## Form 990

### **Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Do not enter social security numbers on this form as it may be made public.

2020
Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

| Αŀ                      | or the                               | 2020 calendar year, or tax year beginning and                                                                            | ending                                  |                                            |                                   |  |  |  |  |
|-------------------------|--------------------------------------|--------------------------------------------------------------------------------------------------------------------------|-----------------------------------------|--------------------------------------------|-----------------------------------|--|--|--|--|
| В                       | Check If<br>applicable               | C Name of organization                                                                                                   |                                         | D Employer identifi                        | cation number                     |  |  |  |  |
|                         | Addre                                | ENVIRONMENTAL WORKS                                                                                                      |                                         |                                            |                                   |  |  |  |  |
|                         | Name<br>chang                        | Doing business as                                                                                                        |                                         | 23-71397                                   | 44                                |  |  |  |  |
| F                       | Initial<br>return<br>Final<br>return | Number and street (or P.O. box if mail is not delivered to street address) 402 15TH AVENUE EAST                          | Room/suite                              | E Telephone numbe<br>206-329-              |                                   |  |  |  |  |
| _                       | termin<br>ated                       |                                                                                                                          | <del>.</del>                            | G Gross receipts \$ 4,713,957              |                                   |  |  |  |  |
| Г                       | Amen                                 |                                                                                                                          |                                         | H(a) Is this a group re                    |                                   |  |  |  |  |
| Η                       | Applic<br>tion                       |                                                                                                                          |                                         | for subordinates? Yes X No                 |                                   |  |  |  |  |
| _                       | pendir                               | SAME AS C ABOVE                                                                                                          |                                         | H(b) Are all subordinates Included? Yes No |                                   |  |  |  |  |
| 1 7                     | Tay av                               | empt status: X 501(c)(3) 501(c) ( ) (insert no.) 4947(a)(1)                                                              | or 527                                  |                                            | list, See instructions            |  |  |  |  |
|                         |                                      | e; WWW.EWORKS.ORG                                                                                                        | <u></u> 967                             | H(c) Group exemption                       |                                   |  |  |  |  |
|                         |                                      | organization: X Corporation Trust Association Other                                                                      | 1 Year                                  |                                            | M State of legal domicile; WA     |  |  |  |  |
|                         | art I                                | Summary                                                                                                                  | 12 1001                                 | 31 10111341011, = 2 · = 1 1                | W Diate of logal ability (1, 1122 |  |  |  |  |
|                         |                                      | Briefly describe the organization's mission or most significant activities: SEE                                          | SCHEDIT                                 | LE O                                       |                                   |  |  |  |  |
| 9                       | Ι'                                   | briefly describe the organization's mission of most significant activities.                                              |                                         |                                            |                                   |  |  |  |  |
| Activities & Governance | 2                                    | Check this box if the organization discontinued its operations or dispos                                                 | sed of more                             | than 25% of its net as                     | sets.                             |  |  |  |  |
| /eri                    | 3                                    | •                                                                                                                        |                                         |                                            | 11                                |  |  |  |  |
| OS                      | 4                                    | Number of independent voting members of the governing body (Part VI, line 1a)                                            |                                         |                                            | 11                                |  |  |  |  |
| о <b>б</b>              | *                                    | Total number of individuals employed in calendar year 2020 (Part V, line 2a)                                             |                                         |                                            | 33                                |  |  |  |  |
| Hes                     | 5                                    |                                                                                                                          |                                         |                                            | 11                                |  |  |  |  |
| E.                      | 9                                    | Total number of volunteers (estimate if necessary)  Total unrelated business revenue from Part VIII, column (C), line 12 |                                         |                                            | 35,373.                           |  |  |  |  |
| Ac                      | / a                                  | Net unrelated business taxable income from Form 990-T. Part I, line 11                                                   |                                         |                                            | 0.                                |  |  |  |  |
|                         | В                                    | net unrelated dusiness texable income from Form \$30-1, Part I, line 11                                                  |                                         | Prior Year                                 | Current Year                      |  |  |  |  |
| Revenue                 |                                      | Contributions and grants // Back VIII. line 1th                                                                          |                                         | 6,128.                                     | 23,941.                           |  |  |  |  |
|                         | I .                                  | Contributions and grants (Part VIII, line 1h)                                                                            |                                         | 4,188,955.                                 | 4,690,011.                        |  |  |  |  |
|                         |                                      | Program service revenue (Part VIII, line 2g)                                                                             |                                         | <del>4,100,333.</del><br><del>-775.</del>  | 5.                                |  |  |  |  |
|                         |                                      | Investment income (Part VIII, column (A), lines 3, 4, and 7d)                                                            |                                         | 3,960.                                     | 0.                                |  |  |  |  |
| _                       |                                      | Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)                                                 | 200000000000000000000000000000000000000 |                                            | 4,713,957.                        |  |  |  |  |
| _                       | 1                                    | Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)                                       |                                         | 4,198,268.                                 |                                   |  |  |  |  |
|                         |                                      | Grants and similar amounts paid (Part IX, column (A), lines 1-3)                                                         |                                         | 29,017.                                    | 0.                                |  |  |  |  |
|                         |                                      | Benefits paid to or for members (Part IX, column (A), line 4)                                                            |                                         | 0.                                         | 0.                                |  |  |  |  |
| 60                      | 15                                   | Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)                                        |                                         | 2,352,367.                                 | 2,509,568.                        |  |  |  |  |
| ž.                      | 16a                                  | Professional fundraising fees (Part IX, column (A), line 11e)                                                            |                                         | 0.                                         | 0.                                |  |  |  |  |
| Expenses                | b                                    | Total fundralsing expenses (Part IX, column (D), line 25)                                                                |                                         | 1 550 000                                  | 0 044 000                         |  |  |  |  |
| Ш                       |                                      | Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)                                                             |                                         | 1,579,833.                                 | 2,241,337.                        |  |  |  |  |
|                         |                                      | Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)                                                | 5.03273653                              | 3,961,217.                                 | 4,750,905.                        |  |  |  |  |
|                         |                                      | Revenue less expenses. Subtract line 18 from line 12                                                                     |                                         | 237,051.                                   | -36,948.                          |  |  |  |  |
| SOF                     |                                      |                                                                                                                          | Be                                      | inning of Current Year                     | End of Year                       |  |  |  |  |
| Net Assets              | 20                                   | Total assets (Part X, line 16)                                                                                           |                                         | 2,051,480.                                 | 2,668,328.                        |  |  |  |  |
| \$                      | 21                                   | Total liabilities (Part X, line 26)                                                                                      |                                         | 420,200.                                   | 1,010,705.                        |  |  |  |  |
| 2                       | 22                                   | Net assets or find balances. Subtract line 21 from line 20                                                               |                                         | 1,631,280.                                 | 1,657,623.                        |  |  |  |  |
|                         | art II                               | Signature Block                                                                                                          | <del>.</del>                            |                                            |                                   |  |  |  |  |
|                         |                                      | ties of perjury, 1 declare that I have examined this return, including accompanying schedules                            |                                         |                                            | knowledge and belief, it is       |  |  |  |  |
| rue,                    | , correc                             | t, and complete. Declaration of preparer (other than officer) is based on all information of wh                          | ich preparer l                          |                                            |                                   |  |  |  |  |
|                         |                                      | Stable Mines                                                                                                             |                                         | 111/15/21                                  |                                   |  |  |  |  |
| Sig                     | n                                    | Signature of officer                                                                                                     |                                         | Date                                       |                                   |  |  |  |  |
| Her                     | e                                    | JESS ZIMBABWE, EXECUTIVE DIRECTOR                                                                                        |                                         |                                            |                                   |  |  |  |  |
|                         |                                      | Type or print name and title                                                                                             | 1.0                                     | . I                                        | DZINI                             |  |  |  |  |
|                         |                                      | Print/Type preparer's name Preparer's signature                                                                          |                                         | ate Check                                  | PTIN                              |  |  |  |  |
| Paid                    | ı                                    |                                                                                                                          | CPA 1                                   | 1/15/21 self-employ                        |                                   |  |  |  |  |
| Prep                    | Parer                                | Firm's name CLIFTONLARSONALLEN LLP                                                                                       |                                         | Firm's EIN ▶                               | 41-0746749                        |  |  |  |  |
| Jse                     | Only                                 | Firm's address 10700 NORTHUP WAY, SUITE 200                                                                              |                                         |                                            |                                   |  |  |  |  |
|                         |                                      | BELLEVUE, WA 98004                                                                                                       |                                         | Phone no. 42                               | 5-250-6100                        |  |  |  |  |
| Vlay                    | the IF                               | S discuss this return with the preparer shown above? See instructions                                                    |                                         |                                            | X Yes No                          |  |  |  |  |
| _                       |                                      |                                                                                                                          |                                         |                                            |                                   |  |  |  |  |

Form 990 (2020) ENVIRONMENTAL WORKS
Part IV Checklist of Required Schedules

|                                         |                                                                                                                                                                                                                                         |      | Yes   | No       |
|-----------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------|-------|----------|
| 1                                       | ls the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?                                                                                                                                     |      |       | İ        |
|                                         | If "Yes," complete Schedule A                                                                                                                                                                                                           | 1    | X     | 37       |
| 2                                       | is the organization required to complete Schedule B, Schedule of Contributors?                                                                                                                                                          | 2    |       | X        |
| 3                                       | Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for                                                                                                         | _    |       |          |
|                                         | public office? If "Yes," complete Schedule C, Part I                                                                                                                                                                                    | 3    |       | X        |
| 4                                       | Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect                                                                                                        | ١,   | x     |          |
| _                                       | during the tax year? If "Yes," complete Schedule C, Part II                                                                                                                                                                             | 4    |       |          |
| 5                                       | Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or                                                                                                            | 5    |       | х        |
|                                         | similar amounts as defined in Revenue Procedure 98-197 If "Yes," complete Schedule C, Part III                                                                                                                                          | -    |       | _        |
| 6                                       | Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to                                                                                                               |      | -     | x        |
| _                                       | provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I  Did the organization receive or hold a conservation easement, including easements to preserve open space, | 6_   |       |          |
| 7                                       |                                                                                                                                                                                                                                         | 7    |       | x        |
|                                         | the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II.  Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete     | -    |       |          |
| 8                                       |                                                                                                                                                                                                                                         | 8    |       | x        |
|                                         | Schedule D, Part III  Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for                                                                                     |      |       |          |
| 9                                       | amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?                                                                                                               |      |       |          |
|                                         |                                                                                                                                                                                                                                         | 9    |       | Х        |
| 10                                      | If "Yes," complete Schedule D, Part IV  Did the organization, directly or through a related organization, hold assets in donor-restricted endowments                                                                                    | -    |       |          |
| 10                                      |                                                                                                                                                                                                                                         | 10   |       | х        |
| 11                                      | or in quasi endowments? If "Yes," complete Schedule D, Part V  If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X                                              | 10   | 4-1-1 |          |
| • • • • • • • • • • • • • • • • • • • • | as applicable.                                                                                                                                                                                                                          |      |       |          |
| -                                       | Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,                                                                                                             |      |       |          |
| 44.                                     |                                                                                                                                                                                                                                         | 11a  | x     |          |
| h                                       | Part VI  Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total                                                                                                   | 110  |       |          |
|                                         | assets reported in Part X, line 16? If "Yes, * complete Schedule D, Part VII                                                                                                                                                            | 11b  | x     |          |
|                                         | Did the organization report an amount for investments · program related in Part X, line 13, that is 5% or more of its total                                                                                                             |      |       |          |
|                                         | assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII                                                                                                                                                            | 11c  |       | X        |
| d                                       | Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in                                                                                                           |      |       |          |
| -                                       | Part X, line 16? If "Yes," complete Schedule D, Part IX                                                                                                                                                                                 | 11d  | X     |          |
| A                                       | Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X                                                                                                                   | 11e  |       | X        |
| f                                       | Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses                                                                                                                 |      |       |          |
| •                                       | the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X                                                                                                                  | 11f  | х     |          |
| 12a                                     | Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete                                                                                                                     |      |       |          |
|                                         | Schedule D, Parts XI and XII                                                                                                                                                                                                            | 12a  |       | X        |
| b                                       | Was the organization included in consolidated, independent audited financial statements for the tax year?                                                                                                                               |      |       |          |
| _                                       | If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional                                                                                                                   | 12b  | X     |          |
| 13                                      | Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E                                                                                                                                       | 13   |       | X        |
|                                         | Did the organization maintain an office, employees, or agents outside of the United States?                                                                                                                                             | 14a  |       | X        |
|                                         | Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,                                                                                                                 |      |       |          |
|                                         | investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000                                                                                                              |      |       |          |
|                                         | or more? If "Yes," complete Schedule F, Parts I and IV                                                                                                                                                                                  | 14b  |       | _X_      |
| 15                                      | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any                                                                                                               |      |       |          |
|                                         | foreign organization? If "Yes," complete Schedule F, Parts II and IV                                                                                                                                                                    | 15   |       | 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? If "Yes," complete Schedule F, Parts III and IV                                                                                                                                                             | 16   |       | _X       |
| 17                                      | Did the organization report a total of more than \$15,000 of expenses for professional fundralsing services on Part IX,                                                                                                                 |      |       |          |
|                                         | column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I                                                                                                                                                                      | 17   |       | X        |
| 18                                      | Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines                                                                                                            |      |       |          |
|                                         | 1c and 8a? If "Yes," complete Schedule G, Part II                                                                                                                                                                                       | 18   |       | X        |
| 19                                      | Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? # "Yes,"                                                                                                                   |      |       |          |
|                                         | complete Schedule G, Part III                                                                                                                                                                                                           | 19   |       | X        |
| 20a                                     | Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H                                                                                                                                             | 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 17 If "Yes." complete Schedule I, Parts I and II                                                                                                                                       | 21   | 200   | <u>X</u> |
| ****                                    | 19.22.25                                                                                                                                                                                                                                | Form | 35O ( | 2020)    |

| Part IV   Checklist of Required Schedules (continued)   Yes   No                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | Form | 990 (2020) ENVIRONMENTAL WORKS 23-713                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | 9744 | P   | age 4         |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------|-----|---------------|
| 22 Did the organization report more than \$5.000 of grants or other assistance to or for domestic individuals on Part X, column (A), line 27 if "Yes," complete Schedule I, Parts I and III 22 A Schedule I, Parts I and III 24 A Schedule I, Parts I and III 24 A Schedule I, Parts I and III 25 A Schedule I, Parts I II 25 Column I and former officers, direction, instease, key employees, and rightest compensation of the organization survent survey and former officers, direction, instease, key employees, and rightest compensation of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," arrawer lines 26 through 24 and complete Schedule III 24 In year, and the stage of the year, that was issued after December 31, 2002? If "Yes," arrawer lines 26 through 24 and complete Schedule III 14 In year proceeds of tax-exempt bonds beyond a temporary period exception?  of Did the organization marks that in an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?  of Did the organization marks that it repaged in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule I, Part I  25 Schedule I, Part I is the reposted on any of the organization repost any tax-exempt bonds?  Did the organization exerce that it repaged in an excess benefit transaction with a disqualified person of the page and that the transaction has not been reported on any of the organization part of the page and that the transaction has not been reported on any of the organization part of the page and that the transaction has not been reported on any of the organization part of the page and the page and that the transaction has not been reported on any of the organization page and the page and t |      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |      |     |               |
| Part K, column (A), line 2? (f. "Yea," complete Schedule I, Part 1 and III 20 bit the organization assert "yes" to Part VI). Scient On, Inio 3.4, or 5 about compensation of the organization scurrent and former officers, directors, trustees, key employees, and highest compensated employees? (f. "Yes," complete Schedule J 23                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |      | Yes | No            |
| 23 Did the organization answer "Yes" to Part VII, Section A, line 3, 6, or 5 about compensation of the organization around "Yes" to Part VII, Section A, line 3, 6, or 5 about compensation of the organization around in the compensation of the organization around "Yes", complete Schedule I, I "Yes," complete Schedule I, Very, compete Schedule I, Part II (Schedule I, Very II) and schedule I, Part II (Schedule I, Very II) and schedule I, Part II (Schedule I, Part II) and schedule I the organization maintain an escrew account other than a refunding escrew at any time during the year to defease any tax-exempt bond?  did bit the organization maintain an escrew account other than a refunding escrew at any time during the year to defease any tax-exempt bond?  did bit the organization maintain an escrew account other than a refunding escrew at any time during the year?  did bit the organization maintain an escrew account other than a refunding escrewal any time during the year?  did bit the organization exempt bond?  did bit the organization exempt bond?  did bit the organization exempt bett in the agolagin ian escess benefit transaction with a disqualified person during the year?  If yes, complete Schedule I, Part I (Schedule I, Part I) (Schedule I, Part II) (Schedule II) (Schedule II) (Schedule II) (Sch   | 22   | Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |      |     |               |
| and former officens, directors, trustees, key employees, and highest compensated employees? If Y'es, "complete Schedule I, Schedule I, and the service of th   |      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 22   |     | X             |
| Schedule J                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | 23   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |      |     |               |
| 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete \$24a D Did the organization invest any proceeds of tax-exempt bonds beyond a temporary pariod exception?  24a D Did the organization invest any proceeds of tax-exempt bonds beyond a temporary pariod exception?  25a D Did the organization invest any and an accrow account other than a returning escrow at any time during the year to defease any tax-exempt bonds?  25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule I, Part I  25b Is the organization exerce that it engaged in an excess benefit transaction with a disqualified person of uniting the year?  25c Schedule I, Part I  25d I she to reparation exerce 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 experisors? Forms 990 or 990-27? If "Yes," complete Schedule I, Part I  25d D I defend the organization approach or any of these persons? If "Yes," complete from or payables to any current or former officer, director, trustee, key employee, creator or former forms officer, director, trustee, key employee, creator or former officer, director, trustee, key em |      | and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |      |     |               |
| start day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a.  b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?  c Did the organization and that an escrew account other than a refunding secrow at any time during the year to defesse any tax-exempt bonds?  d Did the organization and that an escrew account other than a refunding secrow at any time during the year?  d Did the organization and that an escrew account other than a refunding secrow at any time during the year?  24d 25a Section 50(16(3), 50(16)4), 40, 60(16)4, 40, 60(16)4, 40, 60(16)4, 40, 60(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4, 40(16)4,    |      | Schedule J                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 23   |     | <u>X</u>      |
| Schedule K. If "No." 30 to line 256.  b Did the organization invest any proceeds of tax exempt bonds beyond a temporary period exception?  c Did the organization maintain an escrew account other than a refunding secrew at any time during the year to defesse any tax-exempt bonds?  24d                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 24a  | - 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |      |     |               |
| b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?  c Did the organization mishtain an escrew account other than a refurding secrow 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?  24d                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |      |     | v             |
| 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?  24d   25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "yes, "complete Schedule I. Part I    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-E7? If "Yes," complete Schedule I. Part I    25b X  X bid the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any curent or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity of tamily member of any of these persons? If "Yes," complete Schedule I. Part II    26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any curent or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity of tamily member of any of these persons? If "Yes," complete Schedule I. Part II    27 X  28 Was the organization a party to a business transaction with one of the following parties (see Schedule I. Part II    28 A Lamily member of any individual described in line 28a1 if "Yes," complete Schedule I. Part IV    29 If the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule II    29 X  20 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule II, Part II    20 Did the organization receive contributions of art, historical treasures,    |      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |      |     |               |
| 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(x/3), 501(x/4), and 501(x/52) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule I, Part I b is the organization water that the regaged 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-E27 if "Yes," complete Schedule I, Part I   25b   X    25b   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 of rainly embers of any of these persons? If "Yes," complete Schedule I, Part II   26b   X    27c   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) or family member of any of these persons? If "Yes," complete Schedule I, Part II   27c   X   28b   X   27c      |      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 240  |     | _             |
| d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  23a Section 501(c/3), 501(c)(4), and 501(c)(20) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "yes," complete Schedule 1, Part I                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | C    | •                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 040  |     |               |
| 25a Saction 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |      |     | _             |
| 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-E27 // 'Yes," complete Schedule L, Part I                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 240  |     | $\vdash$      |
| b is the organization evere 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? #*Yes,** complete Schedule L, Part I                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | 25a  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 250  |     | x             |
| that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? // "Yes," complete Schedule L, Part I                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 230  |     |               |
| Schedule L, Part I  25 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? If "Yes," complete Schedule L, Part II 26 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 of circular and entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III 27 X  28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions):  a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV 28B X  b A family member of any Individual described in line 2887 If "Yes," complete Schedule L, Part IV 28B X  c A 35% controlled entity of one or more individuals and/or organizations described in lines 280 or 280? If "Yes," complete Schedule L, Part IV 28B X  29 Did the organization receive more than 255,000 in non-cash contributions? If "Yes," complete Schedule IV 29 X  30 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule IV, Part I 31 X  31 Did the organization liquidate, terminate, or dissolve and ceases operations? If "Yes," complete Schedule IV, Part I 31 X  32 Did the organization of IV (II) is regarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-27 IV "Yes," complete Schedule IV IV IV "Yes," complete Schedule IV IV "Yes," complete Schedule IV IV    | b    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |      |     |               |
| 28 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? If "Yes," complete Schedule L, Part II 28 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 thereol, a grant selection committee member, or to a 35% controlled entity founding an employee thereol or family member of any of these persons? If "Yes," complete Schedule L, Part III 27 X  28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV Instructions, for applicable filing thresholds, conditions, and exceptions):  A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV 28a X  A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If "Yes," complete Schedule L, Part IV 28b X  29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 X  30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 30 X  31 Did the organization inquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31 X  32 Did the organization enabled to any tax-exempt or taxable entity? If "Yes," complete Schedule N, Part I 31 X  33 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part I, III, or IV, and Part V, Iin 1 32 X  34 Was the organization have a controlled entity within the meaning of section \$12(b)(13)? If "Yes," complete Schedule R, Part V, Iin 2 2  35 Did the organization have a contr |      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 25h  |     | X             |
| or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule I., Part II  27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule I., Part IV  28 Was the organization a party to a business transaction with one of the following parties (see Schedule I., Part IVI instructions, for applicable filing thresholds, conditions, and exceptions):  a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If  "Yes," complete Schedule I., Part IVI 288 X  b A family member of any Individual described in line 28a? If "Yes," complete Schedule I., Part IVI 28b X  c A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b7 If  "Yes," complete Schedule I., Part IVI 28b X  29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 X  30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 30 X  31 Did the organization liquidate, terminate, or dissolve and casas operations? If "Yes," complete Schedule N, Part I 31 X  32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II 32 X  33 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 34 X  34 Was the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V II III III III II  | 00   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 200_ |     |               |
| controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II 25 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 fincluding an employee thereof) or family member of any of these persons? If "Yes," complete 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? If "Yes," complete Schedule L, Part IV 25a X  b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV 25b X  c A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If "Yes," complete Schedule L, Part IV 25c X  29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 259 X  30 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 250 X  31 Did the organization individuals, terminate, or dissolve and cease operations? If "Yes," complete Schedule M 250 X  32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II 31 X  33 Did the organization related to any tax-exempt or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II 32 X  34 Was the organization related to any tax-exempt or transfer more than 25% of its net assets? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, Iline 1 35a Did the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, Iline 1 35a Did the organization related to any tax-exempt or schedule R, Part V, Iline 2 35b X  35 Section 501(c/3) organizations. Did the organiza | 20   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |      |     |               |
| 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 fincluding an employee thereof or family member of any of these persons? If "Yes," complete 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? If "Yes," complete 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? If "Yes," complete Schedule L, Part IV Instructions or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV Instructions or instructions? If "Yes," complete Schedule L, Part IV Instructions? If "Yes," complete Schedule Instructions? Instructions? If "Yes," complete Schedule Instructions, instruct   |      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 26   |     | Х             |
| creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III 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? If "Yes," complete Schedule L, Part IV                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 27   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |      |     | $\overline{}$ |
| entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part IV instructions, for applicable filling thresholds, conditions, and exceptions):  a A current or former officer, director, trustes, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV 28a X  b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV 28b X  c A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If "Yes," complete Schedule L, Part IV 28c X  29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 X  30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M, Part I 31 X  31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31 X  32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part I 32 X  33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.77012 and 301.77013? If "Yes," complete Schedule R, Part I 32 X  34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 34 X  35 Did the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 35b X  35 Section 501(c)(3) organizations. Did the organization nake any transfers to an exempt non-charitable related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part V, line 2 36 X  36 Section 501(c)(3) organizations. Order INS Fillings and Tax Compliance  Check if Schedule O contains a response or note to any line in this P  | 21   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |      |     |               |
| 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):  **Pes,** complete Schedule L, Part IV.**  **Pos,** complete Schedule M.**  **Pos,** complete Schedule N.**  **Pos,** complete Schedule R.**  **P   |      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 27   | 2   | X             |
| instructions, for applicable filing thresholds, conditions, and exceptions):  a A current or former officer, director, trustes, key employee, creator or founder, or substantial contributor? If  "Yes," complete Schedule L, Part IV.  b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV.  c A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If  "Yes," complete Schedule L, Part IV.  28c                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | 28   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |      |     |               |
| a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV.  28b X  28b X  28b X  28c A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If "Yes," complete Schedule L, Part IV.  28c X  28d X  28   |      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |      |     |               |
| *Yes,* complete Schedule L, Part IV  b A family member of any individual described in line 28a7 If "Yes,* complete Schedule L, Part IV  c A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b7 If  "Yes,* complete Schedule L, Part IV  28c                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | а    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |      |     |               |
| b A family member of any individual described in line 28a7 # "Yes," complete Schedule L, Part IV  c A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b7 #  "Yes," complete Schedule L, Part IV  28c                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | -    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 28a  |     | X             |
| c A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If  "Yes," complete Schedule I., Part IV  28c X  29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M  29 X  30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M  30 X  31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31 X  31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part I 32 X  32 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I 33 X  33 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 34 X  35 Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a X  36 Section 501(c)(3) organizations. Did the organization make any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 36 X  37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part V, lines 11 A X  38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?  Note: All Form 990 filers are required to complete Schedule O for Part VI, lines 11b and 19?  Yes Nother the number reported in Box 3 of Form 1096. Enter 0- if not applicable 1a  | b    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 28b  |     | X             |
| "Yes," complete Schedule L, Part IV Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I  Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, Iine 1 Did the organization have a controlled entity within the meaning of section 512(b)(13)?  bif "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, Iine 2  Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, Iine 2  Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, Iine 2  36                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |      |     |               |
| Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M  Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M  The organization if quidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I  Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part I  Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I  Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1  Did the organization have a controlled entity within the meaning of section 512(b)(13)?  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 51(c)(13)? If "Yes," complete Schedule R, Part V, line 2  Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?  If "Yes," complete Schedule R, Part V, line 2  Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?  Note: All Form 990 filers are required to complete Schedule O  Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?  Yes No  The Enter the number of Forms W-2G included in line 1a. Enter O- if not applicable  The tert the number of Forms W-2G included in line 1a. Enter O- if not applicable  Death or an                                                                                                                                                                                                                                   |      | ·                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 28c  |     | _             |
| contributions? If "Yes," complete Schedule M                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 29   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 29_  |     | X             |
| contributions? If "Yes," complete Schedule M                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 30   | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |      |     |               |
| Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II  32 X  33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I  34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1  35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?  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)? If "Yes," complete Schedule R, Part V, line 2  36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?  If "Yes," complete Schedule R, Part V, line 2  37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI  38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?  Note: All Form 990 filers are required to complete Schedule O  Check if Schedule O contains a response or note to any line in this Part V  19 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  1 b O                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 30   |     |               |
| Schedule N, Part II  32 X  33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I 33 X  34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 34 X  35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?  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)? If "Yes," complete Schedule R, Part V, line 2 35b X  36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 36 X  37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part V 37 X  38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?  Note: All Form 990 filers are required to complete Schedule O  Check if Schedule O contains a response or note to any line in this Part V  1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 25  b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | 31   | Did the organization liquidate, terminate, or dissolve and cease operations? If *Yes, " complete Schedule N, Part I                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | 31   |     | X             |
| 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I 33 X X 34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 34 X 35 Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35 X 35 X 5 Dif "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 35 X X 5 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 36 X X 5 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part V X 5 X X 5 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O Sc   | 32   | Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |      |     |               |
| sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I  34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, Iine 1  35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?  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)? If "Yes," complete Schedule R, Part V, Iine 2  36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, Iine 2  37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI  38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, Iines 11b and 19?  Note: All Form 990 filers are required to complete Schedule O  Check if Schedule O contains a response or note to any line in this Part V  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  b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 32   |     | <u>X</u>      |
| 34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1  35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?  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)? If "Yes," complete Schedule R, Part V, line 2  36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2  36 X  37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI  38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O  Check if Schedule O contains a response or note to any line in this Part V  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  1b Contains a partnership of tax and the controlled entity in any transaction with a controlled entity in a system of the controlled entity in a system of the controlled entity in any transaction with a controlled entity in a system of the controlled entity in a system of the controlled entity in any transaction with a controlled entity in a system of the controlled entity in a system of the controlled entity in any transaction with a controlled entity in a system of the controlled entity in any transaction with a controlled entity in a system of the controlled entity in any transaction with a controlled entity in a system of the controlled entity in a syste   | 33   | Did the organization own 100% of an entity disregarded as separate from the organization under Regulations                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |      |     |               |
| Part V, line 1  35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?  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)? If "Yes," complete Schedule R, Part V, line 2  35b Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2  36 YX  37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part V III and 19?  Note: All Form 990 filers are required to complete Schedule O  Check if Schedule O contains a response or note to any line in this Part V  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  1a 25  b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable  1b 0                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 33   |     | X             |
| 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?  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)? If "Yes," complete Schedule R, Part V, line 2  35b X  36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2  36 X  37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI  38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?  Note: All Form 990 filers are required to complete Schedule O  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                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 34   | Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |      |     |               |
| 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)? If "Yes," complete Schedule R, Part V, line 2  35b X  36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?  If "Yes," complete Schedule R, Part V, line 2  36 X  37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI  38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?  Note: All Form 990 filers are required to complete Schedule O  Statements Regarding Other IRS Filings and Tax Compliance  Check if Schedule O contains a response or note to any line in this Part V  1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable  1a 25  b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable  1b 0                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |      |     |               |
| within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2  36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?  If "Yes," complete Schedule R, Part V, line 2  36 X  37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI  38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?  Note: All Form 990 filers are required to complete Schedule O  Check if Schedule O contains a response or note to any line in this Part V  10 Statements Regarding Other IRS Filings and Tax Compliance  Check if Schedule O contains a response or note to any line in this Part V  11 Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable  12 Did the organization conduct more than 5% of its activities through an entity that is not a related organization  38 X  4 Yes No                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 35a  | A   | _             |
| Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?  If "Yes," complete Schedule R, Part V, line 2  36 X  37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI  38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?  Note: All Form 990 filers are required to complete Schedule O  Statements Regarding Other IRS Filings and Tax Compliance  Check if Schedule O contains a response or note to any line in this Part V  1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable  1a 25  b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable  1b 0                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | b    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |      |     | v             |
| If "Yes," complete Schedule R, Part V, line 2  36                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 35b  |     | _             |
| Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI  37                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 36   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |      |     | v             |
| and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI  38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?  Note: All Form 990 filers are required to complete Schedule O  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  1b 0                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |      | If "Yes," complete Schedule R, Part V, line 2                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | 36   |     | _             |
| 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197  Note: All Form 990 filers are required to complete Schedule O  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  1b 0                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | 37   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 0.7  |     | Y             |
| Note: All Form 990 filers are required to complete Schedule O  Statements Regarding Other IRS Filings and Tax Compliance  Check if Schedule O contains a response or note to any line in this Part V  Ta 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  18  25  19  10  10  10  10  10  10  10  10  10                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 37   |     |               |
| 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  1b 0                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | 38   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 20   | x   |               |
| 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  1b 0                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Dai  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 1 30 | 42  |               |
| 1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable  1 b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable  1 b 0                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | I al |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |      |     |               |
| 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  1b 0                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |      | Glieck it delication of contains a response of those to any line in this real v                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |      | Yes | No            |
| b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | 4.0  | Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 5    | 100 |               |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |      | Eliter and neutron reported in sent of the | _    |     |               |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |      | Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |      |     |               |

032004 12-23-20

Form 990 (2020)

(gambling) winnings to prize winners?

| Lai | t 4 Statements negariting other in 5 hings and Tax Compilation (continued)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |            |     |       |
|-----|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|-----|-------|
|     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |            | Yes | No    |
| 2a  | Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |            |     |       |
|     | filed for the calendar year ending with or within the year covered by this return 2a 33                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | -          | 37  |       |
| b   | If at least one is reported on line 2a, did the organization file all required federal employment tax returns?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 2b         | X   | -     |
|     | Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |            | v   |       |
|     | Did the organization have unrelated business gross income of \$1,000 or more during the year?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | 3 <u>a</u> | X   |       |
|     | If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 3b_        | Х   |       |
| 4a  | At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |            |     | х     |
|     | financial account in a foreign country (such as a bank account, securities account, or other financial account)?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 4a         |     | _     |
| b   | If "Yes," enter the name of the foreign country                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |            |     |       |
|     | See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |            | -   | x     |
|     | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | 5a         |     | X     |
|     | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 5b_        |     | A     |
| C   | If "Yes" to line 5a or 5b, did the organization file Form 8886-T7                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | 5c         |     |       |
| 6a  | Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |            |     | х     |
|     | any contributions that were not tax deductible as charitable contributions?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 6a         |     |       |
| Ь   | If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | a.         |     |       |
|     | were not tax deductible?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | 6b         |     |       |
| 7   | Organizations that may receive deductible contributions under section 170(c).                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | 7.         |     | x     |
| 8   | Did the organization receive a payment in excess of \$75 made partty as a contribution and partly for goods and services provided to the payor?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | 7a         | _   | A     |
|     | If "Yes," did the organization notify the donor of the value of the goods or services provided?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | 7b         |     |       |
| C   | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | 7-         |     | x     |
|     | to file Form 82827  If "Yes " indicate the number of Forms 8282 filed during the year 7d                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | 7c         |     | A     |
|     | il too, illocate the heart of the second of | 7-         |     | х     |
| 8   | Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | 7e<br>7f   |     | X     |
| f   | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |            |     | 11    |
| 9   | If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 7g_<br>7h  |     |       |
| h   | If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | 711        |     |       |
| 8   | Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | 8          | -   |       |
|     | sponsoring organization have excess business holdings at any time during the year?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | -          | 200 |       |
| 9   | Sponsoring organizations maintaining donor advised funds.  Did the sponsoring organization make any taxable distributions under section 4966?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | 9a         |     |       |
| а   | Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | 9b         |     |       |
| 10  | U a                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | -00        |     |       |
| 10  | Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |            |     |       |
|     | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |            |     |       |
|     | Section 501(c)(12) organizations. Enter:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |            |     |       |
| 11  | Gross income from members or shareholders                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |            |     |       |
|     | Gross income from other sources (Do not net amounts due or paid to other sources against                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |            |     |       |
|     | amounts due or received from them.)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |            | - 0 |       |
| 19a | Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in Ileu of Form 1041?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | 12a        |     |       |
|     | If "Yes," enter the amount of tax-exempt interest received or accrued during the year                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |            |     |       |
| 13  | Section 501(c)(29) qualified nonprofit health insurance issuers.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |            |     |       |
|     | Is the organization licensed to issue qualified health plans in more than one state?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | 13a        |     |       |
| _   | Note: See the instructions for additional information the organization must report on Schedule O.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |            |     |       |
| ь   | Enter the amount of reserves the organization is required to maintain by the states in which the                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |            |     |       |
| _   | organization is licensed to issue qualified health plans                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |            |     |       |
| c   | Enter the amount of reserves on hand                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |            |     |       |
| 14a | Did the organization receive any payments for indoor tanning services during the tax year?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | 14a        |     | Х     |
|     | if "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 14b        |     |       |
| 15  | Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |            |     |       |
|     | excess parachute payment(s) during the year?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | 15         |     | X     |
|     | If "Yes," see instructions and file Form 4720, Schedule N.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |            |     |       |
| 16  | Is the organization an educational institution subject to the section 4968 excise tax on net investment income?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | 16         |     | X     |
|     | If "Yes," complete Form 4720, Schedule O.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |            |     |       |
|     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | -          | OOO | 10000 |

23-7139744 Form 990 (2020) ENVIRONMENTAL WORKS 25-/139/44 Pag
Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response ENVIRONMENTAL WORKS to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. X

| Sec         | tion A. Governing Body and Management                                                                                                                               |        |         |     |
|-------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|---------|-----|
| 000         | don A. Governing Dody and managoment                                                                                                                                |        | Yes     | No  |
| 4-          | Enter the number of voting members of the governing body at the end of the tax year 11                                                                              |        | 163     | 140 |
| 14          | If there are material differences in voting rights among members of the governing body, or if the governing                                                         |        |         |     |
|             | body delegated broad authority to an executive committee or similar committee, explain on Schedule O.                                                               |        |         |     |
| ь           | Enter the number of voting members included on line 1a, above, who are independent 1b 11                                                                            |        | 20      |     |
| _           | Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other                                            |        |         |     |
| 2           |                                                                                                                                                                     | 2      | х       |     |
|             | officer, director, trustee, or key employee?  Did the organization delegate control over management duties customarily performed by or under the direct supervision |        |         |     |
| 3           | of officers, directors, trustees, or key employees to a management company or other person?                                                                         | 3      |         | x   |
|             |                                                                                                                                                                     | 4      | х       | A   |
| 4           | Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?                                                    | 5      | _A      | Х   |
| 5           | Did the organization become aware during the year of a significant diversion of the organization's assets?                                                          | 6      |         | X   |
| 6           | Did the organization have members or stockholders?                                                                                                                  | -0_    |         | Δ.  |
| 7a          | Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or                                                      |        |         | X   |
|             | more members of the governing body?                                                                                                                                 | 7a     |         | Δ.  |
| b           | Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or                                                  | Th.    |         | x   |
| _           | persons other than the governing body?                                                                                                                              | 7b     |         | Α   |
| 8           | Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:                                   |        | v       |     |
| a           | The governing body?                                                                                                                                                 | 8a     | X       |     |
| b           | Each committee with authority to act on behalf of the governing body?                                                                                               | 8b     | X       |     |
| 9           | Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the                                                |        |         | ų.  |
| 0           | organization's mailing address? If "Yes." provide the names and addresses on Schedule O                                                                             | 9      |         | X   |
| Sec         | tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)                                                    |        |         |     |
|             |                                                                                                                                                                     |        | Yes     | No  |
|             | Did the organization have local chapters, branches, or affiliates?                                                                                                  | 10a    |         | A   |
| : 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    |         | X   |
| 11a         |                                                                                                                                                                     | 11a    |         | Α   |
| b           |                                                                                                                                                                     | WE!    | 7.7     |     |
| <b>12</b> a | Did the organization have a written conflict of interest policy? If "No," go to line 13                                                                             | 12a    | X       |     |
| b           | Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?                                 | 12b    | X       |     |
| C           | Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe                                                  |        | 49      |     |
|             | in Schedule O how this was done                                                                                                                                     | 12c    | X       | _   |
| 13          | Did the organization have a written whistleblower policy?                                                                                                           | 13     | X       | _   |
| 14          | Did the organization have a written document retention and destruction policy?                                                                                      | 14     | X       |     |
| 15          | Did the process for determining compensation of the following persons include a review and approval by independent                                                  | -8     |         |     |
|             | persons, comparability data, and contemporaneous substantiation of the deliberation and decision?                                                                   |        |         |     |
|             | The organization's CEO, Executive Director, or top management official                                                                                              | 15a    | X       | 77  |
| b           | Other officers or key employees of the organization                                                                                                                 | 15b    | 40.000  | Х   |
|             | 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                                               |        | AHI     | 77  |
|             | taxable entity during the year?                                                                                                                                     | 16a    |         | Х   |
| 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    |         |     |
| Sec         | tion C. Disclosure                                                                                                                                                  |        |         |     |
| 17          | List the states with which a copy of this Form 990 is required to be filed NONE                                                                                     |        |         |     |
| 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)  | availal | ble |
|             | for public inspection. Indicate how you made these available. Check all that apply.                                                                                 |        |         |     |
|             | Own website Another's website Upon request X 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                                     | financ | ial:    |     |
|             | 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   EILEEN KROTKI - 206-329-8300                       |        |         |     |

402 15TH AVENUE EAST, SEATTLE, 98112 WA

| Form | 990 | (2020) |
|------|-----|--------|

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 employees."
- 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)                                  | (B)               | Jiga                           | 11120                                                         |          | C)                   | iipai                           | ISGU            | (D)             | (E)             | (F)           |
|--------------------------------------|-------------------|--------------------------------|---------------------------------------------------------------|----------|----------------------|---------------------------------|-----------------|-----------------|-----------------|---------------|
| Name and title                       | Average           | (do                            | Position<br>(do not check more than one                       |          | Reportable           | Reportable                      | Estimated       |                 |                 |               |
|                                      | hours per         | box                            | box, unless person is both an officer and a director/trustee) |          | compensation<br>from | compensation from related       | amount of other |                 |                 |               |
|                                      | week<br>(list any | Į.                             |                                                               |          |                      | П                               | Ė               | the             | organizations   | compensation  |
|                                      | hours for         | Individual trustee or director |                                                               |          |                      | 2                               |                 | organization    | (W-2/1099-MISC) | from the      |
|                                      | related           | tre o                          | ustee                                                         |          |                      | ensate                          |                 | (W-2/1099-MISC) |                 | organization  |
|                                      | organizations     | 囂                              | 룓                                                             |          | loyee                | Ē.                              |                 | 1               |                 | and related   |
|                                      | below             | P. C.                          | Institutional brustee                                         | Officer  | Kry employee         | Highest compensated<br>employee | Former          |                 |                 | organizations |
| (1) ROGER TUCKER                     | line)<br>35.00    | Ĕ                              | Ē                                                             | 5        | 2                    | 主品                              | 윤               |                 |                 |               |
| EXECUTIVE DIRECTOR                   | 5.00              | ł                              |                                                               | x        |                      |                                 |                 | 118,100.        | 0.              | 15,915.       |
| (2) WILLIAM SINGER                   | 40.00             | $\vdash$                       |                                                               |          |                      | $\vdash$                        | -               | 110,1000        |                 | 20,020        |
| DIRECTOR OF ARCHITECTURE             | 0.00              |                                |                                                               | x        |                      |                                 |                 | 114,600.        | 0.              | 13,935.       |
| (3) SALLY KNODELL                    | 40.00             | $\vdash$                       |                                                               | -        |                      |                                 |                 |                 |                 |               |
| DIRECTOR OF ARCHITECTURE             | 0.00              |                                |                                                               | x        |                      |                                 |                 | 114,600.        | 0.              | 14,561.       |
| (4) JIM SHANAHAN                     | 40.00             | $\vdash$                       | $\vdash$                                                      |          |                      |                                 | Т               |                 | -               |               |
| SENIOR ARCHITECT                     | 0.00              | 1                              |                                                               |          |                      | x                               |                 | 102,500.        | 0.              | 13,519.       |
| (5) MIKE MACKIE                      | 40.00             |                                |                                                               |          |                      |                                 |                 |                 |                 |               |
| SENIOR PROJECT MANAGER & QUALITY CON | 0.00              | 1                              |                                                               |          |                      | X                               |                 | 101,600.        | 0.              | 3,041.        |
| (6) JEANNE MARIE CORONADO            | 1.00              |                                |                                                               |          | Г                    |                                 |                 |                 |                 |               |
| PRESIDENT                            | 0.25              | X                              |                                                               | X        |                      |                                 |                 | 0.              | 0.              | 0.            |
| (7) BOB PISH                         | 2.00              |                                |                                                               |          |                      |                                 |                 |                 |                 |               |
| VICE PRESIDENT                       | 0.25              | X                              |                                                               | X        |                      |                                 | L_              | 0.              | 0.              | 0.            |
| (8) ANNETTE STRAND                   | 1.00              |                                |                                                               |          |                      |                                 |                 | _               | _               |               |
| TREASURER                            | 0.00              | X                              | _                                                             | X        |                      |                                 |                 | 0.              | 0.              | 0.            |
| (9) ANN MARIE BORYS                  | 1.00              | _                              |                                                               |          |                      |                                 |                 |                 |                 |               |
| SECRETARY                            | 0.00              | X                              |                                                               | X        | _                    | ┡                               | _               | 0.              | 0.              | 0.            |
| (18) DAVID BARLOW                    | 1.00              |                                |                                                               |          |                      |                                 |                 |                 |                 | 0             |
| DIRECTOR                             | 0.25              | X                              | _                                                             | Щ        | L                    | _                               | _               | 0.              | 0.              | 0.            |
| (11) MARK BROWN                      | 1.00              |                                |                                                               |          |                      |                                 |                 | 0.              | 0.              | 0             |
| DIRECTOR                             | 1.00              | X                              | <u> </u>                                                      | _        |                      |                                 | H               | 0.              | 0.              | 0.            |
| (12) LARRY GORTZ                     | 0.00              | x                              |                                                               |          |                      |                                 |                 | 0.              | 0.              | 0.            |
| DIRECTOR                             | 1.00              | Α                              |                                                               | $\vdash$ |                      | ⊢                               | -               |                 | 0.              | 0.            |
| (13) LINDA JOSEPHSON<br>DIRECTOR     | 0.00              | x                              |                                                               |          |                      |                                 |                 | 0.              | 0.              | 0.            |
| (14) TIM SPELMAN                     | 2.00              | Α                              |                                                               | Н        |                      | $\vdash$                        | $\vdash$        | 0.              | 0.              |               |
| DIRECTOR                             | 0.25              | x                              |                                                               |          |                      |                                 |                 | 0.              | 0.              | 0.            |
| (15) ALIX TOWN                       | 1.00              | Ĥ                              | -                                                             | Н        | $\vdash$             | $\vdash$                        | -               | - 0.            | J •             | <u> </u>      |
| DIRECTOR                             | 0.00              | x                              |                                                               |          |                      |                                 |                 | 0.              | 0.              | 0.            |
| (16) BRADLEY WILDRUN                 | 1.00              | <u> </u>                       |                                                               | Н        |                      |                                 |                 |                 | 3.              |               |
| DIRECTOR                             | 0.00              | x                              |                                                               |          |                      |                                 |                 | 0.              | 0.              | 0.            |
|                                      |                   |                                | $\Box$                                                        |          |                      | <b> </b>                        |                 |                 |                 |               |
|                                      |                   |                                |                                                               |          |                      | L                               |                 |                 |                 |               |
|                                      |                   |                                |                                                               |          |                      |                                 |                 |                 |                 | - 000         |

032007 12-23-20

Form 990 (2020)

| Part VII Section A. Officers, Directors, Trus                                                   | tees, Key Em   | ploy                           | ees,                  | and      | d Hig        | ghes                            | st C          | Compensated Employee      | s (continued)                 |          |              |           |     |
|-------------------------------------------------------------------------------------------------|----------------|--------------------------------|-----------------------|----------|--------------|---------------------------------|---------------|---------------------------|-------------------------------|----------|--------------|-----------|-----|
| (A) (B) (C)                                                                                     |                |                                |                       |          |              |                                 |               | (D) (E)                   |                               |          | (F)          |           |     |
| Name and title                                                                                  | Average        | (do not check more than one    |                       |          | 000          | Reportable                      | Reportable    |                           | Estimated                     |          |              |           |     |
|                                                                                                 | hours per      | box                            | unle                  | ss pe    | rson i       | s both                          | an            | compensation              | compensation                  |          |              | ount of   |     |
|                                                                                                 | (list any      |                                | COT ILI               | IO III O | m ecto       | i/trus                          | ree!          | from                      | from related                  |          |              | other     |     |
|                                                                                                 | hours for      | recto                          | l                     |          |              |                                 |               | the organization          | organization<br>(W-2/1099-MIS |          | '            | pensation | ın  |
|                                                                                                 | related        | e or 6                         | <b>.</b>              |          |              | sated                           |               | (W-2/1099-MISC)           | (44-27 1099-1411)             | 30)      |              | anization | n   |
|                                                                                                 | organizations  | truste                         | Ë                     |          | E            | шрег                            |               | (17 27 1000 111100)       |                               |          | _            | related   |     |
|                                                                                                 | below          | Individual trustee or director | Institutional trustee | ਙ        | Cey employee | est co                          | <u> </u>      |                           |                               |          | orga         | nization  | S   |
|                                                                                                 | line)          | age of                         | 딿                     | Officer  | \$           | Highest compensated<br>employee | 를             |                           |                               |          |              |           |     |
|                                                                                                 |                |                                |                       |          |              |                                 |               |                           |                               |          |              |           |     |
|                                                                                                 |                |                                |                       |          | _            |                                 |               |                           |                               |          |              |           |     |
|                                                                                                 |                |                                | L                     |          | L            | $\vdash$                        |               |                           |                               |          |              |           |     |
|                                                                                                 |                |                                |                       |          |              |                                 |               |                           |                               |          |              |           |     |
| -                                                                                               |                |                                |                       |          | Γ            |                                 |               |                           |                               |          |              |           |     |
|                                                                                                 |                | H                              | Н                     |          | $\vdash$     |                                 | H             |                           |                               | -        |              |           | _   |
|                                                                                                 |                |                                |                       |          |              |                                 |               |                           |                               |          |              |           |     |
|                                                                                                 |                |                                |                       |          |              |                                 |               |                           |                               |          |              |           |     |
|                                                                                                 |                |                                |                       |          |              | Н                               |               |                           |                               | $\dashv$ |              |           | _   |
|                                                                                                 |                | Ш                              |                       |          |              |                                 | _             |                           |                               |          |              |           | _   |
|                                                                                                 |                |                                |                       |          |              |                                 |               |                           |                               |          |              |           |     |
|                                                                                                 |                |                                |                       |          |              |                                 |               |                           | -                             | $\neg$   |              |           |     |
| dh Cubhadai                                                                                     |                |                                |                       |          |              | Щ                               |               | 551,400.                  |                               | 0.       | 60           | ,971      |     |
| 1b Subtotal c Total from continuation sheets to Part VII                                        | Section A      |                                |                       |          |              |                                 |               | 0.                        |                               | 0.       | - 00         |           | ) . |
| d Total (add lines 1b and 1c)                                                                   |                |                                |                       |          |              |                                 |               | 551,400.                  |                               | 0.       | 60           | 971       |     |
| 2 Total number of individuals (including but no                                                 |                |                                |                       |          |              |                                 |               | <del></del>               | 000 of reportable             |          |              | ,,,,,,    | -   |
| compensation from the organization                                                              |                | -                              | 11414                 |          |              |                                 |               |                           | ood of roportubic             |          |              |           | 5   |
|                                                                                                 |                |                                |                       |          |              |                                 |               |                           |                               |          |              | Yes N     | lo  |
| 3 Did the organization list any former officer,                                                 |                |                                | -                     |          |              |                                 | _             | •                         | •                             |          | 3            | Η,        | K   |
| line 1a? If "Yes," complete Schedule J for so 4 For any individual listed on line 1a, is the su |                |                                |                       |          |              |                                 |               |                           |                               | ***      | 3            | -         | -   |
| and related organizations greater than \$150                                                    | •              |                                |                       |          |              |                                 |               | •                         | ~                             |          | 4            | ١,        | K   |
| 5 Did any person listed on line 1a receive or a                                                 |                |                                |                       |          |              |                                 |               |                           |                               | 222      | -            | 1 7 10    | 97  |
| rendered to the organization? If "Yes." com                                                     |                |                                |                       |          | -            |                                 |               | -                         |                               |          | 5            | 2         | K   |
| Section B. Independent Contractors                                                              |                |                                |                       |          |              |                                 |               |                           |                               |          |              |           |     |
| 1 Complete this table for your five highest cor                                                 | npensated ind  | eper                           | nder                  | nt co    | ntra         | ctor                            | s th          | nat received more than \$ | 100,000 of comp               | ensati   | ion fro      | T)        |     |
| the organization. Report compensation for t                                                     | he calendar ye | ar e                           | ndin                  | g w      | lth o        | r wit                           | hin           | the organization's tax y  | ear.                          |          |              |           | _   |
| (A)<br>Name and business                                                                        | -dd            |                                |                       |          |              |                                 |               | (B)<br>Description of s   |                               | 0        | (C)<br>ompen |           |     |
| SWENSON SAY FAGET, 2124 T                                                                       |                | ENI                            | TE                    |          |              |                                 | ۲             | STRUCTURAL                | Brvices                       |          | ompen        | Salion    | _   |
| SUITE 100, SEATTLE, WA 98                                                                       |                |                                |                       | •        |              |                                 | г             | ENGINEERING               |                               |          | 416          | ,399      |     |
| SIDER + BYERS ASSOCIATES,                                                                       |                | CKI                            | ER!                   | 501      | N I          |                                 | $\rightarrow$ | MECHANICAL AN             | 1D                            |          |              | ,         | _   |
| STREET, #300, SEATTLE, WA                                                                       | 98109          |                                |                       |          |              |                                 | þ             | ELECTICAL ENG             | SINEER                        |          | 215          | ,955      | j . |
| REID MIDDLETON, 728 1334T                                                                       | H STREE        | T ;                            | SW                    | ,        |              |                                 | ľ             | CIVIL AND STE             | RUCTURAL                      |          |              | _         |     |
| SUITE 200, EVERETT, WA 98                                                                       | 204            |                                |                       |          |              |                                 | _             | ENGINEERING               |                               |          | 113          | ,542      | ! . |
|                                                                                                 |                |                                |                       |          |              |                                 | T             |                           |                               |          |              |           |     |
|                                                                                                 |                |                                |                       |          |              |                                 | 4             |                           |                               |          |              |           | _   |
|                                                                                                 |                |                                |                       |          |              |                                 |               |                           |                               |          |              |           |     |

Total number of independent contractors (including but not limited to those listed above) who received more than

\$100,000 of compensation from the organization

Form 990 (2020) ENVIRONMENTAL WORKS
Part VIII Statement of Revenue

|                                                           |    |   | Check if Schedule O contains a response                                        | or note to any lii | ne in this Part VIII                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                        |                                      |                                                        |
|-----------------------------------------------------------|----|---|--------------------------------------------------------------------------------|--------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------|--------------------------------------|--------------------------------------------------------|
|                                                           |    |   |                                                                                |                    | (A)<br>Total revenue                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | (B) Related or exempt function revenue | (C)<br>Unrelated<br>business revenue | (D) Revenue excluded from tax under sections 512 - 514 |
| 97 00                                                     | 1  | а | Federated campaigns 1a                                                         |                    | The state of the s |                                        | P =                                  |                                                        |
| Contributions, Gifts, Grants<br>and Other Similar Amounts | '  |   |                                                                                |                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                        |                                      |                                                        |
| ع ق                                                       |    |   | Membership dues 1b Fundraising events 1c                                       |                    | Y 13                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                        |                                      |                                                        |
| \$ X                                                      |    |   | Related organizations 1d                                                       |                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                        | 0.00                                 |                                                        |
| <u>ت</u>                                                  |    |   | Government grants (contributions) 1e                                           |                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 2 X 2 2 2 2                            | II II II EVI                         |                                                        |
| E S                                                       |    |   |                                                                                |                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                        |                                      |                                                        |
| 岩草                                                        |    | T | All other contributions, gifts, grants, and similar amounts not included above | 23,941.            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 200 2010                               |                                      |                                                        |
| 등                                                         |    |   |                                                                                | 23,341.            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 5 7 5 1                                | 1//0                                 |                                                        |
| 5 5                                                       |    | _ | Noncash contributions included in lines 1a-1f                                  |                    | 23,941.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                        |                                      |                                                        |
| 0 8                                                       | H  | h | Total. Add lines 1a-1f                                                         | Business Code      | 23,341.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                        |                                      |                                                        |
|                                                           |    |   | ADQUITMEQMIDAL CEDUTCEC                                                        |                    | 4,690,011.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 4 6E4 620                              | 35,373.                              |                                                        |
| CO                                                        | 2  |   | ARCHITECTURAL SERVICES                                                         | 541300             | 4,030,011.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 4,034,036.                             | 35,3/3.                              |                                                        |
| Program Service<br>Revenue                                |    | Ь |                                                                                | -                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                        |                                      |                                                        |
| SE                                                        |    | C |                                                                                |                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                        |                                      |                                                        |
| Zev<br>Zev                                                |    | d |                                                                                | <u> </u>           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                        |                                      |                                                        |
| 0                                                         |    | 8 |                                                                                |                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                        |                                      |                                                        |
| ů.                                                        |    |   | All other program service revenue                                              |                    | 4 600 011                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                        |                                      |                                                        |
|                                                           |    | g | Total. Add lines 2a-2f                                                         |                    | 4,690,011.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                        |                                      |                                                        |
|                                                           | 3  |   | Investment income (including dividends, intere                                 |                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                        |                                      | _                                                      |
|                                                           |    |   | other similar amounts)                                                         |                    | 5.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                        |                                      | 5.                                                     |
|                                                           | 4  |   | Income from investment of tax-exempt bond p                                    |                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                        |                                      |                                                        |
|                                                           | 5  |   | Royalties                                                                      |                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                        |                                      |                                                        |
|                                                           |    |   | (i) Real                                                                       | (ii) Personal      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                        |                                      |                                                        |
|                                                           | 6  | a | Gross rents 6a                                                                 |                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                        |                                      |                                                        |
|                                                           |    | b | Less: rental expenses 6b                                                       |                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                        |                                      |                                                        |
|                                                           |    | C | Rental income or (loss) 6c                                                     | <u> </u>           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                        |                                      |                                                        |
|                                                           |    | d | Net rental income or (loss)                                                    |                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                        |                                      |                                                        |
|                                                           | 7  | 8 | Gross amount from sales of (i) Securities                                      | (ii) Other         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                        | St                                   |                                                        |
| i                                                         |    |   | assets other than inventory 7a                                                 |                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                        |                                      |                                                        |
|                                                           |    | b | Less: cost or other basis                                                      |                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | . 11 1.9"                              |                                      |                                                        |
| 3                                                         |    |   | and sales expenses 7b                                                          |                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                        |                                      |                                                        |
| Ver                                                       |    | C | Gain or (loss) 7c                                                              |                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                        |                                      |                                                        |
| æ                                                         |    |   | Net gain or (loss)                                                             |                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                        |                                      |                                                        |
| Other Revenue                                             | 8  | 8 | Gross income from fundraising events (not                                      |                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                        |                                      |                                                        |
| ఠ                                                         |    |   | including \$ of                                                                |                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                        |                                      |                                                        |
|                                                           |    |   | contributions reported on line 1c). See                                        |                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                        |                                      |                                                        |
|                                                           |    |   | Part IV, line 188a                                                             |                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                        |                                      |                                                        |
|                                                           |    | b | Less: direct expenses8b                                                        |                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                        |                                      |                                                        |
|                                                           |    | C | Net income or (loss) from fundraising events                                   | <u></u>            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                        |                                      |                                                        |
|                                                           | 9  | a | Gross income from gaming activities. See                                       |                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                        |                                      |                                                        |
|                                                           |    |   | Part IV, line 19 9a                                                            |                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                        |                                      |                                                        |
|                                                           |    |   | Less: direct expenses 9b                                                       |                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                        |                                      |                                                        |
|                                                           |    | C | Net income or (loss) from gaming activities                                    |                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                        |                                      |                                                        |
|                                                           | 10 | а | Gross sales of inventory, less returns                                         |                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                        |                                      |                                                        |
|                                                           |    |   | and allowances 10a                                                             |                    | 100 = 11 11                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                        |                                      |                                                        |
|                                                           |    | b | Less: cost of goods sold10b                                                    |                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                        |                                      |                                                        |
|                                                           |    | Ç | Net income or (loss) from sales of inventory                                   |                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                        |                                      |                                                        |
|                                                           |    |   |                                                                                | Business Code      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                        |                                      |                                                        |
| Miscellaneous<br>Revenue.                                 | 11 | a |                                                                                |                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                        |                                      |                                                        |
|                                                           |    | b |                                                                                |                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                        |                                      |                                                        |
| 7 2                                                       |    | C |                                                                                |                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                        |                                      |                                                        |
| E H                                                       |    | ď | All other revenue                                                              |                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                        |                                      |                                                        |
|                                                           |    | e | Total. Add lines 11a-11d                                                       |                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                        |                                      |                                                        |
|                                                           | 12 |   | Total revenue. See instructions                                                |                    | 4,713,957.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 4,654,638.                             | 35,373.                              | 5.                                                     |
|                                                           |    |   |                                                                                |                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                        |                                      | Form 990 (2020)                                        |

032009 12-23-20

Form 990 (2020) ENVIRONMENTAL WORKS
Part IX Statement of Functional Expenses

| Do        | Check if Schedule O contains a response not include amounts reported on lines 6b,                                                                                                                 | (A) Total expenses                    | (B) Program service | (C)<br>Management and | (D)<br>Fundraising |
|-----------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------|---------------------|-----------------------|--------------------|
| 7b,       | 8b, 9b, and 10b of Part VIII.                                                                                                                                                                     | · · · · · · · · · · · · · · · · · · · | expenses            | general expenses      | expenses           |
| 1         | Grants and other assistance to domestic organizations                                                                                                                                             |                                       |                     |                       |                    |
|           | and domestic governments. See Part IV, line 21                                                                                                                                                    |                                       |                     |                       |                    |
| 2         | Grants and other assistance to domestic                                                                                                                                                           |                                       |                     |                       |                    |
|           | Individuals. See Part IV, line 22                                                                                                                                                                 |                                       |                     |                       |                    |
| 3         | Grants and other assistance to foreign                                                                                                                                                            | İ                                     |                     |                       |                    |
|           | organizations, foreign governments, and foreign                                                                                                                                                   |                                       |                     |                       |                    |
|           | individuals. See Part IV, lines 15 and 16                                                                                                                                                         |                                       |                     |                       |                    |
| 4         | Benefits paid to or for members                                                                                                                                                                   |                                       |                     |                       |                    |
| 5         | Compensation of current officers, directors,                                                                                                                                                      | 201 712                               | 212 256             | 125 225               | 2 (01              |
|           | trustees, and key employees                                                                                                                                                                       | 391,712.                              | 213,256.            | 175,775.              | 2,681              |
| 6         | Compensation not included above to disqualified                                                                                                                                                   |                                       |                     |                       |                    |
|           | persons (as defined under section 4958(f)(1)) and                                                                                                                                                 |                                       |                     |                       |                    |
| _         | persons described in section 4958(c)(3)(B)                                                                                                                                                        | 1,780,015.                            | 1,501,941.          | 269,799.              | 8,275              |
| 7         | Other salaries and wages                                                                                                                                                                          | 1,700,013.                            | 1,301,341.          | 403,133.              | 0,275              |
| 8         | Pension plan accruals and contributions (include                                                                                                                                                  | 37,071.                               | 32,100.             | 4,803.                | 168                |
|           | section 401(k) and 403(b) employer contributions)                                                                                                                                                 | 108,127.                              | 94,658.             | 13,008.               | 461                |
| 9         | Other employee benefits                                                                                                                                                                           | 192,643.                              | 153,151.            | 38,529.               | 963                |
| 10        | Payroll taxes                                                                                                                                                                                     | 192,043.                              | 133,131.            | 30,323.               | 703                |
| 11        | Fees for services (nonemployees):                                                                                                                                                                 |                                       | !                   |                       |                    |
| a         | Management                                                                                                                                                                                        | 11,607.                               |                     | 11,607.               |                    |
| b         | Legal                                                                                                                                                                                             | 11,007.                               |                     | 11,007.               |                    |
| C         |                                                                                                                                                                                                   |                                       |                     |                       |                    |
| d         | Lobbying Professional fundraising services. See Part IV, line 17                                                                                                                                  |                                       |                     |                       |                    |
| f         | Investment management fees                                                                                                                                                                        |                                       |                     |                       |                    |
| g         | Other. (If line 11g amount exceeds 10% of line 25,                                                                                                                                                |                                       |                     |                       |                    |
| 9         | column (A) amount, list line 11g expenses on Sch O.)                                                                                                                                              | 107,894.                              | 53,408.             | 53,947.               | 539                |
| 12        | Advertising and promotion                                                                                                                                                                         | 2,671.                                | 2,137.              | 00/20/2               | 534                |
| 13        | Office expenses                                                                                                                                                                                   | 159,908.                              | 127,807.            | 31,984.               | 117.               |
| 14        | Information technology                                                                                                                                                                            |                                       | ==:,==::            | ,                     |                    |
| 15        | Royalties                                                                                                                                                                                         |                                       |                     |                       |                    |
| 16        | Occupancy                                                                                                                                                                                         | 70,240.                               | 55,841.             | 14,048.               | 351.               |
| 17        | Travel                                                                                                                                                                                            | 16,566.                               | 8,200.              | 8,283.                | 83.                |
| 18        | Payments of travel or entertainment expenses                                                                                                                                                      |                                       |                     |                       |                    |
|           | for any federal, state, or local public officials                                                                                                                                                 |                                       |                     |                       |                    |
| 19        | Conferences, conventions, and meetings                                                                                                                                                            |                                       |                     | j                     |                    |
| 20        | Interest                                                                                                                                                                                          | 5,988.                                |                     | 5,988.                |                    |
| 21        | Payments to affiliates                                                                                                                                                                            |                                       |                     |                       |                    |
| 22        | Depreciation, depletion, and amortization                                                                                                                                                         | 55,541.                               | 44,433.             | 11,108.               |                    |
| 23        | Insurance                                                                                                                                                                                         | 70,400.                               | 55,968.             | 14,080.               | 352.               |
| 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.) |                                       |                     |                       |                    |
| а         | PROJECT COSTS                                                                                                                                                                                     | 1,614,930.                            | 1,614,930.          |                       |                    |
| b         | BUSINESS TAXES                                                                                                                                                                                    | 90,097.                               | 90,097.             |                       |                    |
| C         | DUES & LICENSES                                                                                                                                                                                   | 19,749.                               | 19,749.             |                       |                    |
| d         | PROFESSIONAL DEVELOPMEN                                                                                                                                                                           | 7,680.                                | 7,680.              |                       |                    |
|           | All other expenses                                                                                                                                                                                | 8,066.                                | 6,546.              | 1,483.                | 37.                |
| 25        | Total functional expenses. Add lines 1 through 24e                                                                                                                                                | 4,750,905.                            | 4,081,902.          | 654,442.              | 14,561.            |
| <u>26</u> | 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)                                                                                                                                                    |                                       |                     |                       |                    |

| ar                          | T A | Balance Sheet                                                                |                          |     |                                   |
|-----------------------------|-----|------------------------------------------------------------------------------|--------------------------|-----|-----------------------------------|
|                             |     | Check if Schedule O contains a response or note to any line In this Part X   | (A)<br>Beginning of year |     | (B)<br>End of year                |
|                             | 1   | Cash · non-interest-bearing                                                  | 77,298.                  | 1   | 613,902                           |
|                             | 2   | Savings and temporary cash investments                                       | 15,066.                  | 2   | 15,072                            |
|                             | 3   | Pledges and grants receivable, net                                           |                          | 3   |                                   |
|                             | 4   | Accounts receivable, net                                                     |                          | 4   | 1,105,953                         |
|                             | 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      |                          | 259 |                                   |
|                             |     | under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)    |                          | 6   |                                   |
| , l                         | 7   | Notes and loans receivable, net                                              | 9,947.                   | 7   | 9,947                             |
| A.S.S.G.T.S                 | 8   | Inventories for sale or use                                                  |                          | 8   |                                   |
| 2                           | 9   | Prepaid expenses and deferred charges                                        |                          | 9   | 33,550                            |
|                             | 10a | Land, buildings, and equipment: cost or other                                |                          |     |                                   |
|                             |     | basis. Complete Part VI of Schedule D 10a 556,141                            |                          |     |                                   |
|                             | b   | Less: accumulated depreciation 10b 258,051                                   | . 303,601.               | 10c | 298,090                           |
|                             | 11  | Investments · publicly traded securities                                     | 8                        | 11  |                                   |
|                             | 12  | Investments - other securities. See Part IV, line 11                         | 442,303.                 | 12  | 442,303                           |
|                             | 13  | Investments - program-related. See Part IV, line 11                          |                          | 13  |                                   |
|                             | 14  | Intangible assets                                                            | 8                        | 14  |                                   |
|                             | 15  | Other assets. See Part IV, line 11                                           | 84,397.                  | 15  | 149,511                           |
|                             | 16  | Total assets. Add lines 1 through 15 (must equal line 33)                    | 2,051,480.               | 16  | 2,668,328                         |
|                             | 17  | Accounts payable and accrued expenses                                        | 305,473.                 | 17  | 494,601                           |
| ı                           | 18  | Grants payable                                                               |                          | 18  |                                   |
|                             | 19  | Deferred revenue                                                             | 9                        | 19  |                                   |
|                             | 20  | Tax-exempt bond liabilities                                                  | Si                       | 20  |                                   |
|                             | 21  | Escrow or custodial account liability. Complete Part IV of Schedule D        | 8                        | 21  |                                   |
|                             | 22  | Loans and other payables to any current or former officer, director,         |                          |     |                                   |
|                             |     | trustee, key employee, creator or founder, substantial contributor, or 35%   | V == 1                   |     |                                   |
| Liabilities                 |     | controlled entity or family member of any of these persons                   |                          | 22  |                                   |
| ן כּ                        | 23  | Secured mortgages and notes payable to unrelated third parties               |                          | 23  | 99,914                            |
|                             | 24  | Unsecured notes and loans payable to unrelated third parties                 | 0.                       | 24  | 416,190                           |
|                             | 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                                                                | 100.000                  | 25  | 4 040 505                         |
| _                           | 26  | Total liabilities. Add lines 17 through 25                                   | 420,200.                 | 26  | 1,010,705                         |
|                             |     | Organizations that follow FASB ASC 958, check here                           |                          |     |                                   |
| 8                           |     | and complete lines 27, 28, 32, and 33.                                       | 4 604 000                |     | 4 655 600                         |
|                             | 27  | Net assets without donor restrictions                                        |                          | 27  | 1,657,623                         |
|                             | 28  | Net assets with donor restrictions                                           | <u> </u>                 | 28  |                                   |
|                             |     | Organizations that do not follow FASB ASC 958, check here                    |                          |     |                                   |
|                             |     | and complete lines 29 through 33.                                            |                          |     |                                   |
| 2                           | 29  | Capital stock or trust principal, or current funds                           |                          | 29  |                                   |
| 9                           | 30  | Paid-in or capital surplus, or land, building, or equipment fund             |                          | 30  |                                   |
| Net Assets or Fund Balances | 31  | Retained earnings, endowment, accumulated income, or other funds             |                          | 31  | 1 657 603                         |
| 2                           | 32  | Total net assets or fund balances                                            | 1,631,280.               | 32  | 1,657,623                         |
|                             | 33  | Total liabilities and net assets/fund balances                               | 2,051,480.               | 33  | 2,668,328<br>Form <b>990</b> (202 |

| Pa | Reconciliation of Net Assets                                                                                           |           |            |      |              |            |
|----|------------------------------------------------------------------------------------------------------------------------|-----------|------------|------|--------------|------------|
|    | Check if Schedule O contains a response or note to any line in this Part XI                                            |           |            |      | Aires.       |            |
|    |                                                                                                                        |           |            |      |              |            |
| 1  | Total revenue (must equal Part VIII, column (A), line 12)                                                              | 1         |            |      |              | <u>57.</u> |
| 2  | Total expenses (must equal Part IX, column (A), line 25)                                                               | 2         | 4          | ,75  | 0,9          | 05.        |
| 3  | Revenue less expenses. Subtract line 2 from line 1                                                                     | 3         |            | -3   | 6,9          | 48.        |
| 4  | Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))                              | 4         | 1          | , 63 | $1, \bar{2}$ | 80.        |
| 5  | Net unrealized gains (losses) on investments                                                                           | 5         |            |      |              |            |
| 6  | Donated services and use of facilities                                                                                 | 6         |            |      |              |            |
| 7  | Investment expenses                                                                                                    | 7         |            |      |              |            |
| 8  | Prior period adjustments                                                                                               | 8         |            | 6    | 3,2          | 91.        |
| 9  | Other changes in net assets or fund balances (explain on Schedule O)                                                   | 9         |            |      |              | 0.         |
| 10 | Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,                     |           |            |      |              |            |
|    | column (B))                                                                                                            | 10        | 1          | ,65  | 7,6          | 23.        |
| Pa | rt XII Financial Statements and Reporting                                                                              |           |            |      |              |            |
|    | Check if Schedule O contains a response or note to any fine in this Part XII                                           |           |            |      |              | X          |
|    |                                                                                                                        |           |            |      | Yes          | No         |
| 1  | Accounting method used to prepare the Form 990: Cash X Accrual Other                                                   |           |            |      |              |            |
|    | If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule         | <b>D.</b> | _          |      |              |            |
| 2a | Were the organization's financial statements compiled or reviewed by an independent accountant?                        |           |            | 2a   |              | X          |
|    | If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed        | оп а      |            | -    |              |            |
|    | separate basis, consolidated basis, or both:                                                                           |           |            | - 17 |              |            |
|    | Separate basis Consolidated basis Both consolidated and separate basis                                                 |           |            |      |              |            |
| b  | Were the organization's financial statements audited by an independent accountant?                                     | A         | SULLENIA . | 2b   | X            |            |
|    | If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate       |           |            |      |              |            |
|    | consolidated basis, or both:                                                                                           |           |            |      |              |            |
|    | Separate basis X Consolidated basis Both consolidated and separate basis                                               |           |            |      | - 0          |            |
| 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?                         |           | L          | 2c   | X            |            |
|    | If the organization changed either its oversight process or selection process during the tax year, explain on Sche     |           |            |      |              |            |
| За | As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single | gle Audi  | it         |      |              |            |
|    | Act and OMB Circular A-133?                                                                                            |           |            | 3a   |              | X          |
| b  | If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the require   |           |            |      |              |            |
|    | or audits, explain why on Schedule O and describe any steps taken to undergo such audits                               |           |            | 3ь   |              |            |
|    |                                                                                                                        |           |            | Form | 990          | (2020)     |

#### **SCHEDULE A**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

## **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

Employer identification number

ENVIRONMENTAL WORKS 23-7139744 Reason for Public Charity Status. (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, 4 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 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.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 X 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.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type III. Type III. functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations g Provide the following information about the supported organization(s). (HI) Type of organization (vi) Amount of other (i) Name of supported (fi) EIN (v) Amount of monetary YOUR GOVE ing document (described on lines 1-10 organization support (see instructions) support (see instructions) Yes No above (see instructions)) Total

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

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

| Se.  | ction A. Public Support                                   |                       |                     |                     |          |                    |                |
|------|-----------------------------------------------------------|-----------------------|---------------------|---------------------|----------|--------------------|----------------|
| Cale | ndar 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.")                            |                       |                     |                     | ļ        | <u> </u>           |                |
| 2    | Tax revenues levied for the organ-                        |                       |                     |                     |          |                    |                |
|      | ization's benefit and either paid to                      |                       |                     |                     | i        |                    |                |
|      | or expended on its behalf                                 |                       |                     |                     |          |                    |                |
| 3    | The value of services or facilities                       |                       |                     |                     |          |                    |                |
|      | furnished by a governmental unit to                       |                       |                     |                     |          |                    |                |
|      | the organization without charge                           | -7                    |                     |                     | 1        |                    |                |
|      | Total. Add lines 1 through 3                              |                       |                     |                     |          |                    |                |
| 5    | The portion of total contributions                        |                       |                     |                     |          |                    |                |
|      | by each person (other than a                              |                       |                     | 18,8% = 11          |          |                    |                |
|      | governmental unit or publicly                             |                       |                     |                     |          |                    |                |
|      | supported organization) included                          |                       |                     |                     |          |                    |                |
|      | on line 1 that exceeds 2% of the amount shown on line 11. |                       | 1 1 2 2             |                     |          | 1100               |                |
|      |                                                           |                       | 100                 |                     |          |                    |                |
|      | column (f)                                                |                       |                     | -                   |          | 1931               |                |
|      | Public support. Subtract line 5 from line 4.              |                       |                     |                     |          |                    | <u> </u>       |
|      | ndar year (or fiscal year beginning in)                   | (a) 2016              | (b) 2017            | (c) 2018            | (d) 2019 | (e) 2020           | (f) Total      |
|      | Amounts from line 4                                       | (a) 2010              | (5) 2511            | (0) 2010            | (4) 2515 | (6) 2020           | (1) 10121      |
|      | Gross income from interest.                               |                       |                     |                     |          |                    |                |
| •    | dividends, payments received on                           |                       |                     |                     |          |                    |                |
|      | securities loans, rents, royalties,                       |                       |                     |                     |          |                    |                |
|      | and income from similar sources                           |                       |                     |                     |          |                    |                |
| 9    | Net income from unrelated business                        |                       |                     |                     |          | 1                  |                |
|      | activities, whether or not the                            |                       |                     |                     |          |                    |                |
|      | business is regularly carried on                          |                       |                     |                     |          |                    |                |
| 10   | Other income. Do not include gain                         |                       |                     |                     | ĺ        | İ                  |                |
| -    | or loss from the sale of capital                          |                       |                     |                     |          |                    |                |
|      | assets (Explain in Part VI.)                              |                       |                     |                     |          |                    |                |
| 11   | Total support. Add lines 7 through 10                     |                       |                     |                     | 25       |                    |                |
|      | Gross receipts from related activities,                   | etc. (see instruction | ons)                |                     |          | 12                 |                |
|      | First 5 years. If the Form 990 is for the                 | •                     |                     |                     |          | 01(c)(3)           |                |
|      | organization, check this box and stop                     |                       |                     |                     |          |                    |                |
|      | ction C. Computation of Public                            |                       |                     |                     |          |                    |                |
| 14   | Public support percentage for 2020 (lin                   | ne 6, column (f), d   | livided by line 11, | column (f))         |          | 14                 | 9              |
| 15   | Public support percentage from 2019 5                     | Schedule A, Part      | II, line 14         |                     |          | 15                 | 9              |
| 16a  | 33 1/3% support test - 2020. If the or                    | _                     |                     |                     |          |                    |                |
|      | stop here. The organization qualifies a                   | s a publicly supp     | orted organization  |                     |          |                    |                |
| b    | 33 1/3% support test - 2019. If the or                    | -                     |                     |                     |          |                    |                |
|      | and stop here. The organization qualif                    |                       |                     |                     |          |                    |                |
| 17a  | 10% -facts-and-circumstances test -                       | _                     |                     |                     |          |                    |                |
|      | and if the organization meets the facts                   |                       |                     |                     |          | VI how the organiz | ation          |
|      | meets the facts-and-circumstances tes                     | _                     | •                   |                     |          |                    |                |
| b    | 10% -facts-and-circumstances test -                       |                       |                     |                     |          |                    | 10% or         |
|      | more, and if the organization meets the                   |                       |                     |                     |          |                    | . —            |
|      | organization meets the facts-and-circur                   |                       |                     |                     |          |                    |                |
| 18   | Private foundation. If the organization                   | did not check a       | box on line 13, 16  | a, 16b, 17a, or 17b | ·        |                    |                |
|      |                                                           |                       |                     |                     | Sche     | edule A (Form 990  | or 990-EZ) 202 |

# Schedule A (Form 990 or 990-EZ) 2020 ENVIRONMENTAL WORKS 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 falled to qualify under Part II. If the organization falls to qualify under the tests listed below, please complete Part II.)

| Se    | ction A. Public Support                                                                                                         |                            |                        |                       |                     |                      |                 |  |
|-------|---------------------------------------------------------------------------------------------------------------------------------|----------------------------|------------------------|-----------------------|---------------------|----------------------|-----------------|--|
| Cale  | endar year (or fiscal year beginning in)                                                                                        | (a) 2016                   | (b) 2017               | (c) 2018              | (d) 2019            | (e) 2020             | (f) Total       |  |
|       | Glfts, grants, contributions, and                                                                                               | ,_,_                       | ,=,                    |                       |                     |                      |                 |  |
| •     | membership fees received. (Do not                                                                                               |                            |                        |                       |                     |                      |                 |  |
|       | include any "unusual grants.")                                                                                                  | 8,703.                     | 7,413.                 | 10,996.               | 6,128.              | 23,941.              | 57,181.         |  |
| 2     | Gross receipts from admissions,                                                                                                 |                            |                        | <u> </u>              |                     |                      |                 |  |
|       | merchandise sold or services per-                                                                                               |                            |                        |                       |                     |                      |                 |  |
|       | formed, or facilities furnished in                                                                                              |                            |                        |                       |                     |                      |                 |  |
|       | any activity that is related to the<br>organization's tax-exempt purpose                                                        | 2030492.                   | 3064559.               | 3274119.              | 4103721.            | 4678579.             | 17151470.       |  |
| 3     | Gross receipts from activities that                                                                                             |                            |                        |                       |                     |                      |                 |  |
|       | are not an unrelated trade or bus-                                                                                              |                            |                        |                       |                     |                      |                 |  |
|       | iness under section 513                                                                                                         |                            |                        | İ                     |                     |                      |                 |  |
| 4     | Tax revenues levied for the organ-                                                                                              |                            |                        |                       |                     |                      |                 |  |
|       | ization's benefit and either paid to                                                                                            |                            |                        |                       |                     |                      |                 |  |
|       | or expended on its behalf                                                                                                       |                            |                        |                       |                     |                      |                 |  |
| 5     | The value of services or facilities                                                                                             |                            |                        |                       |                     |                      |                 |  |
|       | furnished by a governmental unit to                                                                                             |                            | İ                      |                       |                     |                      |                 |  |
|       | the organization without charge                                                                                                 |                            |                        |                       |                     |                      |                 |  |
| 6     | Total. Add lines 1 through 5                                                                                                    | 2039195.                   | 3071972.               | 3285115.              | 4109849.            | 4702520.             | 17208651.       |  |
|       | Amounts included on lines 1, 2, and                                                                                             |                            |                        |                       |                     |                      |                 |  |
|       | 3 received from disqualified persons                                                                                            |                            |                        |                       |                     |                      | 0.              |  |
| 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                                                       | 1166752.                   | 2026373.               | 1716871.              | 2860298.            | 2483948.             | 10254242.       |  |
| c     | Add lines 7a and 7b                                                                                                             | 1166752.                   | 2026373.               | 1716871.              | 2860298.            | 2483948.             | 10254242.       |  |
|       | Public support. (Subtract line 7c from line 6.)                                                                                 | 1865   S 10 1 1 1 1 1 1    |                        | United the            |                     | THE HELLS            | 6954409.        |  |
| Sec   | ction B. Total Support                                                                                                          |                            |                        |                       |                     |                      |                 |  |
| Cale  | ndar year (or fiscal year beginning in) 🕨                                                                                       | (a) 2016                   | (b) 2017               | (c) 2018              | (d) 2019            | (e) 2020             | (f) Total       |  |
|       | Amounts from line 6                                                                                                             | 2039195.                   | 3071972.               | 3285115.              | 4109849.            | 4702520.             | 17208651.       |  |
|       | Gross income from interest,                                                                                                     |                            |                        |                       |                     |                      |                 |  |
|       | dividends, payments received on securities loans, rents, royalties,                                                             |                            |                        |                       |                     |                      |                 |  |
|       | and income from similar sources                                                                                                 |                            |                        |                       | 13.                 | 5.                   | 18.             |  |
| ь     | Unrelated business taxable income                                                                                               |                            |                        |                       |                     |                      |                 |  |
|       | (less section 511 taxes) from businesses                                                                                        |                            |                        |                       |                     |                      |                 |  |
|       | acquired after June 30, 1975                                                                                                    |                            |                        |                       |                     |                      |                 |  |
| c     | Add lines 10a and 10b                                                                                                           |                            |                        |                       | 13.                 | 5.                   | 18.             |  |
|       | Net income from unrelated business                                                                                              |                            |                        |                       |                     |                      |                 |  |
|       | activities not included in line 10b, whether or not the business is                                                             |                            |                        |                       |                     |                      |                 |  |
|       | regularly carried on                                                                                                            |                            | 3,402.                 |                       | 42,617.             | 35,373.              | 81,392.         |  |
| 12    | Other income. Do not include gain                                                                                               |                            |                        |                       |                     |                      |                 |  |
|       | or loss from the sale of capital assets (Explain in Part VI.)                                                                   |                            | :                      | 4,320.                | 3,960.              |                      | 8,280.          |  |
| 13    | Total support. (Add lines 9, 10c, 11, and 12.)                                                                                  | 2039195.                   | 3075374.               | 3289435.              | 4156439.            | 4737898.             | 17298341.       |  |
| 14    | First 5 years. If the Form 990 is for th                                                                                        | e organization's fir       | st, second, third, f   | ourth, or fifth tax y | ear as a section 50 | 01(c)(3) organizatio | An,             |  |
|       | check this box and stop here                                                                                                    |                            |                        |                       |                     |                      |                 |  |
| Sec   | tion C. Computation of Publi                                                                                                    | c Support Per              | centage                |                       |                     |                      |                 |  |
| 15    | Public support percentage for 2020 (II                                                                                          | ne 8, column (f), di       | vided by line 13, c    | olumn (f))            |                     | 15                   | 40.20 %         |  |
| 16    | Public support percentage from 2019                                                                                             | Schedule A, Part I         | II, line 15            |                       | (T. 10)             | 16                   | 34.50 %         |  |
| Sec   | tion D. Computation of Inves                                                                                                    | tment Income               | Percentage             |                       |                     |                      |                 |  |
| 17    | Investment income percentage for 20                                                                                             | <b>20</b> (line 10c, colum | nn (f), divided by lir | ne 13, column (f))    |                     | 17                   | .00 %           |  |
| 18    | Investment income percentage from 2                                                                                             | 2019 Schedule A, F         | Part III, line 17      |                       |                     | 18                   | %               |  |
|       | 33 1/3% support tests - 2020. If the                                                                                            |                            |                        |                       |                     | 3 1/3%, and line 17  |                 |  |
|       | more than 33 1/3%, check this box an                                                                                            | d stop here. The           | organization qualif    | ies as a publicly su  | pported organizat   | ion                  | <b>▶</b> X      |  |
| b     | 33 1/3% support tests - 2019. If the                                                                                            | organization did no        | ot check a box on      | line 14 or line 19a,  | and line 16 is mor  | e than 33 1/3%, a    | nd              |  |
|       | 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                                                                                         | n did not check a b        | ox on line 14, 19a     | , or 19b, check thi   | s box and see inst  | ructions             | <b>▶</b> □      |  |
| 03202 | 3 01-25-21                                                                                                                      |                            |                        |                       | Sche                | dule A (Form 990     | or 990-EZ) 2020 |  |

Yes No

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

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

|           | Yes   | No   |
|-----------|-------|------|
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| 990 or 99 | 0-EZ) | 2020 |

|     |                                                                                                                                                                                                                                           |           | Yes   | No |
|-----|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|-------|----|
| 11  | Has the organization accepted a gift or contribution from any of the following persons?                                                                                                                                                   |           |       |    |
| а   | A person who directly or indirectly controls, either alone or together with persons described in 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                                                                                                                        |           | IIII. |    |
|     | detail in Part VI.                                                                                                                                                                                                                        | 11c       |       |    |
| Sec | tion 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,                                                                                                             | 100       |       |    |
|     | 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                                                                                                                                       | USE III   | West  |    |
|     | organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in                                                                                                                                | 111       |       |    |
|     | Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,                                                                                                                               |           |       |    |
|     | supervised, or controlled the supporting organization.                                                                                                                                                                                    | 2         | -     |    |
| Sec | tion C. Type II Supporting Organizations                                                                                                                                                                                                  |           |       |    |
|     |                                                                                                                                                                                                                                           |           | Yes   | No |
| 1   | Were a majority of the organization's directors or trustees during the tax year also a majority of the directors                                                                                                                          |           | 100   |    |
| •   | 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                                                                                                                                    | JIR_      |       |    |
|     | the supported organization(s).                                                                                                                                                                                                            | 1 1       |       |    |
| Sec | tion D. All Type III Supporting Organizations                                                                                                                                                                                             |           |       |    |
|     |                                                                                                                                                                                                                                           |           | Yes   | No |
| 1   | Did the organization provide to each of its supported organizations, by the last day of the fifth month of the                                                                                                                            | 3 1 2     |       |    |
| -   | 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                                                                                                                              |           | Y     |    |
|     | supported organizations played in this regard.                                                                                                                                                                                            | 3         |       |    |
| Sec | tion E. Type III Functionally Integrated Supporting Organizations                                                                                                                                                                         | , - ,     |       |    |
| 1   | Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions                                                                                                           | ).        |       |    |
| а   | The organization satisfied the Activities Test. Complete line 2 below.                                                                                                                                                                    | ,-        |       |    |
| b   | The organization is the parent of each of its supported organizations. Complete line 3 below.                                                                                                                                             |           |       |    |
| C   | The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see in                                                                                                                     | struction | e).   |    |
| 2   | Activities Test. Answer lines 2a and 2b below.                                                                                                                                                                                            |           | Yes   | No |
| а   | Did substantially all of the organization's activities during the tax year directly further the exempt purposes of                                                                                                                        |           |       |    |
|     | the supported organization(s) to which the organization was responsive? If "Yes." then in Part VI identify                                                                                                                                | - 13      |       |    |
|     | those supported organizations and explain how these activities directly furthered their exempt purposes,                                                                                                                                  |           |       |    |
|     | how the organization was responsive to those supported organizations, and how the organization determined                                                                                                                                 |           |       |    |
|     | that these activities constituted substantially all of its activities.                                                                                                                                                                    | 2a        |       |    |
| b   | Did the activities described in 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.                                                                                                                                                                          |           |       |    |
|     | Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or                                                                                                                               |           | 3     |    |
| -   | trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.                                                                                                                                             | 3a        |       |    |
| h   | 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        |       |    |
|     |                                                                                                                                                                                                                                           | [         |       |    |

| Pa   | rt V Type III Non-Functionally Integrated 509(a)(3) Supporti                   | ng Organi       | zations                               |                                |
|------|--------------------------------------------------------------------------------|-----------------|---------------------------------------|--------------------------------|
| 1    | Check here if the organization satisfied the Integral Part Test as a qualifyi  | ng trust on N   | lov. 20, 1970 ( <i>explain in</i>     | Part VI). See instructions.    |
|      | All other Type Itl non-functionally integrated supporting organizations mu-    | st complete S   | Sections A through E.                 |                                |
| Sec  | ion A - Adjusted Net Income                                                    |                 | (A) Prior Year                        | (B) Current Year<br>(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               | · · · · · · · · · · · · · · · · · · · |                                |
|      | ion B - Minimum Asset Amount                                                   |                 | (A) Prior Year                        | (B) Current Year<br>(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):              |                 |                                       |                                |
| -    | Average monthly value of securities                                            | 1a              |                                       |                                |
|      | Average monthly cash balances                                                  | 1b              |                                       |                                |
| c    | Fair market value of other non-exempt-use assets                               | 10              |                                       |                                |
| d    | Total (add lines 1a, 1b, and 1c)                                               | 1d              |                                       |                                |
| . 0  | Discount claimed for blockage or other factors                                 | 24 2000         |                                       |                                |
|      | (explain in detail in Part VI):                                                |                 |                                       |                                |
| 2    | Acquisition indebtedness applicable to non-exempt-use assets                   | 2               |                                       |                                |
| _3   | Subtract line 2 from line 1d.                                                  | 3               |                                       | ļ                              |
| 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               |                                       |                                |
| Sect | ion 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    | Check here if the current year is the organization's first as a non-functional | Illy integrated | Type III supporting great             | nization (see                  |
| •    | Instructional                                                                  | ,               |                                       |                                |

Schedule A (Form 990 or 990-EZ) 2020

| Pai      | T V   Type III Non-Functionally integrated 509                  | (a)(3) Supporting Orga        | inizations <sub>(contin</sub>         | ued)     |                                           |
|----------|-----------------------------------------------------------------|-------------------------------|---------------------------------------|----------|-------------------------------------------|
| Secti    | ion D - Distributions                                           |                               |                                       |          | Current Year                              |
| _1_      | Amounts paid to supported organizations to accomplish exe       | mpt purposes                  |                                       | 1        |                                           |
| 2        | Amounts paid to perform activity that directly furthers exemp   | ot purposes of supported      |                                       |          |                                           |
|          | organizations, in excess of income from activity                |                               |                                       | 2        |                                           |
| 3        | Administrative expenses paid to accomplish exempt purpose       | S                             | 3                                     |          |                                           |
| 4        | Amounts paid to acquire exempt-use assets                       |                               | 4                                     |          |                                           |
| _5_      | Qualified set-aside amounts (prior IRS approval required - pri  | 5                             |                                       |          |                                           |
| 6        | Other distributions (describe in Part VI). See instructions.    | 6                             |                                       |          |                                           |
| 7        | Total annual distributions. Add lines 1 through 6.              | <u> </u>                      |                                       | 7        |                                           |
| 8        | Distributions to attentive supported organizations to which the | he organization is responsive | t .                                   | 1 1      |                                           |
|          | (provide details in Part VI). See instructions.                 |                               |                                       | 8        |                                           |
| 9        | Distributable amount for 2020 from Section C, line 6            |                               |                                       | 9        |                                           |
| 10       | Line 8 amount divided by line 9 amount                          |                               |                                       | 10       |                                           |
| Secti    | ion E - Distribution Allocations (see instructions)             | (i)<br>Excess Distributions   | (ii)<br>Underdistribution<br>Pre-2020 | ns       | (iii)<br>Distributable<br>Amount for 2020 |
| 1        | Distributable amount for 2020 from Section C, line 6            |                               | 200                                   |          |                                           |
| 2        | Underdistributions, if any, for years prior to 2020 (reason-    |                               |                                       |          |                                           |
|          | able cause required - explain in Part VI). See instructions.    |                               |                                       |          |                                           |
| 3        | Excess distributions carryover, if any, to 2020                 |                               |                                       |          |                                           |
| а        | From 2015                                                       |                               |                                       | 20/14/22 |                                           |
| b        | From 2016                                                       |                               |                                       |          |                                           |
| С        | From 2017                                                       |                               |                                       |          |                                           |
| d        | From 2018                                                       |                               |                                       | 1        |                                           |
| •        | 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)              |                               | 4                                     |          |                                           |
|          | 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                            |                               |                                       |          |                                           |
| С        | Remainder. Subtract lines 4a and 4b from line 4.                |                               |                                       |          |                                           |
| 5        |                                                                 |                               |                                       |          |                                           |
|          | any. Subtract lines 3g and 4a from line 2. For result greater   |                               |                                       |          |                                           |
|          | than zero, explain in Part VI. See instructions.                |                               |                                       |          |                                           |
| 6        | Remaining underdistributions for 2020. Subtract lines 3h        |                               |                                       |          |                                           |
|          | and 4b from line 1. For result greater than zero, explain in    |                               |                                       |          |                                           |
|          | Part VI. See instructions.                                      |                               |                                       |          |                                           |
| 7        | Excess distributions carryover to 2021. Add lines 3)            |                               |                                       |          |                                           |
|          | and 4c.                                                         |                               |                                       |          |                                           |
| _8_      | Breakdown of line 7:                                            |                               |                                       |          |                                           |
| a_       | Excess from 2016                                                |                               |                                       |          |                                           |
| <u>b</u> | Excess from 2017                                                |                               |                                       |          |                                           |
| <u>C</u> | Excess from 2018                                                |                               |                                       |          |                                           |
| <u>d</u> | Excess from 2019                                                |                               |                                       |          |                                           |
|          | Excess from 2020                                                |                               |                                       |          |                                           |

Schedule A (Form 990 or 990-EZ) 2020

#### SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

### **Political Campaign and Lobbying Activities**

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ. ► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047 Open to Public Inspection

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

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

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

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

| Tax) (See separate instructions), ther                                                                                                             |                                                                           | A Lay) (See seharare                                                          | misu ucuons) or Form 550-                                                                         | EZ, Part V, IIIIO SSC (Proxy                                                                                                                |
|----------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------|-------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------|
| <ul> <li>Section 501(c)(4), (5), or (6) organization</li> </ul>                                                                                    | ations: Complete Part III.                                                |                                                                               |                                                                                                   |                                                                                                                                             |
| Name of organization                                                                                                                               | <del></del>                                                               |                                                                               | Emp                                                                                               | loyer identification number                                                                                                                 |
| ENVIRO                                                                                                                                             | NMENTAL WORKS                                                             |                                                                               |                                                                                                   | 23-7139744                                                                                                                                  |
| Part I-A Complete if the or                                                                                                                        | ganization is exempt unde                                                 | er section 501(c)                                                             | or is a section 527 or                                                                            | ganization.                                                                                                                                 |
| <ol> <li>Provide a description of the organ</li> <li>Political campaign activity expend</li> <li>Volunteer hours for political campaign</li> </ol> | itures                                                                    |                                                                               |                                                                                                   |                                                                                                                                             |
| Part I-B Complete if the or                                                                                                                        | ganization is exempt unde                                                 | er section 501(c)(                                                            | 3).                                                                                               |                                                                                                                                             |
| 1 Enter the amount of any excise tax                                                                                                               | x incurred by the organization unde                                       | er section 4955                                                               |                                                                                                   |                                                                                                                                             |
| 2 Enter the amount of any excise tax                                                                                                               | x incurred by organization manage                                         | rs under section 4955                                                         | <b>▶</b> \$                                                                                       |                                                                                                                                             |
| 3 If the organization incurred a secti<br>4a Was a correction made?                                                                                |                                                                           | ***************************************                                       |                                                                                                   | Yes No                                                                                                                                      |
| Part I-C Complete if the or                                                                                                                        | ganization is exempt unde                                                 | er section 501(c),                                                            | except section 501(c                                                                              | )(3).                                                                                                                                       |
| 1 Enter the amount directly expende                                                                                                                |                                                                           |                                                                               |                                                                                                   |                                                                                                                                             |
| 2 Enter the amount of the filing orga                                                                                                              |                                                                           |                                                                               |                                                                                                   |                                                                                                                                             |
| exempt function activities                                                                                                                         |                                                                           |                                                                               |                                                                                                   |                                                                                                                                             |
| 3 Total exempt function expenditure                                                                                                                |                                                                           |                                                                               |                                                                                                   |                                                                                                                                             |
| line 17b  4 Did the filing organization file Form                                                                                                  | 4400 001 (asthlesses)                                                     |                                                                               |                                                                                                   | Yes No                                                                                                                                      |
| 5 Enter the names, addresses and e<br>made payments. For each organiz<br>contributions received that were p                                        | mployer identification number (EIN<br>ation listed, enter the amount paid | ) of all section 527 po<br>from the filing organiz<br>separate political orga | litical organizations to which<br>zation's funds. Also enter the<br>anization, such as a separate | n the filing organization<br>e amount of political                                                                                          |
| (a) Name                                                                                                                                           | (b) Address                                                               | (c) EIN                                                                       | (d) Amount paid from<br>filing organization's<br>funds. If none, enter -0                         | (e) Amount of political contributions received and promptly and directly delivered to a separate political organization.  If none, enter -0 |
|                                                                                                                                                    |                                                                           |                                                                               |                                                                                                   |                                                                                                                                             |
|                                                                                                                                                    |                                                                           |                                                                               |                                                                                                   |                                                                                                                                             |
|                                                                                                                                                    |                                                                           |                                                                               |                                                                                                   |                                                                                                                                             |
|                                                                                                                                                    |                                                                           |                                                                               |                                                                                                   |                                                                                                                                             |
|                                                                                                                                                    |                                                                           |                                                                               |                                                                                                   |                                                                                                                                             |
|                                                                                                                                                    |                                                                           |                                                                               |                                                                                                   |                                                                                                                                             |

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

Schedule C (Form 990 or 990-EZ) 2020

LHA

032041 12-02-20

| Schedule C (Form 990 or 990-EZ) 2020 E<br>Part II-A Complete if the organ<br>section 501(h)).                                                                                                      | NVIR<br>nizatio             | ONMENT<br>n is exen                                       | AL WORKS npt under section | n 501(c)(3) and filed                  | 23-'<br>I Form 5768 (el                | 7139744 Page 2<br>ection under |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------|-----------------------------------------------------------|----------------------------|----------------------------------------|----------------------------------------|--------------------------------|
| A Check ► if the filing organization expenses, and share of B Check ► if the filing organization                                                                                                   | of exces                    | s lobbying e                                              | expenditures).             | Part IV each affiliated g              | roup member's nam                      | ne, address, EIN,              |
| Limits                                                                                                                                                                                             | on Lobi                     | oying Exper                                               |                            |                                        | (a) Filing<br>organization's<br>totals | (b) Affiliated group<br>totals |
| Total lobbying expenditures to influer     Total lobbying expenditures to influer     Total lobbying expenditures (add lines     d Other exempt purpose expenditures                               | nce a leg<br>s 1a and       | islative bod                                              | y (direct lobbying)        |                                        |                                        |                                |
| e Total exempt purpose expenditures (a                                                                                                                                                             | add line:                   | s 1c and 1d)                                              |                            |                                        |                                        |                                |
| f Lobbying nontaxable amount. Enter t                                                                                                                                                              | he amo                      | unt from the                                              |                            |                                        |                                        |                                |
| If the amount on line 1e, column (a) or (i                                                                                                                                                         |                             |                                                           | bying nontaxable am        |                                        |                                        |                                |
| Not over \$500,000                                                                                                                                                                                 |                             |                                                           | the amount on line 1e.     |                                        |                                        |                                |
| Over \$500,000 but not over \$1,000,0                                                                                                                                                              | 00                          |                                                           | O plus 15% of the exc      | ess over \$500,000.                    |                                        |                                |
| Over \$1,000,000 but not over \$1,500                                                                                                                                                              |                             |                                                           | 0 plus 10% of the exc      |                                        |                                        |                                |
| Over \$1,500,000 but not over \$17,00                                                                                                                                                              |                             |                                                           | O plus 5% of the exce      |                                        |                                        |                                |
|                                                                                                                                                                                                    | 0,000                       |                                                           |                            | 55 Over #1,500,000.                    |                                        |                                |
| Over \$17,000,000                                                                                                                                                                                  |                             | \$1,000,0                                                 | JOU.                       |                                        |                                        |                                |
| h Subtract line 1g from line 1a. If zero of Subtract line 1f from line 1c. If zero of J if there is an amount other than zero of reporting section 4911 tax for this year (Some organizations that | less, er<br>on eithe<br>ar? | nter -0-<br>r line 1h or li<br>4-Year Ave<br>a section 50 | raging Period Under        | Section 501(h) have to complete all of |                                        | Yes No                         |
|                                                                                                                                                                                                    |                             |                                                           | ditures During 4-Yes       |                                        |                                        |                                |
| 1                                                                                                                                                                                                  | LODE                        | THIS EXPOR                                                | iorares Daring 4-100       | Averaging Ferroc                       |                                        |                                |
| Calendar year<br>(or fiscal year beginning in)                                                                                                                                                     | (a) 2                       | 2017                                                      | (b) 2018                   | (c) 2019                               | (d) 2020                               | (e) Total                      |
| 2s Lobbying nontaxable amount                                                                                                                                                                      |                             |                                                           |                            |                                        |                                        |                                |
| b Lobbying ceiling amount<br>(150% of line 2a, column(e))                                                                                                                                          |                             |                                                           |                            |                                        |                                        |                                |
| c Total lobbying expenditures                                                                                                                                                                      |                             | i                                                         |                            |                                        |                                        |                                |
| d Grassroots nontaxable amount                                                                                                                                                                     |                             |                                                           |                            |                                        |                                        |                                |
| e Grassroots celling amount                                                                                                                                                                        |                             |                                                           | 1                          |                                        |                                        |                                |
| (150% of line 2d, column (e))                                                                                                                                                                      |                             |                                                           |                            |                                        |                                        |                                |
| f Grassroots lobbying expenditures                                                                                                                                                                 |                             |                                                           |                            |                                        |                                        |                                |

Schedule C (Form 990 or 990-EZ) 2020

## Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

| the lobbying activity.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | (a)                     |                           | (b)        |       |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------|---------------------------|------------|-------|
| we wanted                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Yes                     | No                        | Am         | ount  |
| During the year, did the filing organization attempt to influence foreign, national, state, or                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                         |                           | 1          |       |
| local legislation, including any attempt to influence public opinion on a legislative matter                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                         |                           |            |       |
| or referendum, through the use of:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                         |                           |            |       |
| a Volunteers?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                         | X                         |            |       |
| b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | X                       |                           |            |       |
| c Media advertisements?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | . !                     | X                         |            |       |
| d Mailings to members, legislators, or the public?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                         | X                         |            |       |
| e Publications, or published or broadcast statements?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                         | X                         |            |       |
| f Grants to other organizations for lobbying purposes?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                         | X                         |            |       |
| g Direct contact with legislators, their staffs, government officials, or a legislative body?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | Х                       |                           |            | 500   |
| h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                         | X                         |            |       |
| i Other activities?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                         | X                         |            |       |
| j Total. Add lines 1c through 1i                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                         |                           |            | 500   |
| 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                         | X                         |            | - 100 |
| b If "Yes," enter the amount of any tax incurred under section 4912                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                         |                           |            |       |
| c If "Yes," enter the amount of any tax incurred by organization managers under section 4912                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                         |                           |            |       |
| d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                         |                           |            |       |
| art III-A Complete if the organization is exempt under section 501(c)(4), section                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | n 501(c)(5              | ), or sec                 | tion       |       |
| 501(c)(6).                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                         |                           |            |       |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                         |                           | Yes        | No    |
| Were substantially all (90% or more) dues received nondeductible by members?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                         |                           |            |       |
| 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                         |                           |            |       |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                         |                           |            |       |
| Did the organization agree to carry over lobbying and political campaign activity expenditures from the art III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | 1 501(c)(5              | ), or sec                 |            | 3, is |
| art III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes."  Dues, assessments and similar amounts from members                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | 501(c)(5<br>No" OR (    | ), or sec<br>b) Part I    |            | 3, is |
| art III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | 501(c)(5<br>No" OR (    | ), or sec<br>b) Part I    |            | 3, is |
| art III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | n 501(c)(5<br>No" OR (  | b) Part I                 |            | 3, is |
| art III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  a Current year                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | 1 501(c)(5<br>No" OR (  | ), or sec<br>b) Part I    |            | 3, is |
| Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | 1 501(c)(5<br>No" OR (  | b) Part I                 |            | 3, is |
| art III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Carryover from last year                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | 1 501(c)(5<br>No" OR (  | b) Part I                 |            | 3, is |
| art III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes."  Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  a Current year b Carryover from last year c Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | 1 501(c)(5              | b) Part I                 |            | 3, is |
| art III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes."  Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  a Current year  b Carryover from last year  c Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | a 501(c)(5              | b) Part I                 |            | 3, is |
| Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceed does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expensions.                                                                                                                                                                                                                                                                                                                                                                            | a 501(c)(5              | b) Part I  2a 2b 2c 3     |            | 3, is |
| Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceed does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and polexpenditure next year?                                                                                                                                                                                                                                                                                                                                                                        | a 501(c)(5              | b) Part I  2a 2b 2c 3     |            | 3, is |
| Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceed does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and polexiend turns (See instructions)                                                                                                                                                                                                                                                                                                                                                                                         | a 501(c)(5              | b) Part I  2a 2b 2c 3     |            | 3, is |
| Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues lif notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceed does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and pole expenditure next year?  Taxable amount of lobbying and political expenditures (See instructions)  art IV Supplemental Information                                                                                                                                                                                                                                                                                     | a 501(c)(5<br>No" OR (  | ), or sec<br>b) Part I    | II-A, line | 3, is |
| Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues if notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceedes the organization agree to carryover to the reasonable estimate of nondeductible lobbying and pole expenditure next year?  Taxable amount of lobbying and political expenditures (See instructions)  art IV Supplemental Information  Divide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affillated group littructions); and Part II-B, line 1. Also, complete this part for any additional information.                                                                  | a 501(c)(5<br>No" OR (  | ), or sec<br>b) Part I    | II-A, line | 3, is |
| Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues if notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceedes the organization agree to carryover to the reasonable estimate of nondeductible lobbying and pole expenditure next year?  Taxable amount of lobbying and political expenditures (See instructions)  art IV Supplemental Information                                                                                                                                                                                                                                                                                         | al Sol (c) (5) No" OR ( | b) Part I  2a 2b 2c 3 4 5 | nd 2 (See  | 3, is |
| Sot(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues lif notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceedoes the organization agree to carryover to the reasonable estimate of nondeductible lobbying and poleximate next year?  Taxable amount of lobbying and political expenditures (See instructions)  Taxable amount of lobbying and political expenditures (See instructions)  Carr IV Supplemental Information  Divide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affillated group littructions); and Part II-B, line 1. Also, complete this part for any additional information.  ART II-B, LINE 1, LOBBYING ACTIVITIES: | al Sol (c) (5 No" OR (  | b) Part I  2a 2b 2c 3 4 5 | nd 2 (See  | 3, is |
| Solicited and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceedes the organization agree to carryover to the reasonable estimate of nondeductible lobbying and pole expenditure next year?  Taxable amount of lobbying and political expenditures (See instructions)  art IV   Supplemental Information  Dide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affillated group littructions); and Part II-B, line 1. Also, complete this part for any additional information.  ART II-B, LINE 1, LOBBYING ACTIVITIES:  URING 2020, THE EXECUTIVE DIRECTOR WROTE 3-4 LETTERS 1.              | al Sol (c) (5 No" OR (  | b) Part I  2a 2b 2c 3 4 5 | nd 2 (See  | 3, is |

#### **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.

Open to Public Inspection

OMB No. 1545-0047

Name of the organization

ENVIRONMENTAL WORKS

Employer identification number 23-7139744

| Pa  | rt I Organizations Maintaining Donor Advised                            |                                         | r Similar Funds                         | or Accou         | ints. Complete if the                            |
|-----|-------------------------------------------------------------------------|-----------------------------------------|-----------------------------------------|------------------|--------------------------------------------------|
|     | organization answered "Yes" on Form 990, Part IV, lin                   |                                         |                                         |                  |                                                  |
|     | •                                                                       | (a) Donor ac                            | vised funds                             | (b) Fu           | inds 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 v          | vriting that the asset                  | s held in donor advi                    | sed funds        | D                                                |
|     | are the organization's property, subject to the organization's          |                                         |                                         |                  | Yes No                                           |
| 6   | Did the organization inform all grantees, donors, and donor a           |                                         |                                         |                  |                                                  |
|     | for charitable purposes and not for the benefit of the donor or         | =                                       | -                                       | _                |                                                  |
|     | impermissible private benefit?                                          |                                         |                                         | _                | Yes No                                           |
| Pa  |                                                                         |                                         |                                         |                  |                                                  |
| 1   | Purpose(s) of conservation easements held by the organization           | 7,0                                     |                                         |                  |                                                  |
|     | Preservation of land for public use (for example, recreat               | tion or education)                      | Preservation of                         | of a historicall | y important land area                            |
|     | Protection of natural habitat                                           | •                                       |                                         |                  | nistoric structure                               |
|     | Preservation of open space                                              |                                         |                                         |                  |                                                  |
| 2   | Complete lines 2a through 2d if the organization held a qualifi         | ed conservation cor                     | tribution in the form                   | of a conserv     | ation easement on the last                       |
|     | day of the tax year.                                                    |                                         |                                         |                  | Held at the End of the Tax Year                  |
| а   | Total number of conservation easements                                  |                                         |                                         | 2a               |                                                  |
| b   | Total acreage restricted by conservation easements                      |                                         |                                         |                  | 1                                                |
| c   | Number of conservation easements on a certified historic stru           |                                         |                                         |                  | <del>                                     </del> |
| d   | Number of conservation easements included in (c) acquired a             |                                         |                                         |                  |                                                  |
| -   | listed in the National Register                                         |                                         |                                         |                  |                                                  |
| 3   | Number of conservation easements modified, transferred, rele            |                                         |                                         |                  | ÷                                                |
|     | year▶                                                                   | , <b>,,</b>                             | , , , , , , , , , , , , , , , , , , , , | · J              |                                                  |
| 4   | Number of states where property subject to conservation eas             | ement is located                        |                                         |                  |                                                  |
| 5   | Does the organization have a written policy regarding the peri          |                                         | ection, handling of                     | •                |                                                  |
|     | violations, and enforcement of the conservation easements it            |                                         |                                         |                  | Yes No                                           |
| 6   | Staff and volunteer hours devoted to monitoring, inspecting, I          |                                         |                                         |                  |                                                  |
|     | <b>&gt;</b>                                                             |                                         | -                                       |                  |                                                  |
| 7   | Amount of expenses incurred in monitoring, inspecting, hand             | ing of violations, and                  | enforcing conserva                      | ation easeme     | nts during the year                              |
|     | <b>▶</b> \$                                                             |                                         |                                         |                  |                                                  |
| 8   | Does each conservation easement reported on line 2(d) above             | satisfy the requiren                    | ents of section 170                     | (h)(4)(B)(i)     |                                                  |
|     | and section 170(h)(4)(B)(ii)?                                           |                                         |                                         |                  | Yes No                                           |
| 9   | In Part XIII, describe how the organization reports conservation        |                                         |                                         |                  |                                                  |
|     | balance sheet, and include, if applicable, the text of the footne       | ote to the organization                 | n's financial statem                    | ents that des    | cribes the                                       |
|     | organization's accounting for conservation easements.                   |                                         |                                         |                  |                                                  |
| Par | t III Organizations Maintaining Collections of                          | Art, Historical 1                       | reasures, or O                          | ther Simila      | ar 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            | 3, not to report in its                 | revenue statement                       | and balance s    | sheet works                                      |
|     | of art, historical treasures, or other similar assets held for public   | lic exhibition, educat                  | ion, or research in f                   | urtherance of    | public                                           |
|     | service, provide in Part XIII the text of the footnote to its financial | cial statements that                    | describes these iten                    | ns.              |                                                  |
| b   | If the organization elected, as permitted under FASB ASC 958            | , to report in its reve                 | nue statement and                       | balance shee     | t works of                                       |
|     | art, historical treasures, or other similar assets held for public      | exhibition, education                   | , or research in furt                   | herance of pu    | ıblic 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 trea      |                                         |                                         |                  |                                                  |
| •   | the following amounts required to be reported under FASB AS             |                                         |                                         |                  |                                                  |
| а   | Revenue included on Form 990, Part VIII, line 1                         | -                                       |                                         |                  | \$                                               |
|     | Assets included in Form 990, Part X                                     |                                         |                                         |                  |                                                  |
| _   | For Panerwork Reduction Act Notice, see the Instructions                |                                         |                                         |                  | Schedule D (Form 990) 2020                       |

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| Schedule D (Form 990) 2020 ENVIRONMENT                                                   | AL WORKS                     | 23                                           | 3-7139744          | Page |
|------------------------------------------------------------------------------------------|------------------------------|----------------------------------------------|--------------------|------|
| Part VII Investments - Other Securities.                                                 |                              |                                              |                    |      |
| Complete if the organization answered "Yes"                                              | on Form 990, Part IV, line 1 | 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 en          | d-of-year market v | alue |
| (1) Financial derivatives                                                                |                              |                                              |                    |      |
| (2) Closely held equity interests                                                        | 442,303.                     | END-OF-YEAR MARKET                           | VALUE              |      |
| (3) Other                                                                                |                              |                                              | _                  |      |
| (A)                                                                                      |                              |                                              |                    |      |
| (B)                                                                                      |                              | ~                                            |                    |      |
| (C)                                                                                      |                              |                                              |                    |      |
| (D)                                                                                      |                              |                                              |                    |      |
| (E)                                                                                      |                              |                                              |                    |      |
| (F)                                                                                      |                              |                                              |                    |      |
| (G)                                                                                      |                              |                                              |                    |      |
| (H)                                                                                      |                              |                                              |                    |      |
| Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)                         | 442,303.                     |                                              |                    |      |
| Part VIII investments - Program Related.                                                 |                              |                                              |                    |      |
| Complete if the organization answered "Yes"                                              |                              |                                              |                    |      |
| (a) Description of investment                                                            | (b) Book value               | (c) Method of valuation: Cost or en          | d-of-year market v | alue |
| (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 1 | 1d. See Form 990, Part X, line 15.           |                    |      |
|                                                                                          | Description                  |                                              | (b) Book va        |      |
| (1) WORK IN PROGRESS - PROJEC                                                            | rs                           |                                              | 149,               | 511. |
| (2)                                                                                      |                              |                                              |                    |      |
| (3)                                                                                      |                              |                                              |                    |      |
| (4)                                                                                      |                              |                                              |                    |      |
| (5)                                                                                      |                              |                                              |                    |      |
| (6)                                                                                      |                              |                                              |                    |      |
|                                                                                          |                              |                                              |                    |      |
| (8)                                                                                      |                              |                                              |                    |      |
| (9)                                                                                      |                              |                                              |                    |      |
| Total. (Column (b) must equal Form 990. Part X. col. (B) line  Part X Other Liabilities. | <u> = 15.)</u>               | <b>—————————————————————————————————————</b> | 149,               | 511. |
| Complete if the organization answered "Yes"                                              | on Form 990, Part IV, line 1 | 1e or 11f. See Form 990, Part X, line 25     | l <sub>e</sub>     |      |
| 1. (a) Description of liability                                                          |                              |                                              | (b) Book va        | lue  |
| (1) Federal income taxes                                                                 |                              |                                              |                    |      |
| (2)                                                                                      |                              |                                              |                    |      |
| (3)                                                                                      |                              |                                              |                    |      |
| (4)                                                                                      |                              |                                              |                    |      |
| (5)                                                                                      |                              |                                              |                    |      |
|                                                                                          |                              |                                              |                    |      |

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) 2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII .... X

Schedule D (Form 990) 2020

(7) (8)

| Schedule D (Form 990) 2020 ENVIRONMENTAL WORKS                                                   | 23-7139744 Page 5 |
|--------------------------------------------------------------------------------------------------|-------------------|
| Schedule D (Form 990) 2020 ENVIRONMENTAL WORKS  Part XIII   Supplemental Information (continued) |                   |
|                                                                                                  |                   |
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#### **SCHEDULE 0**

(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.

2020 Open to Public Inspection

Name of the organization

ENVIRONMENTAL WORKS

Employer identification number 23-7139744

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

PROVIDE SUSTAINABLE ARCHITECTURE, LANDSCAPE ARCHITECTURE & PLANNING

SERVICES TO LOW-INCOME UNDER-SERVED COMMUNITIES.

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

PROBLEMS IN THESE AREAS OF OUR COMMUNITY AND INVESTIGATION OF POSSIBLE

SOLUTIONS; (C) DEVELOPS AND AIDS IN THE DEVELOPMENT AND IMPROVEMENT OF

LOW-INCOME HOUSING AND FACILITIES FOR THE DELIVERY OF COMMUNITY AND

HUMAN SERVICES; (D) PRESERVES AND PROTECTS THE NATURAL ENVIRONMENT FOR

THE BENEFIT OF THE PUBLIC AND FURTHERS THE CONSERVATION, PRESERVATION,

ENHANCEMENT AND RESTORATION OF PARKS, PARKS' FACILITIES, RECREATION

AREAS, AND OPEN SPACES IN COMMUNITIES; AND (E) AIDS, SUPPORTS AND

ASSISTS BY GIFTS, CONTRIBUTIONS OR OTHERWISE, OTHER TAX-EXEMPT

CHARITABLE ORGANIZATIONS.

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

THE BOARD OF DIRECTORS HAS AN EXECUTIVE COMMITTEE CONSISTING OF THE

OFFICERS OF THE BOARD AND THE IMMEDIATE PAST PRESIDENT. THE EXECUTIVE

COMMITTEE HAS AND EXERCISES THE AUTHORITY OF THE BOARD IN THE MANAGEMENT OF

THE ORGANIZATION AS DESIGNATED BY THE BOARD EXCEPT THAT IT DOES NOT HAVE

THE POWER TO (A) AMEND, ALTER OR REPEAL THE BYLAWS; (B) ELECT, APPOINT OR

REMOVE ANY MEMBER OF A COMMITTEE OR THE BOARD OR ANY OFFICER; (C) AMEND THE

ARTICLES OF INCORPORATION; (D) ADOPT A PLAN OF MERGER OR CONSOLIDATION; (E)

AUTHORIZE THE ORGANIZATION'S VOLUNTARY DISSOLUTION OR REVOKE PROCEEDINGS

THEREOF; (F) ADOPT A PLAN FOR THE DISTRIBUTION OF THE ORGANIZATION'S ASSETS

OUTSIDE THE ORDINARY COURSE OF BUSINESS; OR (G) AMEND, ALTER OR REPEAL ANY

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

Schedule O (Form 990 or 990-EZ) 2020

2020.05000 ENVIRONMENTAL WORKS

| Name of the organization  ENVIRONMENTAL WORKS              | Employer identification number 23-7139744 |
|------------------------------------------------------------|-------------------------------------------|
| RESOLUTION OF THE BOARD THAT BY ITS TERMS INDICATES THAT I | T CANNOT BE                               |
| AMENDED, ALTERED OR REPEALED BY THE EXECUTIVE COMMITTEE. 1 | HE EXECUTIVE                              |
| COMMITTEE WAS INACTIVE DURING 2020.                        | ·-                                        |
|                                                            |                                           |
| FORM 990, PART VI, SECTION A, LINE 2:                      |                                           |
| DAVID BARLOW AND LINDA JOSEPHSON HAVE A BUSINESS RELATIONS | HIP.                                      |
|                                                            |                                           |
| FORM 990, PART VI, SECTION A, LINE 4:                      |                                           |
| THE BYLAWS WERE AMENDED IN FEBRUARY 2020.                  |                                           |
|                                                            |                                           |
| THE CHANGES WERE MADE WERE:                                |                                           |
| - TO THE MAKE UP OF THE EXECUTIVE COMMITTEE TO ALSO INCLUD | E THE CHAIRS OF                           |
| EACH STANDING COMMITTEE                                    |                                           |
| - MOVED THE ANNUAL MEETING TO THE 2ND TUESDAY OF JANUARY I | NSTEAD OF 4TH,                            |
| AND                                                        |                                           |
| - TO INCLUDE A REGULAR MEETING SCHEDULE RATHER THAN JUST S | PECIAL MEETINGS                           |
|                                                            |                                           |
| FORM 990, PART VI, SECTION B, LINE 11B:                    |                                           |
| BEFORE BEING FILED WITH THE IRS, THE FORM 990 WAS REVIEWED | BY THE                                    |
| CONTROLLER AND THE EXECUTIVE DIRECTOR AND DRAFTS WERE PROV | IDED TO THE                               |
| FINANCE COMMITTEE MEMBERS.                                 |                                           |
|                                                            |                                           |
| FORM 990, PART VI, SECTION B, LINE 12C:                    |                                           |
| IF AN INDIVIDUAL HAS A POTENTIAL CONFLICT OF INTEREST, THE | Y ARE REQUIRED TO                         |
| DISCLOSE THIS FACT TO EITHER THE EXECUTIVE DIRECTOR OR THE | BOARD OF                                  |
| DIRECTORS, AS APPROPRIATE. IF IT IS UNCLEAR WHETHER A CONF | LICT EXISTS, THE                          |
| BOARD OF DIRECTORS MAKES THE DETERMINATION. A BOARD MEMBER |                                           |
| ABSTAINS FROM VOTING ON THE MATTER. AN EMPLOYEE WITH A CON |                                           |
|                                                            | edule O (Form 990 or 990-EZ) 2020         |

Name of the organization Employer identification number ENVIRONMENTAL WORKS 23-7139744 ALLOWED TO WORK ON THE PROJECT INVOLVING THE CONFLICT. FORM 990, PART VI, SECTION B, LINE 15A: THE EXECUTIVE DIRECTOR'S PERFORMANCE IS REVIEWED ANNUALLY BY A COMMITTEE OF THE BOARD OF DIRECTORS. THE COMMITTEE PROVIDES A WRITTEN AND ORAL REVIEW TO THE EXECUTIVE DIRECTOR BASED ON BOARD AND STAFF REVIEW AS WELL AS SELF-REVIEW. THE COMMITTEE MAKES A RECOMMENDATION FOR ANY SALARY ADJUSTMENTS TO THE BOARD OF DIRECTORS, WHO APPROVE ANY ADJUSTMENTS. THE LAST REVIEW WAS IN DECEMBER 2019. THE COMMITTEE DID NOT REVIEW THE ED IN 2020 BECAUSE HE RETIRED AT THE END OF THE YEAR. COMPENSATION AND OFFER FOR NEW EXECUTIVE DIRECTOR WERE COMPLETED BY THE BOARD COMMITTEE AND A THIRD PARTY EXECUTIVE SEARCH CONSULTANT. THE COMMITTEE MADE A COMPENSATION RECOMMENDATION TO THE BOARD AND IT WAS RATIFIED. FORM 990, PART VI, SECTION C, LINE 18: THE ORGANIZATION'S FORM 990 IS AVAILABLE ONLINE AT WWW.GUIDESTAR.ORG AND UPON REQUEST. THE ORGANIZATION'S FORM 1023 IS AVAILABLE UPON REQUEST. FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION'S CONFLICT OF INTEREST POLICY, FINANCIAL STATEMENTS AND GOVERNING DOCUMENTS ARE AVAILABLE UPON REQUEST. FORM 990, PART XII, LINE 2C THE PROCESS FOR SELECTING THE INDEPENDENT AUDITOR HAS NOT CHANGED.

SCHEDULE R (Form 990)

Name of the organization

Part

Department of the Treasury Internal Revenue Service

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

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

OMB No. 1545-0047

2020 Open to Public Inspection

Employer identification number 23-7139744 ENVIRONMENTAL WORKS

Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

|                                                                                                                                                                                                                         | 7                                      |                                               |                               |                                                  |                               |                                             |                      |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------|-----------------------------------------------|-------------------------------|--------------------------------------------------|-------------------------------|---------------------------------------------|----------------------|
| (a) Name, address, and EIN (if applicable) of disregarded entity                                                                                                                                                        | (b) Primary activity                   | (c) Legal domicile (state or foreign country) | (d)<br>Total income           | (e)<br>End-of-year assets                        |                               | (f)<br>Direct controlling<br>entity         |                      |
|                                                                                                                                                                                                                         |                                        |                                               |                               |                                                  |                               |                                             |                      |
|                                                                                                                                                                                                                         |                                        |                                               |                               |                                                  |                               |                                             |                      |
|                                                                                                                                                                                                                         |                                        |                                               |                               |                                                  |                               |                                             |                      |
|                                                                                                                                                                                                                         |                                        |                                               |                               |                                                  |                               |                                             |                      |
| Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year. | itions. Complete if the organization a | nswered "Yes" on Form 990,                    | Part IV, line 34, be          | cause it had one                                 | or more related tax-exeл      | )pt                                         |                      |
| (a) Name, address, and EIN of related organization                                                                                                                                                                      | (b)<br>Primary activity                | (c) Legal domicile (state or foreign country) | (d)<br>Exempt Code<br>section | (e) Public charity status (if section 501(c)(3)) | (f) Direct controlling entity | Section 5 (20)(13)<br>controlled<br>entity7 | 2(b)(13)<br>led<br>7 |
| FIRESTATION SEVEN ASSOCIATES - 91-1370580 402 15TH AVENUE RAST SEATTLE, WA 98112                                                                                                                                        | REAL ESTATE                            | WASHINGTON                                    | 501(C)(25)                    |                                                  | ENVIRONMENTAL                 | g ×                                         | 2                    |
|                                                                                                                                                                                                                         |                                        |                                               |                               |                                                  |                               |                                             |                      |
|                                                                                                                                                                                                                         |                                        |                                               |                               |                                                  |                               |                                             |                      |
|                                                                                                                                                                                                                         |                                        |                                               |                               |                                                  |                               |                                             |                      |
| For Paperwork Reduction Act Notice, see the Instructions for Form 990.                                                                                                                                                  | is for Form 990.                       |                                               |                               |                                                  | Schedule R (Form 990) 2020    | Form 990                                    | ) 2020               |

23-7139744

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Schedule R (Form 990) 2020 ENVIRONMENTAL WORKS

Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year. Part III

| (f) (g) (h) (l) (l) (l) Share of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total of total | domicile<br>(state or<br>foreion | sections 512-514) Yes No |  |  |  |  |  |  |  |  |
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Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year. Part IV

|                                                                |                                                 |                                                |           |          | 1 |  |  |  |  |  |  |  |
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|                                                                | (F)                                             | Percentage                                     | 1         |          |   |  |  |  |  |  |  |  |
|                                                                | (6)                                             | Share of                                       | assets    |          |   |  |  |  |  |  |  |  |
|                                                                | 9                                               | Share of total                                 |           |          |   |  |  |  |  |  |  |  |
|                                                                | (e)                                             | Type of entity                                 | or trust) | ,        |   |  |  |  |  |  |  |  |
|                                                                | (p)                                             | Direct controlling<br>entity                   | ·         |          |   |  |  |  |  |  |  |  |
|                                                                | 9                                               | Legal domicile<br>(state or                    | foreign   | country) |   |  |  |  |  |  |  |  |
| ווופ ומא אפמו.                                                 | (q)                                             | Primary activity                               |           |          |   |  |  |  |  |  |  |  |
| משפה הבפונטו א שמנסט בא מיש של האים ושאר עומותון נוופ נפג אפשי | (a)                                             | Name, address, and EIN of related organization |           |          |   |  |  |  |  |  |  |  |

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# ENVIRONMENTAL WORKS Schedule R (Form 990) 2020

Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36. Part V

Schedule R (Form 990) 2020 Ŷ Yes × × Ē Ę 9 우 무 10 f ¥ 19 ÷ 50 ta e 은 2 0 (d) Method of determining amount involved 2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds CONTRACT 1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II:VY 74,044. (c) Amount involved (b) Transaction type (a-s) b Performance of services or membership or fundraising solicitations for related organization(s) m Performance of services or membership or fundraising solicitations by related organization(s) Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity Lease of facilities, equipment, or other assets from related organization(s) Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule. Lease of facilities, equipment, or other assets to related organization(s) Other transfer of cash or property from related organization(s) Gift, grant, or capital contribution from related organization(s) Reimbursement paid by related organization(s) for expenses Reimbursement paid to related organization(s) for expenses r Other transfer of cash or property to related organization(s) Gift, grant, or capital contribution to related organization(s) d Loans or loan guarantees to or for related organization(s) Sharing of paid employees with related organization(s) SEVEN ASSOCIATES (a) Name of related organization e Loans or loan guarantees by related organization(s) Purchase of assets from related organization(s) Exchange of assets with related organization(s) Sale of assets to related organization(s) Dividends from related organization(s) (1) FIRESTATION 032163 10-28-20 9 থ্ৰ ପ୍ର 3 回

Schedule R (Form 990) 2020 ENVIRONMENTAL WORKS

Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

| Primary activity | Legal domicile (state or foreign | Predominant income particulated, unrelated, excluded from tax under | Are all parthers sec 501 (c)(3) orgs.? | Share of total | (g)<br>Share of<br>end-of-year | (h) Disproportionate abocations? | (h) (i) (ii) (k) (k) bispeper Code V-UBI General or Percentage tionate amount in box 20 managing ownership of Schedule K-1 partner? | General of managin | (k)<br>Percentage<br>ownership |
|------------------|----------------------------------|---------------------------------------------------------------------|----------------------------------------|----------------|--------------------------------|----------------------------------|-------------------------------------------------------------------------------------------------------------------------------------|--------------------|--------------------------------|
|                  |                                  | Sections 5 12-5 14)                                                 | o N                                    |                | 2523                           | Xes Xes                          | (Form 1055)                                                                                                                         | Xes No             |                                |
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| Schedule R | l (Form 990) 2020                    | ENVIRONMENTAL WORKS                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | 23-7139744 | Page 5   |
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| Part VII   | (Form 990) 2020<br>Supplemental Info | mation                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |            | - 1      |
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