

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Department of the Treasury
Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

A For the 2020 calendar year, or tax year beginning **JUL 1, 2020** and ending **JUN 30, 2021**

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization ECHOING GREEN, INC. Doing business as Number and street (or P.O. box if mail is not delivered to street address) Room/suite 462 7TH AVENUE, 13TH FLOOR City or town, state or province, country, and ZIP or foreign postal code NEW YORK, NY 10018	D Employer identification number 13-3424419 E Telephone number 212-689-1165
F Name and address of principal officer: CHERYL DORSEY SAME AS C ABOVE		G Gross receipts \$ 65,603,010. H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions H(c) Group exemption number ▶
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		
J Website: ▶ WWW.ECHOINGGREEN.ORG		
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		L Year of formation: 1987 M State of legal domicile: NY

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: ASSISTING TOP EMERGING SOCIAL ENTREPRENEURS TO CREATE INNOVATIVE SOCIAL CHANGE WORLDWIDE. 2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets. 3 Number of voting members of the governing body (Part VI, line 1a) 3 24 4 Number of independent voting members of the governing body (Part VI, line 1b) 4 23 5 Total number of individuals employed in calendar year 2020 (Part V, line 2a) 5 35 6 Total number of volunteers (estimate if necessary) 6 990 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a 0. 7b Net unrelated business taxable income from Form 990-T, Part I, line 11 7b 0.																									
Revenue	<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th style="text-align: right;">Prior Year</th> <th style="text-align: right;">Current Year</th> </tr> </thead> <tbody> <tr> <td>8 Contributions and grants (Part VIII, line 1h)</td> <td style="text-align: right;">9,576,654.</td> <td style="text-align: right;">55,487,644.</td> </tr> <tr> <td>9 Program service revenue (Part VIII, line 2g)</td> <td style="text-align: right;">50,000.</td> <td style="text-align: right;">128,290.</td> </tr> <tr> <td>10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)</td> <td style="text-align: right;">16,714.</td> <td style="text-align: right;">-311,041.</td> </tr> <tr> <td>11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)</td> <td style="text-align: right;">27,125.</td> <td style="text-align: right;">28,579.</td> </tr> <tr> <td>12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)</td> <td style="text-align: right;">9,670,493.</td> <td style="text-align: right;">55,333,472.</td> </tr> </tbody> </table>		Prior Year	Current Year	8 Contributions and grants (Part VIII, line 1h)	9,576,654.	55,487,644.	9 Program service revenue (Part VIII, line 2g)	50,000.	128,290.	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	16,714.	-311,041.	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	27,125.	28,579.	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	9,670,493.	55,333,472.							
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Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer SHARYANNE MCSWAIN, CHIEF OPERATING OFFICER Type or print name and title	Date
Paid Preparer Use Only	Print/Type preparer's name JENNIFER COATES	Preparer's signature Date Check if self-employed <input type="checkbox"/> PTIN P02247728
	Firm's name ▶ LUTZ AND CARR, CPAS LLP Firm's address ▶ 551 FIFTH AVENUE, SUITE 400 NEW YORK, NY 10176	Firm's EIN ▶ 13-1655065 Phone no. 212-697-2299

May the IRS discuss this return with the preparer shown above? See instructions Yes No

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission: ECHOING GREEN IDENTIFIES TOMORROW'S TRANSFORMATIONAL LEADERS TODAY. THROUGH ITS FELLOWSHIPS AND OTHER INNOVATIVE LEADERSHIP INITIATIVES, ECHOING GREEN SPOTS EMERGING LEADERS AND INVESTS DEEPLY IN THEIR SUCCESS TO ACCELERATE THEIR IMPACT. EG HAS BEEN AHEAD OF THE CURVE FOR

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [] Yes [X] No If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [] Yes [X] No If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 5,654,067. including grants of \$ 2,583,308.) (Revenue \$) FELLOWSHIP AND ALUMNI PROGRAM

ECHOING GREEN'S FELLOWSHIP PROGRAM IDENTIFIES A DIVERSE GROUP OF SOCIAL IMPACT ENTREPRENEURS, INVESTS MILLIONS OF DOLLARS INTO SEED FUNDING AND HAS BUILT A NETWORK OF MORE THAN 800+ BEST-IN-CLASS SOCIAL ENTREPRENEURS WORLDWIDE WITH DEEP FOCUS ON COMMUNITIES OF COLOR AND RACIAL EQUITY. IN SUPPORTING ALUMNI, ECHOING GREEN PROVIDES FOLLOW-ON FUNDING GRANTS, NEARLY \$1M, AS AN ADDITIONAL CAPITAL INVESTMENT TO LEADERS BATTLING RACIAL INEQUITY. IN ADDITION, ECHOING GREEN HAS PROVIDED EMERGENCY GRANTS TO FELLOWS AS THE COVID-19 GLOBAL PANDEMIC HAS EXACERBATED LONG STANDING STRUCTURAL INEQUITIES IMPACTING VULNERABLE COMMUNITIES-INCLUDING PEOPLE OF COLOR AND OTHER

4b (Code:) (Expenses \$ 1,060,218. including grants of \$) (Revenue \$ 28,579.) THOUGHT LEADERSHIP

THOUGHT LEADERSHIP WILL SUPPORT ECHOING GREEN'S MISSION TO ADVANCE GLOBAL EQUITY AND SUSTAINABILITY BY INCREASING OUR IMPACT POTENTIAL AND INFLUENCING THE FIELDS OF SOCIAL INNOVATION AND PHILANTHROPY TO MOVE SIGNIFICANT RESOURCES AND SHIFT POWER TO PROXIMATE LEADERS AND THEIR COMMUNITIES.

4c (Code:) (Expenses \$ 210,482. including grants of \$) (Revenue \$ 128,290.) EMPLOYEE ENGAGEMENT

ECHOING GREEN CREATES OPPORTUNITIES FOR CORPORATE EMPLOYEES TO ENGAGE IN BUILDING A MULTI-RACIAL, MULTI-GENERATIONAL AND CROSS-SECTOR COALITION TO DISMANTLE STRUCTURAL RACISM. CORPORATE EMPLOYEES WILL GAIN AWARENESS OF SOCIAL INNOVATION'S ROLE IN FURTHERING RACIAL EQUITY, USE THEIR SKILLS AND EXPERTISE TO MEANINGFULLY CONTRIBUTE TO THE RACIAL EQUITY MOVEMENT. ECHOING GREEN HOSTS SENIOR LEADERSHIP BOARD TRAINING WORKSHOPS, INNOVATOR TALKS, BRAIN TRUST SERIES AND INVITES CORPORATE EMPLOYEES TO PARTICIPATE IN REVIEWING FELLOWSHIP APPLICATIONS.

4d Other program services (Describe on Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses 6,924,767.

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	1 X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ?	2 X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>	3	X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	4	X
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>	5	X
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>	6	X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7	X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	8	X
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>	9	X
10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If "Yes," complete Schedule D, Part V</i>	10 X	
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	11a X	
b Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>	11b	X
c Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>	11c	X
d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>	11d	X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	11e X	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	11f	X
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	12a X	
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>	12b	X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>	13	X
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a	X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>	14b X	
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>	15 X	
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>	16	X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i>	17 X	
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18	X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>	19	X
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20a	X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	21 X	

Part IV Checklist of Required Schedules (continued)

	Yes	No
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	X	
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
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?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>		X
26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>		X
27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i>		X
b A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i>		X
c A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	X	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>		X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	X	

Note: All Form 990 filers are required to complete Schedule O

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

	Yes	No
1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		

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

Table with columns for question number, question text, and Yes/No response boxes. Includes questions 2a through 16 regarding employee counts, tax returns, unrelated business income, foreign accounts, prohibited transactions, and charitable contributions.

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

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

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.		
1a	24		
b	Enter the number of voting members included on line 1a, above, who are independent		
1b	23		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	X	
b	Each committee with authority to act on behalf of the governing body?		X
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O		X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		
10b			
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	X	
12c		X	
13	Did the organization have a written whistleblower policy?	X	
14	Did the organization have a written document retention and destruction policy?	X	
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?		
a	The organization's CEO, Executive Director, or top management official	X	
b	Other officers or key employees of the organization	X	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		
16b			

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed **NY**
- 18** Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website Another's website Upon request Other (explain on Schedule O)
- 19** Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records **SHARYANNE MCSWAIN - 212-689-1165**
462 7TH AVENUE, 13TH FLOOR, NEW YORK, NY 10018

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

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

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

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

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

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) MARIE KELLY CO-CHAIR	1.00	X		X				0.	0.	0.
(2) CARTER MCCLELLAND CO-CHAIR	1.00	X		X				0.	0.	0.
(3) MARC SAIONTZ TREASURER	1.00	X		X				0.	0.	0.
(4) CHERYL DORSEY PRESIDENT	40.00	X		X			229,799.	0.	16,894.	
(5) PEGGY SEGAL SECRETARY	1.00	X		X				0.	0.	0.
(6) MAYA AJMERA BOARD MEMBER	1.00	X						0.	0.	0.
(7) ESTHER T. BENJAMIN BOARD MEMBER	1.00	X						0.	0.	0.
(8) ROBERT CHINA BOARD MEMBER	1.00	X						0.	0.	0.
(9) GUY DE CHAZAL BOARD MEMBER	1.00	X						0.	0.	0.
(10) DAVID HODGSON BOARD MEMBER	1.00	X						0.	0.	0.
(11) DAVID ISSROFF BOARD MEMBER	1.00	X						0.	0.	0.
(12) RAFIQ KALAM ID-DIN BOARD MEMBER	1.00	X						0.	0.	0.
(13) ANDREW KASSOY BOARD MEMBER	1.00	X						0.	0.	0.
(14) WILLIAM M. LEWIS, JR. BOARD MEMBER	1.00	X						0.	0.	0.
(15) JOSHUA MAILMAN BOARD MEMBER	1.00	X						0.	0.	0.
(16) HUGH MOLOTSI BOARD MEMBER	1.00	X						0.	0.	0.
(17) AJAY NAGPAL BOARD MEMBER	1.00	X						0.	0.	0.

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) RAJ PANJABI BOARD MEMBER	1.00	X						0.	0.	0.
(19) DIANA PROPPER DE CALLEJON BOARD MEMBER	1.00	X						0.	0.	0.
(20) ROBBERT VORHOFF BOARD MEMBER	1.00	X						0.	0.	0.
(21) NOAH WALLEY BOARD MEMBER	1.00	X						0.	0.	0.
(22) DANIEL WEISS BOARD MEMBER	1.00	X						0.	0.	0.
(23) LARRY WIESENECK BOARD MEMBER	1.00	X						0.	0.	0.
(24) MELINDA WOLFE BOARD MEMBER	1.00	X						0.	0.	0.
(25) SHARYANNE MCSWAIN CHIEF OPERATING OFFICER	40.00			X				221,582.	0.	17,516.
(26) LAURA WEIDMAN POWERS HEAD OF IMPACT	40.00					X		239,667.	0.	0.
1b Subtotal								691,048.	0.	34,410.
c Total from continuation sheets to Part VII, Section A								538,077.	0.	98,432.
d Total (add lines 1b and 1c)								1,229,125.	0.	132,842.

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

	Yes	No
3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
THE ORR GROUP, 3000 K STREET NW, SUITE E280, WASHINGTON, DC 20007	FUNDRAISING CONSULTING	559,095.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **1**

SEE PART VII, SECTION A CONTINUATION SHEETS

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees <i>(continued)</i>										
(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(27) JANNA OBERDORF VP OF EXTERNAL AFFAIRS	40.00					X		159,909.	0.	30,442.
(28) ELIZABETH MUELLER VP OF THOUGHT LEADERSHIP	40.00					X		143,184.	0.	39,632.
(29) SCOTT BALUM COHEN CREATIVE DIRECTOR	40.00					X		120,570.	0.	17,013.
(30) JOANNA HELOU CHIEF OF STAFF	40.00					X		114,414.	0.	11,345.
Total to Part VII, Section A, line 1c								538,077.		98,432.

Part VIII Statement of Revenue

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

			(A)	(B)	(C)	(D)	
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e	630,158.				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	54,857,486.				
	g Noncash contributions included in lines 1a-1f	1g	\$ 10,269,538.				
	h Total. Add lines 1a-1f			55,487,644.			
Program Service Revenue	2 a PROGRAM REVENUE	Business Code	711190	128,290.	128,290.		
	b						
	c						
	d						
	e						
	f All other program service revenue						
	g Total. Add lines 2a-2f			128,290.			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			68,701.		68,701.	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6 a Gross rents	6a	(i) Real				
			(ii) Personal				
	b Less: rental expenses	6b					
	c Rental income or (loss)	6c					
	d Net rental income or (loss)						
	7 a Gross amount from sales of assets other than inventory	7a	(i) Securities	9,889,796.			
			(ii) Other				
	b Less: cost or other basis and sales expenses	7b	10,269,538.				
c Gain or (loss)	7c	-379,742.					
d Net gain or (loss)			-379,742.		-379,742.		
8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	8a						
b Less: direct expenses	8b						
c Net income or (loss) from fundraising events							
9 a Gross income from gaming activities. See Part IV, line 19	9a						
b Less: direct expenses	9b						
c Net income or (loss) from gaming activities							
10 a Gross sales of inventory, less returns and allowances	10a						
b Less: cost of goods sold	10b						
c Net income or (loss) from sales of inventory							
Miscellaneous Revenue	11 a OTHER INCOME	Business Code	900099	28,579.	28,579.		
	b						
	c						
	d All other revenue						
	e Total. Add lines 11a-11d			28,579.			
12 Total revenue. See instructions			55,333,472.	156,869.	0.	-311,041.	

Part IX Statement of Functional Expenses

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

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

<i>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</i>	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	2,210,492.	2,210,492.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	112,875.	112,875.		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	259,941.	259,941.		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	486,540.	305,012.	132,874.	48,654.
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	2,722,956.	2,042,566.	319,454.	360,936.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	114,120.	87,169.	10,810.	16,141.
9 Other employee benefits	78,776.	65,256.	1,488.	12,032.
10 Payroll taxes	607,627.	463,532.	59,932.	84,163.
11 Fees for services (nonemployees):				
a Management	905,903.	611,377.	288,407.	6,119.
b Legal	9,236.		9,236.	
c Accounting	84,883.		84,883.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17	787,776.			787,776.
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)				
12 Advertising and promotion	11,895.	11,895.		
13 Office expenses	313,868.	215,070.	61,367.	37,431.
14 Information technology				
15 Royalties				
16 Occupancy	559,383.	408,313.	67,129.	83,941.
17 Travel	13,951.	9,417.	3,905.	629.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	163,330.	119,231.	19,600.	24,499.
23 Insurance				
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a OTHER EXPENSES	62,185.	2,387.	13,869.	45,929.
b EVENT FEES & CATERING	8,310.	234.	8,076.	
c				
d				
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	9,514,047.	6,924,767.	1,081,030.	1,508,250.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

Check here if following SOP 98-2 (ASC 958-720)

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	2,480,247.	1	936,008.
	2 Savings and temporary cash investments	3,740,859.	2	21,059,028.
	3 Pledges and grants receivable, net	3,013,935.	3	21,732,215.
	4 Accounts receivable, net		4	
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use	4,923.	8	4,923.
	9 Prepaid expenses and deferred charges	14,707.	9	270,661.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 1,101,000.		
	b Less: accumulated depreciation	10b 992,514.	271,816.	10c 108,486.
	11 Investments - publicly traded securities		11	9,824,339.
	12 Investments - other securities. See Part IV, line 11		12	
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	111,812.	15	111,812.
16 Total assets. Add lines 1 through 15 (must equal line 33)	9,638,299.	16	54,047,472.	
Liabilities	17 Accounts payable and accrued expenses	247,329.	17	606,751.
	18 Grants payable	1,662,017.	18	193,054.
	19 Deferred revenue		19	306,710.
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties	630,158.	24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	239,100.	25	198,643.
	26 Total liabilities. Add lines 17 through 25	2,778,604.	26	1,305,158.
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	3,161,996.	27	24,633,862.
	28 Net assets with donor restrictions	3,697,699.	28	28,108,452.
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances	6,859,695.	32	52,742,314.
33 Total liabilities and net assets/fund balances	9,638,299.	33	54,047,472.	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	55,333,472.
2	Total expenses (must equal Part IX, column (A), line 25)	2	9,514,047.
3	Revenue less expenses. Subtract line 2 from line 1	3	45,819,425.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	6,859,695.
5	Net unrealized gains (losses) on investments	5	-19,556.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	82,750.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	52,742,314.

Part XII Financial Statements and Reporting

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

	Yes	No
1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
b Were the organization's financial statements audited by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? _____ If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.	X	
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? _____		X
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits _____		

Form 990 (2020)

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
▶ Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2020

Open to Public Inspection

Name of the organization **ECHOING GREEN, INC.** Employer identification number **13-3424419**

Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

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

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	6053339.	10510689.	10251358.	9576654.	55487644.	91879684.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	6053339.	10510689.	10251358.	9576654.	55487644.	91879684.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						34182184.
6 Public support. Subtract line 5 from line 4.						57697500.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
7 Amounts from line 4	6053339.	10510689.	10251358.	9576654.	55487644.	91879684.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	7,311.	8,730.	13,315.	16,714.	68,701.	114,771.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	10,913.	2,298.	20,066.	27,125.	28,579.	88,981.
11 Total support. Add lines 7 through 10						92083436.
12 Gross receipts from related activities, etc. (see instructions)					12	445,949.
13 First 5 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						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2020 (line 6, column (f), divided by line 11, column (f)).....	14	62.66 %
15 Public support percentage from 2019 Schedule A, Part II, line 14	15	71.93 %
16a 33 1/3% support test - 2020. 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		<input checked="" type="checkbox"/>
b 33 1/3% support test - 2019. 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		<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2020. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 10% -facts-and-circumstances test - 2019. 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 VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		<input type="checkbox"/>

Part III Support Schedule for Organizations Described in Section 509(a)(2)

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

14 First 5 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

15 Public support percentage for 2020 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2019 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2020 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2019 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2020. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2019. 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

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described in lines 11b and 11c below, the governing body of a supported organization?		
11a		
b A family member of a person described in line 11a above?		
11b		
c A 35% controlled entity of a person described in line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI .		
11c		

Section B. Type I Supporting Organizations

	Yes	No
1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.		
1		
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.		
2		

Section C. Type II Supporting Organizations

	Yes	No
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).		
1		

Section D. All Type III Supporting Organizations

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
1		
2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).		
2		
3 By reason of the relationship described in line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.		
3		

Section E. Type III Functionally Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.			
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.			
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).			
2 Activities Test. Answer lines 2a and 2b below.			
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.		Yes	No
2a			
b Did the activities described in line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.			
2b			
3 Parent of Supported Organizations. Answer lines 3a and 3b below.			
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI .			
3a			
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.			
3b			

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

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

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3.	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8	

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by 0.035.	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	
2	Enter 0.85 of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

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

Section D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required - <i>provide details in Part VI</i>)	5
6	Other distributions (<i>describe in Part VI</i>). See instructions.	6
7	Total annual distributions. Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive (<i>provide details in Part VI</i>). See instructions.	8
9	Distributable amount for 2020 from Section C, line 6	9
10	Line 8 amount divided by line 9 amount	10

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2020	(iii) Distributable Amount for 2020
1 Distributable amount for 2020 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2020 (reasonable cause required - <i>explain in Part VI</i>). See instructions.			
3 Excess distributions carryover, if any, to 2020			
a From 2015			
b From 2016			
c From 2017			
d From 2018			
e From 2019			
f Total of lines 3a through 3e			
g Applied to underdistributions of prior years			
h Applied to 2020 distributable amount			
i Carryover from 2015 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2020 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2020 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2020, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
6 Remaining underdistributions for 2020. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
7 Excess distributions carryover to 2021. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2016			
b Excess from 2017			
c Excess from 2018			
d Excess from 2019			
e Excess from 2020			

Schedule A (Form 990 or 990-EZ) 2020

Part VI

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

Multiple horizontal lines for supplemental information.

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.**
▶ **Attach to Form 990.**

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

OMB No. 1545-0047

2020

Open to Public Inspection

Name of the organization ECHOING GREEN, INC. **Employer identification number** 13-3424419

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?	<input type="checkbox"/> Yes <input type="checkbox"/> No	

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).
 Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area
 Protection of natural habitat Preservation of a certified historic structure
 Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenue included on Form 990, Part VIII, line 1

(ii) Assets included in Form 990, Part X

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:

a Revenue included on Form 990, Part VIII, line 1

b Assets included in Form 990, Part X

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule D (Form 990) 2020

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

- 3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):
- a Public exhibition
 - b Scholarly research
 - c Preservation for future generations
 - d Loan or exchange program
 - e Other _____
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|---------------------------------|--------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No
- b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	239,335.	239,335.	239,335.	239,335.	239,335.
b Contributions					
c Net investment earnings, gains, and losses	113.	3,595.	6,122.	2,245.	954.
d Grants or scholarships					
e Other expenditures for facilities and programs	113.	3,595.	6,122.	2,245.	954.
f Administrative expenses					
g End of year balance	239,335.	239,335.	239,335.	239,335.	239,335.

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment _____ %
 - b Permanent endowment 100 %
 - c Term endowment _____ %
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|--|-----|----|
| (i) Unrelated organizations | | X |
| (ii) Related organizations | | X |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? | | |
- 4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		233,012.	225,811.	7,201.
d Equipment		252,705.	225,756.	26,949.
e Other		615,283.	540,947.	74,336.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				108,486.

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶		

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶		

Part IX Other Assets.

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

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

Part X Other Liabilities.

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) DEFERRED RENT	198,643.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	198,643.

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

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements	1	55,408,388.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	-19,556.
b	Donated services and use of facilities	2b	100,972.
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	-6,500.
e	Add lines 2a through 2d	2e	74,916.
3	Subtract line 2e from line 1	3	55,333,472.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	55,333,472.

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements	1	9,525,769.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	100,972.
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	-89,250.
e	Add lines 2a through 2d	2e	11,722.
3	Subtract line 2e from line 1	3	9,514,047.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5	9,514,047.

Part XIII Supplemental Information.

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

PART V, LINE 4:

INTEREST EARNED ON THE ENDOWMENT FUND IS IMMEDIATELY AVAILABLE FOR USE IN GENERAL OPERATIONS.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

REDUCTION OF PRIOR YEAR RESTRICTED FUNDS -6,500.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

REDUCTION OF PRIOR YEAR GRANT LIABILITY -89,250.

**SCHEDULE F
(Form 990)**

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

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

▶ Attach to Form 990.

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

OMB No. 1545-0047

2020

Open to Public
Inspection

Name of the organization ECHOING GREEN, INC.	Employer identification number 13-3424419
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Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes** **No**

2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	0	0	FISCAL SPONSORSHIP	FELLOWSHIP PROGRAM AND RELATED ACTIVITIES	11,841.
SOUTH ASIA - AFGHANISTAN, BANGLADESH, BHUTAN, INDIA, MALDIVES,	0	0	GRANTING TO INDIVIDUALS AND ORGANIZATIONS ONLY	FELLOWSHIP PROGRAM AND RELATED ACTIVITIES	32,500.
EAST ASIA AND THE PACIFIC	0	0	FISCAL SPONSORSHIP	FELLOWSHIP PROGRAM AND RELATED ACTIVITIES	28,100.
SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	0	0	GRANTING TO INDIVIDUALS AND ORGANIZATIONS ONLY	FELLOWSHIP PROGRAM AND RELATED ACTIVITIES	127,500.
CENTRAL AMERICA AND THE CARRIBBEAN	0	0	GRANTING TO INDIVIDUALS AND ORGANIZATIONS ONLY	FELLOWSHIP PROGRAM AND RELATED ACTIVITIES	25,000.
EAST ASIA AND THE PACIFIC	0	0	GRANTING TO INDIVIDUALS AND ORGANIZATIONS ONLY	FELLOWSHIP PROGRAM AND RELATED ACTIVITIES	25,000.
MIDDLE EAST AND NORTH AFRICA	0	0	GRANTING TO INDIVIDUALS AND ORGANIZATIONS ONLY	FELLOWSHIP PROGRAM AND RELATED ACTIVITIES	10,000.
3 a Subtotal	0	0			259,941.
b Total from continuation sheets to Part I	0	0			0.
c Totals (add lines 3a and 3b)	0	0			259,941.

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

Schedule F (Form 990) 2020

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

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	FOLLOW ON FUNDING	25,000.	WIRE	0.		
		EAST ASIA AND THE PACIFIC	COVID 19 EMERGENCY GRANT	7,500.	WIRE	0.		
		EAST ASIA AND THE PACIFIC	COVID 19 EMERGENCY GRANT	7,500.	WIRE	0.		
		EAST ASIA AND THE PACIFIC	COVID 19 EMERGENCY GRANT	10,000.	WIRE	0.		
		EAST ASIA AND THE PACIFIC	FISCAL SPONSORSHIP	10,000.	WIRE	0.		
		EAST ASIA AND THE PACIFIC	FISCAL SPONSORSHIP	18,100.	WIRE	0.		
		MIDDLE EAST AND NORTH AFRICA	COVID 19 EMERGENCY GRANT	10,000.	WIRE	0.		
		SOUTH ASIA	COVID 19 EMERGENCY GRANT	7,500.	WIRE	0.		

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a tax exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter **7**

3 Enter total number of other organizations or entities **9**

Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)								
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-SAHARAN AFRICA	FISCAL SPONSORSHIP	7,500.	WIRE	0.		
		SUB-SAHARAN AFRICA	COVID 19 EMERGENCY GRANT	7,500.	WIRE	0.		
		SUB-SAHARAN AFRICA	FOLLOW ON FUNDING	10,000.	WIRE	0.		
		SUB-SAHARAN AFRICA	FOLLOW ON FUNDING	25,000.	WIRE	0.		
		SUB-SAHARAN AFRICA	FOLLOW ON FUNDING	25,000.	WIRE	0.		
		SUB-SAHARAN AFRICA	FOLLOW ON FUNDING	25,000.	WIRE	0.		
		SUB-SAHARAN AFRICA	FOLLOW ON FUNDING	25,000.	WIRE	0.		
		SUB-SAHARAN AFRICA	FOLLOW ON FUNDING	10,000.	WIRE	0.		

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.

Part III can be duplicated if additional space is needed.

(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 noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)

Part IV Foreign Forms

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

Schedule F (Form 990) 2020

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

PART I, LINE 2:

FELLOWSHIP PROGRAM: THE ORIGINAL APPLICATION SPECIFIES THE DESIGNATED USE OF THE FUNDS. FELLOWS ARE REQUIRED TO SUBMIT 2 OR 3 REPORTS (1 EVERY 6 MONTHS) OVER THE COURSE OF THEIR FELLOWSHIP. THESE REPORTS INCLUDE DESCRIPTIONS OF THE FUNDS SPENT, ACTIVITIES OF THE ENTITY AND FINANCIAL STATEMENTS. IF THERE IS AN EVIDENT DEPARTURE FROM THE ORIGINAL DESIGNATED USE, THE CONTRACT PROVIDES FOR THE RETURN OF GRANT FUNDS TO ECHOING GREEN. FACILITY EXISTS WITHIN THE CONTRACT FOR ECHOING GREEN TO REQUEST EXTRA DETAILED INFORMATION NECESSARY TO PROVE SATISFACTORY EXPENDITURES OF GRANT FUNDS, IN ADDITION TO AN OBLIGATION TO SIGN AN AFFIDAVIT CONFIRMING DETAILS OF THE USE OF FUNDS, IF REQUESTED.

Multiple horizontal lines for additional text entry.

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

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
		(event type)	(event type)	(total number)	(add col. (a) through col. (c))
Revenue	1 Gross receipts				
	2 Less: Contributions				
	3 Gross income (line 1 minus line 2)				
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses				
	10 Direct expense summary. Add lines 4 through 9 in column (d)				
	11 Net income summary. Subtract line 10 from line 3, column (d)				

Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
		1 Gross revenue			
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
7 Direct expense summary. Add lines 2 through 5 in column (d)					
8 Net gaming income summary. Subtract line 7 from line 1, column (d)					

9 Enter the state(s) in which the organization conducts gaming activities: _____
a Is the organization licensed to conduct gaming activities in each of these states? Yes No
b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? Yes No
b If "Yes," explain: _____

- 11 Does the organization conduct gaming activities with nonmembers? Yes No
- 12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming? Yes No
- 13 Indicate the percentage of gaming activity conducted in:

a The organization's facility		13a	%
b An outside facility		13b	%
- 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ _____

Address ▶ _____

- 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No
- b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____
- c If "Yes," enter name and address of the third party:

Name ▶ _____

Address ▶ _____

16 Gaming manager information:

Name ▶ _____

Gaming manager compensation ▶ \$ _____

Description of services provided ▶ _____

Director/officer Employee Independent contractor

17 Mandatory distributions:

- a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No
- b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.

SCHEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISERS:

(I) NAME OF FUNDRAISER: ORR GROUP INC.

(I) ADDRESS OF FUNDRAISER: 3000 K STREET, NW, WASHINGTON, DC 20007

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2020

**Open to Public
Inspection**

Name of the organization **ECHOING GREEN, INC.** Employer identification number **13-3424419**

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
ACCELERATING APPALACHIA PO BOX 3165, 310 S. WINTER STREET MIDWAY, KY 40347	46-3102411	501C3	7,500.	0.			COVID 19 EMERGENCY GRANT
ALIENTO FUND 2264 S. DEERFIELD LN. GILBERT, AZ 85295	840-41-2721	501C3	10,000.	0.			COVID 19 EMERGENCY GRANT
B-360 4003 PINKEY ROAD BALTIMORE, MD 21215	83-0545344	501C3	10,000.	0.			COVID 19 EMERGENCY GRANT
B HOLDING GROUP, LLC 738 SAINT NICHOLAS AVE NEW YORK, NY 10031	45-0611207	N/A	7,500.	0.			COVID 19 EMERGENCY GRANT
BLOCPower 257 WEST 91ST STREET NEW YORK, NY 10024	46-1526893	N/A	7,500.	0.			COVID 19 EMERGENCY GRANT
CENTRAL BROOKLYN ECONOMIC DEV. CORP-INNER CITY GREEN TEAM - 444 THOMAS S. BOYLAND ST, 3RD FL SUITE 301 - BROOKLYN, NY 11212	11-2981085	501C3	7,500.	0.			COVID 19 EMERGENCY GRANT

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **44.**

3 Enter total number of other organizations listed in the line 1 table **26.**

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

Schedule I (Form 990) 2020

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHASING23 YOUTH EMPOWERMENT GROUP 4501 S. CALUMET AVE APT 3N CHICAGO, IL 60653	82-1538521	N/A	7,500.	0.			COVID 19 EMERGENCY GRANT
SOCIAL GOOD FUND - THE HOOD INCUBATOR - 12651 SAN PABLO AVE - RICHMOND, CA 94805	46-1323531	501C3	10,000.	0.			COVID 19 EMERGENCY GRANT
RAHEEM 447 17TH STREET OAKLAND, CA 94612	82-1805718	501C3	10,000.	0.			COVID 19 EMERGENCY GRANT
THE PRAXIS PROJECT INC - SACRED GENERATION - 1900 FRUITVALE AVE, SUITE 3D - OAKLAND, CA 94601	30-0044814	501C3	10,000.	0.			COVID 19 EMERGENCY GRANT
SUMMER HOUSE INSTITUTE 1531 N 7TH STREET UNIT 3 PHILADELPHIA, PA 19122	84-3148804	N/A	7,500.	0.			COVID 19 EMERGENCY GRANT
UNCHAINED STORIES LLC 1869 MINTWOOD PLACE NW #21 WASHINGTON, DC 20009	83-3768717	N/A	7,500.	0.			COVID 19 EMERGENCY GRANT
EMERGING LEADERS IN TECHNOLOGY AND ENGINEERING - 275 MALCOLM X BLVD - NEW YORK, NY 10027	27-4737469	N/A	190,000.	0.			FISCAL SPONSORSHIP
LABORX 88 CHARLES STREET #4 BOSTON, MA 02114	47-4879155	N/A	44,670.	0.			FISCAL SPONSORSHIP
SUMMER HOUSE INSTITUTE 1531 N 7TH STREET UNIT 3 PHILADELPHIA, PA 19122	84-3148805	N/A	432,250.	0.			FISCAL SPONSORSHIP

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNCHAINED STORIES LLC 1870 MINTWOOD PLACE NW #21 WASHINGTON, DC 20009	83-3768718	N/A	218,500.	0.			FISCAL SPONSORSHIP
ANGEL CITY ADVISORS LLC 6141 BARROWS DRIVE LOS ANGELES, CA 90048	83-2837859	N/A	25,000.	0.			FOLLOW ON FUNDING
BE MORE INC 424 WEST 54TH STREET NEW YORK, NY 10019	47-3150292	501C3	25,000.	0.			FOLLOW ON FUNDING
SOCIAL & ENVIRONMENTAL ENTREPRENEURS - CAMP EQUITY - 23564 CALABASAS ROAD SUITE 201 - CALABASAS, CA 91302	95-4116679	501C3	25,000.	0.			FOLLOW ON FUNDING
CENTER FOR CIVIC INNOVATION 135 AUBURN AVE NE, SUITE 222 ATLANTA, GA 30303	26-4096600	501C3	25,000.	0.			FOLLOW ON FUNDING
CHASING23 YOUTH EMPOWERMENT GROUP 4502 S. CALUMET AVE APT 3N CHICAGO, IL 60653	82-1538521	N/A	25,000.	0.			FOLLOW ON FUNDING
COMMUNITY JUSTICE PROJECT INC 3000 BISCAYNE BLVD. SUITE 106 MIAMI, FL 33137	47-2777185	501C3	25,000.	0.			FOLLOW ON FUNDING
CREATIVE REACTION LAB 3547 OLIVE STREET SUITE 301 ST. LOUIS, MO 63103	47-2876860	501C3	25,000.	0.			FOLLOW ON FUNDING
DETROIT JUSTICE CENTER 1420 WASHINGTON BOULEVARD, STE 301 DETROIT, MI 48226	82-2295339	501C3	25,000.	0.			FOLLOW ON FUNDING

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DISCRIMINOLOGY 3015 QUAIL HOLLOW SARASOTA, FL 34235	81-3119776	N/A	25,000.	0.			FOLLOW ON FUNDING
EMERGING LEADERS IN TECHNOLOGY AND ENGINEERING - 275 MALCOLM X BLVD - NEW YORK, NY 10027	27-4737469	N/A	25,000.	0.			FOLLOW ON FUNDING
FREECAP FINANCIAL 172 BRYANT STREET, NW WASHINGTON, DC 20007	85-2517687	N/A	25,000.	0.			FOLLOW ON FUNDING
GOOD CALL 150 COURT STREET, STE 2 BROOKLYN, NY 11201	82-1011857	501C3	25,000.	0.			FOLLOW ON FUNDING
SOCIAL GOOD FUND. INC - HBCUVC 12651 SAN PABLO AVE RICHMOND, CA 94805	46-1323531	501C3	25,000.	0.			FOLLOW ON FUNDING
IFOSTER INC. 10089 EAST ALDER CREEK ROAD TRUCKEE, CA 96161	80-0627614	501C3	10,000.	0.			FOLLOW ON FUNDING
INDIGENOUS HEALTH SOLUTIONS 176 CANADA VILLAGE ROAD SANTE FE, NM 87505	35-2583088	501C3	25,000.	0.			FOLLOW ON FUNDING
LATIN AMERICAN LEADERSHIP FOUNDATION - 9 MARINE DRIVE - VERO BEACH, FL 32960	83-3823621	501C3	10,000.	0.			FOLLOW ON FUNDING
LEAP YEAR 229 PEACHTREE STREET, NE SUITE 725 ATLANTA, GA 30303	81-1224809	501C3	10,000.	0.			FOLLOW ON FUNDING

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LOOP CLOSING 2121 VERMONT AVE NW WASHINGTON, DC 20001	82-2189927	N/A	25,000.	0.			FOLLOW ON FUNDING
MADE IN BROWNSVILLE, INC. DBA YOUTH DESIGN CENTER - 47 BELMONT AVENUE - BROOKLYN, NY 11212	81-0693987	501C3	25,000.	0.			FOLLOW ON FUNDING
MISSION: LAUNCH INC. 711 W. 40TH STREET, SUITE #153 BALTIMORE, MD 21211	45-4633339	501C3	25,000.	0.			FOLLOW ON FUNDING
MORTAR CINCINNATI 1329 VINE STREET CINCINNATI, OH 45202	47-2431620	501C3	25,000.	0.			FOLLOW ON FUNDING
TIDES CENTER - ONE GENERATION 1012 TORNEY AVENUE SAN FRANCISCO, CA 94129	94-3213100	501C3	25,000.	0.			FOLLOW ON FUNDING
PAY OUR INTERNS INC 1001 PENNSYLVANIA AVE NW SUITE#7111 WASHINGTON, DC 20004	81-5324800	501C3	25,000.	0.			FOLLOW ON FUNDING
ROOTS STUDIO 925 FULTON STREET, APT 3 BROOKLYN, NY 11238	81-2839632	N/A	25,000.	0.			FOLLOW ON FUNDING
THE PRAXIS PROJECT INC - SACRED GENERATION - 1900 FRUITVALE AVE, SUITE 3D - OAKLAND, CA 94601	30-0044814	501C3	25,000.	0.			FOLLOW ON FUNDING
SOU SOU INVESTMENT SOLUTIONS 1774 W. ST E WASHINGTON, DC 20020	47-4234332	N/A	10,000.	0.			FOLLOW ON FUNDING

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SUMMER HOUSE INSTITUTE 1531 N 7TH STREET UNIT 3 PHILADELPHIA, PA 19122	84-3148806	N/A	25,000.	0.			FOLLOW ON FUNDING
THE SCHOLARSHIP ACADEMY INC. 215 LAKEWOOD WAY, SUITE 108 ATLANTA, GA 30315	20-3721836	501C3	25,000.	0.			FOLLOW ON FUNDING
TOMORROW'S LEADERS NYC INC. 735 LINCOLN AVENUE BROOKLYN, NY 11208	45-3943245	501C3	25,000.	0.			FOLLOW ON FUNDING
TUJENGE AFRICA FOUNDATION INC 81 WALL STREET NEW HAVEN, CT 06511	81-0996813	501C3	25,000.	0.			FOLLOW ON FUNDING
UNCHAINED STORIES LLC 1871 MINTWOOD PLACE NW #21 WASHINGTON, DC 20009	83-3768719	N/A	10,000.	0.			FOLLOW ON FUNDING
THE PRAXIS PROJECT - VIDA AFROLATINA - 1001 CONNECTICUT AVE NW, SUITE 201 - WASHINGTON, DC 20036	30-0044814	501C3	25,000.	0.			FOLLOW ON FUNDING
VILLAGE OF WISDOM 600 E UMSTEAD STREET DURHAM, NC 27701	47-2060936	501C3	25,000.	0.			FOLLOW ON FUNDING
WEIRD ENOUGH PRODUCTIONS 3639 TRINITY PLACE LITHONIA, GA 30038	82-1118409	N/A	25,000.	0.			FOLLOW ON FUNDING
WITH REASON LLC 1140 WALL STREET #3376 SAN DIEGO, CA 92037	81-3157803	501C3	25,000.	0.			FOLLOW ON FUNDING

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PROFOUND GENTLEMAN 2701-C FREEDOM DRIVE CHARLOTTE, NC 28208	47-2225983	N/A	25,000.	0.			FOLLOW ON FUNDING
B-360 PO BOX 67053 BALTIMORE, MD 21215	83-0545345	501C3	18,214.	0.			PASS THROUGH FUNDING
MOVEMENT STRATEGY CENTER - BROWN BOI - 436 14TH STREET SUITE 425 - OAKLAND, CA 94612	20-1037643	501C3	18,214.	0.			PASS THROUGH FUNDING
METRO SOLUTIONS - DLIVE 18000 WEST NITE MILE ROAD, SUITE 36 SOUTHFIELD, MI 48075	20-0156511	501C3	42,580.	0.			PASS THROUGH FUNDING
LEAP YEAR 230 PEACHTREE STREET, NE SUITE 725 ATLANTA, GA 30303	81-1224809	501C3	60,794.	0.			PASS THROUGH FUNDING
MADE IN BROWNSVILLE, INC. DBA YOUTH DESIGN CENTER - 48 BELMONT AVENUE - BROOKLYN, NY 11212	81-0693987	501C3	18,214.	0.			PASS THROUGH FUNDING
MISSION: LAUNCH INC. 711 W. 40TH STREET, SUITE #153 BALTIMORE, MD 21211	45-4633339	501C3	42,580.	0.			PASS THROUGH FUNDING
URBAN AFFAIRS COALITION - ONESUP 1207 CHESTNUT ST, SUITE 700 PHILADELPHIA, PA 19107	23-7046393	N/A	18,214.	0.			PASS THROUGH FUNDING
SECTOR SOFTWARE 886 HURON ROAD FRANKLIN LAKES, NJ 07417	85-3877120	N/A	18,214.	0.			PASS THROUGH FUNDING

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TASSELTURN 4334 N. HAZEL ST. #1007 CHICAGO, IL 60613	83-1153574	N/A	18,214.	0.			PASS THROUGH FUNDING
BROTHERS EMPOWERED TO TEACH INITIATIVE - 2533 COLUMBUS ST, SUITE 102 - NEW ORLEANS, LA 70119	46-4812536	501C3	9,000.	0.			SOCIAL INNOVATION CHALLENGE
CS EDUCATIONAL SERVICES LLC 3651 S. LINDELL RD. SUITE D692 LAS VEGAS, NV 89103	47-3617212	N/A	20,000.	0.			SOCIAL INNOVATION CHALLENGE
EIGHTFOLD FARMS DC LLC 2315 ELVANS RD SE WASHINGTON, DC 20020	84-4402165	N/A	20,000.	0.			SOCIAL INNOVATION CHALLENGE
HOMEWORKS TRENTON 174 NASSAU STREET, BOX #196 PRINCETON, NJ 08542	81-5218769	501C3	18,000.	0.			SOCIAL INNOVATION CHALLENGE
IMMSCHOOLS P. O. BOX 181029 DALLAS, TX 78218	82-3350805	501C3	9,000.	0.			SOCIAL INNOVATION CHALLENGE
IRONBOUND BOXING & EDUCATION 1 GATEWAY CENTER #120 NEWARK, NJ 07102	81-4215296	501C3	9,000.	0.			SOCIAL INNOVATION CHALLENGE
JOURNI 440 BURROUGHS STREET, #153 DETROIT, MI 48202	47-4047149	501C3	9,000.	0.			SOCIAL INNOVATION CHALLENGE
PIVOT INC 1725 E. BALTIMORE ST BALTIMORE, MD 21231	82-3451911	501C3	9,000.	0.			SOCIAL INNOVATION CHALLENGE

Schedule I (Form 990)

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
FOLLOW ON FUNDING	1	25,000.	0.		
SOCIAL INNOVATION CHALLENGE	3	38,000.	0.		
FISCAL SPONSORSHIP	1	49,875.	0.		

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

PART I, LINE 2:

FELLOWSHIP PROGRAM: THE ORIGINAL APPLICATION SPECIFIES THE DESIGNATED USE OF THE FUNDS. FELLOWS ARE REQUIRED TO SUBMIT 4 REPORTS (1 EVERY 6 MONTHS) OVER THE COURSE OF THEIR FELLOWSHIP. THESE REPORTS INCLUDE DESCRIPTIONS OF THE FUNDS SPENT, ACTIVITIES OF THE ENTITY AND FINANCIAL STATEMENTS. IF THERE IS AN EVIDENT DEPARTURE FROM THE ORIGINAL DESIGNATED USE, THE CONTRACT PROVIDES FOR THE RETURN OF GRANT FUNDS TO ECHOING GREEN. FACILITY EXISTS WITHIN THE CONTRACT FOR ECHOING GREEN TO REQUEST EXTRA DETAILED INFORMATION NECESSARY TO PROVE SATISFACTORY EXPENDITURES OF GRANT FUNDS, IN

Part IV Supplemental Information

ADDITION TO AN OBLIGATION TO SIGN AN AFFIDAVIT CONFIRMING DETAILS OF THE USE OF FUNDS, IF REQUESTED.

ALUMNI PROGRAM: ECHOING GREEN'S ALUMNI PROGRAM AIMS TO SUPPORT THE ORGANIZATION'S GRANTEEES WITH ADDITIONAL TECHNICAL ASSISTANCE AND PEER SUPPORT AFTER THE FUNDING PERIOD IS COMPLETED. ECHOING GREEN PROVIDES PRO-BONO SUPPORT IN THE FORM OF CONNECTING GRANTEEES TO ONE ANOTHER AS PEERS, MENTORS AND ADVISORS, AS WELL AS ACTING AS TRUSTED ADVISORS FOR A SELECT GROUP OF ALUMNI AT KEY INFLECTION POINTS IN THEIR PERSONAL OR PROFESSIONAL LIVES. IN ADDITION, ECHOING GREEN GIVES ITS ALUMNI OPPORTUNITIES TO PARTICIPATE IN THE FELLOW SEARCH AND SELECTION PROCESS.

**SCHEDULE J
(Form 990)**

Compensation Information

OMB No. 1545-0047

2020

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

▶ Attach to Form 990.

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

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

ECHOING GREEN, INC.

Employer identification number

13-3424419

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- | | |
|--|--|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (such as maid, chauffeur, chef) |

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?

3 Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- | | |
|---|--|
| <input checked="" type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input checked="" type="checkbox"/> Form 990 of other organizations | <input type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment?
- b** Participate in or receive payment from a supplemental nonqualified retirement plan?
- c** Participate in or receive payment from an equity-based compensation arrangement?
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.

5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization?
- b** Any related organization?
- If "Yes" on line 5a or 5b, describe in Part III.

6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization?
- b** Any related organization?
- If "Yes" on line 6a or 6b, describe in Part III.

7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III

8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1b		
2		
4a		X
4b		X
4c		X
5a		X
5b		X
6a		X
6b		X
7		X
8		X
9		

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

Schedule J (Form 990) 2020

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) CHERYL DORSEY PRESIDENT	(i)	229,799.	0.	0.	8,669.	8,225.	246,693.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) SHARYANNE MCSWAIN CHIEF OPERATING OFFICER	(i)	221,582.	0.	0.	0.	17,516.	239,098.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) LAURA WEIDMAN POWERS HEAD OF IMPACT	(i)	239,667.	0.	0.	0.	0.	239,667.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) JANNA OBERDORF VP OF EXTERNAL AFFAIRS	(i)	149,909.	10,000.	0.	11,600.	18,842.	190,351.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) ELIZABETH MUELLER VP OF THOUGHT LEADERSHIP	(i)	143,184.	0.	0.	10,654.	28,978.	182,816.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2020

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

- ▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
- ▶ Attach to Form 990.
- ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization **ECHOING GREEN, INC.** Employer identification number **13-3424419**

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded	X	7	10,269,538.	FAIR MARKET VALUE
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ()				
26 Other ()				
27 Other ()				
28 Other ()				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement **29**

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?		X
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		X
b If "Yes," describe in Part II.		
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

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

Schedule M (Form 990) 2020

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

2020

Open to Public
Inspection

Name of the organization

ECHOING GREEN, INC.

Employer identification number

13-3424419

FOR 990, PART I, LINE 5

NUMBER OF VOLUNTEERS

THE NUMBER OF VOLUNTEERS INCLUDES FELLOWSHIP APPLICATION JUDGES AS WELL
AS FELLOWSHIP FINALIST JUDGES.

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

30 YEARS, SUPPORTING VISIONARIES AROUND THE WORLD WHO ARE TRANSFORMING
THEIR COMMUNITIES, ADDRESSING ECONOMIC DEVELOPMENT, RACIAL AND GENDER
EQUITY, ENVIRONMENTAL SUSTAINABILITY, AND MORE. ECHOING GREEN'S
UNPARALLELED COMMUNITY OF TALENT CONSISTS OF 850+ INNOVATORS WHO HAVE
LAUNCHED TEACH FOR AMERICA, CITY YEAR, ONCE ACRE FUND, SKS
MICROFINANCE, PUBLIC ALLIES, AND MORE. THE ORGANIZATION PROVIDES
SEED-FUNDING AND LEADERSHIP DEVELOPMENT TO A NEW CLASS OF FELLOWS EVERY
YEAR AND WELCOMES THEM INTO ITS LIFELONG COMMUNITY OF LEADERS.

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

DISADVANTAGED COMMUNITIES.

FORM 990, PART VI, SECTION A, LINE 1:

THE PURPOSE OF THE EXECUTIVE COMMITTEE IS TO ACT ON SPECIFIC ISSUES ON THE
BOARD'S BEHALF. TO ACCOMPLISH THIS, ITS RESPONSIBILITIES ARE TO ACT FOR THE
BOARD BETWEEN MEETINGS, PROVIDED THAT IT MAY NOT APPROVE OR RECOMMEND TO
MEMBERS THE DISSOLUTION OR MERGER OF ECHOING GREEN'S ASSETS; ELECT, APPOINT
OR REMOVE DIRECTORS OR PERMANENTLY FILL VACANCIES ON THE BOARD OR ANY
COMMITTEE OF THE BOARD; ADOPT, AMEND OR REPEAL THE BYLAWS OR ARTICLES OF

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

Schedule O (Form 990 or 990-EZ) 2020

032211 11-20-20

Name of the organization ECHOING GREEN, INC.	Employer identification number 13-3424419
---	--

INCORPORATION; AMEND ANY COMMITTEE CHARTER OR RESOLUTION OF A BOARD COMMITTEE PREVIOUSLY ESTABLISHED BY THE BOARD; HIRE OR FIRE THE PRESIDENT; APPROVE OR CHANGE THE BUDGET OR ADD OR ELIMINATE PROGRAMS PREVIOUSLY AUTHORIZED BY THE BOARD.

THE EXECUTIVE COMMITTEE CAN MAKE DECISIONS BETWEEN BOARD MEETINGS AND ON BEHALF OF THE ENTIRE BOARD. SUBJECT TO LIMITATIONS ON ITS AUTHORITY ESTABLISHED BY THE BOARD, THE BYLAWS OR LAW, THE EXECUTIVE COMMITTEE SHALL OVERSEE THE PERFORMANCE OF THE PRESIDENT AND MAKE RECOMMENDATIONS TO THE BOARD ON REASONABLE EXECUTIVE COMPENSATION AND RAISES. THE EXECUTIVE COMMITTEE MAY SERVE AS A SOUNDING BOARD FOR THE ORGANIZATION'S TOP MANAGERS. IN ADDITION, THE EXECUTIVE COMMITTEE WILL REVIEW THE DRAFT AUDIT ANNUALLY PRIOR TO A FULL BOARD VOTE FOR APPROVAL. THE REVIEW PROCESS WILL INCLUDE THE AUDITING FIRM OF RECORD.

THE COMMITTEE CONSISTS OF THREE OFFICERS, THREE BOARD MEMBERS AND THE PRESIDENT.

FORM 990, PART VI, SECTION A, LINE 8B:
THE ONLY COMMITTEE WITH AUTHORITY TO ACT ON BEHALF OF THE BOARD (GOVERNING BODY) IS THE EXECUTIVE COMMITTEE. MEETINGS FOR THE EXECUTIVE COMMITTEE ARE NORMALLY HELD ADJACENT TO THE FULL BOARD MEETINGS, BUT ARE NOT DOCUMENTED. TYPICALLY, DECISIONS TAKEN BY THE EXECUTIVE COMMITTEE ARE RATIFIED AT THE NEXT BOARD MEETING AND DOCUMENTED AT THAT TIME.

FORM 990, PART VI, SECTION B, LINE 11B:
THE FORM 990 IN DRAFT FORMAT IS REVIEWED BY THE CHIEF OPERATING OFFICER AND THE FINANCE COMMITTEE, AND IS PROVIDED TO THE BOARD OF DIRECTORS PRIOR TO

Name of the organization

ECHOING GREEN, INC.

Employer identification number

13-3424419

FILING.

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

THE ORGANIZATION REQUESTS THAT BOARD MEMBERS COMPLETE A DETAILED QUESTIONNAIRE THAT COVERS ALL FACETS OF CONFLICTS OF INTEREST, RELATED PARTIES, TRANSACTIONS WITH RELATED PARTIES AND EXCESS BENEFIT TRANSACTIONS. THE ORGANIZATION MAKES ITS BEST EFFORTS TO COLLATE RESPONSES FROM THE BOARD MEMBERS TO THE QUESTIONNAIRE, AND TO ENSURE THAT ALL FACTS REGARDING BUSINESS RELATIONSHIPS ARE KNOWN. THE APPROPRIATE POLICY CONTAINS DETAILS OF THE PROCEDURES FOR ADDRESSING A CONFLICT OF INTEREST. THE PROCEDURE ALLOWS FOR THE INTERESTED PERSON TO PRESENT DETAILS OF THE TRANSACTION FOR THE BOARD TO INVESTIGATE, TO REVIEW POSSIBLE ALTERNATIVES AND TO REACH A CONCLUSION ON THE BEST ROUTE FORWARD. REQUIRED ACTIONS IN THE EVENT OF A POLICY VIOLATION ARE ALSO CONTAINED WITHIN THE POLICY DOCUMENT.

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

THE COMPENSATION OF THE CEO AND COO ARE DETERMINED VIA DISCUSSION AND APPROVAL BY THE EXECUTIVE COMMITTEE. THE COMPENSATION OF OTHER EMPLOYEES IS DETERMINED BY THE CEO AND THE COO TAKING INTO ACCOUNT COMPARABLE SALARIES AT SIMILAR NONPROFITS WITH ADVICE OF THE EXECUTIVE COMMITTEE AND EXTERNAL CONSULTANTS.

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

THE ORGANIZATION'S FINANCIAL STATEMENTS ARE AVAILABLE ON ITS WEBSITE, WWW.ECHOINGGREEN.ORG, AFTER FORMAL APPROVAL. OTHER ORGANIZATIONAL DOCUMENTS ARE MADE AVAILABLE ON REQUEST.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

