# \*\* PUBLIC DISCLOSURE COPY \*\*

**Return of Organization Exempt From Income Tax** 

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

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

Open to Public Inspection

AI	ror u	ne 2021 calendar year, or tax year beginning and	enaing		
В	Check i applical	C Name of organization		D Employer identifi	ication number
	Addr				
	Nam char	ge Doing business as		23-71397	44
	Initia retur	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone numbe	er
	Final	n/   402 IJII AVENOE EADI		206-329-	8300
	term ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	4,959,093.
Г	Ame retur	nded CEAMMTE WAY 00110		H(a) Is this a group r	
F	Appl			for subordinates	
_	pend	SAME AS C ABOVE		<b>H(b)</b> Are all subordinates i	—
$\overline{}$	Tay-o	xempt status: $\overline{\mathbf{X}}$ 501(c)(3) $\overline{}$ 501(c) ( ) $\overline{}$ (insert no.) $\overline{}$ 4947(a)(1) o	or 527	1	list. See instructions
		ite: WWW.EWORKS.ORG	01 021	H(c) Group exemption	
		of organization: X Corporation Trust Association Other	I Voor		M State of legal domicile; WA
	art I	Summary	L TEAT	or formation, TOTT	VI State of legal doffficile, WZL
	1	Briefly describe the organization's mission or most significant activities: SEE	CCHEDII	T.F. O	
9	│ '	Briefly describe the organization's mission or most significant activities.	SCIIEDO	пв О	
Activities & Governance	2	Check this box if the organization discontinued its operations or dispos	sed of more	than 25% of its net as	sets.
Ve	3			3	9
ဗိ	4	Number of independent voting members of the governing body (Part VI, line 1b)			9
<u>«</u>	5	Total number of individuals employed in calendar year 2021 (Part V, line 2a)			37
<u>i</u>	6	Total number of volunteers (estimate if necessary)			13
ξį	7 :			7a	<del></del>
¥	';	Net unrelated business taxable income from Form 990-T, Part I, line 11			0.
	<del>  `</del>	The difference business taxable meeting from 500 1, 1 art 1, iiii 11		Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)		23,941.	427,888.
	9			4,690,011.	4,531,202.
	10	Program service revenue (Part VIII, line 2g)  Investment income (Part VIII, column (A), lines 3, 4, and 7d)		5.	3.
Be	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0.	0.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		4,713,957.	4,959,093.
_	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.
	14			0.	0.
	45	Benefits paid to or for members (Part IX, column (A), line 4)  Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		2,509,568.	2,773,417.
Expenses	15			0.	0.
ĕ	102	Professional fundraising fees (Part IX, column (A), line 11e)  Total fundraising expenses (Part IX, column (D), line 25)		<u> </u>	0.
X				2,241,337.	1,725,003.
	''	, , , , , , , , , , , , , , , , , , , ,		4,750,905.	4,498,420.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		-36,948.	460,673.
	19	Revenue less expenses. Subtract line 18 from line 12			
Net Assets or	<b>1</b>	T. I. (D. I.V.); 40)	Ве	ginning of Current Year 2,668,328.	End of Year 2,650,606.
SSE	20	Total assets (Part X, line 16)			651,158.
et A	21	Total liabilities (Part X, line 26)		1,010,705. 1,657,623.	1,999,448.
	22 art II	Net assets or fund balances. Subtract line 21 from line 20		1,037,023.	1,999,440.
		nalties of perjury, I declare that I have examined this return, including accompanying schedules			y knowledge and belief, it is
true	, corre	ect, and complete Declaration of preparer (other than officer) is based on all information of wh	nch preparer		
		Signature of officer		11/15/22 Date	
Sig		1 2/1		Date	
Hei	re	JESS ZIMBABWE, EXECUTIVE DIRECTOR  Type or print name and title			
			Tr	Date Check F	PTIN
D - 1		Print/Type preparer's name  Preparer's signature  Preparer's Signature	1	i; L	
Paid		KURT BENNION, CPA KURT BENNION, CE	A L	1/15/22 self-emplo	
	parer	Firm's name CLIFTONLARSONALLEN LLP		Firm's EIN ▶	41-0746749
Use	Only	Firm's address > 10700 NORTHUP WAY, SUITE 200		40	E 250 6100
_		BELLEVUE, WA 98004		Phone no. <b>4</b> 2	35-250-6100
Ma	y the	IRS discuss this return with the preparer shown above? See instructions			X Yes No

Fai	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:  ENVIRONMENTAL WORKS (A) FUNCTIONS AS A COMMUNITY DESIGN AND CENTRAL
	RESOURCE CENTER FOR THE DISADVANTAGED AREAS OF OUR COMMUNITY AND AIDS
	THEM IN DEVELOPING LONG-RANGE COMMUNITY OBJECTIVES REGARDING PLANNING,
	DESIGN AND THE ENVIRONMENT; (B) AIDS IN THE DEFINITION OF PRESENT
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
_	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ 9,700. including grants of \$ 0.) (Revenue \$ 21,581.)
	COMMUNITY EDUCATION: EW COLLABORATES WITH COMMUNITIES TO PLAN AND
	DESIGN SPACES IN A WAY THAT RESPONDS TO THEIR MOST PRESSING NEEDS. BY
	SHARING WHAT WE LEARN, WE MOBILIZE A VAST NETWORK OF LEADERS AND
	ORGANIZATIONS WHO CAN TAP INTO THESE POWERFUL COMMUNITIES TO CO-CREATE
	HEALTHY, EQUITABLE FUTURES. IN 2021, HERE ARE SOME OF THE EDUCATIONAL EFFORTS THAT EW WAS A PART OF:
	EFFORIS THAT EW WAS A PART OF:
	1) THE EARLY LEARNING SYMPOSIUM: A CONFERENCE THAT STRENGTHENED
	CONNECTIONS BETWEEN DESIGNERS AND PRACTITIONERS. FOLLOWING THE
	CONFERENCE, EW ALSO PROVIDED TECHNICAL DESIGN ASSISTANCE TO CHILDCARE
	PROVIDERS THROUGH THE NETWORK.
	(CONTINUED IN SCHEDULE O)
4b	(Code:) (Expenses \$ 59,610 . including grants of \$ 0 . ) (Revenue \$ )
710	PRO BONO DESIGN SERVICES: THIS YEAR, EW CONTRIBUTED DESIGN WORK TO
	SERVE SEVERAL WASHINGTON-BASED NONPROFIT ORGANIZATIONS. SOME EXAMPLES
	OF PROJECTS WE PROVIDED DESIGNS FOR IN 2021:
	1) THE WILLIAM GROSE CENTER FOR CULTURAL INNOVATION, AN ECONOMIC
	INCUBATOR THAT SUPPORTS ENTREPRENEURSHIP AND WORKFORCE DEVELOPMENT. THE
	CENTER IS OPERATED BY AFRICATOWN COMMUNITY LAND TRUST IN SEATTLE'S
	CENTRAL DISTRICT.
	2) SEVERAL TINY HOUSE VILLAGES OPERATED BY THE LOW INCOME HOUSING
	INSTITUTE. THESE TINY HOUSE VILLAGES ALLOW RESIDENTS TO RECLAIM THEIR
	DIGNITY AND GET ON A PATH TO PERMANENT HOUSING, EMPLOYMENT AND
	CONNECTION TO SUPPORTIVE SERVICES. (CONTINUED IN SCHEDULE O)
4c	(Code:) (Expenses \$12,066 . including grants of \$0 (Revenue \$)
	EW GIVES: OUR ACTIVE TEAM OF DESIGNERS ALSO SERVE AS COMMUNITY
	AMBASSADORS, SINCE THEY ARE FAMILIAR WITH THE CONCERNS AND NEEDS OF OUR
	NONPROFIT PARTNERS AROUND THE STATE. IN 2021, SOME OF THE SIGNIFICANT
	FUNDS THAT WE RAISED SUPPORTED OTHER NONPROFIT ORGANIZATIONS LIKE
	VOICES OF TOMORROW CHILD CARE CENTER, A SOMALI-ENGLISH DUAL-LANGUAGE,
	CULTURALLY RESPONSIVE EARLY LEARNING PROGRAM SERVING EAST AFRICAN AND
	OTHER SOUTH END FAMILIES, THAT EW SUPPORTED THROUGH A GRANT AND
	VOLUNTEER LABOR TO TRANSFORM AN ASPHALT LOT AT THE CENTER INTO AN
	ENRICHING AND FUN NATURAL PLAY AREA.
اء ۾	Other program convices (Describe on Schodule O.)
₩u	Other program services (Describe on Schedule O.) (Expenses \$ 3,575,319 \cdot including grants of \$ 0 \cdot ) (Revenue \$ 4,463,357 \cdot)
	Total program service expenses \( \) 3,656,695.
	Form 990 (2021)

09301115 131839 032-208467

Form 990 (2021) ENVIRONMENTAL WORKS
Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
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		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
-	during the tax year? If "Yes," complete Schedule C, Part II	4		х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
·	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		x
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	<u> </u>		<del></del>
Ü	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	-		
′		7		x
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	<b>-</b>		
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			<sub>V</sub>
_	Schedule D, Part III	8_		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			٦,
	If "Yes," complete Schedule D, Part IV	9		<u> </u>
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	X	
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	Х	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
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	<u> </u>		
124	•	12a		x
h	Schedule D, Parts XI and XII  Was the organization included in consolidated, independent audited financial statements for the tax year?	124		<del></del>
D	•	12b	Х	
12	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional		- 21	х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			x
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		<u> </u>
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			<b>.</b>
	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		<u> </u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			,,
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		<u> </u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	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 1? If "Yes." complete Schedule I. Parts I and II	21		Х

132003 12-09-21

Form **990** (2021)

23-7139744

Form 990 (2021) ENVIRONMENTAL WORKS
Part IV | Checklist of Required Schedules (continued)

	Continued)		V	
00	Did the averagination was at asset to a fig. 000 of average as at least one of a second constant in dividuals as		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			x
00	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			x
04 -	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			v
	Schedule K. If "No," go to line 25a	24a		<u> </u>
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		<u> </u>
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	04-		
ام	any tax-exempt bonds?  Did the exemptation act as an long behalf of lineaux for bonds outstanding at any time during the year?	24c 24d		$\vdash$
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	240		
<b>2</b> 5a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	25a		x
h	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete	25b		x
26	Schedule L, Part I  Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current	230		
20				
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%	26		x
27	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II  Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,	20		
21	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		x
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,	21		
20	instructions for applicable filing thresholds, conditions, and exceptions):			
•	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i>			
а		28a		x
h	"Yes," complete Schedule L, Part IV  A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If	200		
·	"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			
00	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
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If</i> "Yes," complete	<u> </u>		
-	October 1 to M. Douttle	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	Х	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Х	
	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	Х	<u> </u>
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	37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
	Note: All Form 990 filers are required to complete Schedule O	38	X	
Pai	T 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			$\Box$
			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 on line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c		
132004	4 12-09-21	Form	990	(2021)

Form 990 (2021) ENVIRONMENTAL WORKS

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

	i (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 37		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.	_	37	
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	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	X	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			,,
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			37
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			٦,
	any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			37
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			,,
	to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year			.,,
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
_	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.	_		
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
a	Gross income from members or shareholders  Cross income from ethan equipped (De not and amounts due or noid to other equipped against			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)			
100		120		
12a b	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12a		
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		
а	Note: See the instructions for additional information the organization must report on Schedule O.	IJa		
h	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			
С	Enter the amount of reserves on hand 13c			
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		<u></u>
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 the instructions and file Form 4720, Schedule N.	.0		
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		х
	If "Yes," complete Form 4720, Schedule O.	.5		
17	Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any			
	activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17		
	If "Ves " complete Form 6069			

09301115 131839 032-208467

23-7139744 Page 6 Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response

	to line da, de, or rob below, addenied the directinated of proceeding, or changes on contended of the months.			
	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	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.			
b	Enter the number of voting members included on line 1a, above, who are independent 1b 9			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		Х
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6		Х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a		х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Х	
b		8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	0.5		
Ŭ	organization's mailing address?   f "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.)			
	(This Section B requests information about policies not required by the internal nevertice Gode.)		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	100		
_	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		х
	Describe on Schedule O the process, if any, used by the organization to review this Form 990.	- 1.0		
12a		12a	х	
b		12b	X	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe	12.0		
·	on Schedule O how this was done	12c	х	
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			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a	х	
h	Other officers or key employees of the organization	15b		Х
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.	.55		
162	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
104	taxable entity during the year?	16a		х
h	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	104		
D	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	100	1	
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 onlv)	availal	ole
·	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	d finan	cial	
	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, WA 98112			
	, , , , , , , , , , , , , , , , , , , ,		202	

Form **990** (2021)

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

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

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

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

Check this box if neither the organization ne	or any related	orga	niza	tion	con	npen	sate	ed any current officer, di	rector, or trustee.	
(A)	(B)				<b>C</b> )			(D)	(E)	(F)
Name and title	Average	(do		Pos		l than d	nne	Reportable	Reportable	Estimated
	hours per	box	, unles	ss pe	rson i	s both	an	compensation	compensation	amount of
	week	_	Ler an	uau	recto	i / ii uS	iee)	from	from related	other
	(list any hours for	irecto						the organization	organizations (W-2/1099-MISC/	compensation from the
	related	e or c	stee			sated		(W-2/1099-MISC/	1099-NEC)	organization
	organizations	Individual trustee or director	In stit utio nal tru stee		yee	Highest compensated employee		1099-NEC)	1000 (120)	and related
	below	idual	ution	-i-	Key employee	est co oyee	er	,		organizations
	line)	Indiv	Instit	Officer	Key 6	High empl	Former			
(1) JESS ZIMBABWE	35.00									
EXECUTIVE DIRECTOR	5.00			Х				133,820.	0.	7,278.
(2) WILLIAM SINGER	40.00									
DIRECTOR OF ARCHITECTURE	0.00			Х				117,245.	0.	11,543.
(3) SALLY KNODELL	40.00									
DIRECTOR OF ARCHITECTURE	0.00			Х				117,500.	0.	11,250.
(4) JIM SHANAHAN	40.00	1							_	
SENIOR ARCHITECT	0.00					X		105,166.	0.	11,000.
(5) MIKE MACKIE	40.00	-								
SENIOR PROJECT MANAGER & QUALITY CON	0.00					X		105,490.	0.	8,426.
(6) CHRISTOPHER WILTON	40.00							100 165		
DIRECTOR OF ARCHITECTURE	0.00					X		102,467.	0.	0.
(7) JEANNE MARIE CORONADO	2.00									_
PRESIDENT	0.25	Х		X				0.	0.	0.
(8) BOB FISH	1.00	ļ								•
VICE PRESIDENT & TREASURER	0.25	Х		X				0.	0.	0.
(9) BRADLEY WILBURN	1.00									_
DIRECTOR & VICE PRESIDENT	0.00	Х		X				0.	0.	0.
(10) ANNETTE STRAND	1.00									_
TREASURER (THROUGH DECEMBER 2021)	0.00	Х		X				0.	0.	0.
(11) ANN MARIE BORYS	1.00									_
SECRETARY	0.00	Х		X				0.	0.	0.
(12) DAVID BARLOW	1.00									_
DIRECTOR (THROUGH MARCH 2021)	0.00	Х						0.	0.	0.
(13) MARK BROWN	1.00	ļ								
CALENDARIAN	0.00	Х						0.	0.	0.
(14) JUAN CALAF	1.00									_
DIRECTOR	0.00	Х						0.	0.	0.
(15) LARRY GOETZ	1.00									_
DIRECTOR (THROUGH FEBRUARY 2021)		Х						0.	0.	0.
(16) MEG HALEY	1.00									_
DIRECTOR		Х						0.	0.	0.
(17) TIM SPELMAN	2.00									_
DIRECTOR (THROUGH NOVEMBER 2021)	0.25	Х						0.	0.	0. Form <b>990</b> (2021)

132007 12-09-21 Form **990** (2021)

Section A. Officers, Directors, Trus		PIOY	ees,			gnes	sτC		,			<b>/</b> E`	
(A)	(B)				C) ition	1		(D)	(E)		_	(F)	
Name and title	Average hours per	Position (do not check more than one box, unless person is both an						Reportable	Reportable		l .	stimate nount	
	week					is bot or/trus		compensation from	compensation from related		an	other	OI .
	(list any	ctor						the	organization		com	pensa	tion
	hours for	or dire	a.			rted		organization	(W-2/1099-MIS		l	om th	
	related organizations	ustee	truste		ap.	suadi		(W-2/1099-MISC/ 1099-NEC)	1099-NEC)		ı -	anizat	
	below	dual tr	tional	١.	ploye	st com		1099-NEC)			l	d relat anizati	
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former				l org	ar ii Laci	5110
(18) PRESTINA STULL	1.00	_				1							
DIRECTOR	0.00	Х						0.		0.			0.
(19) ALIX TOWN	1.00												
DIRECTOR	0.00	Х						0.		0.			0.
		1											
		_											
						-							
		1											
						-							
		1											
		1											
		1											
1b Subtotal							▶	681,688.		0.	4	9,4	97.
c Total from continuation sheets to Part VI							ightharpoons	0.		0.			0.
d Total (add lines 1b and 1c)							<b></b>	681,688.		0.	4	9,4	<u>97.</u>
2 Total number of individuals (including but n	ot limited to th	ose	liste	d ab	ove	e) wh	o re	eceived more than \$100,	000 of reportable	)			_
compensation from the organization													6
												Yes	No
3 Did the organization list any <b>former</b> officer,	•		-	•	•	-	_		•				v
line 1a? If "Yes," complete Schedule J for s											3		X
4 For any individual listed on line 1a, is the su	•		•					•	J		4		Х
<ul><li>and related organizations greater than \$150</li><li>Did any person listed on line 1a receive or a</li></ul>											4		
rendered to the organization? If "Yes." com	•				,			•			5		Х
Section B. Independent Contractors	ipiete ocheduk	- 0 1	OI SE	<i>icii</i> ,	Jers	OH							
Complete this table for your five highest co	mpensated inc	depe	nde	nt co	ontra	acto	rs th	nat received more than \$	100,000 of comp	oensa	tion fro	om	
the organization. Report compensation for	the calendar ye	ear e	endir	ng w	ith c	or wi	thin	the organization's tax y	ear.				
(A)								(B)			(0		
Name and business	address	N	INC	3			_	Description of s	ervices		Compe	nsatio	<u>n</u>
							$\dashv$						
							$\dashv$						
2 Total number of independent contractors (ii	ncluding but n	ot lir	nited	d to	thos	se lis	ted	above) who received mo	ore than				
\$100,000 of compensation from the organi						)		,					
	•										_	മമവ /	2004)

Form **990** (2021)

23-7139744

art VIII	Statement of Reven	ue

			Check if Schedule O co	ontain	e a reenor	180	or note to any lir	e in this P	art VIII			
			Offeck if Schedule O co	Ulitalii	s a respoi	136 (	or flote to arry iii	( <i>I</i>	<u> </u>	(B)	(C)	(D)
								Total re	evenue	Related or exempt	Unrelated	Revenuè excluded
											business revenue	from tax under
												sections 512 - 514
ts st	1	а	Federated campaigns		1a			_				
irar		b	Membership dues		1b							
e, E		С	Fundraising events		1c							
if ts					1 1							
Contributions, Gifts, Grants and Other Similar Amounts			Government grants (contrib				416,190.					
Sig			All other contributions, gifts, g				·					
e ti		•	similar amounts not included a				11,698.					
GË		~	Noncash contributions included in li					-				
o		•						127	,888.			
<u>о</u> в		n	Total. Add lines 1a-1f					44/	,000.			
				~		_	Business Code	4 504		4 404 000	46.064	
မွ	2	а	ARCHITECTURAL	SEI	KATCE	<u>-</u>	541300	4,531	<u>,202.</u>	4,484,938.	46,264.	
ē Š		b				_						
s z		С				_						
am		d				_						
Program Service Revenue		е										
Pro		f	All other program service re	evenu	<del></del> е							
			Total. Add lines 2a-2f				<b></b>	4,531	.202.			
	3		Investment income (includi						,			
	٥								3.			3.
			other similar amounts)						<u> </u>			<u>~ .</u>
	4		Income from investment of		-	-						
	5		Royalties	·····								
					(i) Real		(ii) Personal					
	6	а	Gross rents	6a								
		b	Less: rental expenses	6b								
		С	Rental income or (loss)	6с								
		d	Net rental income or (loss)									
	7	а	Gross amount from sales of		(i) Securiti	es	(ii) Other					
			assets other than inventory	7a								
		h	Less: cost or other basis	<u> </u>								
Ф		~	and sales expenses	7h								
Revenue		_	Gain or (loss)									
eve												
π.			Net gain or (loss)				·····					
ther	8	а	Gross income from fundraising	•	•							
ਠ			including \$									
			contributions reported on I									
			Part IV, line 18			8a		_				
		b	Less: direct expenses			8b						
		С	Net income or (loss) from for	undrai	sing event	s	<b></b>					
	9	а	Gross income from gaming	activ	ities. See							
			Part IV, line 19			9a						
		b	Less: direct expenses			9b						
			Net income or (loss) from g				•					
			Gross sales of inventory, le		•							
		u	and allowances			10a						
		<b>L</b>										
			Less: cost of goods sold			10b						
-		С	Net income or (loss) from s	ales o	ı inventor	/						
<u>9</u>							Business Code					
on e	11	а				_						
Miscellaneous Revenue		b				_						
e e		С				_						
/list B		d	All other revenue									
2			Total. Add lines 11a-11d				<b></b>					
	12		Total revenue. See instruction				<b>.</b>	4,959	,093.	4,484,938.	46,264.	3.

Par	t IX   Statement of Functional Expense	es			
Section	on 501(c)(3) and 501(c)(4) organizations must comp	olete all columns. All othe	r organizations must con	nplete column (A).	
	Check if Schedule O contains a respon				
	ot include amounts reported on lines 6b, lb, 9b, and 10b of Part VIII.	(A) Total expenses	<b>(B)</b> Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraising 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				
	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,	398,893.	216,037.	180,034.	2,822
6	trustees, and key employees	390,093.	210,037.	100,034.	2,022
0	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	1,993,503.	1,679,144.	305,223.	9,136
8	Pension plan accruals and contributions (include	_,,		,	2,200
-	section 401(k) and 403(b) employer contributions)	41,032.	33,995.	6,809.	228
9	Other employee benefits	145,643.	121,184.	23,749.	710
10	Payroll taxes	194,346.	154,505.	38,869.	972
11	Fees for services (nonemployees):	•	,		
а	Management				
	Legal	15,618.		15,618.	
	Accounting				
	Lobbying				
	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A), amount, list line 11g expenses on Sch O.)	116,009.	27,392.	88,340.	277. 1,516.
12	Advertising and promotion	7,579.	6,063.	22 210	1,516
13	Office expenses	166,558.	133,188.	33,312.	58
14	Information technology				
15	Royalties	00 220		00 220	
	Occupancy	98,320. 1,261.	624.	98,320.	6.
17	Iravel	1,201.	024.	031.	0 (
18	Payments of travel or entertainment expenses				
10	for any federal, state, or local public officials Conferences, conventions, and meetings				
19 20	Interest	5,323.		5,323.	
20 21	Payments to affiliates	3,3231		3,3231	
22	Depreciation, depletion, and amortization	55,156.	44,125.	11,031.	
23	Insurance	70,396.	55,965.	14,079.	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	1,025,692.	1,025,692.		
	BUSINESS TAXES	105,897.	105,897.		
	DUES & LICENSES	19,228.	19,228.		
d	PROFESSIONAL DEVELOPMEN	16,941.	16,941.		
е	All other expenses	21,025.	16,715.	4,205.	105
25	Total functional expenses. Add lines 1 through 24e	4,498,420.	3,656,695.	825,543.	16,182
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				Form <b>990</b> (202)

Form **990** (2021)

Form 990 (2021)
Part X | Balance Sheet

Par	t X	Balance Sheet					
		Check if Schedule O contains a response or r	note to an	y line in this Part X			
					<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing	613,902.	1	626,279.		
	2	Savings and temporary cash investments		15,072.	2	15,075.	
	3	Pledges and grants receivable, net		3			
	4	Accounts receivable, net	1,105,953.	4	1,044,959.		
	5	Loans and other receivables from any current					
		trustee, key employee, creator or founder, su					
		controlled entity or family member of any of the		5			
	6	Loans and other receivables from other disqu	Loans and other receivables from other disqualified persons (as defined				
		under section 4958(f)(1)), and persons describ	oed in sec	tion 4958(c)(3)(B)		6	
က္က	7	Notes and loans receivable, net		9,947.	7	9,947.	
Assets	8	Inventories for sale or use				8	
۲	9	Description of the second seco			33,550.	9	10,715.
	10a	Land, buildings, and equipment: cost or othe	r				
		basis. Complete Part VI of Schedule D	10a	617,092.			
	b	Less: accumulated depreciation	298,090.	10c	303,886.		
	11	Investments - publicly traded securities			11		
	12	Investments - other securities. See Part IV, lin	442,303.	12	496,013.		
	13	Investments - program-related. See Part IV, lin		13			
	14	Intangible assets		440 544	14	440 500	
	15	Other assets. See Part IV, line 11		149,511.	15	143,732.	
	16	Total assets. Add lines 1 through 15 (must e			2,668,328.	16	2,650,606.
	17	Accounts payable and accrued expenses	494,601.	17	382,314.		
	18	Grants payable		18	160 020		
	19	Deferred revenue				19	168,930.
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Comple				21	
ies	22	Loans and other payables to any current or for					
Liabilities		trustee, key employee, creator or founder, su				00	
Lia I	00	controlled entity or family member of any of the		99,914.	22	99,914.	
	23 24	Secured mortgages and notes payable to unrule Unsecured notes and loans payable to unrule			416,190.	24	0.
	25	Other liabilities (including federal income tax,			110,1300	24	•
	25	parties, and other liabilities not included on lin					
		of Schedule D				25	
	26	Total liabilities. Add lines 17 through 25			1,010,705.	26	651,158.
		Organizations that follow FASB ASC 958, or	heck her	e <b>X</b>	, , , , , , , , , , , , , , , , , , , ,		
es		and complete lines 27, 28, 32, and 33.					
auc	27	Net assets without donor restrictions			1,657,623.	27	1,999,448.
Bai	28					28	
Б		Organizations that do not follow FASB ASC					
ᄚ		and complete lines 29 through 33.					
Net Assets or Fund Balances	29	Capital stock or trust principal, or current fun	ds			29	
set	30	Paid-in or capital surplus, or land, building, or				30	
As	31	Retained earnings, endowment, accumulated	income,	or other funds		31	
Set	32	Total net assets or fund balances			1,657,623.	32	1,999,448.
	33	Total liabilities and net assets/fund balances			2,668,328.	33	2,650,606.

Form **990** (2021)

Pa	T XI Reconciliation of Net Assets							
	Check if Schedule O contains a response or note to any line in this Part XI				X			
1	Total revenue (must equal Part VIII, column (A), line 12)	1	4,95					
2	Total expenses (must equal Part IX, column (A), line 25)	2	4,49		$\frac{20.}{73.}$			
3	Revenue less expenses. Subtract line 2 from line 1							
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	1,65	7,6	<u>23.</u>			
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	-14					
9	Other changes in net assets or fund balances (explain on Schedule O)	9	3	0,2	72.			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,							
	column (B))	10	1,99	9,4	<u>48.</u>			
Pa	t XII Financial Statements and Reporting							
	Check if Schedule O contains a response or note to any line in this Part XII				X			
				Yes	No			
1	Accounting method used to prepare the Form 990: Cash X Accrual Other							
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	Ο.						
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	on a						
	separate basis, consolidated basis, or both:							
	Separate basis Consolidated basis Both consolidated and separate basis							
b	Were the organization's financial statements audited by an independent accountant?		2b	X	$ldsymbol{ld}}}}}}}}}$			
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,						
	consolidated basis, or both:							
	Separate basis X Consolidated basis Both consolidated and separate basis							
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,						
	review, or compilation of its financial statements and selection of an independent accountant?		. 2c	X				
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche	edule O.						
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	gle Audit						
	Act and OMB Circular A-133?		3a		<u> </u>			
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ed audit						
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		. 3b	225	<u> </u>			
			Form	990	(2021)			

#### **SCHEDULE A**

(Form 990)

Total

Department of the Treasury Internal Revenue Service

# **Public Charity Status and Public Support**

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2021

Open to Public Inspection

**Employer identification number** Name of the organization 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). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 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). 11 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 on 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 II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) No above (see instructions))

Schedule A (Form 990) 2021 ENVIRONMENTAL WORKS 23-7139744 Page 2

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

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

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						
6	Public support. Subtract line 5 from line 4.						
	tion B. Total Support	,					
Cale	ndar year (or fiscal year beginning in)	(a) 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
	Amounts from line 4		. ,	, ,		.,	
	Gross income from interest.						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources						
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)						
11	<b>Total support.</b> Add lines 7 through 10						
	Gross receipts from related activities,	etc. (see instruction	ons)	•	•	12	
	First 5 years. If the Form 990 is for the	•					
	organization, check this box and stop			ŕ	•	. , . ,	
Sec	tion C. Computation of Publi	c Support Per	centage				
14	Public support percentage for 2021 (I	ine 6, column (f), d	livided by line 11,	column (f))		14	%
15	Public support percentage from 2020	Schedule A, Part	II, line 14			15	%
16a	33 1/3% support test - 2021. If the	organization did no	ot check the box o	n line 13, and line	14 is 33 1/3% or m	ore, check this bo	x and
	stop here. The organization qualifies						
b	33 1/3% support test - 2020. If the	organization did no	ot check a box on	line 13 or 16a, and	line 15 is 33 1/3%	or more, check th	is box
	and stop here. The organization qual	ifies as a publicly s	supported organiza	ation			
17a	10% -facts-and-circumstances test						
	and if the organization meets the fact						
	meets the facts-and-circumstances te				•		<b>▶</b> □
b	10% -facts-and-circumstances test	· ·	•			17a, and line 15 is	10% or
	more, and if the organization meets the	-					
	organization meets the facts-and-circu						<b>▶</b> □
18	<b>Private foundation.</b> If the organization		-	• •	•		s
	<u> </u>		•				(Form 990) 2021

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

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

Sec	ction A. Public Support	,,	,						
Cale	ndar year (or fiscal year beginning in)	<b>(a)</b> 2017	<b>(b)</b> 2018	<b>(c)</b> 2019	(d) 2020	(e) 2021	(f) Total		
1	Gifts, grants, contributions, and								
	membership fees received. (Do not								
	include any "unusual grants.")	7,413.	10,996.	6,128.	23,941.	427,888.	476,366.		
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	3064559.	3274119.	4103721.	4654638.	4484938.	19581975.		
3	Gross receipts from activities that are not an unrelated trade or business under section 513								
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf								
5	The value of services or facilities furnished by a governmental unit to the organization without charge								
6	Total. Add lines 1 through 5	3071972.	3285115.	4109849.	4678579.	4912826.	20058341.		
7 <i>a</i>	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	2026272	1716071	2060200	2492049	2046212	11122002		
	amount on line 13 for the year	2026373.	1716871. 1716871.	2860298. 2860298.	2483948.		11133802.		
	Add lines 7a and 7b	2020373.	1/100/1.	2000290.	2403940.	2040312.	11133802. 8924539.		
	Public support. (Subtract line 7c from line 6.)						0924339.		
		(a) 2017	(h) 0010	(a) 2010	(4) 2020	(a) 2021	(f) Total		
	ndar year (or fiscal year beginning in)	(a) 2017 3071972.	(b) 2018 3285115.	(c) 2019 4109849.	(d) 2020 4678579.	(e) 2021 4 9 1 2 8 2 6	(f) Total 20058341.		
	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	3071372.	3203113.	13.	5.	3.	21.		
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975								
c	Add lines 10a and 10b			13.	5.	3.	21.		
	Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on	3,402.		42,617.	35,373.	46,264.	127,656.		
12	Other income. Do not include gain or loss from the sale of capital	,	4,320.	3,960.	,	,	8,280.		
13	assets (Explain in Part VI.)	3075374.	3289435.	4156439.	4713957.	4959093.	20194298.		
	First 5 years. If the Form 990 is for th			ourth, or fifth tax v					
	check this box and stop here	· ·		•		. , . , .	<b>&gt;</b>		
Sed	ction C. Computation of Publi	c Support Per	centage						
15	Public support percentage for 2021 (li	ne 8, column (f), di	vided by line 13, c	olumn (f))		15	44.19 %		
16	Public support percentage from 2020	Schedule A, Part I	II, line 15			16	40.20 %		
Sec	ction D. Computation of Inves	tment Income	Percentage						
17	17 Investment income percentage for 2021 (line 10c, column (f), divided by line 13, column (f)) 17 .00 %								
18	Investment income percentage from 2	<b>2020</b> Schedule A, I	Part III, line 17			18	%		
19a	33 1/3% support tests - 2021. If the	organization did n	ot check the box o	n line 14, and line	15 is more than 33	3 1/3%, and line 1			
b	more than 33 1/3%, check this box are 33 1/3% support tests - 2020. If the								
	line 18 is not more than 33 1/3%, chec	ck this box and sto	op here. The orga	nization qualifies a	s a publicly suppor	rted organization			
20	Private foundation If the organization	n did not chack a l	ooy on line 14 10a	or 10h chock th	is how and soo inst	ructions			

# 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")? *If* "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).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7?

  If "Yes." complete Part I of Schedule L (Form 990).
- 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 on 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 on 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
1		
•		
2		
3a		
3b		
30		
3с		
- 55		
4a		
4b		
4 -		
4c		
5a		
5b		
5c		
6		
-		
7		
8		
9a		
9b		
90		
9с		
10a		
10b		
ıla Δ (Fo	rm 990)	2021

132024 01-04-21

Га	Supporting Organizations (continued)			
			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 on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
	A family member of a person described on line 11a above?	11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide	110		
Sec	detail in Part VI. tion B. Type I Supporting Organizations	11c		
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			110
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
<u> </u>	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations	1		
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in <b>Part VI</b> how control			
	or management of the supporting organization was vested in the same persons that controlled or managed	1		
Sec	the supported organization(s). 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			
	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 on 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 <b>Part VI</b> the role the organization's	3		
Sec	supported organizations played in this regard. 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.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see ins	struction	s).	
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			
	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			
L	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described on 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	2b		
3	these activities but for the organization's involvement.  Parent of Supported Organizations. Answer lines 3a and 3b below.	20		
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
_	trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

	dule A (Form 990) 2021 ENVIRONMENTAL WORKS			23-7139744 Page 6
Pa				
1	Check here if the organization satisfied the Integral Part Test as a qualifyin	g trust on	Nov. 20, 1970 ( explain i	n Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations must	t complete	Sections A through E.	
Sect	ion A - Adjusted Net Income	(A) Prior Year	(B) Current Year (optional)	
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
_3_	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
_7_	Other expenses (see instructions)	7		
8_	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
с	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 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		

Schedule A (Form 990) 2021

Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see

instructions).

Distributable Amount. Subtract line 5 from line 4, unless subject to

emergency temporary reduction (see instructions).

Par	rt V Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	ınizations <sub>(continu</sub>	ıed)	
Secti	ion D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish exe	1			
2	Amounts paid to perform activity that directly furthers exempt				
	organizations, in excess of income from activity	2			
3	Administrative expenses paid to accomplish exempt purpose	3			
4	Amounts paid to acquire exempt-use assets	4			
5	Qualified set-aside amounts (prior IRS approval required - pr	5			
6	Other distributions (describe in Part VI). See instructions.	6			
7	Total annual distributions. Add lines 1 through 6.	7			
8	Distributions to attentive supported organizations to which t				
	(provide details in <b>Part VI</b> ). See instructions.			8	
9	Distributable amount for 2021 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
		(i)	(ii)		(iii)
Secti	ion E - Distribution Allocations (see instructions)	Excess Distributions	Underdistribution Pre-2021	าร	Distributable Amount for 2021
_1_	Distributable amount for 2021 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2021 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2021				
<u>a</u>	From 2016				
b	From 2017				
с	From 2018				
d	From 2019				
е	From 2020				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2021 distributable amount				
i_	Carryover from 2016 not applied (see instructions)				
j_	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2021 from Section D,				
	line 7: \$				
а	Applied to underdistributions of prior years				
b	Applied to 2021 distributable amount				
С	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2021, if				
	any. Subtract lines 3g and 4a from line 2. For result greater				
	than zero, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2021. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2022. Add lines 3j				
	and 4c.				
8	Breakdown of line 7:				
a	Excess from 2017				
b	Excess from 2018				
С	Excess from 2019				
	Excess from 2020				
	Excess from 2021				

Dort VI																								agc <b>c</b>
	Part I\ line 1;	/, Se Part	ction <i>F</i> IV, Se	A, line: ection	s 1, 2, D, line	, 3b, 3 es 2 a	3c, 4t and 3:	o, 4c, : ; Part	5a, 6 IV, Se	, 9a, 9 ection	9b, 9c ı E, lin	, 11a ies 1d	, 11b, c, 2a, :	and 1 2b, 3a	1c; P , and	art IV, 3b; Pa	Sec art V	II, line tion B, , line 1; or any a	lines ' Part '	l and : V, Sec	2; Par tion E	t IV, Se B, line 1	12; ection C e; Part	), V,
			ctions							.,			0.740			1110 pt								
SCHEDUL	Œ A	λ,	PAR	T I	II,	L.	INE	12	, 1	EXP	LAN	AT]	ON	FOI	2 0	THE	R :	INCC	ME:					
PROPERT	Y M	IAN	AGE:	MEN	T F	EES	S																	

# Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service

# **Schedule of Contributors**

► Attach to Form 990 or Form 990-PF.

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

OMB No. 1545-0047

2021

Name of the organization	Employer identification number
ENVIRONMENTAL WORKS	23-7139744

Organization type (check one):												
Filers of:		Section:										
Form 990 or 990-EZ		$\boxed{\textbf{X}}$ 501(c)( $3$ ) (enter number) organization										
		4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation										
		527 political organization										
Form 990	)-PF	501(c)(3) exempt private foundation										
		4947(a)(1) nonexempt charitable trust treated as a private foundation										
		501(c)(3) taxable private foundation										
	nly a section 501(c)(7	covered by the <b>General Rule</b> or a <b>Special Rule</b> .  7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.										
X		filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.										
Special	Rules											
	sections 509(a)(1) a contributor, during	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; line 1. Complete Parts I and II.										
	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.											
	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the <b>General Rule</b> applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year											
answer "	No" on Part IV, line	at isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it <b>must</b> 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify requirements of Schedule B (Form 990).										

 $\ \ \, \text{LHA} \ \ \, \text{For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.}$ 

Schedule B (Form 990) (2021)

Page 2 Schedule B (Form 990) (2021)

Name of organization	Employer identification number
ENVIRONMENTAL WORKS	23-7139744

Part I	Contributors (see instructions). Use duplicate copies of Part I if	additional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$\$	Person X Payroll
(a)	(b)	(c) Total contributions	(d)
No.	Name, address, and ZIP + 4	\$	Person Payroll Complete Part II for noncash contributions.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Person Payroll Complete Part II for noncash contributions.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
140.	Hame, audiess, and ZIF + +	\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Turne, addition, und Ell TT	\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Page 3

Name of organization Employer identification number

# ENVIRONMENTAL WORKS

23-7139744

Part II	Noncash Property (see instructions). Use duplicate copies of Part II	if additional space is needed.	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
123/53 11-11.	04		Schedule B (Form 990) (2021)

Schedule B (Form 990) (2021) Page 4 Name of organization **Employer identification number** ENVIRONMENTAL WORKS 23-7139744 Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) Use duplicate copies of Part III if additional space is needed. (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (d) Description of how gift is held (c) Use of gift Part I

123454 11-11-21 Schedule B (Form 990) (2021)

(e) Transfer of gift

Transferee's name, address, and ZIP + 4

Relationship of transferor to transferee

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

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

► Attach to Form 990.

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

OMB No. 1545-0047 Inspection

Name of the organization

ENVIRONMENTAL WORKS

**Employer identification number** 23-7139744

Par	t I Organizations Maintaining Donor Advised organization answered "Yes" on Form 990, Part IV, line		or Accounts. Complete if the
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in w	riting that the assets held in donor advise	ed funds
	are the organization's property, subject to the organization's ex	xclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor ad		
	for charitable purposes and not for the benefit of the donor or	donor advisor, or for any other purpose of	conferring
Par	t II Conservation Easements. Complete if the organic	anization answered "Yes" on Form 990, F	Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization	n (check all that apply).	
	Preservation of land for public use (for example, recreation	on or education) Preservation of	a historically important land area
	Protection of natural habitat	Preservation of	a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualifie	ed conservation contribution in the form of	
	day of the tax year.		Held at the End of the Tax Year
а			
b			
С	Number of conservation easements on a certified historic structure of conservation easements on a certified historic structure.		
d	Number of conservation easements included in (c) acquired aff	•	
_	listed in the National Register		2d
3	Number of conservation easements modified, transferred, release	ased, extinguished, or terminated by the	organization during the tax
	year		
4	Number of states where property subject to conservation ease	· · · · · · · · · · · · · · · · · · ·	
5	Does the organization have a written policy regarding the period		Yes No
6	violations, and enforcement of the conservation easements it I Staff and volunteer hours devoted to monitoring, inspecting, h		
6	Starr and volunteer riours devoted to monitoring, inspecting, in	andling of violations, and emorcing cons	ervation easements during the year
7	Amount of expenses incurred in monitoring, inspecting, handli	ng of violations, and enforcing conservat	ion essements during the year
•	S	ing of violations, and emoroning conservat	non casements during the year
8	Does each conservation easement reported on line 2(d) above	satisfy the requirements of section 170/b	n)(4)(B)(i)
Ū	and section 170(h)(4)(B)(ii)?	• •	
9	In Part XIII, describe how the organization reports conservation		
	balance sheet, and include, if applicable, the text of the footnot	•	
	organization's accounting for conservation easements.	ÿ	
Par	t III Organizations Maintaining Collections of A	Art, Historical Treasures, or Otl	her Similar Assets.
	Complete if the organization answered "Yes" on Form 9	990, Part IV, line 8.	
1a	If the organization elected, as permitted under FASB ASC 958	, not to report in its revenue statement ar	nd balance sheet works
	of art, historical treasures, or other similar assets held for publi	ic exhibition, education, or research in fu	rtherance of public
	service, provide in Part XIII the text of the footnote to its finance	cial statements that describes these items	s.
b	If the organization elected, as permitted under FASB ASC 958	, to report in its revenue statement and b	palance sheet works of
	art, historical treasures, or other similar assets held for public e	exhibition, education, or research in furth	erance of public service,
	provide the following amounts relating to these items:		
	(i) Revenue included on Form 990, Part VIII, line 1		<b>&gt;</b> \$
			<b>L</b> 4
2	If the organization received or held works of art, historical treas		
	the following amounts required to be reported under FASB AS	C 958 relating to these items:	
а	Revenue included on Form 990, Part VIII, line 1		<b>&gt;</b> \$
b	Assets included in Form 990, Part X		

132051 10-28-21

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

Par	t III Organizations Maintaining Co	llections of Art	t, Histo	orical Tre	asures, o	r Other	Similar	Assets	(contin	nued)	<u>.gc</u>
	Using the organization's acquisition, accession								(000000	,	
	collection items (check all that apply):	,	,	,	3		,				
а	Public exhibition	d		I oan or exc	hange progra	am					
b	Scholarly research	e			age pregn						
c	Preservation for future generations	J									
4	Provide a description of the organization's coll	ections and explain	how th	ev further th	ne organizatio	n's evem	nt nurnos	e in Part	XIII		
5	During the year, did the organization solicit or	•		•	J			oc iiii ait	XIII.		
3	to be sold to raise funds rather than to be main								Yes		No
Par	t IV Escrow and Custodial Arrang					"Voc" on I					<u> </u>
	reported an amount on Form 990, Part		ie ii tile	Gugariizatic	ii alisweleu	165 0111	-01111 990	, raitiv,	iii le 9, Oi		
12	Is the organization an agent, trustee, custodial		iany for (	contribution	e or other see	eate not in	ncluded				
ıa									Yes		No
h	on Form 990, Part X?								_ 1es		] NO
D	If "Yes," explain the arrangement in Part XIII are	na compiete trie ioi	lowing t	able.					Amoun	+	
_	Danissis s balance						4.		Amoun		
C	Beginning balance						1c				
a	Additions during the year										
e	Distributions during the year										
f	Ending balance								7	$\overline{}$	1
	Did the organization include an amount on For						y?		Yes	<u> </u>	No
Par	If "Yes," explain the arrangement in Part XIII. C										
Fai	t V Endowment Funds. Complete if							aara baali	(a) Faur		haalı
		(a) Current year	(D) F	rior year	(c) Two year	IS DACK (	<b>(d)</b> Three y	ears back	(e) Four	years	Dack
1a	Beginning of year balance										
b	Contributions										
С	Net investment earnings, gains, and losses										
d	Grants or scholarships										
е	Other expenditures for facilities										
	and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the curre	nt year end balance	e (line 1ç	g, column (a	)) held as:						
а	Board designated or quasi-endowment		_%								
b	Permanent endowment	%									
С	Term endowment >%	, 5									
	The percentages on lines 2a, 2b, and 2c should	d equal 100%.									
За	Are there endowment funds not in the possess	sion of the organiza	tion tha	t are held ar	nd administer	ed for the	e organiza	ition			
	by:									Yes	No
	(i) Unrelated organizations								3a(i)		
	(ii) Related organizations								3a(ii)		
b	If "Yes" on line 3a(ii), are the related organizati	ons listed as require	ed on S	chedule R?					3b		
4	Describe in Part XIII the intended uses of the o	organization's endov	wment f	unds.							
Par	t VI Land, Buildings, and Equipme	ent.									
	Complete if the organization answered	"Yes" on Form 990	, Part IV	, line 11a. S	See Form 990	, Part X, li	ine 10.				
	Description of property	(a) Cost or of	ther	(b) Cost	or other	(c) Ac	cumulate	ed	(d) Boo	k value	 е
		basis (investm			(other)		reciation		` ,		
1a	Land										
b	Buildings										
c	Leasehold improvements			35	0,331.	1	35,44	18.	21	4,88	83.
d	Equipment				6,761.		77,75			9,00	
	Other				,	_	, .				
	. Add lines 1a through 1e. (Column (d) must ea		X colum	n (R) line 1	0c)			ightharpoonup	30	3,88	86.

Schedule D (Form 990) 2021 ENVIRONMENTA	L WORKS	23	-7139744 Page <b>3</b>
Part VII Investments - Other Securities.			
Complete if the organization answered "Yes" or	n Form 990, Part IV, line 1	1b. See Form 990, Part X, line 12.	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end	-of-year market value
(1) Financial derivatives			
(2) Closely held equity interests	496,013.	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.)	496,013.		
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes" o	n Form 990, Part IV, line 1	1c. See Form 990, Part X, line 13.	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end	-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			
Complete if the organization answered "Yes" o	n Form 990, Part IV, line 1	1d. See Form 990, Part X, line 15.	
(a) [	Description		(b) Book value
(1) WORK IN PROGRESS - PROJECT	S		143,732.
(2)			
(3)			
(4)			
(5)			
(6)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line	15.)	<b>&gt;</b>	143,732.
Part X Other Liabilities.			
Complete if the organization answered "Yes" o	n Form 990, Part IV, line 1	1e or 11f. See Form 990, Part X, line 25.	
1 (a) Description of liability			(b) Book value

1.	(a) Description of liability	(b) Book value
(1)	Federal income taxes	
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
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

Pai	rt XI Reconciliation of Revenue per Audited Financial State	ments With Revenue	e per Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line	12a.		
1	Total revenue, gains, and other support per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
а	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b		
С	Recoveries of prior year grants			
d	Other (Describe in Part XIII.)	2d		
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
С	Add lines <b>4a</b> and <b>4b</b>		4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.)		5	
Pa	rt XII Reconciliation of Expenses per Audited Financial State		es per Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line			
1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 1		
а	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
С	Other losses	2c		
d	Other (Describe in Part XIII.)	2d		
е	Add lines 2a through 2d			
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
С	Add lines 4a and 4b		4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5	
Pa	rt XIII Supplemental Information.			
Provi	ide the descriptions required for Part II, lines ${\bf 3,5,}$ and ${\bf 9;PartIII,}$ lines ${\bf 1a}$ and ${\bf 4;F}$	Part IV, lines 1b and 2b; Pa	art V, line 4; Part X, line 2; Part XI,	
lines	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any $\alpha$	additional information.		
PAI	RT X, LINE 2:			
EN	VIRONMENTAL WORKS IS A NONPROFIT ORGANIZA	ATION AS DEFIN	IED UNDER INTERNAL	
RE	VENUE CODE SECTION 501(C)(3) AND IS EXEMP	T FROM FEDERA	L INCOME TAXES	
T T 3 T T	ODD TAMEDALL DEVENUE CODE CECUTON FO1/3)		NAT WORKS OUALTEEN	~
UNI	DER INTERNAL REVENUE CODE SECTION 501(A).	ENVIRONMENT	AL WORKS QUALIFIE	<u>S</u>
<b></b>	DESCRIPTION OF THE PROPERTY OF	NIDED GEGETON	170/0)/1)/3) 3370	
FOF	R THE CHARITABLE CONTRIBUTION DEDUCTION U	INDER SECTION	1/U(B)(1)(A) AND	
TT 7 /	י החווא מו אפמדודה אפ און מהפאודפאחדמי חייאים	י דמ ז חווח דמ	CHADIMY AC DESINE	Ъ
нΑ	S BEEN CLASSIFIED AS AN ORGANIZATION THAT	. T2 W LORFIC	CHARITY AS DEFINE	ע
יזם	CECUTON FOO/A\/1\			
ΒY	SECTION 509(A)(1).			

THE ORGANIZATION BELIEVES THAT IT HAS APPROPRIATE SUPPORT FOR ANY

POSITIONS TAKEN, AND AS SUCH DOES NOT HAVE ANY UNCERTAIN TAX POSITIONS

THAT ARE MATERIAL TO THE FINANCIAL STATEMENTS.

Schedule D (Form 990) 2021	ENVIRONMENTAL	WORKS	23-7139744	Page 5
Schedule D (Form 990) 2021 Part XIII Supplemental Info	rmation (continued)			
	(continued)			

## SCHEDULE O (Form 990)

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 Form 990-EZ.

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

2021
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 III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

- 2) PATHWAYS TO EQUITY: A NATIONAL LEADERSHIP DEVELOPMENT COHORT TO HELP
  DESIGNERS LEARN BEST PRACTICES FOR COMMUNITY ENGAGEMENT AND EQUITABLE
  DESIGN.
- 3) THE LEGACY CITIES COMMUNITY OF PRACTICE IS A PROGRAM THAT BRINGS

  TOGETHER INTERDISCIPLINARY TEAMS OLDER INDUSTRIAL CITIES TO FOCUS ON

  LAND-USE ISSUES LIKE HOUSING, TRANSPORTATION CONNECTIONS, OR

  PLACEMAKING AND IMPLEMENT SOLUTIONS THROUGH PLACE-BASED PROJECTS IN

  DISINVESTED NEIGHBORHOODS.

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

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

Schedule O (Form 990) 2021 Page **2** 

Name of the organization

ENVIRONMENTAL WORKS

Employer identification number

23-7139744

3) MOUNTAINVIEW FAMILY HOUSING, A PROJECT THAT PROVIDES AFFORDABLE

FARMWORKER AND FAMILY HOUSING THAT TURNS A BROWNFIELD SITE INTO A

COMMUNITY ASSET IN ENTIAT, WASHINGTON.

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

WE PLAN, DESIGN, AND ADVOCATE FOR COMMUNITY-CENTERED ENVIRONMENTS. SOME HIGHLIGHTS OF DESIGN PROJECTS THAT WE COMPLETED IN 2021 ARE:

- 1) RENOVATIONS OF 234 UNITS OF PERMANENT SUPPORTIVE HOUSING FOR PEOPLE TRANSITIONING OUT OF HOMELESSNESS IN THE HISTORIC FRYE BUILDING OF SEATTLE.
- 2) THE EDMONDS WATERFRONT REDEVELOPMENT CREATED ACCESSIBLE,

  SUSTAINABLE, WELCOMING ACCESS TO A RESTORED BEACHFRONT WHILE ADDING 280

  FEET TO THE CITY'S BELOVED MILE-LONG PUBLIC MARINE WALKWAY. IT REMOVED

  A CREOSOTE-SOAKED BULKHEAD AND FILL; AND ADDED SAND, GRAVEL, NATIVE

  PLANTS, AND LOGS TO RESTORE THE SHORELINE TO NATURAL CONDITIONS.
- 3) ANDY'S PLACE, WHICH INCLUDES 82 NEW UNITS OF HOUSING, COUPLED WITH FACILITIES FOR INTEGRATED TREATMENT AND SUPPORT SERVICES FOR PEOPLE WITH CHRONIC BEHAVIORAL HEALTH CHALLENGES.

EXPENSES \$ 3,575,319. INCLUDING GRANTS OF \$ 0. REVENUE \$ 4,463,357.

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

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

132212 11-11-21

Schedule O (Form 990) 2021 Page **2** 

Name of the organization

ENVIRONMENTAL WORKS

Employer identification number 23-7139744

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

RESOLUTION OF THE BOARD THAT BY ITS TERMS INDICATES THAT IT CANNOT BE

AMENDED, ALTERED OR REPEALED BY THE EXECUTIVE COMMITTEE. THE EXECUTIVE

COMMITTEE WAS INACTIVE DURING 2021.

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 PROVIDED TO THE

FINANCE COMMITTEE MEMBERS.

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

IF AN INDIVIDUAL HAS A POTENTIAL CONFLICT OF INTEREST, THEY ARE REQUIRED TO DISCLOSE THIS FACT TO EITHER THE EXECUTIVE DIRECTOR OR THE BOARD OF DIRECTORS, AS APPROPRIATE. IF IT IS UNCLEAR WHETHER A CONFLICT EXISTS, THE BOARD OF DIRECTORS MAKES THE DETERMINATION. A BOARD MEMBER WITH A CONFLICT ABSTAINS FROM VOTING ON THE MATTER. AN EMPLOYEE WITH A CONFLICT IS NOT 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 2021, WITH THE ASSISTANCE OF A THIRD-PARTY EXECUTIVE

Schedule O (Form 990) 2021 Page 2 **Employer identification number** Name of the organization 23-7139744 ENVIRONMENTAL WORKS SEARCH CONSULTANT. 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 XI, LINE 9, CHANGES IN NET ASSETS: CHANGE IN VALUE OF INVESTMENT IN SUBSIDIARY 30,272. FORM 990, PART XII, LINE 2C THE PROCESS FOR SELECTING THE INDEPENDENT AUDITOR HAS NOT CHANGED.

#### **SCHEDULE R** (Form 990)

Related Organizations and Unrelated Partnerships

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

Attach to Form 990.

Department of the Treasury Internal Revenue Service Name of the organization

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

23-7139744

Part I Identification of Disregarded Entities. Comple	te if the organization answered "Yes"	on Form 990, Part IV, line 33	3.					
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state of foreign country)	(d) or Total inco	me End-of-yea		(f) Direct controlling entity		)
	_							
Part II Identification of Related Tax-Exempt Organizations during the tax year.	ations. Complete if the organization a	answered "Yes" on Form 990	), Part IV, line 34, I	pecause it had one	or more	related tax-exer	mpt	
(a)  Name, address, and EIN  of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))		(f) ct controlling entity	Section 5 contr ent	rolled ity?
FIRESTATION SEVEN ASSOCIATES - 91-1370580 402 15TH AVENUE EAST SEATTLE, WA 98112	REAL ESTATE	WASHINGTON	501(C)(25)	(-)(-)/-//	ENVIRO WORKS	NMENTAL	Yes	No

ENVIRONMENTAL WORKS

Page 2

		0 11 100	"\ " E 000 B		
Part III	Identification of Related Organizations Taxable as a Partnership.	Complete if the organization answered	"Yes" on Form 990, Pa	irt IV, line 34, l	because it had one or more related
	organizations treated as a partnership during the tax year.		· ·		
	organizations treated as a partiership during the tax year.				

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(1	h)	(i)	(j)	(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Share of total	Share of end-of-year assets	Disprop	ortionata	Code V-UBI	General o	Percentage
		country)		sections 512-514)			Yes	No	K-1 (Form 1065)	Yes No	
				1					1		

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.

(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	Sec 512(t contr ent	(i) ction (b)(13) trolled tity?
		country)		2				Yes	No
	-								
								<u> </u>	<u> </u>
	-								
								<u> </u>	<u> </u>
	-								
								<u> </u>	<del></del>
-									
								<u> </u>	
	]								

Page 3

Yes No

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

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

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-IV?

a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity

b	Gift, grant, or capital contribution to related organization(s)				1b		X	
С	Gift, grant, or capital contribution from related organization(s)				1c		X	
d	Loans or loan guarantees to or for related organization(s)				1d		X	
е	Loans or loan guarantees by related organization(s)				1e		X	
f	Dividends from related organization(s)				1f		X	
g	Sale of assets to related organization(s)				1g		Х	
h	n Purchase of assets from related organization(s)				1h		Х	
i	Exchange of assets with related organization(s)				1i	Х	X	
j	j Lease of facilities, equipment, or other assets to related organization(s)							
k	Lease of facilities, equipment, or other assets from related organization(s)				1k		X	
-1	Performance of services or membership or fundraising solicitations for related organizatio				11	Х		
n	n Performance of services or membership or fundraising solicitations by related organization	on(s)			1m		X	
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n	X		
0	Sharing of paid employees with related organization(s)				10	X		
р	Reimbursement paid to related organization(s) for expenses				<b>1</b> p	X		
q	Reimbursement paid by related organization(s) for expenses				1q		X	
r	Other transfer of cash or property to related organization(s)				1r		X	
	Other transfer of cash or property from related organization(s)				1s		X	
2	If the answer to any of the above is "Yes," see the instructions for information on who mu	ust complete thi	s line, including covered re	elationships and transaction thresholds.				
	· · · · · · · · · · · · · · · · · · ·	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount invo	olved			
1)	FIRESTATION SEVEN ASSOCIATES	J	86,900.	CONTRACT				
2)								
3)								
<u>J,</u>								
4)								
•,								
5)								
<u>J,</u>								
6)								
3216	63 11-17-21			Schedule F	R (Forr	n 990	2021	
		2.5				,		

Schedule R (Form 990) 2021 ENVIRONMENTAL WORKS 23-7139744 Page 4

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.

(a) Name, address, and EIN of entity	(b) Primary activity	(c)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	Are all partners sec. 501(c)(3) orgs.?  Yes No	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproptionat allocatio	Code V-UBI amount in box 2 of Schedule K-	General of managing partner?  Yes No	(k) Percentage ownership