# Form 990

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

OMB No. 1545-6047

Under section 501(c), 527, or 4947(a)(1) of the internal Revenue Code (except black lung benefit trust or private foundation)

2012

Department of the Treasury Internal Revenue Service

> The organization may have to use a copy of this return to satisfy state reporting requirements.

Open to Public Inspection

A	For 1	the 2012 calendar year, or tax year beginning 10/01, 2012, and en	ding		9/30, 20 13					
В	Čhank if	C Name of organization		D Employer Identi	fication number					
_	_	ENVIRONMENTAL DEFENSE FUND, INC.		11-61071	28					
- 1	oh=	free Doing Business As		1						
L	Nes	Number and street (or P.O. box if meil is not delivered to street address) Room/suit	е	E Telephone number						
	Initi	a retain 257 PARK AVENUE SOUTH		(212) 505-	2100					
		minuted City, town or post office, state, and ZIP code			<u> </u>					
L	rela			G Gross receipts \$	182,432,331.					
L		F Name and address of principal officer: FREDERIC D. KRUPP		H(x) is this a group re	Num for Yes X No					
_		257 PARK AVENUE SOUTH NEW YORK, NY 10010		H(b) Are all affiliates in	ncluded? Yes No					
1_			527	If "No," attach e i	let. (see Instructions)					
7		site: DWWW.EDF.ORG		H(c) Group mamption	number 3>					
K	_	of organization: X Corporation Trust Association Other > L Yes	r of format	ton: 1967 M Ster	te of legal domicile: NY					
P	art I									
	1	Briefly describe the organization's mission or most significant activities:								
5	ıl	EDF'S MISSION IS TO PRESERVE THE NATURAL SYSTEMS ON WHIC								
Activities & Governance		DEPENDS. GUIDED BY SCIENCE AND ECONOMICS, WE FIND PRACTI		MD CIN						
Ę		LASTING SOLUTIONS TO THE MOST SERIOUS ENVRIONMENTAL PROB								
ě	2	Check this box D if the organization discontinued its operations or disposed of more	than 25%	of its net assets.						
-6	3	Number of voting members of the governing body (Part VI, line 1a)		3	37.					
8	4	Number of Independent voting members of the governing body (Part VI, line 1b)		4	35.					
2	5	Total number of Individuals employed in calendar year 2012 (Part V, line 2a)		5	579.					
Š	1 .	Total number of volunteers (estimate if necessary)		6	20.					
	7a	Total unrelated business revenue from Part VIII, column (C), line 12			25,646.					
	Ь	Net unrelated business taxable income from Form 990-T, line 34		7ь	6,291.					
				Prior Year	Current Year					
2	8	Contributions and grants (Part VIII, line 1h)	. 1	10,051,773.	145,135,042.					
Revenue	9	Program service revenue (Part VIII, line 2g)		0	0					
8	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	.	1,155,219.	4,042,141.					
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		708,146.	542,980.					
_	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	. 1	11,915,138.	149,720,163.					
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		8,242,309.	13,482,633.					
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0	0					
8	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		46,244,145.	52,675,612.					
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)  Total fundraising expenses (Part IX, column (D), line 25) ▶ 11,939,410.		497,673.	724,443.					
	Ь	Total fundraising expenses (Part IX, column (D), line 25) ▶11,939,410.								
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	.	47,047,316.	48,649,283.					
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	1	02,031,443.	115,531,971.					
- 16	19	Revenue less expenses. Subtract line 18 from line 12		9,883,695.	34,188,192.					
20 20 20 20 20 20 20 20 20 20 20 20 20 2				ing of Current Year	End of Year					
9.5	20	Total assets (Part X, line 16) Total liabilities (Part X, line 26)	1	73,139,307.	208,751,208.					
2 E	21			21,270,071.	22,049,869.					
Ş	demonstrat	Net assets or fund balances. Subtract line 21 from line 20,	1!	51,869,236.	186,701,339.					
Pa		Signature Block								
	der per 9, corre	naities of perjury. I declare that I have examined this return, including accompanying schedules and stated, and complete. Declaration of preparer (other than officer) is based on all infogmation of which preparer is	ments, an	nd to the best of my	knowledge and belief, It is					
		0000000	ou only kin	amouga.						
Sig	ın	Signature of officer		5/8	//4					
He		a with: Hallanharle are		Date	′ ′					
		Type of print name and fillie								
_		Print/Type preparer's name Preparer's signature Date								
Paic	r	JULIE FLOCH DANA' - LENGTH SAN	110	C   C   C   C   C   C   C   C   C   C	PTIN					
Pre	Darer		5/17	self-employed	P00736879					
Use	Only	Firm's address > 750 THIRD AVENUE NEW YORK, NY 10017-2703		040	1639826					
Mas	the II	RS discuss this return with the preparer shown above? (see instructions)		Phone no. 212	-9498700					
		work Reduction Act Notice, see the separate Instructions.			X Yes No					
JSA		•			Form <b>990</b> (2012)					
2E10	10 1.00	0								

	ENVIRONMENTAL DEFENSE FUND, INC.	11-6107128
	rm 990 (2012)	Page 2
P	art III Statement of Program Service Accomplishments	
_	Check if Schedule O contains a response to any question in this Part III	X
1	Briefly describe the organization's mission:	
	ENVIRONMENTAL DEFENSE FUND'S MISSION IS TO PRESERVE THE NATURAL	
	SYSTEMS ON WHICH ALL LIFE DEPENDS. GUIDED BY SCIENCE AND ECONOMICS,	
	WE FIND PRACTICAL AND LASTING SOLUTIONS TO THE MOST SERIOUS	
_	ENVIRONMENTAL PROBLEMS.	
2	Did the organization undertake any significant program services during the year which were not listed	on the
	prior Form 990 or 990-EZ?	Yes X No
	If "Yes," describe these new services on Schedule O.	
3	Did the organization cease conducting, or make significant changes in how it conducts, any p	rogram
	services?	Yes X No
4	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 the total expenses, and revenue, if any, for each program service reported.	s and allocations to others,
	the total expenses, and revenue, if any, for each program service reported.	
40	/Code: \/Evenness B including growth of B	
48	(Code:) (Expenses \$43,913,571. including grants of \$9,911,671. ) (Revenue \$CLIMATE AND ENERGY - SEE SCHEDULE O	)
	CLIMATE AND ENERGY - SEE SCHEDULE O	
41		
4b	(Code:) (Expenses \$	)
	OCEANS - SEE SCHEDULE O	
4c	(Code:) (Expenses \$	)
	ECOSYSTEMS - SEE SCHEDULE O	
	<u> </u>	
4d	Other program services (Describe in Schedule O.)	
	(Expenses \$ 12,862,315, including grants of \$ 624,520, ) (Revenue \$	
4e	Total program service expenses ▶ 95,755,248.	

Part	Checklist of Required Schedules			- ago e
			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	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		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,	1		
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,	l _		.,
e	Part III	5		_ <u>X</u>
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6	х	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	-		
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21, 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? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Х	
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	X	
Ь	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	
C	Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.			х
а	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets	11c		
u	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		х
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	х	
	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	x	
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes,"			
	complete Schedule D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if		: [	
	the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a	х	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,		J	
	fundraising, business, investment, and program service activities outside the United States, or aggregate	ا ,,, ا	Ţ	
15	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	Х	
19	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any	4.5	x	
16	organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance	15		
	to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16	x	
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services			
	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	x	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19		X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
ь	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
JSA		Form 9	9 <b>90</b> (	2012)

	990 (2012)			Page 4
Par	t IV Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization			
	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States			
	on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, 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 Schedule J	23	X	
24 a	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 Schedule K. If "No," go to line 25	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d		24d		
25 a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction			
		25a		х
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 Schedule L, Part I	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or			
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26	- 1	х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		х
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete		$\neg$	
	Schedule L, Part IV	28b	$_{\mathbf{x}}$	
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified		$\dashv$	
	conservation contributions? If "Yes," complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,	-	- +	
	Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"	<del>-</del>	- +	<del></del>
	complete Schedule N, Part II	32		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	V2	-	<del></del> -
	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,	33	_	<del></del>
	or IV, and Part V, line 1	34	х	
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		<u>x</u>
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a	034		<del></del>
-	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable	330	-	
	related organization? If "Yes," complete Schedule R, Part V, line 2	36	х	
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	30		
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,		1	
	Part VI	27		х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and	37	-+	**
	19? Note. All Form 990 filers are required to complete Schedule O	38	х	
			90 /2	2012

Page 5

	Check if Schedule O contains a response to any question in this Part V	• • •	
	Enter the number recorded to Box 0 of Eq. (1995)		Yes
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	2	Ì
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	0	
C	Did the organization comply with backup withholding rules for reportable payments to vendors and		175
	reportable gaming (gambling) winnings to prize winners?	1c	х
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 579		4 00
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	х
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	8	Kar San
3a	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," provide an explanation in Schedule O	3b	Х
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority	OD	<u> </u>
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial		
	account?	4	
<b>L</b>	account)?	4a	X
D	If "Yes," enter the name of the foreign country: ► ATTACHMENT 1		Η.
_	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	
	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 any contributions that were not tax deductible as charitable contributions?	6a	
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).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	J. 11	
	and services provided to the payor?	7a	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	
-	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	7.0	
•	required to file Form 8282?		
a l		7c	2-3- K-K
	If "Yes," indicate the number of Forms 8282 filed during the year	1.3	li de
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	
ୁମ ଭ	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 and section 509(a)(3) supporting		
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring	]	
	organization, have excess business holdings at any time during the year?	8	
9	Sponsoring organizations maintaining donor advised funds.		
	Did the organization make any taxable distributions under section 4966?	9a	
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b	
0	Section 501(c)(7) organizations. Enter:		
а	Initiation fees and capital contributions included on Part VIII, line 12		
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b		
ı	Section 501(c)(12) organizations. Enter:		- 1
a	Gross income from members or shareholders		
b	Gross income from other sources (Do not net amounts due or paid to other sources		
	against amounts due or received from them.)		
2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	124	
	Section 501(c)(29) qualified nonprofit health insurance issuers.		
	Is the organization licensed to issue qualified health plans in more than one state?	42-	
44	Note. See the instructions for additional information the organization must report on Schedule O.	13a	
Ja.			
D	Enter the amount of reserves the organization is required to maintain by the states in which		
_	the organization is licensed to issue qualified health plans		
C	Enter the amount of reserves on hand		
ıa	Did the organization receive any payments for indoor tanning services during the tax year?	14a	
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	

Par	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See in	nstruc	tions.	
800	Check if Schedule O contains a response to any question in this Part VI		• •	Х
Sec	tion A. Governing Body and Management		1	T
			Yes	No
1a		4		
	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 in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent	4		
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_		X
3	Did the organization delegate control over management duties customarily performed by or under the direct			]
	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint			
	one or more members of the governing body?	7a		X
Ь	Are any governance decisions of the organization reserved to (or subject to approval by) members,		1	
	stockholders, or persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during	100		
	the year by the following:			
а	The governing body?	8a	X	<u> </u>
b	Each committee with authority to act on behalf of the governing body?	8b	Х	<u> </u>
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
Cooti	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	Ļ	X
Secu	on B. Policies (This Section B requests information about policies not required by the Internal Revenue	Code	_	<del></del>
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a_		Х
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,			
44	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	Х	<del></del>
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		
10a	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		х	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		<u> </u>
D	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give		v	
	rise to conflicts?	12b	x	<u> </u>
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"		v	
40	describe in Schedule O how this was done	12c	x	
13	Did the organization have a written whistleblower policy?	13	<u>x</u>	-
14	Did the organization have a written document retention and destruction policy?	14		
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?		х	
a b	The organization's CEO, Executive Director, or top management official	15a	$\frac{x}{x}$	
D	Other officers or key employees of the organization	15b	<u> </u>	
16-	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
IVa	with a taxable entity during the year?	46.		x
<b>h</b>	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its	16a		
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16b		
Sect	on C. Disclosure	IOD	_	
17	List the states with which a copy of this Form 990 is required to be filed ▶ ATTACHMENT 2			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 5	01/0\/		
. •	available for public inspection. Indicate how you made these available. Check all that apply.	o 1(6)(	oja Ol	ııy <i>)</i>
	X Own website Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of	into-	oet -	oliov
. •	and financial statements available to the public during the tax year.	шег	csi þ	olicy,
20	State the name, physical address, and telephone number of the person who possesses the books and records of the	_		
	organization: ► Cynthia Hallenbeck 257 Park avenue south New York, NY 10010 212-505-2100	G		
JSA		Form	990	(2012)
40 4 000				

2E1042 1.000

Part VII	Compensation of Officers,	Directors, Trustees,	Key Employees,	<b>Highest Compensated</b>	Employees, and
	Independent Contractors				

Check if Schedule O contains a response to any question in this Part VII ......

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

  1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

(A) Name and Title	(B) Average hours per week (list any	<del>                                     </del>					an ee)	(D) Reportable compensation from the	(E)  Reportable compensation from related organizations	(F) Estimated amount of other compensation
	related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Former Highest compensated employee		organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
(1) CARL FERENBACH	2.00									
CHAIR	<del> </del>	x		х				o	o	
(2) ARTHUR KERN	2.00									
VICE CHAIR	<del> -</del>	х		х				0	o	1
(3) ARTHUR P. COOLEY	2.00									
SECRETARY	<del></del>	х		х				0	o	
(4) G. LEONARD BAKER, JR.	2.00									
TRUSTEE		х						О	o	
(5) JAMES W. B. BENKARD	2.00									
TRUSTEE		х						o	o	
(6) SALLY G. BINGHAM M. DIV.	2.00						$\vdash$		- 1	
TRUSTEE		х						О	o	
(7) SHELBY W. BONNIE	2.00									<del>-</del>
TRUSTEE	<del></del>	х						О	o	(
(8) WILLIAM K. BOWES, JR.	2.00									
TRUSTEE	<del></del>	х						0	o	(
(9) KEITH CAMPBELL	2.00						$\Box$			
TRUSTEE		х						0	0	(
(10) RUTH DEFRIES PH.D.	2.00		$\Box$							
TRUSTEE	<del> </del>	х						0	0	(
(11)ANN DOERR	2.00						$\Box$			
TRUSTEE		х						0	o	
(12) SUSAN FORD DORSEY	2.00									
TRUSTEE		х						О	0	(
(13) STANLEY DRUCKENMILLER	2.00									
TRUSTEE	<del> </del>	х						0	o	(
(14)KIRSTEN J. FELDMAN	2.00		$\neg$	$\neg$			$\Box$		-	
TRUSTEE	<del> -</del>	х						0	o	(

Form 990 (2012)

F	Part VII Section A. Officers, Directors, Tr	ustees, Ke	y En	nplo	ye	es,	and	Hig	hest Compensat	ed Employe	es (c	Page continued)
	(A) Name and title	(B) Average hours per week (list any hours for	(do i	not cl unies	Pos heck ss pe	c) sition mon erson lirect	e than ( is both	one an tee)	(D) Reportable compensation from the	(E) Reportable compensation related organization	le i from	(F) Estimated amount of other compensation
		related organizations below dotted line)	I of O	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-N	IISC)	from the organization and related organizations
( 15	) LYNN R. GOLDMAN M.D., M.P.H. TRUSTEE	2.00	х						0		0	
16	) CHARLES J. HAMILTON, JR. TRUSTEE	2.00	х						0			
17	) GRIFFITH R. HARSH, IV TRUSTEE	2.00	х			-			0	-	0	
18	) MARK W. HEISING TRUSTEE	2.00	x						0		0	
19	) KRISTINE M. JOHNSON TRUSTEE	2.00	х									
20		2.00	x								J	
21		2.00	X	H								
22	) RICHARD J. LAZARUS TRUSTEE	2.00	X									
23	) ABBY LEIGH TRUSTEE	2.00	x								- 0	
24	) SARAH LIAO SAU-TUNG, PH.D. TRUSTEE	2.00	X		-						-	<u> </u>
25	) KATHERINE LORENZ TRUSTEE	2.00	X								- 0	
_	b Sub-total c Total from continuation sheets to Part VII, So d Total (add lines 1b and 1c) Total number of individuals (including but not			isted	d ab	oove	e) who	▶ ▶ •	2,450,239. 2,450,239. ceived more than	\$100.000 of	0	309,894 309,894
-	Did the organization list any former officemployee on line 1a? If "Yes," complete Schedu	er, directo	125 r, or	tru	stee	 e, k	ev e		loyee, or highest	compensate	 ed	Yes No
4	For any individual listed on line 1a, is the sorganization and related organizations greated individual	eater than	\$15 	0,00	007	lf 	"Yes	," (	complete Schedul	e J for su	ch	4 X
	for services rendered to the organization? If "Ye ection B. Independent Contractors	s," complet	e Sch	edul	le J	for	such ,	pers	son	or individu	aı _•	5 X
1		pensated ir ompensatio	ndepe on for	nde the	nt c	ont end	ractor ar yea	rs th ar e	nat received more nding with or with	than \$100,0 in the organi	00 of zation	's tax
	(A) Name and business add	ress							(B) Description of ser	vices	Cr	(C) empensation
A	TTACHMENT 3		_					ļ.				
_							_					
2	in the state of th				ited			e lis	sted above) who	received		
-	more than \$100,000 in compensation from the	e organizati	on 🕨	•		24	4					

Page 8

(a) Name and title    Name and title	Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)											
TRUSTEE				box,	unle er an	Pos heck ss pe	mor erson direct	e than o is both tor/trus	an tee)	Reportable compensation from	Reportable compensation from related	other compensation
TRUSTEE			organizations below dotted	ndividual trustee or director	nstitutional trustee	Officer	(ey employee	lighest compensated	omer		(W-2/1099-MISC	from the organization and related organizations
TRUSTEE    X			2.00	4								
TRUSTEE	27) DR	. JANE LUBCHENCO	2.00									0
TRUSTEE			2.00	_								0
TRUSTEE 2.00 X 0 0  TRUSTEE X 0 0 0 0  TRUS	TR	USTEE	1 2.00							0		o
TRUSTER  TRU		<del></del>	2.00									
TRUSTEE X 0 0 0  TRUSTE			2.00	_ A		-		_				<u> </u>
TRUSTEE				Х						0		0
TRUSTEE X O O O  TRUSTEE X O O  TRUSTE		===i	2.00	x						,		
TRUSTEE  34) PEGGY M. SHEPARD  2.00  TRUSTEE  35) DOUGLAS W. SHORENSTEIN  2.00  TRUSTEE  36) SAM RAWLINGS WALTON  TRUSTEE  37  TRUSTEE  38  TRUSTEE  39  TRUSTEE  30  TRUSTEE  30  TRUSTEE  30  TRUSTEE  31  TRUSTEE  32  TRUSTEE  33  TRUSTEE  34  TRUSTEE  35  TRUSTEE  36  TRUSTEE  37  TRUSTEE  38  TRUSTEE  39  TRUSTEE  30  TRUSTEE  30  TRUSTEE  30  TRUSTEE  31  TRUSTEE  32  TRUSTEE  33  TRUSTEE  34  TRUSTEE  35  TRUSTEE  36  TRUSTEE  37  TRUSTEE  38  TRUSTEE  39  TRUSTEE  30  TRUSTEE  30  TRUSTEE  31  TRUSTEE  31  TRUSTEE  32  TRUSTEE  34  TRUSTEE  36  TRUSTEE  37  TRUSTEE  38  TRUSTEE  39  TRUSTEE  30  TRUSTEE			2.00							0		
TRUSTEE			2.00	х						0		0
TRUSTEE  36) SAM RAWLINGS WALTON TRUSTEE  36) SAM RAWLINGS WALTON TRUSTEE  37) Double total  38			2.00		П							
TRUSTEE  36) SAM RAWLINGS WALTON  TRUSTEE  2.00  TRUSTEE  2.00  TRUSTEE  3.00  TRUSTEE  3.00  TRUSTEE  3.00  TRUSTEE  3.00  TOtal from continuation sheets to Part VII, Section A  4.00  Total (add lines 1b and 1c)  Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization  1.25  3.00  Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual  4. For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual  5. Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person  Section B. Independent Contractors  1. Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.  (A) (B) (C)		<del></del>	2.00	Х	Н					0		0
TRUSTEE	TRU	USTEE		х						0		o
c Total from continuation sheets to Part VII, Section A  d Total (add lines 1b and 1c).  2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ▶ 125  3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual  4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual  5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person  5 Section B. Independent Contractors  1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.  (A) (B) (C)			2.00	x						0		
Teportable compensation from the organization ► 125  3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual	c Tota d Tota	Il from continuation sheets to Part VII, So Il (add lines 1b and 1c)		hose I	liste	  d ab	DOVE	  e) who	▶ ▶ red	ceived more than	\$100,000 of	
organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual.  5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person.  5 Section B. Independent Contractors  1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.  (A) (B) (C)	3 Did emp	the organization list any former offic loyee on line 1a? If "Yes," complete Schedu	er, directo ule J for suc	r, or ch ind	tru <i>ividu</i>	ıal .				• • • • • • • • • • •		Yes No
for services rendered to the organization? If "Yes," complete Schedule J for such person	orga	nization and related organizations gre	eater than	\$15	0,0	00?	lf	"Yes	," c	complete Schedul	e J for such	4 X
Section B. Independent Contractors  1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.  (A) (B) (C)	5 Did	any person listed on line 1a receive or ervices rendered to the organization? If "Ve	accrue cor	mpen:	satio	on f	rom	any	unr	elated organizatio	n or individual	5 X
compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.  (A) (B) (C)	Section	B. Independent Contractors										
	com	pensation from the organization. Report of	pensated in ompensation	ndepe on for	nde the	nt c	ont	ractoi ar yea	rsth are	nat received more nding with or with	than \$100,000 in the organization	of on's tax
			ress								rvices	(C) Compensation
			<del></del> .									
2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ▶	2 Total	number of independent contractors (in than \$100,000 in compensation from the	cluding bu organizati	t not	lim	ited	to	thos	e lis	sted above) who	received	
	JŚA	)										Form <b>990</b> (2012

Part VII Section A. Officers, Directors, Tre		y En	iplo			and I	Hig		ed Employees	(continu	ied)
(A) Name and title	(B)  Averege hours per week (list any hours for	box,	not ch unles er and	Pos neck is pe	rson	e than o is both or/trust	an ee)	(D) Reportable compensation from the	Reportable compensation from related organizations	m a	(F) Estimated imount of other impensation
	related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Кеу втрюуее	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC	or aı	from the ganization nd related ganizations
37) CHARLES F. WURSTER, PH.D. TRUSTEE	2.00	х	,			_		0		0	<u>.</u>
38) FREDERIC D. KRUPP PRESIDENT	40.00			х				485,738.		0	56,09
39) PETER ACCINNO CFO & TREASURER	40.00			х				198,985.		0	19,90
40) ELIZABETH HENSHAW CHIEF OPERATING OFFICER	40.00				х			298,702.		0	44,05
41) DAVID FESTA  VP WEST COAST	40.00					х		293,605.		0	30,49
2) PAULA HAYES SENIOR VP GLOBAL INITIATIVES	40.00					х		244,308.		0	39,49
VP VP	40.00					х		335,543.		0	39,09
4) DIANE REGAS SENIOR VP PROGRAMS	40.00					х		315,736.		0	41,65
SENIOR VP STRATEGY & COMM.	40.00					Х		277,622.		0	39,09
1b Sub-total							•				
c Total from continuation sheets to Part VII, Sed Total (add lines 1b and 1c).  2 Total number of individuals (including but not I reportable compensation from the organization  3 Did the organization list any former office employee on line 1a? If "Yes," complete Schedu	imited to the	nosel 125	isted	d ab	ove	e) who	mpl	loyee, or highest	compensated		Yes I
4 For any individual listed on line 1a, is the sorganization and related organizations greated individual	um of repeater than	ortab \$15	le co 0,00	omp 10?	en: <i>If</i>	satior "Yes	ar ," (	nd other compens	eation from the	4	X
5 Did any person listed on line 1a receive or for services rendered to the organization? If "Ye Section B. Independent Contractors	accrue cor s," complet	npens e Sch	satio edul	n fi e J	rom for	any such	unr oers	elated organization	on or individual	5	824
Complete this table for your five highest componentation from the organization. Report of year.	pensated ir ompensation	ndepe on for	nder the	nt c	ont	ractoi ar yea	rsth are	nat received more nding with or with	than \$100,000 in the organizat	of on's tax	
(A) Name and business add	ress		_		_			(B) Description of se	rvices	(C) Compen	
				_	_						
Total number of independent contractors (in more than \$100,000 in compensation from the	cluding bu	t not	limi	ted	to	thos	e lis	sted above) who	received		

Form	990 (	2012) ENVIRONMENT	AL DEFENSE	FUND, INC.		11-6107	L28 Page S
Ра	rt VI			<del>-</del>			
		Check if Schedule O contains a respo	nse to any ques	tion in this Part VII  (A)  Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tar under sections 512, 513, or 514
報報	1a	Federated campaigns 1a	189,836.				
E E	Ь	Membership dues 1b					
A P	C	Fundraising events 1c					1
울혈	a	Related organizations 1d					
SITS,	e	Government grants (contributions) 1e	3,934,389.			1 -	
utto	f	All other contributions, gifts, grants,					
Contributions, Gifts, Grants and Other Similar Amounts		and similar amounts not included above . 1f	141,010,817.				
Pop	g	Noncash contributions included in lines 1a-1f. \$	3,176,585.				
	h	Total. Add lines 1a-1f	<u></u>	145,135,042.			
Ĭ.			Business Code		18.24		
9,6	2a						
Program Service Revenue	b						
2	c						
Š	d						
를	9		_				
6	f	All other program service revenue					
	9	Total. Add lines 2a-2f	_				
	3	Investment income (including dividends, interes					
		other similar amounts)		1,054,786.		25,646.	1,029,140.
	4	Income from investment of tax-exempt bond p		. 0			
	5	Royalties	(li) Personal	2,689.			2,689.
	Ĭ _	''	(II) Fersonal				
	6a	Gross rents					
	b	Less: rental expenses					
	<u>د</u>	Rental income or (loss)					
	ď	Net rental income or (loss)	(ii) Other	0			
	7a	Gross amount from sales of	(11) 00101				
		assets other than inventory 35,699,523.					
	b	Less: cost or other basis and sales expenses 32,712,168.					
	c	Gain or (loss)					
	ď	Net gain or (loss)		2,987,355.			2 987 355
0	88	Gross income from fundraising					2,987,355.
Ē		events (not including \$					
<b>9</b> /6		of contributions reported on line 1c).	·				
ď		See Part IV, line 18					
Other Revenue	ь	Less: direct expenses b					
Ö	c	Net income or (loss) from fundraising events -	<u>,</u> ▶	0			
	9a	Gross income from gaming activities.					
		See Part IV, line 19 a					
	b	Less: direct expenses b					
	¢	Net income or (loss) from gaming activities	<u> ▶</u>	0			
	10a	Gross sales of inventory, less	Í				
		returns and allowances a					
	b	Less: cost of goods sold b					
	C	Net income or (loss) from sales of inventory, .  Miscellaneous Revenue	Business Code	0			
					Page 1	ind	
	11a	HONORARIUM	900099	63,656.			63,656.
	b	LIST RENTAL FEES	900099	162,145.		-	162,145.
	C	OTHER REVENUE	900099	314,490.			314,490.
	d	All other revenue		E40 000			
	е 12	Total Add lines 11a-11d		540,291.		25.515	4 === :==
$\overline{}$			<u>, , , , , , , , , , , , , , , , , , , </u>	149,720,163.		25,646.	4,559,475.

Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response to any question in this Part IX Do not include amounts reported on lines 6b. 7b. (A) Total expenses (B) Program service expenses (C) Management and (D) Fundraising 8b, 9b, and 10b of Part VIII. general expenses expenses Grants and other assistance to governments and 8,099,827. 8,099,827. organizations in the United States. See Part IV, line 21, Grants and other assistance to individuals in the United States. See Part IV, line 22 . . . . . Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16 5,382,806. 5,382,806. Benefits paid to or for members . . . . . . . . . Compensation of current officers, directors, 1,235,525. 625,185. 534,654. 75,686. Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Other salaries and wages 41,173,420. 33,155,515. 2,146,600. 5,871,305. Pension plan accruals and contributions (include section 1,961,080. 1,579,189. 102,242. 279,649. 5,307,722. 4,274,123. 276,721. 756,878. 2,997,865. 2,414,076. 156,295. 427,494. 10 Fees for services (non-employees): 146,029. 146,029. 8,635. 595,548. 577,682. 9,231. 98,000. 98,000. 965,000. 965,000. 724,443. 724,443. e Professional fundraising services. See Part IV, line 17 f Investment management fees 106,442. 106,442. g Other. (If line 11g amount exceeds 10% of line 25, column 20,256,327. 19,931,791. (A) amount, list line 11g expenses on Schedule O.). . . . . . 324,536. Advertising and promotion ........ 6,204,817. 5,767,611. 1,598. 435,608. 1,588,617. 944,335. 251,050. 13 393,232. 1,622,567. 1,113,732. 257,149. 14 Information technology 251,686. 15 6,204,879. 16 2,572,643. 2,659,237. 972,999. 5,304,388. 17 4,732,559. 131,692. 440,137. 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 3,586,694. Conferences, conventions, and meetings . . . . 2,941,974. 231,918. 412,802. 19 156,181. 156,181. 20 21 1,460,408. Depreciation, depletion, and amortization 329,458. 570,141. 560,809. 188,069 182,425. 2,729. 23 2,915. Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) a MISCELLANEOUS 165,317. 165,317. e All other expenses \_\_\_\_\_\_ 25 Total functional expenses. Add lines 1 through 24e 115,531,971. 95,755,248. 7,837,313. 11,939,410. 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 ▶ X if following SOP 98-2 (ASC 958-720) . . . . . .

5,493,948.

2E1052 1.000

1,275,305. Form 990 (2012)

563,785.

3,654,858.

Pa	ırt X	Balance Sheet			
		Check if Schedule O contains a response to any question in this Par	X		X
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	2,174,288.	1	2,986,738.
	2	Savings and temporary cash investments	12,199,244.	2	12,381,508.
	3	Pledges and grants receivable, net	92,800,326.	3	129,662,583.
	4	Accounts receivable, net	C	4	0
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees.		-	
	_	Complete Part II of Schedule L  Loans and other receivables from other disqualified persons (as defined under section		5	
48	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L	C	6	0
sets	7	Notes and loans receivable, net	· 0	7	0
Assets	8	Inventories for sale or use	123,876.	8	123,757.
_	9	Prepaid expenses and deferred charges	1,654,370.	9	1,209,823.
	10 a	Land, buildings, and equipment: cost or			
		other basis. Complete Part VI of Schedule D 15,458,557.			
	b	Less: accumulated depreciation	4,798,785.	10c	4,963,273.
	11	Investments - publicly traded securities	34,556,333.	11	34,520,566.
	12	Investments - other securities. See Part IV, line 11	21,823,819.	12	19,832,990.
	13	Investments - program-related. See Part IV, line 11	0	13	0
	14	Intangible assets , , , , , , , , , , , , , , , , , , ,	O	14	0
	15	Other assets. See Part IV, line 11	3,008,266.	-	3,069,970.
	16	Total assets. Add lines 1 through 15 (must equal line 34)	173,139,307.	16	208,751,208.
	17	Accounts payable and accrued expenses	6,170,214.	17	6,068,092.
	18	Grants payable	0	18	0
	19	Deferred revenue	23,132.	19	16,262.
	20	Tax-exempt bond liabilities	. 0	20	0
Liabilities	21	Escrow or custodial account liability. Complete Part IV of Schedule D	C	21	0
Ħ	22	Loans and other payables to current and former officers, directors,			
Lía I		trustees, key employees, highest compensated employees, and			
	22	disqualified persons. Complete Part II of Schedule L	3,060,318.	22	2 506 007
	23 24	Secured mortgages and notes payable to unrelated third parties	3,000,310.	23	2,596,821.
	25	Other liabilities (including federal income tax, payables to related third		24	
	2.5	parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D	12,016,407.	25	13,368,694.
	26	Total liabilities. Add lines 17 through 25	21,270,071.	26	22,049,869.
- 88		Organizations that follow SFAS 117 (ASC 958), check here X and complete lines 27 through 29, and lines 33 and 34.			
anc	27	Unrestricted net assets	42,123,288.	27	44,193,259.
Bal	28	Temporarily restricted net assets	106,009,450.	28	138,771,582.
פ	29	Permanently restricted net assets	3,736,498.	29	3,736,498.
Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check here Land complete lines 30 through 34.			
ş	30	Capital stock or trust principal, or current funds		30	
- 88	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
¥.	32	Retained earnings, endowment, accumulated income, or other funds		32	
Net	33	Total net assets or fund balances	151,869,236.	33	186,701,339.
	34	Total liabilities and net assets/fund balances	173,139,307.	34	208,751,208.

Form **990** (2012)

	90 (2012)				Р	age 12
Part						
	Check if Schedule O contains a response to any question in this Part XI					
1	Total revenue (must equal Part VIII, column (A), line 12)	1		149,7	720,	163.
2	Total expenses (must equal Part IX, column (A), line 25)	2		115,5	531,	971.
3	Revenue less expenses. Subtract line 2 from line 1	3		34,1	L88,	192.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) .	4		151,8	369,	236.
5	Net unrealized gains (losses) on investments	5		(	543,	911.
6	Donated services and use of facilities	6				0
7	Investment expenses	7				0
8	Prior period adjustments	8				0
9	Other changes in net assets or fund balances (explain in Schedule O)	9				0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line					
	33, column (B))	10	:	186,7	01,	339,
Part	Financial Statements and Reporting					
	Check if Schedule O contains a response to any question in this Part XII		· · · ·	<u></u>	Щ	
1	Accounting to the late of the				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," e	xplai	n in			
20	Schedule O.					
Za	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 con	piled	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	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audit	ed o	n a			
	separate basis, consolidated basis, or both:					
	Separate basis X Consolidated basis Both consolidated and separate basis			-117		
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for overs	ight				
	of the audit, review, or compilation of its financial statements and selection of an independent accour	ntant?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, e	xplaiı	n in			
_	Schedule O.					
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set	forti	n in			
	the Single Audit Act and OMB Circular A-133?			3a	Х	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits?	ergo	the			
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	lits	_	3b	х	

Form **990** (2012)

#### SCHEDULE A (Form 990 or 990-EZ)

### **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. ► See separate Instructions.

OMB No. 1545-0047
2012
Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Employer identification number ENVIRONMENTAL DEFENSE FUND, INC. 11-6107128 Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) 1 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.) 2 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 4 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 5 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 7 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.) 8 An organization that normally receives: (1) more than 331/3 % 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 331/3% 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.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 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 that describes the type of supporting organization and complete lines 11e through 11h. b Type II c Type III-Functionally integrated d | Type III-Non-functionally integrated By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). If the organization received a written determination from the IRS that it is a Type II, Type III, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) Yes No and (iii) below, the governing body of the supported organization? 11g(i) (II) A family member of a person described in (i) above? 11g(ii) (III) A 35% controlled entity of a person described in (i) or (ii) above? Provide the following information about the supported organization(s). h (I) Name of supported (II) EIN (iii) Type of organization (iv) Is the organization in col. (i) listed in (v) Did you notify (vi) is the (VII) Amount of monetary organization (described on lines 1-9 the organization organization in support above or IRC section in col. (i) of col. (I) organized your governing (see instructions)) your support? in the U.S.? document? Yes Yes (A) (B) (C) (D) (E) Total

Form 990 or 990-EZ.

For Paperwork Reduction Act Notice, see the Instructions for

Schedule A (Form 990 or 990-EZ) 2012

Sche	edule A (Form 990 or 990-EZ) 2012						Page 2
Pa	Support Schedule for Or (Complete only if you check Part III. If the organization f	ked the box or	n line 5, 7, or 8	of Part I or if	the organizat	ion failed to qu	A)(vi) ualify under
Sec	ction A. Public Support	_				· · · · · · · · · · · · · · · · · · ·	
Cale	endar year (or fiscal year beginning in)	(a) 2008	<b>(b)</b> 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	126,116,250.	52,480,737.	94,076,678.	110,051,773.	144,945,207.	527,670,645.
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0
4	Total. Add lines 1 through 3	126,116,250.	52,480,737.	94,076,678.	110,051,773.	144,945,207.	527,670,645.
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)						166,248,370.
6	Public support. Subtract line 5 from line 4.	Lizzolog Uplacette	and the state of the	三級1000年來進步後	La bise miligaren 1971a	Sandie See and	361,422,275.
Sec	ction B. Total Support						
Cale	endar year (or fiscal year beginning in)	(a) 2008	<b>(b)</b> 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7	Amounts from line 4	126,116,250.	52,480,737.	94,076,678.	110,051,773.	144,945,207.	527,670,645.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	921,474.	919,296.	1,245,389.	1,281,695.	1,219,620.	5,58 <u>7,474</u> .
9	Net income from unrelated business activities, whether or not the business is regularly carried on	27,135.			5,904.	25,646.	58,685.
10	Other income. Do not Include gain or loss from the sale of capital assets (Explain in Part IV.)	901,908.	517,114.	555,383.	539,498.	378,146.	2,892,049.
11	Total support. Add lines 7 through 10	Terror wishing	Mark to the wife	Carlotte Committee Committ	State Land But & But	The April 19 April 19 April 19	536,208,853.

12	Gross receipts from related activities, etc. (see instructions)								
13	First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c	c)(3)							
	organization, check this box and stop here								
Sec	Section C. Computation of Public Support Percentage								

14	Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f))	IV
15	Public support percentage from 2011 Schedule A, Part II, line 14	6 %
16a	331/3% support test - 2012. If the organization did not check the box on line 13, and line 14 is 331/3% or more, check	
	this box and <b>stop here.</b> The organization qualifies as a publicly supported organization	X
b	331/3% support test - 2011. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3% or more,	
	check this box and <b>stop here</b> . The organization qualifies as a publicly supported organization	Ш
17a	10%-facts-and-circumstances test - 2012. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is	
	10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in	
	Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported	
	organization , , , , , , , , , , , , , , , , , , ,	
b	10%-facts-and-circumstances test - 2011. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line	
	15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here.	
	Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly	_
	supported organization , , , ,	
18	Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see	

Schedule A (Form 990 or 990-EZ) 2012

Part III

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

(Complete only if you checked the box on line 9 of Part I 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	tion A. Public Support	_		_			
Cale	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")					1	
2	Gross receipts from admissions, merchandise						-
	sold or services performed, or facilities			1			
	furnished in any activity that is related to the		ļ				
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid						
	to or expended on its behalf						1
5	The value of services or facilities						
•	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5						
_	Amounts included on lines 1, 2, and 3			-			
	received from disqualified persons						
b	Amounts included on lines 2 and 3						
	received from other than disqualified						
	persons that exceed the greater of \$5,000						
_	or 1% of the amount on line 13 for the year						
C	Add lines 7a and 7b						
	Public support (Subtract line 7c from						
Sec	tion B. Total Support						<u> </u>
	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(a) 2042	40 T-1-I
_		(a) 2000	(b) 2009	(6) 2010	(d) 2011	(e) 2012	(f) Total
9 10 a	Amounts from line 6						
	payments received on securities loans,						
	rents, royalties and income from similar						
h	Unrelated business taxable income (less			-	-		
Ų							
	section 511 taxes) from businesses						
_	acquired after June 30, 1975						
	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b,						
	whether or not the business is regularly						
	carried on						
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part IV.)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)						
14	First five years. If the Form 990 is for	the organization	's first, second,	third, fourth, or	fifth tax year as	a section 501(	c)(3)
200	organization, check this box and stop here. tion C. Computation of Public Sup	nort Porconto		· · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·	🏲 📘
15	Public support percentage for 2012 (line 8,			(f))	·	4-	
16	Public support percentage from 2011 Sche	dule A. Port III. lier	u by line 13, colun	m(i)),		15	%_
	tion D. Computation of Investmen	t Incomo Pore	ontono			16	%_
17				2 anhuma (6)	<del></del>	47	
18	Investment income percentage for 2012 (lin	ie iuc, columni (⊺ Schodulo A. De⇒ '	j ulvided by IINO 1 II. lina 17	o, column (r))	• • • • • • • •	17	
	Investment income percentage from 2011 S	ocheoule A, Par I	u, ine 17			18	
, o a	331/3% support tests - 2012. If the org						
h	17 is not more than 331/3%, check this 331/3% support tests - 2011. If the organ						
	331/3% support tests - 2011. If the orgal line 18 is not more than 331/3%, check						
	Private foundation. If the organization of						
SA 21.1.00		AND OHEOR A	DOX OIL BIRE	-, 130, UI 190,			90 or 990-EZ) 2012

Schedule A (Form 990 or 990-EZ) 2012

Page 4

**Supplemental Information.** Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

#### SCHEDULE C (Form 990 or 990-EZ)

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

For Organizations Exempt From Income Tax Under section 501(c) and section 527

Complete if the organization is described below.

Attach to Form 990 or Form 990-EZ.

2012

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury

Complete if the organization is described below.
 ▶ See separate instructions.

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C. Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B. Section 527 organizations: Complete Part I-A only. If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B. Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A. If the organization answered "Yes." to Form 990, Part IV, line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35c (Proxy Tax), then Section 501(c)(4), (5), or (6) organizations: Complete Part III. Name of organization Employer identification number ENVIRONMENTAL DEFENSE FUND, INC. 11-6107128 Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization. Provide a description of the organization's direct and indirect political campaign activities in Part IV. Part I-B Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955. . . . . . . > \$ Enter the amount of any excise tax incurred by organization managers under section 4955 . . . > \$\_\_\_ If the organization incurred a section 4955 tax, did it file Form 4720 for this year? No Yes No b If "Yes," describe in Part IV. Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function Enter the amount of the filing organization's funds contributed to other organizations for section Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, Did the filing organization file Form 1120-POL for this year? Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV. (b) Address (c) EIN (d) Amount paid from (e) Amount of political (a) Name contributions received and filing organization's promptly and directly funds. If none, enter -0-. delivered to a separate political organization. If none, enter -0-. (1) (2) (3)(4) (5)

JSA 2E1264 1.000

(6)

Schedule C (Form 990 or 990-EZ) 2012

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

SCI	legule C (Form 990 of 990-EZ) 2012	IMBRIAN DEFENDE FORD, INC.	11 01	Tage 7
Pa	art II-A Complete if the organizati section 501(h)).	on is exempt under section 501(c)(3) and	filed Form 5768 (elec	tion under
$\overline{\mathbf{A}}$	Check ▶ if the filing organization	belongs to an affiliated group (and list in Pa	art IV each affiliated gro	oup member's
	name, address, EIN, exp	enses, and share of excess lobbying expend	ditures).	
В	Check ▶ if the filing organization	checked box A and "limited control" provisi	ons apply.	
	Limits on Lobi	oying Expenditures	(a) Filing	(b) Affiliated
		eans amounts paid or incurred.)	organization's totals	group totals
1:	Total lobbying expenditures to influence	ce public opinion (grass roots lobbying)	250,000.	•
		e a legislative body (direct lobbying)	715,000.	
-		1a and 1b)	965,000.	
-			114,566,971.	
		dd lines 1c and 1d)	115,531,971.	
1		the amount from the following table in both		
	columns.		1,000,000.	
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	Not over \$500,000	20% of the amount on line 1e.		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.		
	Over \$17,000,000	\$1,000,000.		
	g Grassroots nontaxable amount (enter	25% of line 1f)	250,000.	
ı	h Subtract line 1g from line 1a. If zero or	eless, enter -0-	. 0	(
i		less, enter -0-	0	C
j	If there is an amount other than zer	o on either line 1h or line 1i, did the organiz	zation file Form 4720	
_	reporting section 4911 tax for this yea	n	, , , , , , , , , , , , , , , ,	Yes No

# 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

Lobbying Expenditures During 4-Year Averaging Period											
	Calendar year (or fiscal year beginning in)	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) Total					
2a	Lobbying nontaxable amount	1,000,000.	1,000,000.	1,000,000.	1,000,000.	4,000,000.					
b	Lobbying ceiling amount (150% of line 2a, column (e))					6,000,000.					
С	Total lobbying expenditures	896,377.	921,529.	947,570.	965,000.	3,730,476.					
d	Grassroots nontaxable amount	250,000.	250,000.	250,000.	250,000.	1,000,000.					
θ	Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000.					
f	Grassroots lobbying expenditures	250,000.	240,143.	245,765.	250,000.	985,908.					

Schedule C (Form 990 or 990-EZ) 2012

Par	Complete if the organization is exempt under section 501(c)(3) and has NO (election under section 501(h)).	Γ file	d Fo	rm 576	8	
For	each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed	(a	a)		(b)	
	cription of the lobbying activity.	Yes	No		Amount	t
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:					
а	Volunteers?			17.7		
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
C.	Media advertisements?					
d e	Mailings to members, legislators, or the public?					
f	Publications, or published or broadcast statements?  Grants to other organizations for lobbying purposes?					
g g	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i	Other activities?					
j	Total. Add lines 1c through 1i					
2 a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
b	If "Yes," enter the amount of any tax incurred under section 4912					
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
d Dar	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	-\{E\				
rai	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(501(c)(6).	(C)(D)	, or s	ection		
					Ye	s No
1	Were substantially all (90% or more) dues received nondeductible by members?				1	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?				2	
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?  till-B Complete if the organization is exempt under section 501(c)(4), section 501(				3	
ган	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No,"					ie
	answered "Yes."		J, . u			
1	Dues, assessments and similar amounts from members			1		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amou political expenses for which the section 527(f) tax was paid).					
а	Current year car car car car car car car car car	- 22	2.63	2a		
þ	Carryover from last year	100	(4Vs)	2b		
C	Total	• 👀	S 16	2c		
3 4	Aggregate amount reported in section 6033(e)(1)(A) notices or nondeductible section 162(e) due if notices were sent and the amount on line 2c exceeds the amount on line 3, what portion			3		
-	excess does the organization agree to carryover to the reasonable estimate of nondeductible lo					
		-	•	4		
5	and political expenditure next year?  Taxable amount of lobbying and political expenditures (see instructions)			5		
Par						
	plete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 9 Part II-A, line 2; and Part II-B, line 1. Also, complete this part for any additional information.	5; Pai	rt II-A	(affiliate	d group	
	·					
				<b>_</b>		

Schedule C (Form 990 or 990-EZ) 2012

Part IV Supplemental Information (continued)

Page 4

#### SCHEDULE D (Form 990)

### Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990,

OMB No. 1545-0047 Open to Public

Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► See separate instructions.

ENVIRONMENTAL DEFENSE FUND, INC. 11-6107128 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 5. Total number at end of year . . . . . . . . . . . . . . . . . 1 173,969. Aggregate contributions to (during year) . . . . 2 42,000. 3 Aggregate grants from (during year) . . . . . . . 660,207. Aggregate value at end of year....... 4 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? . . . . . . . . . Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year 2a Number of conservation easements on a certified historic structure included in (a) . . . . . . Number of conservation easements included in (c) acquired after 8/17/06, and not on a Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the Number of states where property subject to conservation easement is located ▶ \_\_\_\_\_\_ 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B) (i) and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets, Complete if the organization answered "Yes" to Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule D (Form 990) 2012

Pa	rt III Organizations Maintaining Co	ollections of	f Art, Hi	storical	Treasure	s, or O	her Simil	ar Ass	ets (con	tinued)
3	Using the organization's acquisition, acc collection items (check all that apply):	ession, and o	ther reco	ords, chec	k any of	the follow	ing that ar	e a sigi	nificant u	se of its
а	Public exhibition		d 🗆	Loan	or exchan	ge progra	ms			
ь	Scholarly research		e	Other						
С	Preservation for future generations									
4	Provide a description of the organization	's collections	and exp	lain how t	thev furth	er the on	nanization's	exemp	t nurnose	in Part
	XIII.						ya	Oxomp	· parpoor	, III I GII
5	During the year, did the organization solic	it or receive d	onations	of art. hist	orical trea	sures, or	other simila	г		
	assets to be sold to raise funds rather than								Yes	No
Pa	rt IV Escrow and Custodial Arrang	ements. Co	mplete	if the ord	panizatio	n answei	red "Yes"	to Form		
	line 9, or reported an amount o	n Form 990.	, Part X,	line 21.	,				, .	
	Is the organization an agent, trustee, custo included on Form 990, Part X? If "Yes," explain the arrangement in Part X		<i>.</i> .			s or other	assets not	[	Yes	☐ No
							An	nount		-
c	Beginning balance	5 KOON FOR FOR		000 00000	sc. sess 1	С		_		
d	Additions during the year									
8	Distributions during the year	6 +000 + 00 +00		80 × 100	e e e 1	8				
f	Ending balance	K +000000000000000000000000000000000000	90000 100	904-914040	economic 1	f				
2a	Did the organization include an amount or	n Form 990, P	art X, line	217	- AMAGE			T	Yes	No
<u>b</u>	If "Yes," explain the arrangement in Part XI	III. Check here	e if the ex	planation	has been	provided	in Part XIII.		<del></del>	
Pai	t V Endowment Funds. Complete	if the organi	zation ar	nswered	"Yes" to I	Form 990	), Part IV, I	ine 10.	<u> </u>	
		Current year	(b) Pri		(c) Two y	ears back	(d) Three year	ars back	(e) Four y	ears back
1a		590,776.	4,49	2,055.	4,53	3,102.	4,533	,102.	4,53	33,102.
	Contributions									
C	Net investment earnings, gains,									
		058,562.	1,35	0,821.	21	2,740.				
d	Grants or scholarships									
е	Other expenditures for facilities	-								
_		247,494.	25	2,100.	25	3,787.	_			
f	Administrative expenses		_		_					
g		401,844.		0,776.		2,055.	4,533	,102.	4,53	3,102.
2	Provide the estimated percentage of the co		id balance	e (line 1g,	column (a	)) held as:				
a	Board designated or quasi-endowment		%							
b	Permanent endowment ► 58.0000 %									
C	Temporarily restricted endowment ▶ 42									
2-	The percentages in lines 2a, 2b, and 2c sh									
Ja	Are there endowment funds not in the pos	session of the	e organiza	ation that	are held a	ind admin	istered for th	ne	_	
	organization by:									s No
	(I) unrelated organizations							60.00	3a(i)	Х
<b>b</b>	(ii) related organizations					(F) F (* (F) F	-090 i + 90 + 00	() · · (*)	3a(ii)	Х
	If "Yes" to 3a(ii), are the related organization							E( (E)	3b	
4 Par	Describe in Part XIII the intended uses of the									
гаі		- i		· · · · · · · · · · · · · · · · · · ·		T				
4-	Description of property	(a) Cost or o			r other basis her)		umulated ciation	(d	) Book value	
1a	Land	3		_	00					
b	Buildings	-			93,319	+	0.455			,319.
C	Leasehold improvements.				75,670		9,410.		2,266	
d	Equipment				88,378		2,096.			,282.
e Tota	Other		000 8-#		01,185.		3,773.		1,307	
rota	I. Add lines 1a through 1e. (Column (d) mus	sı equal rorm	∌⊌∪, Part	x, column	(B), iine 1	υ(c).)	▶	0-1	4,963	_
								achadu	le D (Form	wwiii 2012

Part VII Investments - Other Securities. See I	Form 990, Part X, line 12	2.	raye 🗸
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuati Cost or end-of-year mark	
(1) Financial derivatives			
(2) Closely-held equity interests		<del></del>	
(3) Other			
(A) SPLIT INTEREST AGREEMENTS	7,713,706.	FMV	
(B) FUND OF FUNDS	11,363,288.	FMV	
(C) PRIVATE EQUITIES	28,351.	FMV	
(D) VENTURE CAPITAL	727,645.	FMV	
(E)			
(F)			
(G)			
(H)			
(l)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)	19,832,990.		
Part VIII Investments - Program Related. See	Form 990, Part X, line 1:	3.	
(a) Description of investment type	(b) Book value	(c) Method of valuati Cost or end-of-year mark	
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
(10)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.)	1		
Part IX Other Assets. See Form 990, Part X,		<del></del>	
	) Description		(b) Book value
(1)			
(2)			
(3)		i	
(4)			
(5)			
(6)			
(7)	·		
(8)			
(10)			
Total. (Column (b) must equal Form 990, Part X, col. (B)	line 15 )		
Part X Other Liabilities. See Form 990, Part X			
1. (a) Description of liability	(b) Book value		
(1) Federal income taxes	(b) Book vaide		
(2) DEFERRED RENT	1,258,671		
(3) ANNUITIES PAYABLE	4,440,011		
(4) RETIREMENT PLAN LIABILITY	2,175,972		
(5) DUE TO EDAF	5,133,491		
(6) OTHER PROGRAM RELATED LIABILIT	360,549		
(7)	550,525		
(8)			
(9)			
(10)			
(11)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.	13,368,694		
6. Fill 40 (400 740) Francis la Bat VIII and 11 11			

	e D (Form 990) 2012		Page 4
Part	XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Retur	n	
1	Total revenue, gains, and other support per audited financial statements	1	150,364,074.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains on investments 2a 643,911.		
b	Donated services and use of facilities 2b		
C	Recoveries of prior year grants 2c		
d	Other (Describe in Part XIII.)		
	Add lines 3s through 3d	2-	643,911.
e 3	Add lines 2a through 2d	2e 3	149,720,163.
_	Subtract line 2e from line 1	3	149,720,103.
4			
a	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII.)	-	
C	Add lines 4a and 4b	4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	149,720,163.
Part	XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Retu	ırn	
1	Total expenses and losses per audited financial statements	1	115,531,971.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities 2a		
b	Prior year adjustments 2b		
С	Other losses 2c		
d	Other (Describe in Part XIII.)  Add lines 2a through 2d		
е		2e	
3	Subtract line 2e from line 1	3	115,531,971.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	** (P		
c	Other (Describe in Part XIII.) Add lines 4a and 4b	4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	115,531,971.
_	XIII Supplemental Information	3	113,331,771.
Comp	ete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part I	/ line	s 1h and 2h
	line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to pro		
inform			•
Q E	E PAGE 5		
	E PAGE 3		
			<b>_</b>
		Sche	edule D (Form 990) 2012

JSA

#### Part XIII Supplemental Information (continued)

ENDOWMENT FUNDS

SCHEDULE D, PART V, LINE 4

THE ORGANIZATION'S ENDOWMENT CONSISTS OF NINETEEN INDIVIDUAL FUNDS

ESTABLISHED FOR A VARIETY OF PURPOSES AND CONSISTING ENTIRELY OF

DONOR-RESTRICTED FUNDS. THE ORGANIZATION HAS ADOPTED INVESTMENT AND

SPENDING POLICIES FOR ENDOWMENT ASSETS THAT ATTEMPT TO PROVIDE A

PREDICTABLE STREAM OF FUNDING FOR PROGRAMS SUPPORTED BY ITS ENDOWMENT

WHILE SEEKING TO MAINTAIN THE PURCHASING POWER OF THE ENDOWMENT ASSETS.

UNDER THIS POLICY, AS APPROVED BY THE BOARD OF TRUSTEES, THE ENDOWMENT

ASSETS ARE INVESTED WITH A FOCUS ON EARNING MARKET RETURNS OR BETTER

WHILE ASSUMING A MODERATE LEVEL OF INVESTMENT RISK.

INCOME TAXES FIN 48 (FOOTNOTE)

PART X LINE 2

THE ORGANIZATION IS SUBJECT TO THE PROVISIONS OF ASC TOPIC 740-10-05, RELATING TO ACCOUNTING AND REPORTING FOR UNCERTAINTY IN INCOME TAXES.

BECAUSE OF THE ORGANIZATION'S GENERAL TAX-EXEMPT STATUS, ASC TOPIC 740-10-05 HAS NOT HAD, AND IS NOT EXPECTED TO HAVE, A MATERIAL IMPACT ON THE ORGANIZATION'S CONSOLIDATED AND CONSOLIDATING FINANCIAL STATEMENTS.

# SCHEDULE F (Form 990)

# Statement of Activities Outside the United States

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

► Attach to Form 990. ► See separate instructions.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

	TRONMENTAL DEFENSE FUNI	,			11-6107128	
Par	General Information Form 990, Part IV, line 1	on Activities 4b.	Outside the	United States. Complete	if the organization answe	ered "Yes" to
1	For grantmakers. Does the orga	anization mainta	ain records to	substantiate the amount or	f its grants and other	
	assistance, the grantees' eligibil					
	grants or assistance?					X Yes No
				* * * * * * * * * * * * * * * * * * * *		
2	For grantmakers. Describe in assistance outside the United St		ganization's p	rocedures for monitoring	the use of its grants a	and other
3	Activities per Region. (The follow	wing Part I, line	3 table can be	e duplicated if additional sp	ace is needed.)	
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors In region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to reciplents located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
<u>(1)</u>	NORTH AMERICA	1.	8.	GRANTMAKING		275,029.
(2)	CENTRAL AMERICA/CARIBBEAN			GRANTMAKING		48,375.
(3)	SOUTH AMERICA			GRANTMAKING		1,320,211.
(4)						
(4)	EAST ASIA AND THE PACIFIC	1.	15.	GRANTMAKING		2,900,000.
(5)						
(5)	SOUTH ASIA			GRANTMAKING		425,303.
<b>/6</b> \						
(6)	EUROPE	1.	3.	GRANTMAKING		413,888.
(7)						
111						
(8)		]				
(-)	-					
(9)						
(10)						
						<u> </u>
(11)						
(12)						
(13)						
(14)						
(15)			<u> </u>			
(46)						
(16)		-				
(17)						
(17)	Cub total					<del></del>
3a b	Sub-total,	3.	26.			5,382,806.
D	Total from continuation sheets to Part I					
	Totals (add lines 3a and 3b)	3.				
	I AVOID FOR SHILL MAND TO SHIP OF I	3.	26.			5,382,806.

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

5,382,806. Schedule F (Form 990) 2012

ENVIRONMENTAL DEFENSE FUND, INC.

Page 2 Schedule F (Form 990) 2012

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part II can be duplicated if additional space is needed.

Fait IV, III e 15, 101 any recipient who received m	apient will receive	red more man \$5,000. Part II can be duplicated if additional space is needed.	art II can be c	uplicated if addition	onal space is	s needed.		
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)		CENT. AMERICA/CARIBBEAN	FISHERIES	12,500.				PMV
(7)		EUROPE/ICELAND/GREENLAND	OCEAN WORK	6,500.				EMV
(3)		EUROPE/ICELAND/GREENLAND	OPTIONS MKT	66,500.				EMV
(4)		CENT. AMERICA/CARIBBEAN	OCEAN WORK	25,100.		,		PMV
(5)		SOUTH AMERICA	CLIMATE WORK	30,000,				PMV
(9)		BAST ASIA/PACIFIC	PILOT TRADE	2,900,000.				FMV
(2)		EUROPE/ICELAND/GREENLAND	CLEAN ENGY	25,000.				FMV
(9)		EUROPE/ICELAND/GREENLAND	GHG TRADING	150,000.				FMV
(8)		EUROPE/ICELAND/GREENLAND	OPTIONS MKT	33,500.				PMV
(10)		SOUTH ASIA	LOW CARBON	18,000.				FMV
(11)		SOUTH ASIA	LOW CARBON	18,000.				FMV
(12)		SOUTH ASIA	LOW CARBON	18,000.				FMV
(13)		NORIH AMERICA	DEFORESTATIO	30,800.				FMV
(14)		NORIH AMERICA	OCEAN WORK	44,993.	-			PMV
(15)		NORTH AMERICA	OCEAN WORK	50,261.				FMV
(16)		NORTH AMERICA	OCEAN WORK	10,032.				FMV

Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt

by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter.

Enter total number of other organizations or entities.

Schedule F (Form 990) 2012

ENVIRONMENTAL DEFENSE FUND, INC.

Schedule F (Farm 990) 2012 PartII

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

1 (a) Name of organization								
	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(l) Method of valuation (book, FMV, appraisal, other)
(1)		NORTH AMERICA	OCEAN WORK	132,234.				FMV
(2)		SOUTH AMERICA	SUSTAIN ENV	158,000.				PMV
(9)		SOUTH AMERICA	SUSTAIN ENV	740,882.				FMV
(4)		SOUTH AMERICA	SUSTAIN ENV	112,200.				PMV
(9)		SOUTH AMERICA	SUSTAIN ENV	125,296.				FMV
(0)		SOUTH AMERICA	SUSTAIN ENV	143,333.				FWV
(1)		EUROPE/ICELAND/GREENLAND	FISHERIES	91,498.				FMV
(8)		EUROPE/ICELAND/GREENLAND	OPTIONS MKT	40,890.				FMV
(6)		SOUTH ASIA	GAS EMISSION	55,841.				FMV
(10)		SOUTH ASIA	GAS EMISSION	58,476.				FMV
(11)		SOUTH ASIA	GAS EMISSION	111,236.				FMV
(12)		SOUTH ASIA	LAB SUPPORT	145,750.				FMV
(13)								
(14)								
(15)								
(18)								

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

Enter total number of other organizations or entities. m

28.

Schedule F (Form 990) 2012

Page 3 Schedule F (Form 990) 2012

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

Part III can be duplicated if additional space is needed.

Part III can be duplicated if additional space is needed.	nonal space is needed.						
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1) PISHERIES RESEARCH	CENT. AMERICA/CARIBBEAN	1.	10,000.	CASH PYMTS			AMA
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(6)							
(10)							
(11)							
(12)					·		
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							
						Sche	Schedule F (Form 990) 2012

Part	V Foreign Forms				
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	X	Yes		No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)		Yes	X	No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations. (see Instructions for Form 5471)		Yes	X	No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)		Yes	X	No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect To Certain Foreign Partnerships. (see Instructions for Form 8865)		Yes	X	No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713)		Yes	X	No

Schedule F (Form 990) 2012

#### Part V Suppler

#### **Supplemental Information**

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

GRANTS AND OTHER ASSISTANCE OUTSIDE THE UNITED STATES

GRANT FUNDS -BOTH BY ITSELF AND BY ANY GRANT RECIPIENTS.

PART I, LINE 2

THE ORGANIZATION HAS A NUMBER OF GRANTS AND OTHER ASSISTANCE IT PROVIDES
TO OTHER ENTITIES. THE MAJORITY OF THESE GRANTS ARE TO OTHER
ENVIRONMENTAL AND LIKE MINDED ENTITIES THAT PERFORM WORK ALONGSIDE OF EDF
IN THE ACCOMPLISHMENT OF ITS MISSION. EDF MONITORS THE PERFORMANCE OF
THE GRANT RECIPIENTS BY WRITTEN REPORTS, SITE VISITS, VERBAL
COMMUNICATION AND REVIEW. PARTIAL PAYMENTS ARE TYPICALLY MADE ON A GRANT
UNTIL A PATTERN OF PROVEN ACHIEVEMENTS ON OBJECTIVES IS DEMONSTRATED. IN
THE END EDF TYPICALLY PREPARES A REPORT TO FUNDING ENTITIES ON THE USE OF

#### **SCHEDULE G** (Form 990 or 990-EZ)

Supplemental Information Regarding **Fundraising or Gaming Activities** 

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

OMB No. 1545-0047

Open to Pliblic Inspection

Department of the Treasury Internal Revenue Service Attach to Form 990 or Form 990-EZ. See separate instructions. Name of the organization Employer identification number ENVIRONMENTAL DEFENSE FUND, INC. 11-6107128 Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Part I Form 990-EZ filers are not required to complete this part. 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply. X Mail solicitations Solicitation of non-government grants X X Ь Internet and email solicitations f Solicitation of government grants X c Phone solicitations Special fundraising events X In-person solicitations 2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (v) Amount paid to (III) Did fundraiser have (vi) Amount paid to (i) Name and address of individual (Iv) Gross receipts (or retained by) (ii) Activity custody or control of (or retained by) or entity (fundraiser) fundraiser listed in from activity contributions? organization col. (I) Yes No 1 DIRECT INTEGRAL RESOURCES INC FUNDRAISING X 597,581 400,412 197,170. 2 DIRECT PUBLIC INTEREST COMMUNICATIO **FUNDRAISING** 69,211 X 62,854 6,357. 3 TELEPHONE PDR II, INC. **FUNDRAISING** X 16,560 65,405 DIRECT STRATEGIC FUNDRALSING **FUNDRAISING** X 73,522 152,274 5 FUNDRAISING COMNET MARKETING GROUP, INC. COUNSEL X 19,102 43,498 6 7 8 10 775,976 724,443. 203,527. List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing. AL, AK, AR, CA, CO, CT, FL, GA, HI, IL, KS, KY, LA, ME, MD, MA, MI, MN, MS, NV, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, TN, UT, VA, WA, WV, WI,

Pa		Fundraising Events. Complete than \$15,000 of fundraising ever gross receipts greater than \$5,00	nt contributions and gro	wered "Yes" to Form 990 ss income on Form 990	90, Part IV, line 18, or )-EZ, lines 1 and 6b. I	reported more _ist events with
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through
45			(event type)	(event type)	(total number)	col. (c))
Revenue	1	Gross receipts				
Rev	•	Gross receipts				
	2	Less: Contributions				
	3	Gross income (line 1 minus				
	4	Cash prizes				
	5	Noncash prizes				
enses	6	Rent/facility costs				
Direct Expenses	7	Food and beverages				
Direc	8	Entertainment				
	9	Other direct expenses		·		
	10					(
	11	Net income summary. Combine line 3	i, column (d), and line 10	)		
Pa	rt l	Gaming. Complete if the orgathan \$15,000 on Form 990-E	nization answered "Y	es" to Form 990, Par	t IV, line 19, or repo	rted more
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c)
Se Se	1	Gross revenue			•	
ses		Cash prizes				
irect Expenses	3	Noncash prizes				
Direct	4	Rent/facility costs	<u>-</u>			
	5	Other direct expenses				
	6	Volunteer labor	Yes%	Yes%	Yes%	
	7	Direct expense summary. Add lines 2	through 5 in column (d)			(
	8	Net gaming income summary. Combi	ne line 1, column d, and	l line 7	<i>.</i>	
	Er Is	nter the state(s) in which the organizati the organization licensed to operate g "No," explain:	on operates gaming act	ivities:of these states?		Yes No
		ere any of the organization's gaming li		nded or terminated durir	ng the tax year?	Yes No

Schedule G (Form 990 or 990-EZ) 2012

Sched	ule G (Form 990 or 990-EZ) 2012
11	Does the organization operate gaming activities with nonmembers?
12	is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity
	formed to administer charitable gaming?
13	Indicate the percentage of gaming activity operated in:
а	The organization's facility
	An outside facility ,
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:
	Name ▶
	Address ►
15 a	Does the organization have a contract with a third party from whom the organization receives gaming
	revenue?
b	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the
	amount of gaming revenue retained by the third party ▶ \$
С	If "Yes," enter name and address of the third party:
	Name ▶
	Address ►
16	Gaming manager information:
	Name ▶
	Gaming manager compensation ▶ \$
	Description of services provided ▶
	Director/officer Employee Independent contractor
17	Mandatory distributions:
a	Is the organization required under state law to make charitable distributions from the gaming proceeds to
	retain the state gaming license? Yes No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations
	or spent in the organization's own exempt activities during the tax year ▶ \$
Part _	Supplemental Information. Complete this part to provide the explanation required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).

Schedule G (Form 990 or 990-EZ) 2012

### SCHEDULE | (Form 990)

Department of the Treasury Name of the organization Internal Revenue Service

Part I General Information on Grants and Assistance

ENVIRONMENTAL DEFENSE FUND, INC.

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

OMB No. 1545-0047	2012	
OMB No.	20	

Open to Public Inspection

Employer identification number

X Yes

11-6107128

72			15
records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and	award the grants or assistance?		stance to Governments and Organizations In the United States Complete if the organization answered "V
oility for the grants			e if the organiz
ie grantees' el <del>i</del> gil		d States.	fates Comple
or assistance, th		funds in the Unite	n the United S
nt of the grants		he use of grant	)roanizatione
antiate the amou	assistance?	Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	ernments and (
ecords to substa	ard the grants or	lion's procedure:	stance to Gove
zation maintain r	eria used to awa	IV the organizat	d Other Assis
Does the organization maintain r	the selection criteria used to awa	Describe in Part	Grants and Other Assi
_	_	_	

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

(a) Name and address of organization or government	(g)	(c) IRC section if applicable	(d) Amount of cash grant	(a) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) INTERCULTURAL CENTER FOR THE STUDY OF DESER							
4455 N. CAMINO CARDENAL TUCSON, AZ 85718	86-0578996	501(C)(3)	30,000.		FMV		RESTORE MARINE
(2) IPAM INTERNATIONAL PROGRAM, INC.							
3180 18TH STREET, SUITE 205	27-3444564	501(C)(3)	17,522.		FMV	·	SUPPORT OF REDD
(3) CALIFORNIA INTERFALTH POWER & LIGHT DRA THE							
	94-3335236	501 (C) (3)	7,500,		FMV		PILOT WORK
(4) CENTER FOR ENERGY EFFICIENCY AND RENEWARLS							
1100 11TH ST. SUITE 311	68-0260751	501 (C) (3)	10,417.		PMV		SMART POWER PROGRAM
(5) REGENTS OF THE UNIVERSITY OF CALIFORNIA (AT							
1850 PARK DRIVE, SUITE 300 DAVIS, CA 95618	94-6036494	N/A	7,577.		PMV		METHANE EMISSIONS
(6) CEERT							
BET, SUITE 311	68-0260751	501 (C) (3)	30,000.		FWV	•	SMART POWER PROGRAM
(7) THE TOWER FOUNDATION OF SAN JOSE STATE UNIV							
ONE WASHINGTON SQUARE SAN JOSE,, CA 90803	83-0403915	501(C)(3)	25,000.		FMV		FISHERIES RESEARCH
(8) STAMFORD UNIVERSITY							
CA 94144-4253	94-1156365	501 (C) (3)	216,586.		FMV		FISHERIES FORUM
(9) EARTH SYSTEM RESEARCH LABORATORY, OAR, NOAR							
$\neg$	84-1040636	N/A	135,150.		FMV		METHANE EMISSIONS
(10) UNIVERSITY OF COLORADO-BOULDER							
3100 MARINE ST. BOULDER, CO 80309-0043	84-6000555	N/A	297,070.		FMV		METHANE PRODUCTION
(11) COLORADO STATE UNIVERSITY - SPONSORED PROGR							
	84-6000545	N/A	870,000.		FMV		METHANE GATHERING
(12) CONSERVATION COLORADO EDUCATION FUND							
1536 WYNKOOP STEET, STE 5C DENVER, CO 80202	73-1651499	501(C)(3)	50,000.	1	PMV		GAS EMISSIONS
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	vernment or	ganizations liste	ed in the line 1 table			<b>A</b>	
3 Enter total number of other organizations listed in the lin	in the line	he 1 table				•	
For Paperwork Reduction Act Notice, see the Instructions		for Form 990.				Schedi	Schedule I (Form 990) (2012)

### SCHEDULE 1 (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization Part I General Information on Grants and Assistance

ENVIRONMENTAL DEFENSE FUND,

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

2012

Open to Public

Inspection Employer identification number

11-6107128

Complete If the organization answered "Yes" to Form 990, Part IV, line 21 or 22. ▶ Attach to Form 990.

<b>%</b>
Does the organization maintain records to substantiate the amount of the grants or assistance, and the selection criteria used to award the grants or assistance?  The selection criteria used to award the grants or assistance?  Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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

1 (a) Name and address of organization or government	(p) EIN	(c) IRC section If applicable	(d) Amount of cash grent	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) COLORADO STATE UNIVERSITY 2002 CAMPUS DELLUERY FORT COLLINS, CO 80523	84-5000545	W/A	P37 59				
(2) US CLIMATE ACTION NETWORK					AMA		METHANE MAPPING WORK
	52-1677780	501 (C) (3)	55,000.		PMV		GHG REDUCTION
(3) ALLIANCE TO SAVE ENERGY							
1850 M STREET NW, SUITE 600	52-1082991	501 (C) (3)	10,000.		FMV		ENERGY REPICTRACY
(4) DEFENDERS OF WILDLIFE							
1130 17TH ST. NW WASHINGTON, DC 20036	53-0183181	501(C)(3)	33,448.		FMV		RESTORE MARTNE
(5) MOTE MARINE LABORATORY, INC.							
ŀ	59-0756643	501 (C) (3)	108,276.		PMV		USGEARY NACHE
(6) SNOOK FOUNDATION INC. DRA SNOOK AND GAMERIS							
1505 WEST TERRANCE DRIVE	65-0839514	501(C)(3)	35,000.		FMV		OCRAN CONSERVATION
(7) CLARK ATLANTA UNIVERSITY							
223 JAMES P. BRAWLEY DR., SW	58-1825259	501(C)(3)	50,000.		FMV		SUSTAINABILITY
(8) COALITION TO RESTORE COASTAL LOUISIANA							
6160 PERKINS ROAD #225	72-1115589	501 (C) (3)	100,000.		FMV		COASTAL LOUISIANA
(9) THE NATURE CONSERVANCY							
P.O. BOX 4125 BATON ROUGE, LA 70821	53-0242652	501 (C) (3)	100,000.		FMV		COASTAL LOUISIANA
(10) LAKE PONTCHARTRAIN BASIN FOUNDATION							
PO BOX 6965 METAIRIE, LA 70009	72-1152784	501 (C) (3)	175,000.		FMV		LOUISTANA COASTAL
(11) ATMOSPHERIC AND ENVIRONMENTAL RESEARCH, INC.							
131 HARTWELL AVE., LEXINGTON, MA 02421-3126	04-2608324	N/A	30,000.		FMV		METHANE WORK
(12) PRESIDENT AND FELLOWS OF HARVARD COLLEGE DB							
EARTH AND PLANETARY SCIENCES 20 OXFORD ST.	04-2103580	501 (C) (3)	60,467.		FMV		METHANE WORK
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	overnment or	ganizations liste	ed in the line 1 table			•	
3 Enter total number of other organizations listed in the line 1 table	d in the line	I table					
For Paperwork Reduction Act Notice, see the Instructions		for Form 990.				Schedu	Schedule I (Form 990) (2012)

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### SCHEDULE (Form 990)

Department of the Treasury Name of the organization Internal Revenue Service

Part | General Information on Grants and Assistance

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

OMB No. 1545-0047
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Open to Public Inspection

Employer identification number 11-6107128 2

X Yes

. . . . . .

Separation of the measury	<u></u>		•	Attocke W	000
nternal Revenue Service				Allach to For	.068 E
Name of the organization					
ENVIRONMENTAL DEFENSE FIND INC	DEFENSE	CINE	JNL		

mainta sed to a
Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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

National State   13   15   15   15   15   15   15   15	1 (a) Name and address of organization or government	(p) EIN	(c) IRC section	(d) Amount of cash	(e) Amount of non-	(f) Method of valuation (book, FMV, appraisal,	(g) Description of	(h) Purpose of grant
7         501 (C) (3)         64,033.         PMV           9         501 (C) (3)         104,675.         PMV           6         501 (C) (3)         230,200.         FMV           9         501 (C) (3)         437,974.         PMV           9         501 (C) (3)         437,974.         PMV           6         501 (C) (3)         35,000.         FMV           8         501 (C) (3)         270,500.         FMV           9         501 (C) (3)         250,000.         FMV           1         501 (C) (3)         50,000.         FMV           2         501 (C) (3)         50,000.         FMV           2         501 (C) (3)         50,000.         FMV           1         501 (C) (3)         50,000.         FMV				,	CASH ASSISSENCE	other)	non-cash assistance	or assistance
7         501 (C) (3)         64,033.         FMV           9         501 (C) (3)         104,675.         FMV           6         501 (C) (3)         234,578.         FMV           0         501 (C) (3)         437,974.         FMV           0         501 (C) (3)         437,974.         FMV           6         501 (C) (3)         35,000.         FMV           6         501 (C) (3)         35,000.         FMV           7         501 (C) (3)         50,000.         FMV           8         501 (C) (3)         50,000.         FMV           9         501 (C) (3)         50,000.         FMV           1         501 (C) (3)         50,000.         FMV           1         501 (C) (3)         50,000.         FMV           0         501 (C) (4)         950,000.         FMV           0         501 (C) (4)         950,000.         FMV								
6 501 (C) (3) 104,675. PWV 6 501 (C) (3) 230,200. FWV 7 501 (C) (3) 244,578. FWV 7 501 (C) (3) 437,574. FWV 8 501 (C) (3) 35,000. FWV 9 501 (C) (3) 35,000. FWV 1 501 (C) (3) 200,000. FWV 1 501 (C) (4) 250,000. FWV	A 02215	04-2103547	501(C)(3)	64.033		BMA		A TO SERVICE STATE OF THE PARTY
6         SOJ (C) (3)         104,675.         FMV           6         SOJ (C) (3)         230,200.         FMV           0         SOJ (C) (3)         19,707.         PMV           9         SOJ (C) (3)         437,974.         FMV           6         SOJ (C) (3)         60,000.         FMV           8         SOJ (C) (3)         35,000.         FMV           9         SOJ (C) (3)         35,000.         FMV           1         SOJ (C) (3)         50,000.         FMV           1         SOJ (C) (3)         50,000.         FMV           2         SOJ (C) (3)         50,000.         FMV           1         501 (C) (3)         500,000.         FMV           0         501 (C) (4)         950,000.         FMV						444		METHANE WORK
6         \$01(C) (3)         234,675.         PWV           6         \$01(C) (3)         234,578.         PWV           9         \$01(C) (3)         19,707.         PWV           9         \$01(C) (3)         437,974.         PWV           6         \$01(C) (3)         35,000.         PWV           7         \$01(C) (3)         270,500.         PWV           8         \$01(C) (3)         \$0,000.         PWV           9         \$01(C) (3)         \$0,000.         PWV           1         \$01(C) (3)         \$00,000.         PWV           2         \$01(C) (3)         \$00,000.         PWV           1         \$01(C) (3)         \$00,000.         PWV	(4) DUKE UNIVERSITY							
6 501(C) (3) 230,200. Frav.  8 501 (C) (3) 244,578. Frav.  6 501 (C) (3) 437,974. Frav.  7 501 (C) (3) 35,000. Frav.  8 501 (C) (3) 35,000. Frav.  9 501 (C) (3) 270,500. Frav.  1 501 (C) (3) 200,000. Frav.  1 501 (C) (4) 950,000. Frav.  1 601 (2) (4) 950,000. Frav.  1 601 (2) (4) 950,000. Frav.  1 601 (2) (4) 950,000. Frav.	2117 CAMPUS DRIVE PO BOX 90335	56-0532129	501(C)(3)	104,675.		FMV		METHANE WORK
6 501(C) (3) 230,200. FWV  0 501(C) (3) 244,579. FWV  6 501(C) (3) 437,974. FWV  6 501(C) (3) 50,000. FWV  7 501(C) (3) 270,500. FWV  7 501(C) (3) 200,000. FWV  8 501(C) (3) 200,000. FWV  9 501(C) (3) 200,000. FWV  1 501(C) (4) 950,000. FWV  1 501(C) (4) 950,000. FWV  1 501(C) (4) 950,000. FWV	(3) NORTH CAROLINA STATE UNIVERSITY							
8         501 (C) (3)         244,578.         FWV           0         501 (C) (3)         19,707.         FWV           9         501 (C) (3)         437,374.         FWV           6         501 (C) (3)         35,000.         FWV           8         501 (C) (3)         35,000.         FWV           9         501 (C) (3)         200,000.         FWV           1         501 (C) (3)         200,000.         FWV           1         501 (C) (3)         200,000.         FWV           1         501 (C) (4)         950,000.         FWV           1         501 (C) (4)         950,000.         FWV	CAMPUS BOX 7214 RALEIGH, NC 27695-7214	56-6000756	501(C)(3)	230,200.		FMV		TOTA DIDENTARDID
6         501 (C) (3)         244,578.         FMV           9         501 (C) (3)         437,974.         FMV           6         501 (C) (3)         437,974.         FMV           8         501 (C) (3)         35,000.         FMV           4         501 (C) (3)         270,500.         FMV           2         501 (C) (3)         50,000.         FMV           1         501 (C) (3)         50,000.         FMV           1         501 (C) (4)         950,000.         FMV           1         corganizations listed in the line 1 table         FMV	(4) SAMPSON COUNTY COOPERATIVE EXTENSION SERVIC							THOU THOUSENED THOSE
0         501 (C) (3)         19,707.         PMV           9         501 (C) (3)         437,974.         FMV           6         501 (C) (3)         50,000.         FMV           8         501 (C) (3)         35,000.         FMV           4         501 (C) (3)         270,500.         FMV           2         501 (C) (3)         50,000.         FMV           1         501 (C) (4)         950,000.         FMV           1         501 (C) (4)         950,000.         FMV           1         corganizations listed in the line 1 table         FMV	55 AGRICULTURE PLACE CLINTON, NC 28328	56-6000338	501(C)(3)	244,578.		PMV		ACPT MANAGEMENT
6         501 (C) (3)         437,974.         FMV           8         501 (C) (3)         437,974.         FMV           8         501 (C) (3)         35,000.         FMV           4         \$01 (C) (3)         270,500.         FMV           2         \$01 (C) (3)         \$000.000.         FMV           1         \$01 (C) (3)         \$000.000.         FMV           2         \$01 (C) (3)         \$000.000.         FMV           1         \$01 (C) (4)         \$50,000.         FMV           1         \$01 (C) (4)         \$50,000.         FMV	(5) APPALACHIAN STATE UNIVERSITY							
6       501 (C) (3)       437,974.       FMV         6       501 (C) (3)       60,000.       FMV         8       501 (C) (3)       35,000.       FMV         4       \$01 (C) (3)       270,500.       FMV         2       501 (C) (3)       50,000.       FMV         1       501 (C) (3)       200,000.       FMV         1       501 (C) (4)       950,000.       FMV         1       1 (able in the line 1 table in table	PO BOX 32043 BOONE, NC 28608	56-1176030	501 (C) (3)	19,707.		PMV		PISHERIES RESERVED
6         501 (C) (3)         437,974.         FMV           8         501 (C) (3)         50,000.         FMV           4         501 (C) (3)         270,500.         FMV           2         501 (C) (3)         50,000.         FMV           1         501 (C) (3)         200,000.         FMV           2         501 (C) (4)         950,000.         FMV           3         501 (C) (4)         550,000.         FMV	(6) DUKE UNIVERSITY		,					
6 501 (C) (3) 60,000. PMV 8 501 (C) (3) 35,000. PMV 4 501 (C) (3) 270,500. FMV 2 501 (C) (3) 50,000. FMV  1 501 (C) (3) 200,000. FMV  1 501 (C) (4) 950,000. FMV  2 organizations listed in the line 1 table	2117 CAMPUS DRIVE PO BOX 90335	56-0532129	501(C)(3)	437,974.		FMV		WISHER ROOM
6 SO1(C) (3) 60,000. PMV 4 SO1(C) (3) 35,000. FMV 2 SO1(C) (3) 270,500. FMV 1 SO1(C) (3) 50,000. FMV 0 SO1(C) (4) 950,000. FMV corganizations listed in the line 1 table	(7) NATURAL RESOURCES DEFRINSE COUNCIL, INC.							
8	40 WEST 20TH STREET NEW YORK, NY 10011	13-2654926	501(C)(3)	.000,000		FMV		GHG REDUCTION
8   SO1 (C) (3)         35,000.         PMV           4   SO1 (C) (3)         270,500.         FMV           2   SO1 (C) (3)         50,000.         FMV           1   SO1 (C) (3)         200,000.         FMV           1   SO1 (C) (4)         950,000.         FMV           1   Organizations listed in the line 1 table         FMV								
4 \$01(C) (3) 270,500. FMV 2 \$01(C) (3) 50,000. FMV 1 \$01(C) (3) 200,000. FMV 0 \$01(C) (4) 950,000. FMV corganizations listed in the line 1 table	665 BROADWAX, SUITE 801 NEW YORK, NY 10012	13-5562308	501 (C) (3)	35,000.		PMV		HUGEASAG NOHAEU
4         \$501(C) (3)         270,500.         FMV           2         \$501(C) (3)         \$0,000.         FMV           1         \$501(C) (3)         \$200,000.         FMV           0         \$501(C) (4)         \$550,000.         FMV           t organizations listed in the line 1 table         FMV         FMV								
2 501 (C) (3) 50,000. FMV  1 501 (C) (3) 200,000. FMV  1 501 (C) (4) 950,000. FMV  2 rorganizations listed in the line 1 table		16-1229774	501(C)(3)	270,500.		FMV		METHANE GATHERING
2         501 (C) (3)         50,000.         FMV           1         501 (C) (3)         200,000.         FMV           0         501 (C) (4)         950,000.         FMV           1         organizations listed in the line 1 table         FMV	(10) VAN ALEN INSTITUTE PROJECTS IN PUBLIC ARCHI							
1 501 (C) (3) 200,000. PMV 0 501 (C) (4) 950,000. FMV 1 organizations listed in the line 1 table	30 WEST 22ND STREET NEW YORK, NY 10010	13-1655152	501(C)(3)	50,000.		FMV		MATURAL DES
1 501(C) (3) 200,000. FMV 0 501(C) (4) 950,000. FMV c organizations listed in the line 1 table	(11) CALIFORNIA FISHERIES FUND, INCORPORATED							
torganizations listed in the line 1 table	257 PARK AVENUE SOUTH NEW YORK, NY 10010	26-0873741	501 (C) (3)	200,000.		FMV		GENERAL STIDDOPT
torganizations listed in the line 1 table	Ĺ							
i organizations listed in the line 1 table	257 PARK AVENUE SOUTH NEW YORK, NY 10010	90-0080500	501(C)(4)	950,000.		FMV		GENERAT, SHEDOPT
le 1 table	2 Enter total number of section 501(c)(3) and ac	overnment or	raanizations liste	d in the line 1 table			4	
The state of the s	3 Enter total number of other organizations lister	d in the line	1 table					
	EAR Department Dedication And Material							

V 12-7.12

### SCHEDULE (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

OMB No. 1545-0047 Open to Public 2012

Inspection

Employer Identification number

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. ▶ Attach to Form 990.

哥	NVIRONMENTAL DEFENSE FUND, INC.	11-6107128
مّ	it   General Information on Grants and Assistance	
_	Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and	r assistance, and
	the selection criteria used to award the grants or assistance?	
N	Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	

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

ž

× Yes

1 (a) Name and address of organization or government	(e) Ein	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) GROUND WATER PROTECTION COUNCIL INC.							
13308 N. MACARTHUR BLVD.	73-1210455	501(C)(6)	160,000.		FMV		NATURAL GAS STUDY
(2) OREGON ENVIRONMENTAL COUNCIL							
222 NW DAVIS STREET PORTLAND, OR 97209	93-0578714	501 (C) (3)	13,450.		PMV		TOXIC CHEMICALS
(3) PENNSYLVANIA ENVIRONMENTAL COUNCIL, INC							
22 TERMINAL WAY PITTSBURGH, PA 15219	23-7286159	501(C)(3)	61,200.		FMV		IMPROVE NATURAL CAS
(4) CARNEGIE MELLON UNIVERSITY							
5000 FORBES AVENUE PITISBURGH, PA 15213	25-0969449	501(C)(3)	250,000.		FWV		METHANE BMISSIONS
(5) UNIVERSITY OF TEXAS AT AUSTIN	_				:		
PO BOX 7159 AUSTIN, TX 78712	74-6000203	N/A	107,500.		FMV		METHANE PRODUCTION
(6) HOUGTON ADVANCED RESEARCH CENTER							
	76-0038315	501(C)(3)	12,000.		PMV		SWOTESTME ENGLANCE
(7) NATIONAL WILDLIFE FEDERATION		_					
44 EAST AVE. #200 AUSTIN, TX 78701	53-0204616	501 (C) (3)	30,000.		FMV		MISSISSIPPI DELTA
(8) BIODIVERSITY WORKS							
2611 NOTTINGHAM LANE AUSTIN, TX 78704	27-4032271	501(C)(3)	25,000.		FMV		TANDOWNER RIPLEMENTON
(9) TEXAS TECH UNIVERSITY							
TX 79409-1105	75-6002632	N/A	60,902.		PMV		SHARK RESEARCH
(10) GULE OF MEXICO REEF FISH SHAREHOLDER'S ALLI							
1902 WHARF ROAD GALVESTON, TX 77550	26-2524327	501 (C) (3)	146,200.		PMV		MARTNE PISHERY
(11) CONSERVATION INTERNATIONAL							
2011 CRYSTAL DRIVE, SUITE 500	52-1497470	501(C)(3)	17,568.		FMV		MEXICO DEFORESTATION
(12) ICF RESOURCES, LLC							
- 1	54-1500263	501 (C) (3)	1,120,741.		FMV		TRAN HRAT
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	overnment or	ganizations list	ed in the line 1 table			4	
3 Enter total number of other organizations listed in the	d in the line	line 1 table					•
For Paperwork Reduction Act Notice, see the Instructions for Form 990	structions for	Form 990.				Schedo	Schedule   (Form 990) (2012)

Schedule | (Form 990) (2012)

### SCHEDULE (Form 990)

Department of the Treasury

internal Revenue Service Name of the organization

Part I General Information on Grants and Assistance

ENVIRONMENTAL DEFENSE FUND,

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

Open to Public OMB No. 1545-0047 2012

Complete If the organization answered "Yes" to Form 990, Part IV, line 21 or 22. ▶ Attach to Form 990.

Employer identification number 11-6107128

Inspection

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Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and
the selection criteria used to award the grants or assistance?
Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) AMERICAN SOCIETY OF AGRONOMY, INC.							
5585 GUILFORD ROAD MADISON, WI 53711-5801	39-0808552	501 (C) (3)	15,000.		PMV		4R CURRICULUM
(2) WEST VIRGINIA UNIVERSITY RESEARCH CORPORATI							
PO BOX 6002 MORGANIOWN, WV 25506	55-0665758	501 (C) (3)	783,300.		FMV		METHANE POMP
(3) WYOMING OUTDOOR COUNCIL							
262 LINCOLN STREET LANDER, WY 82520	83-0259411	501(C)(3)	41,000.		FMV		NATURAL GAS
(4)							
(g)							
(9)							
(n)							
(8)							
(6)							
(10)							
(11)							
(12)							
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	overnment or	ganizations liste	ed in the line 1 table	0			41.
3 Enter total number of other organizations listed in the	d in the line	line 1 table					10.
For Paperwork Reduction Act Notice, see the Inst	tructions for	is for Form 990.				Sched	Schedule I (Form 990) (2012)

2E1288 1.000 52644M L161 4/29/2014

Schedule I (Form 990) (2012)

Schedule I (Form 990) (2012)

Page 2 Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed. Part III

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
-					
2					
3					
4				3 4	
5					
9					
4					
Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information.	his part to prov	vide the informat	tion required in	Part I, line 2, Part III,	column (b), and any other additional

GRANTS AND OTHER ASSISTANCE

SCHEDULE I, PART I, LINE 2

THE ORGANIZATION HAS A NUMBER OF GRANTS AND OTHER ASSISTANCE IT PROVIDES

HE TO OTHER CHARITIES AND QUASI-GOVERNMENTAL ENTITIES IN THE U.S. OF THESE GRANTS ARE TO OTHER ENVIRONMENTAL 501(C)3 NON-PROFIT MAJORITY

SOME OF THESE ARE "FLOW-THROUGH" GRANTS FROM A FUNDING ENTITY OR

MISSION.

ENTITIES THAT PERFORM WORK ALONGSIDE OF EDF IN THE ACCOMPLISHMENT OF ITS

FOUNDATION THAT SUPPORTS EDF'S WORK. EDF MONITORS THE PERFORMANCE OF THE

GRANT RECIPIENTS BY WRITTEN REPORTS, SITE VISITS, VERBAL COMMUNICATION

PARTIAL PAYMENTS ARE TYPICALLY MADE ON A SUB-GRANT UNTIL A AND REVIEW.

Schedule | (Form 990) (2012)

ENVIRONMENTAL DEFENSE FUND, INC.

Page 2 Schedule I (Form 990) (2012)

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

Part III can be duplicated if additional space is needed.

	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
			1			
-						
7						
က						
4						
<b>6</b>						
7						
Part IV	Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information.	is part to prov	vide the informat	ion required in	Part I, line 2, Part III,	column (b), and any other additional

IN THE END PATTERN OF PROVEN ACHIEVEMENTS ON OBJECTIVES IS DEMONSTRATED.

EDF TYPICALLY PREPARES A REPORT TO FUNDING ENTITIES ON THE USE OF GRANT

FUNDS -BOTH BY ITSELF AND BY ANY SUB-GRANT RECIPIENTS.

### **SCHEDULE J** (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees
Complete if the organization answered "Yes" to Form 990,
Part IV, line 23.

► Attach to Form 990. ► See separate instructions.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Department of the Treasury Internal Revenue Service

ENVIRONMENTAL DEFENSE FUND, INC.

**Employer Identification number** 11-6107128

Part	Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form			
	990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel    X   Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
h	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment			
	or reimbursement or provision of all of the expenses described above? If "No." complete Part III to			İ
_	explain	1b	X.	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers,			
	directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2	Х	
-	Indiants which if any of the fallowing the filler and the state of the		11.	
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the			
	organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a			
	related organization to establish compensation of the CEO/Executive Director, but explain in Part III.    X   Compensation committee   Written employment contract			
	TV TRUST CONTROL			
	The policies of the first series and the series are the series and the series and the series are the series and the series and the series and the series are the series are the series and the series are the series			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:		14	
	Receive a severance payment or change-of-control payment?	40		х
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4a 4b	х	
	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
•	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.	40		
	in the to diff of miles to a first the persons and provide the applicable unfound for each from in fact in.			
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
	compensation contingent on the revenues of:			
а	The organization?	5a		X
b	Any related organization?	5b		Х
	If "Yes" to line 5a or 5b, describe in Part III.			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
	compensation contingent on the net earnings of:			
а	The organization?	6a		Х
b	Any related organization?	6b		Х
	If "Yes" to line 6a or 6b, describe in Part III.			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed			
	payments not described in lines 5 and 6? If "Yes," describe in Part III	7		X
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject		ļ	
	to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe		į	
_	in Part III	8		X
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			
'	Regulations section 53.4958-6(c)?	9		

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

Schedule J (Form 990) 2012

Page 2

Schedule J (Form 990) 2012

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

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII. Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

		v io mwooweald (a)	or w-z and/or 1099-MISC compensation	compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(III) Other reportable compensation	other deferred compensation	benefits	(BXi)+(D)	reported as deferred in prior Form 990
FREDERIC D. KRUPP	€	440,738.	45,000.	0	37,000.	19,098.	541,836.	0
PRESIDENT	₿		0	Ü			0 	0
ELIZABETH HENSHAW	€	288,702.	10,000.	0	24,954.	19,098.	342,754.	0
2 CHIEF OPERATING OFFICER	₿		0		О	0		0
PETER ACCINNO	ε	198,985.		0	18,868.	1,034.	218,887.	0
3 CFO & TREASURER	₿		0		0	0		0
TA	ε	223,605.	0	70,000.	18,574.	11,922.	324,101.	0
	€		0	J	0	0	0	0
PAULA HAYES	ε	239,308.	5,000.	0	20,400.	19,098.	283,806.	0
4 I	₿		0	2		0		0
NIEL J DUDEK, PH.D.	ε	285,543.	50,000.	0	20,000.	19,098.	374,641.	0
	€		0	0	0	0	0	0
	ε	257,651.	15,000.	43,085.	22,554.	19,098.	357,388.	0
WS	≣		0	0	0	0	0	0
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Schedule J (Form 990) 2012

Page 3

### Schedule J (Form 990) 2012 Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

OFFICERS, DIRECTORS, TRUSTEES, KEY EMPLOYEES

SCHEDULE J, PART II

REPORTABLE COMPENSATION OF \$70,000 FOR DAVID FESTA AND \$43,085 FOR DIANE

REGAS REPRESENTS A HOUSING ALLOWANCE.

Schedule J (Form 990) 2012

### **SCHEDULE L** (Form 990 or 990-EZ)

### **Transactions With Interested Persons**

► Complete if the organization answered
"Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c,
or Form 990-EZ, Part V, line 38a or 40b.

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

OMB No. 1545-0047 Open To Public

Department of the Treasury Internal Revenue Service Name of the organization

Inspection

ENVIRONMENTAL DEFEN	SE FUND.	INC.					-	11	-610				
Part I Excess Benefit Complete if the o	Transaction	s (section 5	01(c) s" on	(3) an Form	d section 501 990, Part IV	l(c)(4) , line 2	organizations only 5a or 25b, or Forn	y).				b.	
· · ·		1			en disqualified		T						) Conecind
1 (a) Name of disqualifie	d person	(3), (5)	an	d orga	nization	po. 0011	(c) Desc	ription	of tran	sactio	n	_	es No
(1)												-	-
(2)		1					1						+
(3)		<del> </del>											+
(4)		1					1					$\overline{}$	+
(5)		1		-			+	-				$\dashv$	+
(6)		1					<del>                                     </del>					-	+
2 Enter the amount of to under section 4958. 3 Enter the amount of to										* \$_ * \$_			
Complete if the organization rep  (a) Name of interested person	organization a	inswered "Ye	990, (d) Lc	n Form	n 990-EZ, Pa (, line 5, 6, or (e) Origin principal am	22. al	ne 38a or Form 99	_		(h) Ap	or if the	(I) W	ritten ment?
			То	From			r	Yes	No	Yes	No	Yes	No
(1)			10	1 10111				168	RU	148	NO	108	NO
(2)		!		$\vdash$				+		$\vdash$			
(3)								<del> </del>		-			
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			_										
(9)			-							<u> </u>			
(10)													
Part III Grants or Ass Complete if the c	istance Ben organization a	efiting Inter	este	d Pers	sons. 1 990, Part IV,	line 27							
(a) Name of interested person		p between Intere the organization		c) Amou	int of assistance	(d)	Type of assistance		(e) F	urpos	e of as	sistan	ce
(1)			$\perp$					$\perp$					
(2)													
(3)													
(4)													
(5)													
(6)													
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(9)													
(10)		••	$\neg$										

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

Schedule L (Form 990 or 990-EZ) 2012

Schedule L (Form 990 or 990-EZ) 2012

Page 2

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	_	naring of Ization's nues?
			·	Yes	No
(1) ISABEL GRANTHAM	DAUGHTER OF TRUSTEE	45,311.	COMPENSATION		х
(2) SANDRA SHORENSTEIN	DAUGHTER OF TRUSTEE	41,166.	COMPENSATION		х
(3)	·				
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)				1	_

Part V Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule L (see instructions).

### SCHEDULE M (Form 990)

### **Noncash Contributions**

► Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

► Attach to Form 990.

2012

Department of the Treasury Internal Revenue Service Name of the organization

ENVIRONMENTAL DEFENSE FUND, INC.

Inspection Employer Identification number

11-6107128

Ра	Types of Property	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	Method o	(d) of dete	rminin	ig ounts
1	Art - Works of art			,				
2	Art - Historical treasures							
3	Art - Fractional interests						_	
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles			<u></u>				
7	Boats and planes.				-			
8	Intellectual property	,						
9	Securities - Publicly traded ,	X	91.	3,176,585.	FMV			
10	Securities - Closely held stock							
11	Securities - Partnership, LLC,							
• •	or trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation							
	contribution - Historic							
	structures							
14	Qualified conservation							
	contribution - Other							
15	Real estate - Residential		<u> </u>		<del></del>			
16	Real estate - Commercial							
17	Real estate - Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21								
22	Taxidermy							
23	Scientific specimens							
24	Scientific specimens.							
2 <del>4</del> 25	Archeological artifacts							
25 26		I						
20 27					<del></del>			
2 <i>1</i> 28	Other ►()		· · · · · · · · · · · · · · · · · · ·					
29	Other ►()			4				
29	Number of Forms 8283 received by							
	which the organization completed F	orm 8283, F	art IV, Donee Acknowledge	ement	29	-		
30 =	During the year, did the organizati	on receive	hy contribution only proper	du separted in Dest 1 (inc	- 4 00 45-4	-	Yes	No
-	it must hold for at least three years							
	used for exempt ournoses for the en	s irom me i itira baldina	vale of the initial contribut	non, and which is not req	uirea to be			
h	used for exempt purposes for the en If "Yes," describe the arrangement in	Dod II	benod !	• • • • • • • • • • • • • • • •		30a		_X
31			maa nalime that are '	the market f				
J 1	Does the organization have a g	ynt accepta	ance policy that requires	the review of any n	on-standard			
22-	Contributions?	think				31	Х	
o∡ a	Does the organization hire or use	third partie	es or related organizations	i to solicit, process, or se	ell noncash			
	contributions?	• • • • • •		• • • • • • • • • • • • • • • • •		32a		_X
	if "Yes," describe in Part II.							
33	If the organization did not report an	amount in c	olumn (c) for a type of prop	perty for which column (a)	is checked,			
	describe in Part II.					_		

Schedule M (Form 990) (2012)

Part II

Page 2

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

### SCHEDULE O (Form 990 or 990-EZ)

### Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047 Open to Public

Inspection

Department of the Treasury Internal Revenue Service Name of the organization

ENVIRONMENTAL DEFENSE FUND, INC.

Employer identification number

11-6107128

STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS PART III, PAGE 2:

- 1. CLIMATE AND ENERGY NEW CARBON-CUTTING PROGRAMS IN CHINA AND CALIFORNIA, U.S. ACTION TO SLASH CARBON POLLUTION FROM POWER PLANTS AND TRANSPORTATION, AND AN AMBITIOUS NEW STRATEGY FOR THE ELECTRIC GRID ALL OFFER HOPE THAT WE CAN AVERT THE WORST IMPACTS OF CLIMATE CHANGE. THIS YEAR, CHINA LAUNCHED THE FIRST OF SEVEN CARBON TRADING PILOT PROGRAMS, WITH EDF PROVIDING TECHNICAL SUPPORT AND TRAINING. IN CALIFORNIA. A MANDATORY, DECLINING CAP ON CARBON THAT EDF HELPED DESIGN TOOK EFFECT THIS YEAR, AND THE STATE'S CARBON AUCTIONS RAISED ALMOST \$400 MILLION FOR CLEAN ENERGY INVESTMENTS. EDF IS WORKING IN A TOTAL OF NINE STATES THAT MAKE UP NEARLY HALF THE U.S. ENERGY MARKET TO STRENGTHEN CLEAN ENERGY REQUIREMENTS AND REMOVE OBSTACLES TO INVESTMENT. EDF ALSO LAUNCHED A SERIES OF EFFORTS TO MEASURE AND REDUCE METHANE EMISSIONS.
- 2. OCEANS DECADES OF OVERFISHING AND FAULTY MANAGEMENT HAVE DEVASTATED OCEAN FISHERIES AND COASTAL COMMUNITIES. BUT NOW NEARLY TWO-THIRDS OF THE FISH CAUGHT IN U.S. WATERS ARE BEING MANAGED USING A POWERFUL METHOD THAT EDF ADVOCATES, CALLED CATCH SHARES. THIS YEAR WE SAW THE COMMERCIAL RED SNAPPER FISHERY IN THE GULF OF MEXICO -- NEAR COLLAPSE IN 2007 BEFORE EDF HELPED INTRODUCE A CATCH SHARE MANAGEMENT PROGRAM -- CONTINUE ITS REMARKABLE RECOVERY. CATCH SHARES EMPOWER FISHERMEN TO BE STEWARDS. BOOSTING PROFITS AND FISH POPULATIONS. AS A RESULT OF THE SUCCESS OF THE

11-6107128

- U.S. PROGRAMS, EDF HAS BEEN ASKED TO HELP DESIGN CATCH SHARES IN PLACES RANGING FROM MEXICO TO BELIZE, EUROPE AND INDONESIA. IN BELIZE, EDF TEAMED UP WITH THE WILDLIFE CONSERVATION SOCIETY AND LOCAL PARTNERS, AND ILLEGAL FISHING IS DOWN BY MORE THAN 60%.
- 3. ECOSYSTEMS THROUGH ON-THE-GROUND PARTNERSHIPS IN 12 STATES, EDF IS

  HELPING FARMERS SAVE MONEY, IMPROVE WILDLIFE HABITAT AND REDUCE POLLUTION

  WITHOUT SACRIFICING YIELDS. HISTORICALLY, FARMERS OFTEN APPLIED TOO MUCH

  FERTILIZER, WITH AS MUCH AS HALF NOT BEING TAKEN UP BY CROPS, INSTEAD

  POLLUTING AIR AND WATER. TO CUT THIS WASTE AND POLLUTION, EDF IS WORKING

  WITH UNIVERSITES, FARM GROUPS AND COMPANIES INCLUDING WALMART AND

  SMITHFIELD FOODS TO HELP FARMERS USE BETTER DATA AND FIELD IMAGERY TO

  DETERMINE HOW MUCH FERTILIZER THEIR CROPS REALLY NEED. EDF ALSO

  INTRODUCED HABITAT EXCHANGES THAT LET LANDOWNERS EARN CREDITS FOR

  RESTORING WILDLIFE HABITAT ON THEIR LAND. ON THE GULF COAST, EDF IS

  HELPING TO GUIDE THE RESTORATION OF ECOSYSTEMS HARMED BY THE 2010 BP OIL

  SPILL, WITH AN INITIAL \$1.25 BILLION OF BP PENALTIES ALLOCATED SO FAR.
- 4. HEALTH WALMART ANNOUNCED A NEW POLICY, WHICH EDF HELPED DEVELOP, TO BEGIN PHASING OUT SOME POTENTIALLY HARMFUL INGREDIENTS FOUND IN EVERYDAY PRODUCTS SUCH AS SHAMPOO, BABY LOTION, COSMETICS AND AIR FRESHENERS, AND REPLACE THEM WITH SAFER INGREDIENTS. EDF ALSO HELPED STRENGTHEN AND ADVANCE A BILL IN CONGRESS TO REFORM THE NATION'S CHEMICALS LAW. NEW YORK CITY RESIDENTS ARE BREATHING THE CLEANEST AIR IN 50 YEARS, THANKS TO A PARTNERSHIP BETWEEN THE CITY AND EDF TO PHASE OUT THE DIRTIEST KINDS OF

HEATING OIL, A PROGRAM THAT HAS SAVED 800 LIVES A YEAR. EDF ALSO IS

DEFENDING ENVIRONMENTAL PROTECTION AGENCY STANDARDS TO ELIMINATE 90% OF

TOXIC MERCURY EMISSIONS FROM POWER PLANTS AND SUPPORTING CLEANER FUEL AND

VEHICLE STANDARDS THAT WILL CUT NITROGEN OXIDES, PARTICULATES AND VOLATILE

ORGANIC COMPOUNDS FROM NEW CARS BY MORE THAN 70%.

THE THREATS TO OUR ENVIRONMENT ARE URGENT, BUT THEY CAN BE SOLVED. EDF'S 440 SCIENTISTS, ECONOMISTS, LAWYERS AND POLICY EXPERTS PARTNER WITH OTHERS TO FIND PRACTICAL SOLUTIONS. WE'RE HOPEFUL BECAUSE, WITH OUR PARTNERS, WE'VE DEVELOPED A SET OF POLICY TOOLS THAT HAVE DELIVERED EXTRAORDINARY RESULTS. IF WE BRING THESE TO SCALE IN TIME, THEY WILL DO THE JOB. WE'RE HOPEFUL, TOO, SINCE MORE PEOPLE ARE JOINING WITH US TO BUILD THESE SOLUTIONS, AND SINCE URGENCY PUTS PRESSURE ON LEADERS TO TAKE ACTION.

A MORE COMPREHENSIVE REPORT OF EDF'S PROGRAM SERVICE ACCOMPLISHMENTS FOR THE YEAR IS AVAILABLE ONLINE AT WWW.EDF.ORG/ANNUAL-REPORTS/2013.

GOVERNANCE, MANAGEMENT, AND DISCLOSURES

REVIEW OF FORM 990

PART VI, SECTION B, LINE 11B

FORM 990, PART VI, SECTION B, LINE 11B - THE FORM 990 IS PREPARED BY
EISNERAMPER LLP, BASED ON FINANCIAL STATEMENTS AUDITED BY EISNERAMPER AND
OTHER INTERNALLY GENERATED INFORMATION BY THE ENVIRONMENTAL DEFENSE
FUND'S FINANCE DEPARTMENT. THE FORM IS FURTHER REVIEWED BY EDF'S FINANCE

DEPARTMENT (WHICH PROVIDES INDEPENDENT VERIFICATION OF CERTAIN INFORMATION) AND MEMBERS OF SENIOR MANAGEMENT. THE AUDIT COMMITTEE THEN REVIEWS ANY SIGNIFICANT ISSUES OR JUDGMENTS RELATING TO DISCLOSURES IN EDF'S FORM 990. FINALLY, COPIES ARE PROVIDED TO THE FULL BOARD OF DIRECTORS FOR THEIR COMMENT PRIOR TO FILING WITH THE IRS.

MONITORING OF CONFLICT OF INTEREST POLICY

PART VI, SECTION B, LINE 12A

IT IS THE RESPONSIBILITY OF ALL TRUSTEES AND EMPLOYEES OF THE
ENVIRONMENTAL DEFENSE FUND TO FAMILIARIZE THEMSELVES WITH THIS POLICY AND
TO COMPLY AND TO ENSURE COMPLIANCE OF RELATED PARTIES WITH IT. IN
ADDITION TO THE DISCLOSURES REQUIRED BY THIS POLICY, ANNUALLY EACH
TRUSTEE AND EMPLOYEE IS PROVIDED WITH A STATEMENT TO COMPLETE AND RETURN
INDICATING THAT THEY HAVE READ, UNDERSTAND AND ARE IN COMPLIANCE WITH
THIS POLICY. FOR BOTH TRUSTEES AND EMPLOYEES, THERE IS A PROCESS WHERE
THE ANNUAL STATEMENT OF COMPLIANCE MAY BE EFFECTED AND TRANSMITTED VIA
E-MAIL OR OTHER ELECTRONIC MEANS. TRUSTEES WHO KNOWINGLY OR UNKNOWINGLY
VIOLATE THIS POLICY ARE SUBJECT TO CENSURE OR REMOVAL, AT THE DISCRETION
OF THE BOARD OF TRUSTEES. EMPLOYEES WHO KNOWINGLY OR UNKNOWINGLY VIOLATE
THIS POLICY WILL BE SUBJECT TO DISCIPLINARY ACTION, INCLUDING POSSIBLE
DISMISSAL.

Employer identification number

11-6107128

DETERMINATION OF COMPENSATION OF THE PRESIDENT

PART VI, SECTION B, LINE 15

EDF USES A HUMAN RELATIONS COMMITTEE TO EVALUATE THE COMPENSATION OF THE PRESIDENT OF THE ORGANIZATION WHO IS THE HIGHEST-RANKING EMPLOYEE. THE HUMAN RELATIONS COMMITTEE OF THE BOARD OF TRUSTEES IS COMPOSED OF THREE INDEPENDENT TRUSTEES AND THE CHAIRMAN OF THE BOARD WHO MEET ANNUALLY TO ASSESS THE PRESIDENT'S PERFORMANCE AND COMPENSATION.

THE HUMAN RELATIONS COMMITTEE USES THE SERVICES OF AN INDEPENDENT

COMPENSATION CONSULTANT TO PROVIDE DEMOGRAPHIC AND COMPARATIVE SALARY

INFORMATION FOR PEER-GROUP ORGANIZATIONS, WITH FOCUS ON THE

PRESIDENT/CEO. THE COMPENSATION CONSULTANT PROVIDES INFORMATION FROM

SURVEYS, PUBLIC DISCLOSURES OF OTHER CHARITIES, AND PROPRIETARY SOURCES.

THE COMMITTEE REVIEWS THIS INFORMATION, DISCUSSES THE FINDINGS AMONGST

THEMSELVES AND NOT IN THE PRESENCE OF THE PRESIDENT OF THE ORGANIZATION.

THE COMMITTEE HAS A PORTION OF ITS MEETING WHERE IT DOES DISCUSS

COMPENSATION AND PERFORMANCE WITH THE PRESIDENT BUT THE DECISION-MAKING

SEGMENTS OF THE MEETING ARE HELD IN EXECUTIVE SESSION. MINUTES OF THE

MEETING ARE KEPT AND RETAINED BY THE CHAIR OF THE HUMAN RELATIONS

COMMITTEE.

THE HUMAN RELATIONS COMMITTEE IS AWARE OF THE COMPENSATION AMOUNTS FOR OTHER KEY EMPLOYEES AND SENIOR MANAGEMENT TEAM MEMBERS BUT THE DECISIONS

11-6107128

GOVERNING THEIR COMPENSATION ARE THE PURVIEW OF THE PRESIDENT OF THE ORGANIZATION.

PUBLIC AVAILABILITY OF GOVERNING DOCUMENTS

PART VI, SECTION C, LINE 18

EDF WAS FORMED IN 1967 AND A COPY OF FORM 1023 IS UNAVAILABLE FROM THIS EARLY PERIOD OF TIME.

PART VI, SECTION C, LINE 19

EDF MAKES AVAILABLE THREE YEARS WORTH OF THE FOLLOWING DISCLOSURE DOCUMENTS ON OUR WEB SITE WWW.EDF.ORG

- 1. OUR ANNUAL REPORT
- OUR CONSOLIDATED AND CONSOLIDATING AUDITED FINANCIAL STATEMENTS
- 3. OUR FORM 990 INFORMATIONAL TAX RETURNS AND THOSE OF RELATED

ORGANIZATIONS

OTHER GOVERNING DOCUMENTS SUCH AS BY-LAW CHANGES AND CONFLICT OF INTEREST POLICIES ARE INCLUDED WITH FORM 990 RETURNS IN THE YEARS THERE ARE CHANGES OR WHEN THEY ARE REQUIRED.

Name of the organization
ENVIRONMENTAL DEFENSE FUND, INC.

Employer Identification number

11-6107128

PART 1X - OTHER FEES FOR SERVICES

LINE 11G

PROFESSIONAL FEES FOR SERVICES RELATED TO PROGRAM ACTIVITIES-

\$19,931,791

PROFESSIONAL FEES FOR SERVICES RELATED TO MEMBERSHIP DIRECT MAIL PLAN

\$324,536

ATTACHMENT 1

FORM 990, PART V, LINE 4B - FOREIGN COUNTRIES

MEXICO

CAYMAN ISLANDS

UNITED KINGDOM

ATTACHMENT 2

FORM 990, PART VI, LINE 17 - STATES

AL, AK, AR, CA, CO, CT,

FL, GA, HI, IL, KS, KY, LA, ME, MD, MA, MI,

MN, MS, NV, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA,

RI, SC, TN, UT, VA, WA, WV, WI,

ATTACHMENT 3

990, PART VII- COMPENSATION OF THE FIVE HIGHEST PAID IND. CONTRACTORS

NAME AND ADDRESS

DESCRIPTION OF SERVICES

COMPENSATION

K&L GATES LLP 1601 K STREET NW WASHINGTON, DC 20006 LEGAL SERVICES

589,115

JSA

SAN FRANCISCO, CA 94114

Name of the organization ENVIRONMENTAL DEFENSE FUND, INC. Employer Identification number

11-6107128

ATTACHMENT 3 (CONT'D)

NAME AND ADDRESS	DESCRIPTION OF SERVICES	COMPENSATION
ECO ANALYTICS, LLP 545 VEREDA DEL CIERVO GOLETA, CA 93117	DESIGN&DATA ANALY	558,250.
COX DIGITAL SOLUTIONS 1000 CHERRY AVENUE SAN BRUNO, CA 94066	ONLINE ADVERTISTING	550,000
CAP LOG GROUP, LLC 135 IPANEMA PLACE DAVIS, CA 95616	ECONOMIC ANALYSIS	391,813.
SEAN DONAHUE 295 SANCHEZ STREET	CONSUL & LEGAL SERV.	281,787

Related Organizations and Unrelated Partnerships

SCHEDULE R (Form 990)

Department of the Treasury

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

Open to Public

OMB No. 1545-0047

Employer Identification number 11-6107128 (f) Direct controlling entity

2012 Inspection

(e) End-of-year assets (d) Total income Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.) (c)
Legal domicile (state
or foreign country) See separate instructions. (b) Primary activity (a)
 Name, address, and EIN (if applicable) of disregarded entity ENVIRONMENTAL DEFENSE FUND, INC. Name of the organization Part II Parti

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(g) Section 512(b)(13) controlled entity? ŝ × × × Yes Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.) (f)
Direct controlling
entity EDF EDF EDF Public charfty status (if section 501(c)(3)) 9 11A (d) Exempt Code section (G) (4) 501(C)(3) 501 (c)
Legal domicile (state
or foreign country) ΩE S MΧ REV LOAN FND ENV ADVOCACY Primary activity OCEAN PROG NC. 90-0080500 NEW YORK, NY 10010 26-0873741 SAN FRANCISCO, CA 94105 LAPAZ, MEXICO MX (a)
Name, address, and EIN of related organization (1) ENVIRONMENTAL DEFENSE ACTION FUND, INC. ENVIRONMENTAL DEFENSE FUND DE MEXICO, CALIFORNIA FISHERIES FUND, INC. 257 PARK AVENUE SOUTH CALLE REVOLUCION 345 123 MISSION STREET 8 ପ୍ର € ତ୍ର 9 5

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

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Schedule R (Form 990) 2012

Page 2

Schedule R (Form 990) 2012

Part III

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign	Direct controlling Predominant Share of t income (inaled, income entity unrelated, income tax under from tax under sections 512-514)	Pre incon un un un section section	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	Share of total income	Share of end-of- year assets	(h) Dispreparitorete sitocadore?	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(I) General or managing partner?	(k) Percentage ownership	age hip
(1)								Yes No		Yes No		1
(2)												
(3)				_	:							
(4)												1
(5)												
(9)												
(7)										-		
Part IV Identification of Related Organizations Taxable in 34 because it had one or more related organ	ed Organizations one or more rela	Taxable ted organ	as a Corporal izations treate	tion or Tr	ust (Comp	lete if the org or trust during	as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, izations treated as a corporation or trust during the tax year.)	red "Yes"	to Form 990, F	oart IV,		1
(a) Name, address, and EIN of related organization	) of related organization		(b) Primary activity		(c) Legal domicile D (state or foreign country)	(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) Percen- sets tage ownership		(i) Section 512(b)(13) controlled
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(2)												
(6)				:				i				
(4)												
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(9)										-		
$\omega$												
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## Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35b, or 36.) Part V

S	Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.				Vos
-	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?	lated organizations liste	ed in Parts II-IV?		53.0
æ	Receipt of (f) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity				×
Q	Gift, grant, or capital contribution to related organization(s)			1p	×
O	Giff, grant, or capital contribution from related organization(s)			10	×
0	Loans or loan guarantees to or for related organization(s)			19	×
0	Loans or loan guarantees by related organization(s).			-J-	×
•	Dividends from related oxognization(s)				\$ 1 W
. 6	Sale of assets to related prosuitation(s)			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	× :
2 6	Purchase of assate from related amountains(a)			- 19	×
=	Fulciliase of assets from related digalization(s)			<b>1</b>	×
	Excitative of assets with related organization(s)			=	×
_	Lease of lacinities, equipment, of other assets to related organization(s)			=	×
¥	Lease of facilities, equipment, or other assets from related ownenization(s)			,	
-	Performance of services or membership or fundraising solicitations for related organization(s)			1k	<b>☆</b>   Þ
Ε					4   ⊅
_				18	¥
0	Sharing of paid employees with related organization(s)	ACRES SERVICES			4 >
•				10	×
٩	Reimbursement paid to related organization(s) for expenses			10	×
5					×
-	Other transfer of cash or property to related organization(s)			:01	
en (	Other transfer of cash or property from related organization(s).			18	×
7	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds	s line, including covere	ed relationships and transa	ction thresholds	
,	(a) Name of other organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining	mining
, Ti		(2.4)			no.
Ξ	ENVIRONMENTAL DEFENSE ACTION FUND, INC	щ	950,000.	FMV	
(2)	ENVIRONMENTAL DEFENSE ACTION FUND, INC	M	76,334.	FMV	
9	ENVIRONMENTAL DEFENSE ACTION FUND, INC	N	808,452.	FMV	1
4	ENVIRONMENTAL DEFENSE ACTION FUND, INC	м	5,133,491.	ΡΜV	
9					
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# 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.

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(a) Name, address, and EIN of entity	(0) Primary activity	Legal domicile (state or foreign country)		(e) Are all partners section 501(c)(3) organizations?	rs Share of total income	(9) Share of end-of-year assets	(h) Disproportionate allocations?		(1) Code V-UBI amount in box 20 of Schedule K-1	(I) General or managing partner?		(k) Percentage ownership
**			section 512-514)	Yes			Yes	2	(000)	Yes	£	
											_	
(2)								_				
(3)											-	
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Schedule R (Form 990) 2012

Page 5

### Part VII

Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions).