,317	casa arab			

			2000 G	72 ST ST	(f) Manner of	(g) Amount of	(h) Description	(i) Method of
(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	cash disbursement	non-cash assistance	of non-cash assistance	valuation (book FMV appraisal oth
	1 5	South Ame	see exempt purpose	6,517	Cash disb	irse		
V		South Ame	see exempt purpose	6,517	Cash disb	ırse		
	MI LOUIS CONTRACTOR	South Ame	see exempt purpose	10,000	Cash disb	ırse		4 12
e-co_o_A	aud 4	South Asi	see exempt purpose	10,000				
phateat i		South Asi	see exempt purpose	23,220				
		South Asi		14,850		annous securi		
		South Asi		6,000	The state of the s			
		South Asi	see exempt purpose	5,234				
		South Asi		5,800				
		South Asi	/	10,000		47-470.5 408.504	4	
		South Asi		30,000				
		South Asi	see exempt purpose	5,400				
**	1 1 27	South Asi		10,000				
		Sub-Sahar	see exempt purpose an Africa	15,000		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		0 92 3
		Sub-Sahar	see exempt purpose an Africa	9,000				
*		Sub-Sahar	see exempt purpose an Africa	7,000				
		Sub-Sahar	see exempt purpose an Africa	6,000	11 Ye	8 8		
er år _{lå} on on s — ma ^{lå}	1/2,75 1,752	Sub-Sahar	see exempt purpose an Africa	8,500		n destinations		
(*)		Sub-Sahar	see exempt purpose	6,000	Cash disb	irse	1	

(a) Name of organization	(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 non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other
		Sub-Sahar	see exempt purpose an Africa	8,000	Cash disb	urse		
		Sub-Sahar	see exempt purpose an Africa	13,000	Cash disb	urse		
		Sub-Sahar	see exempt purpose an Africa	20,000	Cash disb	urse		
-		Sub-Sahar	see exempt purpose an Africa	6,200	Cash disb	urse		
		Sub-Sahar	see exempt purpose an Africa	8,000	Cash disb	urse		
la Gar		Sub-Sahar	see exempt purpose an Africa	6,263	Cash disb	urse		
F		Sub-Sahar	see exempt purpose an Africa	11,000	Cash disb	urse		
			see exempt purpose an Africa	8,870	Cash disb	urse		
EK 9			see exempt purpose an Africa	6,000	Cash disb	urse	30	y
\$			see exempt purpose an Africa	9,000	Cash disb	urse		
	2		see exempt purpose an Africa	10,000	Cash disb	urse		
		Sub-Sahar	see exempt purpose an Africa	6,500	Cash disb	urse		
			see exempt purpose an Africa	7,200	Cash disb	urse		
in the second se		Sub-Sahar	see exempt purpose an Africa	10,000	Cash disb	urse		
		Sub-Sahar	see exempt purpose an Africa	5,500	Cash disb	urse		
10 to			see exempt purpose an Africa	6,000	Cash disb	urse		
89.5 to 1892 to = 61	1192-99		see exempt purpose an Africa	6,900	Cash disb	urse		
		_	see exempt purpose an Africa	5,830	Cash disb	urse		
		Sub-Sahar	see exempt purpose	12,000	Cash disb	urse		

(a) Name of organization	(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 non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, othe
	see exempt purpos Sub-Saharan Africa			72.	Cash disbu	irse		
~		Grants un	Detail not provided der \$5,000 - all regions	1,774,652				
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7 (100) <u>1280, 1880, 1880</u>					5			
		_	-					

Part III Continuation of Gra	nts and Other As	ssistance to Indiv	viduals Outside the	United States. (Sc	nedule F (Form 990),	Part III.)	-34%
Part III Continuation of Gra (a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method o valuation (book FMV appraisal, othe
		73					<u> </u>
							-27
					1		
3-2						19 <u>-</u> 2	
		-					
		- E					

SCHEDULE I (Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the U.S.

2008

Department of the Treasury Internal Revenue Service ▶ Complete if the organization answered "Yes," on Form 990, Part IV, lines 21 or 22.

Attach to Form 990.

Open to Public Inspection

Name of the organ	GLOBAL GREENGRANTS I	FUND				A 255	identification number 612422		
Part I	General Information on Grants and A							-	
the selecti 2 Describe i Part II	organization maintain records to substantiate the a tion criteria used to award the grants or assistance in Part IV the organization's procedures for monito Grants and Other Assistance to Gov Form 990, Part IV, line 21, for any rec	? ring the use of grant rernments and C cipient that receiv	unds in Organ ved m	izations in the Uniore than \$5,000.	ited States. Comp	olete if the org			No
	Part IV and Schedule I-1 (Form 990) i Name and address of organization or government	(b) EIN	c) IRC section pplicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
INT'L FUN PO BOX 10 AKWESASNE	V			7,500					
M. WEDNONE				7,300					
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	-TAKER ARAMATANAKAN								
	S W u u V HILLIAN KANYAWAKAN MANA								
	al number of section 501(c)(3) and government org	anizations	111 111				2202 020 NAGOSTO	<u> </u>	

SCHEDULE M (Form 990)

NonCash Contributions

To be completed by organizations that answered "Yes" on Form 990, Part IV, lines 29 or 30. 2008

OMB No 1545-0047

Open To Public Inspection

Department of the Treasury internal Revenue Service Name of the organization

Types of Property

Part I

Attach to Form 990.

GLOBAL GREENGRANTS FUND Employer identification number 84-1612422

		(a) Check if applicable	(b) Number of Contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d) Method of determin revenues	ng		
1	Art—Works of art							
2	Art—Historical treasures							
3	Art—Fractional interests							
4	Books and publications		er fan Stiffe Dan Estado					
5	Clothing and household							
	goods							
6	Cars and other vehicles						_	
7	Boats and planes							
8	Intellectual property							
9	Securities—Publicly traded .							
10	Securities—Closely held stock					- 514000		11000
11	Securities—Partnership, LLC.							
	or trust interests							
12	Securities—Miscellaneous						=%=== ±@	
13	Qualified conservation						65	
	contribution (historic							
	structures)							
14	Qualified conservation			2.0				
	contribution (other)							
15	Real estate—Residential			(many and a second				
16	Real estate—Commercial							
17	Real estate—Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts	-						
23	Scientific specimens							
24	Archeological artifacts							
25	Other ▶(USE OF FACILITY)	Х	1	40,800	FAIR MARKET VALU	E		
26	Other ►(
27	Other ▶ (
28	Other ► (
29	Number of Forms 8283 received by the	ne organiza	tion during the tax year fo	or contributions for	Sun as			
	which the organization completed For	m 8283, Pa	art IV, Donee Acknowledg	gement [29			
						-	Yes	No
30a	During the year, did the organization r	and the second second						
	it must hold for at least three years fro			and which is not required to	o be	1 8	r.	v
	used for exempt purposes for the enti	-	period?	and the second		30a		<u> </u>
	If "Yes," describe the arrangement in							
31	Does the organization have a gift according	eptance po	licy that requires the revie	ew of any non-standard				v
	contributions?				20 kg	_31		<u>X</u>
32a	Does the organization hire or use third	d parties or	related organizations to	solicit, process, or sell non-	casn			v
99	contributions?	61 6913556			00000 60 -	32a	-	<u>X</u>
b	If "Yes," describe in Part II.	24 29					1	
33	If the organization did not report rever	nues in colu	imn (c) for a type of prope	erry for which column (a) is	cnecked,		1.4	
	describe in Part II.							

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, Part II 32b, and 33. Also complete this part for any additional information.

SCHEDULE O

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

► Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

2008 Open to Public

Inspection

Name of the organization

GLOBAL GREENGRANTS FUND

Employer identification number 84 - 1612422

Form 990, Part VI, Line 10 - Organization's Process Used to Review Form 990
THE FINANCE DIRECTOR AND CEO RECEIVES A DRAFT OF THE FORM 990 TO REVIEW,
AND APPROVES IT BEFORE THE PREPARER FINALIZES THE RETURN.

Form 990, Part VI, Line 15a - Compensation Process for Top Official DURING 2008, MANAGEMENT CONSULTANTS REVIEWED THE SALARY STRUCTURE OF THE ORGANIZATION FOR ALL POSITIONS AND MADE RECOMMENDATIONS BASED ON THEIR COMPARISON OF THE ORGANIZATION'S PAY STRUCTURE TO SALARY SURVEYS IN ITS INDUSTRY AND SIZE. THE BOARD APPROVED THE RECOMMENDATIONS.

Form 990, Part VI, Line 15b - Compensation Process for Officers

DURING 2008, MANAGEMENT CONSULTANTS REVIEWED THE SALARY STRUCTURE OF THE

ORGANIZATION FOR ALL POSITIONS AND MADE RECOMMENDATIONS BASED ON THEIR

COMPARISON OF THE ORGANIZATION'S PAY STRUCTURE TO SALARY SURVEYS IN ITS

INDUSTRY AND SIZE. THE BOARD APPROVED THE RECOMMENDATIONS.