

Form **990**

# Return of Organization Exempt From Income Tax

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

# 2018

Department of the Treasury  
Internal Revenue Service

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

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

Open to Public Inspection

## A For the 2018 calendar year, or tax year beginning and ending

<b>B</b> Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C</b> Name of organization <b>GREENPEACE, INC.</b>		<b>D</b> Employer identification number <b>52-1541501</b>
	Doing business as		<b>E</b> Telephone number <b>202-462-1177</b>
	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	<b>G</b> Gross receipts \$ <b>36,051,936.</b>
	<b>702 H STREET, NW</b> City or town, state or province, country, and ZIP or foreign postal code <b>WASHINGTON, DC 20001</b>		<b>H(a)</b> Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	<b>F</b> Name and address of principal officer: <b>ANN MARIE LEONARD</b> <b>SAME AS C ABOVE</b>		<b>H(b)</b> Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions)
<b>I</b> Tax-exempt status: <input type="checkbox"/> 501(c)(3) <input checked="" type="checkbox"/> 501(c)( <b>4</b> ) ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527			<b>H(c)</b> Group exemption number ▶
<b>J</b> Website: ▶ <b>WWW.GREENPEACEUSA.ORG</b>			
<b>K</b> Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		<b>L</b> Year of formation: <b>1987</b>	<b>M</b> State of legal domicile: <b>CA</b>

## Part I Summary

Activities & Governance	<b>1</b> Briefly describe the organization's mission or most significant activities: <b>TO PROMOTE THE PROTECTION AND PRESERVATION OF THE ENVIRONMENT.</b>		
	<b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	<b>3</b> Number of voting members of the governing body (Part VI, line 1a)	<b>3</b>	<b>9</b>
	<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b)	<b>4</b>	<b>8</b>
	<b>5</b> Total number of individuals employed in calendar year 2018 (Part V, line 2a)	<b>5</b>	<b>1338</b>
	<b>6</b> Total number of volunteers (estimate if necessary)	<b>6</b>	<b>6380</b>
	<b>7a</b> Total unrelated business revenue from Part VIII, column (C), line 12	<b>7a</b>	<b>0.</b>
<b>b</b> Net unrelated business taxable income from Form 990-T, line 38	<b>7b</b>	<b>1,420.</b>	
Revenue	<b>8</b> Contributions and grants (Part VIII, line 1h)	<b>Prior Year</b> 39,587,913.	<b>Current Year</b> 35,952,088.
	<b>9</b> Program service revenue (Part VIII, line 2g)	20,200.	12,016.
	<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,810.	7,014.
	<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	76,026.	75,221.
	<b>12</b> Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	39,685,949.	36,046,339.
Expenses	<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1-3)	68,079.	71,035.
	<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	21,750,391.	20,906,599.
	<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)	1,136,019.	2,108,295.
	<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) ▶ <b>6,108,185.</b>		
	<b>17</b> Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	13,044,285.	12,485,586.
<b>18</b> Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	35,998,774.	35,571,515.	
<b>19</b> Revenue less expenses. Subtract line 18 from line 12	3,687,175.	474,824.	
Net Assets or Fund Balances	<b>20</b> Total assets (Part X, line 16)	<b>Beginning of Current Year</b> 7,945,421.	<b>End of Year</b> 7,812,053.
	<b>21</b> Total liabilities (Part X, line 26)	4,586,729.	3,990,346.
	<b>22</b> Net assets or fund balances. Subtract line 21 from line 20	3,358,692.	3,821,707.

## Part II Signature Block

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

<b>Sign Here</b>	Signature of officer	Date			
	<b>CONSTANTIN DOUMAS, DIRECTOR OF FINANCE</b> Type or print name and title				
<b>Paid Preparer Use Only</b>	Print/Type preparer's name <b>DAVID TRIMMER</b>	Preparer's signature 	Date <b>8-6-2019</b>	Check if self-employed <input type="checkbox"/>	PTIN <b>P00444822</b>
	Firm's name ▶ <b>CLIFTONLARSONALLEN LLP</b>	Firm's EIN ▶ <b>41-0746749</b>	Phone no. <b>571-227-9500</b>		
Firm's address ▶ <b>901 N. GLEBE ROAD, SUITE 200</b> <b>ARLINGTON, VA 22203</b>					

May the IRS discuss this return with the preparer shown above? (see instructions)  Yes  No

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:

GREENPEACE, INC. IS AN INDEPENDENT CAMPAIGNING ORGANIZATION THAT USES PEACEFUL, CREATIVE CONFRONTATION TO EXPOSE GLOBAL ENVIRONMENTAL PROBLEMS, AND TO FORCE SOLUTIONS THAT ARE ESSENTIAL TO A GREEN AND PEACEFUL FUTURE.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [ ] Yes [X] No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [ ] Yes [X] No

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.

Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code: ) (Expenses \$ 9,242,138. including grants of \$ 34,904.) (Revenue \$ 63,823.)

OUTREACH & EDUCATION & ACTIONS - GREENPEACE, INC. FURTHERS ITS MISSION OF PROTECTING THE ENVIRONMENT THROUGH RESEARCH, PUBLIC INFORMATION AND EDUCATION, OUTREACH AND ADVOCACY, AND LITIGATION. IN 2018, GREENPEACE INC USED SEVERAL NOVEL APPROACHES FOR ENGAGING NEW CONSTITUENCIES AND MOBILIZING EVEN MORE PEOPLE OVERALL TO HELP ACHIEVE WINS FOR THE ENVIRONMENT. THESE INCLUDE:

1. THE SHIP TOUR THIS YEAR WAS PRIMARILY MEANT TO ENGAGE NEW AUDIENCES AND OUR CURRENT SUPPORTERS ON THREE IMPORTANT TOPICS: OFFSHORE DRILLING, SINGLE-USE PLASTIC AND THE SUSTAINABLE RECOVERY OF PUERTO RICO. OVER 5,500 PEOPLE HAVE VISITED THE SHIP. OUR VISITORS INCLUDED LONG TIME MEMBERS AND FORMER STAFF, PEOPLE WHO WEREN'T FAMILIAR WITH

4b (Code: ) (Expenses \$ 7,403,709. including grants of \$ 36,131.) (Revenue \$ )

CLIMATE & ENERGY - GREENPEACE, INC. IS CAMPAIGNING TO ADDRESS CLIMATE CHANGE. WE WORKED TOWARD AN END TO FOSSIL FUELS AND A RAPID AND JUST TRANSITION TO A CLEAN ENERGY ECONOMY. WE SUPPORT AN IMMEDIATE HALT TO ALL NEW PERMITS AND INFRASTRUCTURE FOR OIL AND GAS EXPLORATION AND EXTRACTION ON PUBLIC LANDS AND WATERS. WE ALSO SUPPORT POLICY CHANGE THAT STARTS THE RESPONSIBLE PHASEOUT OF ALL OIL AND GAS PRODUCTION, ENSURING A JUST TRANSITION FOR IMPACTED WORKERS AND COMMUNITIES. FINALLY, OUR CAMPAIGN BELIEVES IN HOLDING THE FOSSIL FUEL INDUSTRY ACCOUNTABLE FOR THE CLIMATE IMPACTS IT KNOWINGLY DROVE.

2018 GREENPEACE, INC. CLIMATE AND ENERGY CAMPAIGN HIGHLIGHTS INCLUDE:

4c (Code: ) (Expenses \$ 4,864,248. including grants of \$ ) (Revenue \$ )

FORESTS - GREENPEACE, INC. IS CAMPAIGNING FOR ZERO DEFORESTATION IN THE WORLD'S ANCIENT FORESTS. GREENPEACE, INC. CAMPAIGNS FOR ZERO DEFORESTATION COMMITMENTS FROM INFLUENTIAL U.S.-BASED COMPANIES TO RID THEIR SUPPLY CHAINS OF DESTRUCTIVELY HARVESTED TROPICAL FOREST AND AGRICULTURAL PRODUCTS, AND TO SUPPORT SOLUTIONS THAT WILL PROVIDE LONG-TERM FORESTS PROTECTION. OUR CAMPAIGN HOLDS COMPANIES TO COMMITMENTS THEY MADE TO ELIMINATE DEFORESTATION FROM THE PALM OIL AND OTHER COMMODITIES THAT THEY BUY THAT DRIVE DEFORESTATION.

2018 GREENPEACE, INC. FOREST CAMPAIGN HIGHLIGHTS INCLUDE:

1. RAISED AWARENESS OF THE PLIGHT OF ORANGUTANS IN INDONESIA AND THE

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

(Expenses \$ 4,754,200. including grants of \$ ) (Revenue \$ )

4e Total program service expenses 26,264,295.

**Part IV Checklist of Required Schedules**

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

**Part IV Checklist of Required Schedules** (continued)

	Yes	No
<b>22</b> Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i> .....		X
<b>23</b> Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i> .....	X	
<b>24a</b> Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i> .....		X
<b>b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? .....		
<b>c</b> Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? .....		
<b>d</b> Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? .....		
<b>25a</b> <b>Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i> .....		X
<b>b</b> Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i> .....		X
<b>26</b> Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i> .....		X
<b>27</b> 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? <i>If "Yes," complete Schedule L, Part III</i> .....		X
<b>28</b> 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):		
<b>a</b> A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> .....		X
<b>b</b> A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> .....		X
<b>c</b> 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? <i>If "Yes," complete Schedule L, Part IV</i> .....		X
<b>29</b> Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> .....		X
<b>30</b> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> .....		X
<b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> .....		X
<b>32</b> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i> .....		X
<b>33</b> Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i> .....		X
<b>34</b> Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i> .....		X
<b>35a</b> Did the organization have a controlled entity within the meaning of section 512(b)(13)? .....		X
<b>b</b> If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> .....		
<b>36</b> <b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> .....		
<b>37</b> Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i> .....		X
<b>38</b> Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? .....	X	

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

**Part V Statements Regarding Other IRS Filings and Tax Compliance**

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

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

1a	236
1b	0

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

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

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

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

**Section A. Governing Body and Management**

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

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

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

**Section C. Disclosure**

- 17 List the states with which a copy of this Form 990 is required to be filed **AK, AR, CA, CT, FL, GA, HI, IL, KS, KY, MA, MD**
- 18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.  
 Own website     Another's website     Upon request     Other (explain in Schedule O)
- 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20 State the name, address, and telephone number of the person who possesses the organization's books and records ►  
**CONSTANTIN DOUMAS, DIRECTOR OF FINANCE - 202-462-1177**  
**702 H STREET, NW, SUITE 300, WASHINGTON, DC 20001**

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

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

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

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

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

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) KAREN TOPAKIAN CHAIR	5.00	X		X				37,304.	0.	0.
(2) STUART CLARKE BOARD MEMBER	1.00	X						0.	0.	0.
(3) MICHAEL LEON GUERRERO BOARD MEMBER/TREASURER	2.00	X		X				0.	0.	0.
(4) BRYONY SCHWAN BOARD MEMBER	1.00	X						0.	0.	0.
(5) CHERYL CONTEE BOARD MEMBER	1.00	X						0.	0.	0.
(6) JAKADA IMANI BOARD MEMBER	1.00	X						0.	0.	0.
(7) JONAH SACHS BOARD MEMBER	1.00	X						0.	0.	0.
(8) GUILLERMO QUINTEROS BOARD MEMBER	1.00	X						0.	0.	0.
(9) LARRY KOPALD BOARD MEMBER	1.00	X						0.	0.	0.
(10) ANNE MARIE LEONARD EXECUTIVE DIRECTOR	20.00			X				101,678.	0.	14,875.
(11) EBONY MARTIN CHIEF OPERATING OFFICER	24.00			X				99,697.	0.	15,905.
(12) CONSTANTIN DOUMAS DIRECTOR OF FINANCE	24.00			X				96,292.	0.	11,332.
(13) THOMAS WETTERER DEPUTY COO AND GENERAL COUNSEL	32.00			X				115,450.	0.	12,683.
(14) WILLIAM STEIN CHIEF PROGRAMS OFFICER	40.00				X			166,231.	0.	41,625.
(15) BRIAN ANDERSON CHIEF DEVELOPMENT OFFICER	28.00					X		129,650.	0.	14,171.
(16) NATHAN SANTRY ACTIONS DIRECTOR	40.00					X		129,294.	0.	34,624.
(17) MATHEW BROWNER-HAMLIN HEAD OF ENGAGEMENT STRATEGY & PLANNI	40.00					X		125,208.	0.	35,173.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) CAITLIN GIBLIN INTERIM PROGRAM OPERATIONS DIRECTOR	40.00					X		129,446.	0.	14,896.
(19) ANIELLO ALIOTO GLOBAL ENGAGEMENT MANAGER	40.00					X		125,851.	0.	14,786.
<b>1b Sub-total</b>								1,256,101.	0.	210,070.
<b>c Total from continuation sheets to Part VII, Section A</b>								0.	0.	0.
<b>d Total (add lines 1b and 1c)</b>								1,256,101.	0.	210,070.

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 **21**

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

**Section B. Independent Contractors**

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

(A) Name and business address	(B) Description of services	(C) Compensation
INTEGRATED DIRECT MARKETING, LLC, 1250 CONNECTICUT AVE., NW, WASHINGTON, DC 20036	FUNDRAISING SUPPORT, MAILING, PRINTING,	1,905,151.
CHAPMAN CUBINE AND HUSSEY (CAH) 2000 15TH STREET N, ARLINGTON, VA 22201	DIGITAL PROJECT MANAGEMENT SERVICES	1,213,425.
SMC DIRECT, 8461 VIRGINIA MEADOWS DR, MANASSAS, VA 20109	MAILING AND POSTAGE SERVICES	747,979.
DONOR SERVICES GROUP, LLC 1200 WILSHIRE BLVD, LOS ANGELES, CA 90017	FUNDRAISING COUNCELING AND MAILI	384,054.
TELEFUND, INC 186 LINCOLN STREET, BOSTON, MA 02111	TELEMARKETING SERVICES	343,060.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **16**



**Part VIII Statement of Revenue**

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
<b>Contributions, Gifts, Grants and Other Similar Amounts</b>	<b>1 a</b> Federated campaigns .....	<b>1a</b>					
	<b>b</b> Membership dues .....	<b>1b</b>					
	<b>c</b> Fundraising events .....	<b>1c</b>					
	<b>d</b> Related organizations .....	<b>1d</b>					
	<b>e</b> Government grants (contributions)	<b>1e</b>					
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above .....	<b>1f</b>	35,952,088.				
	<b>g</b> Noncash contributions included in lines 1a-1f: \$						
	<b>h Total.</b> Add lines 1a-1f .....		35,952,088.				
<b>Program Service Revenue</b>	<b>Business Code</b>						
	<b>2 a</b> TUITION AND FEES	611710	12,016.	12,016.			
	<b>b</b> .....						
	<b>c</b> .....						
	<b>d</b> .....						
	<b>e</b> .....						
	<b>f</b> All other program service revenue .....						
<b>g Total.</b> Add lines 2a-2f .....		12,016.					
<b>Other Revenue</b>	<b>3</b> Investment income (including dividends, interest, and other similar amounts) .....		2,803.			2,803.	
	<b>4</b> Income from investment of tax-exempt bond proceeds						
	<b>5</b> Royalties .....		23,414.			23,414.	
	<b>6 a</b> Gross rents .....	(i) Real					
		(ii) Personal					
		<b>b</b> Less: rental expenses .....					
		<b>c</b> Rental income or (loss) .....					
	<b>d</b> Net rental income or (loss) .....						
	<b>7 a</b> Gross amount from sales of assets other than inventory	(i) Securities	9,808.				
		(ii) Other					
		<b>b</b> Less: cost or other basis and sales expenses .....	5,597.				
		<b>c</b> Gain or (loss) .....	4,211.				
	<b>d</b> Net gain or (loss) .....		4,211.			4,211.	
	<b>8 a</b> Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18 .....	<b>a</b>					
		<b>b</b> Less: direct expenses .....	<b>b</b>				
<b>c</b> Net income or (loss) from fundraising events .....							
<b>9 a</b> Gross income from gaming activities. See Part IV, line 19 .....	<b>a</b>						
	<b>b</b> Less: direct expenses .....	<b>b</b>					
	<b>c</b> Net income or (loss) from gaming activities .....						
<b>10 a</b> Gross sales of inventory, less returns and allowances .....	<b>a</b>						
	<b>b</b> Less: cost of goods sold .....	<b>b</b>					
	<b>c</b> Net income or (loss) from sales of inventory .....						
<b>Miscellaneous Revenue</b>		<b>Business Code</b>					
<b>11 a</b> REBATES AND OTHER	900099	51,807.	51,807.				
<b>b</b> .....							
<b>c</b> .....							
<b>d</b> All other revenue .....							
<b>e Total.</b> Add lines 11a-11d .....		51,807.					
<b>12 Total revenue.</b> See instructions .....		36,046,339.	63,823.	0.	30,428.		

**Part IX Statement of Functional Expenses**

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	64,018.	64,018.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	7,017.	7,017.		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	713,070.	516,911.	181,092.	15,067.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	16,137,159.	12,742,429.	1,272,115.	2,122,615.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	844,088.	660,926.	71,986.	111,176.
9 Other employee benefits	1,568,579.	1,227,831.	134,863.	205,885.
10 Payroll taxes	1,643,703.	1,283,114.	151,548.	209,041.
11 Fees for services (non-employees):				
a Management				
b Legal	174,769.	114,546.	47,457.	12,766.
c Accounting	37,725.	16,149.	18,304.	3,272.
d Lobbying				
e Professional fundraising services. See Part IV, line 17	2,108,295.			2,108,295.
f Investment management fees	415.		415.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	2,479,471.	1,890,722.	378,182.	210,567.
12 Advertising and promotion	447,844.	118,134.	352.	329,358.
13 Office expenses	2,294,122.	1,797,445.	121,062.	375,615.
14 Information technology	1,415,430.	717,279.	450,107.	248,044.
15 Royalties				
16 Occupancy	1,280,563.	949,122.	121,082.	210,359.
17 Travel	1,396,547.	1,255,314.	40,388.	100,845.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	753,041.	628,611.	50,604.	73,826.
20 Interest	4,187.	1,792.	2,032.	363.
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	277,164.	154,839.	86,509.	35,816.
23 Insurance	230,479.	141,670.	51,228.	37,581.
24 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 <b>DIRECT MAIL-PRINTING</b>	1,381,353.	1,187,778.		193,575.
b <b>LIST RENTAL EXPENSES</b>	174,640.	141,601.		33,039.
c <b>BOOKS &amp; PUBLICATIONS</b>	58,576.	41,347.	5,816.	11,413.
d <b>FUNDRAISING ALLOCATION</b>	0.	547,741.		-547,741.
e All other expenses	79,260.	57,959.	13,893.	7,408.
<b>25 Total functional expenses.</b> Add lines 1 through 24e	<b>35,571,515.</b>	<b>26,264,295.</b>	<b>3,199,035.</b>	<b>6,108,185.</b>
26 <b>Joint costs.</b> Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input checked="" type="checkbox"/> if following SOP 98-2 (ASC 958-720)	17,191,800.	11,936,918.	0.	5,254,882.

**Part X Balance Sheet**

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

		(A) Beginning of year		(B) End of year
<b>Assets</b>	<b>1</b> Cash - non-interest-bearing .....	4,721,223.	1	2,801,118.
	<b>2</b> Savings and temporary cash investments .....	14,380.	2	22,591.
	<b>3</b> Pledges and grants receivable, net .....		3	
	<b>4</b> Accounts receivable, net .....	1,612.	4	5,600.
	<b>5</b> Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L .....		5	
	<b>6</b> 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 instr). Complete Part II of Sch L .....		6	
	<b>7</b> Notes and loans receivable, net .....		7	
	<b>8</b> Inventories for sale or use .....		8	
	<b>9</b> Prepaid expenses and deferred charges .....	281,607.	9	508,904.
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D .....	<b>10a</b> 3,449,064.		
	<b>b</b> Less: accumulated depreciation .....	<b>10b</b> 2,584,890.	882,592.	<b>10c</b> 864,174.
	<b>11</b> Investments - publicly traded securities .....	69,418.	11	55,998.
	<b>12</b> Investments - other securities. See Part IV, line 11 .....		12	
	<b>13</b> Investments - program-related. See Part IV, line 11 .....		13	
	<b>14</b> Intangible assets .....		14	
	<b>15</b> Other assets. See Part IV, line 11 .....	1,974,589.	15	3,553,668.
<b>16 Total assets.</b> Add lines 1 through 15 (must equal line 34) .....	7,945,421.	16	7,812,053.	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses .....	2,755,024.	17	2,648,166.
	<b>18</b> Grants payable .....		18	
	<b>19</b> Deferred revenue .....		19	
	<b>20</b> Tax-exempt bond liabilities .....		20	
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D .....		21	
	<b>22</b> Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L .....		22	
	<b>23</b> Secured mortgages and notes payable to unrelated third parties .....		23	
	<b>24</b> Unsecured notes and loans payable to unrelated third parties .....	1,362,044.	24	932,783.
	<b>25</b> Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D .....	469,661.	25	409,397.
	<b>26 Total liabilities.</b> Add lines 17 through 25 .....	4,586,729.	26	3,990,346.
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117 (ASC 958), check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27 through 29, and lines 33 and 34.</b>			
	<b>27</b> Unrestricted net assets .....	3,211,757.	27	3,692,504.
	<b>28</b> Temporarily restricted net assets .....	146,935.	28	129,203.
	<b>29</b> Permanently restricted net assets .....		29	
	<b>Organizations that do not follow SFAS 117 (ASC 958), check here</b> <input type="checkbox"/> <b>and complete lines 30 through 34.</b>			
	<b>30</b> Capital stock or trust principal, or current funds .....		30	
	<b>31</b> Paid-in or capital surplus, or land, building, or equipment fund .....		31	
	<b>32</b> Retained earnings, endowment, accumulated income, or other funds .....		32	
<b>33</b> Total net assets or fund balances .....	3,358,692.	33	3,821,707.	
<b>34</b> Total liabilities and net assets/fund balances .....	7,945,421.	34	7,812,053.	

**Part XI Reconciliation of Net Assets**

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	36,046,339.
2	Total expenses (must equal Part IX, column (A), line 25)	2	35,571,515.
3	Revenue less expenses. Subtract line 2 from line 1	3	474,824.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	3,358,692.
5	Net unrealized gains (losses) on investments	5	-11,809.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain 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	3,821,707.

**Part XII Financial Statements and Reporting**

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

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

**Schedule B**

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury  
Internal Revenue Service

**Schedule of Contributors**

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2018**

Name of the organization

**GREENPEACE, INC.**

Employer identification number

**52-1541501**

Organization type (check one):

**Filers of:**

**Section:**

Form 990 or 990-EZ

501(c)( **4** ) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

**Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

**General Rule**

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

**Special Rules**

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ..... ▶ \$ \_\_\_\_\_

**Caution:** An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization

Employer identification number

**GREENPEACE, INC.**

**52-1541501**

**Part I Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2		\$ 12,064.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3		\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4		\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5		\$ 128,961.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6		\$ 6,892,536.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization <b>GREENPEACE, INC.</b>	Employer identification number <b>52-1541501</b>
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**Part I Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	<hr/> <hr/> <hr/>	\$ <u>20,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
8	<hr/> <hr/> <hr/>	\$ <u>9,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
9	<hr/> <hr/> <hr/>	\$ <u>5,900.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
10	<hr/> <hr/> <hr/>	\$ <u>5,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
11	<hr/> <hr/> <hr/>	\$ <u>5,500.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
12	<hr/> <hr/> <hr/>	\$ <u>8,250.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

**GREENPEACE, INC.**

**52-1541501**

**Part I Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
13		\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
14		\$ 5,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
15		\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
16		\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
17		\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
18		\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)



Name of organization

Employer identification number

**GREENPEACE, INC.**

**52-1541501**

**Part I Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
19		\$ 5,015.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
20		\$ 1,865,287.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
21		\$ 7,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
22		\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

**GREENPEACE, INC.**

**52-1541501**

**Part II Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	_____ _____ _____	\$ _____	_____
	_____ _____ _____	\$ _____	_____
	_____ _____ _____	\$ _____	_____
	_____ _____ _____	\$ _____	_____
	_____ _____ _____	\$ _____	_____
	_____ _____ _____	\$ _____	_____
	_____ _____ _____	\$ _____	_____
	_____ _____ _____	\$ _____	_____

Name of organization <b>GREENPEACE, INC.</b>	Employer identification number <b>52-1541501</b>
---	---

**Part III** Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) ▶ \$ \_\_\_\_\_  
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No. 1545-0047

2018

Open to Public Inspection

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

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

Department of the Treasury Internal Revenue Service

Name of the organization: GREENPEACE, INC. Employer identification number: 52-1541501

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

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include: 1 Total number at end of year, 2 Aggregate value of contributions to (during year), 3 Aggregate value of grants from (during year), 4 Aggregate value at end of year, 5 Did the organization inform all donors...?, 6 Did the organization inform all grantees...?

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

Form with multiple sections: 1 Purpose(s) of conservation easements held by the organization (check all that apply), 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution..., 3 Number of conservation easements modified..., 4 Number of states where property subject to conservation easement is located..., 5 Does the organization have a written policy..., 6 Staff and volunteer hours..., 7 Amount of expenses..., 8 Does each conservation easement..., 9 In Part XIII, describe how the organization reports...

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

Form with multiple sections: 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report..., 1b If the organization elected, as permitted under SFAS 116 (ASC 958), to report..., 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain...

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

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

- a  Public exhibition
- b  Scholarly research
- c  Preservation for future generations
- d  Loan or exchange programs
- e  Other \_\_\_\_\_

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  Yes  No

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

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?  Yes  No

b If "Yes," explain the arrangement in Part XIII and complete the following table:

	Amount
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	1f

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?  Yes  No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a Board designated or quasi-endowment  %
- b Permanent endowment  %
- c Temporarily restricted endowment  %

The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

	Yes	No
(i) unrelated organizations	3a(i)	
(ii) related organizations	3a(ii)	

b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?  **3b**

4 Describe in Part XIII the intended uses of the organization's endowment funds.

**Part VI Land, Buildings, and Equipment.**

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		1,364,489.	1,186,101.	178,388.
d Equipment		1,132,941.	1,029,497.	103,444.
e Other		951,634.	369,292.	582,342.
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				864,174.

**Part VII Investments - Other Securities.**

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

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

**Part VIII Investments - Program Related.**

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

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

**Part IX Other Assets.**

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

(a) Description	(b) Book value
(1) DUE FROM STICHTING GP COUNCIL	570,682.
(2) DUE FROM GREENPEACE FUND, INC.	2,871,532.
(3) DUE FROM OTHER GREENPEACE AFFILIATES	1,356.
(4) SECURITY DEPOSITS	110,098.
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	3,553,668.

**Part X Other Liabilities.**

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) DEFERRED RENT	409,397.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	409,397.

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

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

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

1	Total revenue, gains, and other support per audited financial statements		1	36,034,115.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a	-11,809.	
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d	2e	-11,809.	
3	Subtract line 2e from line 1	3	36,045,924.	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	415.	
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b	4c	415.	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	36,046,339.	

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

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

1	Total expenses and losses per audited financial statements		1	35,571,100.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d	2e	0.	
3	Subtract line 2e from line 1	3	35,571,100.	
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	415.	
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b	4c	415.	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	35,571,515.	

**Part XIII Supplemental Information.**

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

**PART X, LINE 2:**

THE ORGANIZATION IS RECOGNIZED AS A TAX-EXEMPT ORGANIZATION UNDER SECTION 501(C)(4) OF THE INTERNAL REVENUE CODE, AND IS EXEMPT FROM INCOME TAXES EXCEPT FOR TAXES ON UNRELATED BUSINESS ACTIVITIES. MANAGEMENT EVALUATED THE ORGANIZATION'S TAX POSITIONS AND CONCLUDED THAT THE ORGANIZATION HAS TAKEN NO UNCERTAIN TAX POSITIONS THAT QUALIFY FOR EITHER RECOGNITION OR DISCLOSURE IN THE ACCOMPANYING FINANCIAL STATEMENTS.

**SCHEDULE F  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Statement of Activities Outside the United States**

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

▶ Attach to Form 990.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2018**

Open to Public Inspection

Name of the organization **GREENPEACE, INC.** Employer identification number **52-1541501**

**Part I** **General Information on Activities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

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

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

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

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
EUROPE	0	0	GRANTS		7,017.
<b>3 a</b> Subtotal .....	0	0			7,017.
<b>b</b> Total from continuation sheets to Part I .....	0	0			0.
<b>c Totals</b> (add lines 3a and 3b) .....	0	0			7,017.



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

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			EUROPE	NATIONAL DELIVERY TAR SANDS GLOBAL PROJECT	7,017	BANK TRANSFER	0		

**2** 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 1

**3** Enter total number of other organizations or entities 0

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

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)

Part IV Foreign Forms

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

Schedule F (Form 990) 2018

**Part V Supplemental Information**

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

**PART I, LINE 2:**

GRANT REQUESTS ARE SUBMITTED IN WRITING AND MUST CONTAIN INFORMATION ABOUT HOW THE RECEIVING ORGANIZATION WILL UTILIZE THE GRANT FUNDS. GRANTS MADE TO ORGANIZATIONS ARE FOR CURRENT ACTIVITIES OR A SPECIFIC PROJECT OF THE RECEIVING ORGANIZATION GRANTS ARE MADE BY GREENPEACE INC IN FURTHERANCE OF THE ORGANIZATION'S EXEMPT PURPOSE TO PROMOTE THE PROTECTION AND PRESERVATION OF THE ENVIRONMENT GLOBALY.

Multiple horizontal lines for supplemental information.

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

**Supplemental Information Regarding Fundraising or Gaming Activities**  
Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

OMB No. 1545-0047

**2018**

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

▶ Attach to Form 990 or Form 990-EZ.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

Name of the organization **GREENPEACE, INC.** Employer identification number **52-1541501**

**Part I Fundraising Activities.** Complete if the organization answered "Yes" on Form 990, Part IV, line 17. 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.

- a  Mail solicitations
- b  Internet and email solicitations
- c  Phone solicitations
- d  In-person solicitations
- e  Solicitation of non-government grants
- f  Solicitation of government grants
- g  Special fundraising events

2 a 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?  Yes  No

b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
CCAH - 2000 15TH STR, ARLINGTON, VA 22201	DIGITAL MANAGEMENT SERVICES		X	1,469,374.	1,037,764.	431,609.
TELEFUND - PO BOX 2366, DENVER, CO 80201	TELEMARKETING		X	265,753.	343,060.	-77,307.
INTEGRATED DIRECT MARKETING, LLC - 1250 CONNECTICUT	DIRECT MARKETING		X	192,938.	316,350.	-123,412.
DONOR SERVICES GROUP - 1200 WILSHIRE, SUITE 650, LOS ANGELES, CA 90017	DIRECT MARKETING		X	190,693.	282,715.	-92,022.
SD&A TELESERVICES, INC. - 5757 WEST CENTURY BOULEVARD, DENVER, CO 80201	TELEMARKETING		X	96,242.	28,396.	67,846.
NEW PARTNERS TELESERVICES - 1250 EYE STREET, NW, SUITE 1000, WASHINGTON, DC 20004	TELEMARKETING		X	19,198.	17,602.	1,596.
BKV, INC. - 3390 PEACHTREE ROAD, 10TH FLOOR, ATLANTA, GA 30341	EMAIL MARKETING		X	0.	58,210.	-58,210.
<b>Total</b>				2,234,198.	2,084,097.	150,100.

3 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.

AK, AL, AR, CA, CO, CT, FL, GA, HI, IL, KS, KY, LA, MA, MD, ME, MI, MN, MS, NC, ND, NH, NJ, NM, NY, OH, OK, OR, PA, RI, SC, TN, UT, VA, WA, WI, WV, MO

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

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

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

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

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

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

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

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

Name ▶ \_\_\_\_\_  
 Address ▶ \_\_\_\_\_

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

Name ▶ \_\_\_\_\_  
 Address ▶ \_\_\_\_\_

16 Gaming manager information:

Name ▶ \_\_\_\_\_  
 Gaming manager compensation ▶ \$ \_\_\_\_\_  
 Description of services provided ▶ \_\_\_\_\_  
 \_\_\_\_\_  
 Director/officer       Employee       Independent contractor

17 Mandatory distributions:

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

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

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

(I) NAME OF FUNDRAISER: INTEGRATED DIRECT MARKETING, LLC  
 (I) ADDRESS OF FUNDRAISER:  
 1250 CONNECTICUT AVENUE, NW, WASHINGTON, DC 20036

(I) NAME OF FUNDRAISER: DONOR SERVICES GROUP  
 (I) ADDRESS OF FUNDRAISER: 1200 WILSHIRE, SUITE 650, LOS ANGELES, CA 90017

Part IV Supplemental Information (continued)

(I) NAME OF FUNDRAISER: SD&A TELESERVICES, INC.

(I) ADDRESS OF FUNDRAISER:

5757 WEST CENTURY BOULEVARD, SUITE 300, LOS ANGELES, CA 90045

(I) NAME OF FUNDRAISER: NEW PARTNERS TELESERVICES

(I) ADDRESS OF FUNDRAISER:

1250 EYE STREET, NW, SUITE 200, WASHINGTON, DC 20005

(I) NAME OF FUNDRAISER: BKV, INC.

(I) ADDRESS OF FUNDRAISER:

3390 PEACHTREE ROAD, 10TH FLOOR, ATLANTA, GA 30326



**SCHEDULE I  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

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

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.  
▶ Attach to Form 990.  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2018**

Open to Public  
Inspection

Name of the organization

**GREENPEACE, INC.**

**Part I General Information on Grants and Assistance**

Employer identification number  
**52-1541501**

Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  Yes  No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LOUISIANNA BUCKET BRIGADE 2803 ST. PHILIP STREET NEW ORLEANS, LA 70119	72-1488935	501(C)(3)	5,000.	0.			GRANT TO SUPPORT THE BAYOU BRIDGE PIPELINE INITIATIVE
LOUISIANNA RISE 916 E BUTLER STREET RAYNE, LA 70578	82-1555123	501(C)(3)	5,000.	0.			GRANT TO SUPPORT HOLD THE LINE ENVIRONMENTAL INITIATIVE
INDIGENOUS ENVIRONMENTAL NETWORK PO BOX 485 BEMIDJI, MN 56619	38-3653476	501(C)(3)	10,000.	0.			GRANT TO SUPPORT "MOTHER EARTH" CONFERENCE

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ..... **3.**  
3 Enter total number of other organizations listed in the line 1 table ..... **0.**

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. **Schedule I (Form 990) (2018)**

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance

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

**PART I, LINE 2:**

THE MICRO-GRANTS AND OTHER ASSISTANCE TO ORGANIZATIONS IN THE UNITED STATES REPORTED ON SCHEDULE I, PART II CONSIST OF CONTRIBUTIONS MADE BY GREENPEACE INC. TO LIKE-MINDED ORGANIZATIONS FOR CURRENT PROGRAM ACTIVITIES OR A SPECIFIC EVENT. THE USE OF FUNDS IS MONITORED THROUGH PARTICIPATION AND UPDATES ON THE RELATED ACTIVITIES.

**SCHEDULE J  
(Form 990)**

**Compensation Information**

OMB No. 1545-0047

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

**2018**

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

▶ Attach to Form 990.

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Department of the Treasury  
Internal Revenue Service

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

Name of the organization

**GREENPEACE, INC.**

Employer identification number

**52-1541501**

**Part I Questions Regarding Compensation**

		Yes	No
<b>1a</b>	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.		
<input type="checkbox"/>	First-class or charter travel	<input type="checkbox"/>	Housing allowance or residence for personal use
<input type="checkbox"/>	Travel for companions	<input type="checkbox"/>	Payments for business use of personal residence
<input type="checkbox"/>	Tax indemnification and gross-up payments	<input type="checkbox"/>	Health or social club dues or initiation fees
<input type="checkbox"/>	Discretionary spending account	<input type="checkbox"/>	Personal services (such as maid, chauffeur, chef)
<b>b</b>	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain .....	<b>1b</b>	
<b>2</b>	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a? .....	<b>2</b>	
<b>3</b>	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.		
<input type="checkbox"/>	Compensation committee	<input type="checkbox"/>	Written employment contract
<input checked="" type="checkbox"/>	Independent compensation consultant	<input checked="" type="checkbox"/>	Compensation survey or study
<input checked="" type="checkbox"/>	Form 990 of other organizations	<input checked="" type="checkbox"/>	Approval by the board or compensation committee
<b>4</b>	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:		
<b>a</b>	Receive a severance payment or change-of-control payment? .....	<b>4a</b>	<input checked="" type="checkbox"/>
<b>b</b>	Participate in, or receive payment from, a supplemental nonqualified retirement plan? .....	<b>4b</b>	<input checked="" type="checkbox"/>
<b>c</b>	Participate in, or receive payment from, an equity-based compensation arrangement? .....	<b>4c</b>	<input checked="" type="checkbox"/>
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.		
<b>Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.</b>			
<b>5</b>	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:		
<b>a</b>	The organization? .....	<b>5a</b>	<input checked="" type="checkbox"/>
<b>b</b>	Any related organization? .....	<b>5b</b>	<input checked="" type="checkbox"/>
	If "Yes" on line 5a or 5b, describe in Part III.		
<b>6</b>	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:		
<b>a</b>	The organization? .....	<b>6a</b>	<input checked="" type="checkbox"/>
<b>b</b>	Any related organization? .....	<b>6b</b>	<input checked="" type="checkbox"/>
	If "Yes" on line 6a or 6b, describe in Part III.		
<b>7</b>	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III .....	<b>7</b>	<input checked="" type="checkbox"/>
<b>8</b>	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III .....	<b>8</b>	<input checked="" type="checkbox"/>
<b>9</b>	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)? .....	<b>9</b>	

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

Schedule J (Form 990) 2018

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

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

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

(A) Name and Title	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(i) WILLIAM STEIN	155,712.	10,039.	480.	10,824.	30,801.	207,856.	0.
(ii) CHIEF PROGRAMS OFFICER	0.	0.	0.	0.	0.	0.	0.
(i) NATHAN SANTRY	128,814.	0.	480.	8,168.	26,456.	163,918.	0.
(ii) ACTIONS DIRECTOR	0.	0.	0.	0.	0.	0.	0.
(i) MATTHEW BROWNER-HAMLIN	124,728.	0.	480.	8,071.	27,102.	160,381.	0.
(ii) HEAD OF ENGAGEMENT STRATEGY & PLANNI	0.	0.	0.	0.	0.	0.	0.
(i)							
(ii)							
(i)							
(ii)							
(i)							
(ii)							
(i)							
(ii)							
(i)							
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(i)							
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(ii)							
(i)							
(ii)							
(i)							
(ii)							



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

Department of the Treasury  
Internal Revenue Service

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

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

▶ Attach to Form 990 or 990-EZ.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2018**

Open to Public  
Inspection

Name of the organization

**GREENPEACE, INC.**

Employer identification number

**52-1541501**

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

**GREENPEACE, NEW COALITION PARTNERS, ELECTED OFFICIALS, REPORTERS,**

**UNIVERSITY FACULTY AND STUDENTS, MEMBERS OF THE EPA, AND MANY OTHERS.**

**VISITORS TOOK TOURS OF THE SHIP AND LEARNED ABOUT OUR CAMPAIGNS AS WELL**

**AS OUR EFFORTS TO HELP WITH PUERTO RICO RESPONSE.**

**2. BRAND AUDITS/BEACH CLEANUPS - WE SENT A SURVEY TO PEOPLE WHO SIGNED**

**THE PLASTIC PETITION, AND ASKED THEM IF THEY'D BE INTERESTED IN DOING A**

**CLEAN-UP AND BRAND AUDIT. OUR SUPPORTER MOBILIZATION TEAM WAS EXPECTING**

**ABOUT 75 PEOPLE, BUT INSTEAD:**

**=3000 PEOPLE FILLED OUT THE SIGNUP SURVEY ALTOGETHER**

**>400 OF THEM SAID THEY WERE 100% READY TO DO THE TACTIC**

**>700 SAID THEY "MIGHT" DO THE TACTIC IF WE SENT THEM THE TOOLKIT**

**3. THE SUMMER OF RESISTANCE TOUR STOPPED IN EIGHT KEY CITIES FOCUSED ON**

**GENERAL RESISTANCE AND TWO KEY CITIES FOCUSED ON PIPELINE WORK. THESE**

**IN-PERSON NON-VIOLENT DIRECT ACTION (NVDA) TRAINING EVENTS WERE MEANT**

**TO EMPOWER PARTICIPANTS TO TAKE ACTION WITH US AGAINST THE HARMFUL**

**TRUMP AGENDA AND FOSSIL FUEL INFRASTRUCTURE. WE TRAINED 300+ PEOPLE IN**

**NVDA IN-PERSON.**

**4. THE TRAININGS PROVIDED AN OPPORTUNITY TO CONTINUALLY TEST AND APPLY**

**LEARNINGS ALONG THE WAY, BY ADAPTING THE CURRICULUM FOR THE TRAININGS**

**BASED ON PARTICIPANT FEEDBACK, ASSESSING DIFFERENT RECRUITMENT TACTICS**

**AND PROVIDING A VARIETY OF OPPORTUNITIES FOR PEOPLE TO APPLY THE**

**TRAINING IN THEIR COMMUNITY. IN CONJUNCTION WITH OUR "HOLD THE LINE"**

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

Schedule O (Form 990 or 990-EZ) (2018)

Name of the organization

GREENPEACE, INC.

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52-1541501

PROJECT (FOCUSING ON STOPPING PIPELINES LIKE KXL) THE FINAL TWO TRAININGS WILL BE IN SEATTLE AND SAN FRANCISCO IN SEPTEMBER.

5. TO PROMOTE THE TOUR WE HOSTED A 30-MINUTE LIVE TRAINING WEBCAST ON SUNDAY, JUNE 25TH WHERE 32,000 PEOPLE TUNED IN FOR AT LEAST A PORTION OF IT, AND OVER 500 PEOPLE STAYED FOR THE ENTIRE WEBCAST. SUPPORTERS ALSO GATHERED TO WATCH THE WEBCAST AT OVER 40+ WELL-ATTENDED WATCH PARTIES, WHERE THEY STARTED TO PLAN THEIR OWN CREATIVE RESISTANCE ACTIONS. FOLLOWING THE WEBCAST, WE DISTRIBUTED OUR SUMMER OF RESISTANCE RESOURCE GUIDE TO SUPPORT VOLUNTEER-LED CREATIVE RESISTANCE ACTIONS THROUGHOUT THE SUMMER. WE ALSO UTILIZED TEXT BANKING AND PHONE BANKING TO REACH OUT TO OUR SUPPORTERS AND RECRUIT THEM AS HOSTS, LEADERS, AND ATTENDEES.

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

1. RELEASED THREE BREAK-THROUGH REPORTS, EXECUTED MORE THAN 15 ACTIONS AROUND THE WORLD (3 IN THE US), INSPIRED MORE THAN 400,000 SUPPORTERS TO TAKE ONLINE ACTIONS, CREATED 20 VIDEOS WITH MORE THAN 1 MILLION VIEWS AND 15K SHARES, AND INSPIRED 10,000 PEOPLE TO TAKE DEEPER ACTIONS LIKE WRITING LETTERS TO WATER PROTECTORS, VISITING THE SHIP, OR JOINING DEMONSTRATIONS. THIS PRESSURE RESULTED IN KEY MEETINGS WITH SEVERAL BANKS, INCLUDING NEGOTIATIONS WITH BANKS THAT WE DID NOT TARGET. HSBC AND BBVA HAVE STOPPED FUNDING TAR SANDS.

2. CHANGED DEFINITION OF CLIMATE LEADERSHIP AHEAD OF GCAS

3. IN RESPONSE TO A GLOBAL CAMPAIGN BY GREENPEACE, SAMSUNG ELECTRONICS COMMITTED TO POWERING ITS OPERATIONS IN THE UNITED STATES, EUROPE, AND CHINA WITH 100% RENEWABLE ENERGY BY 2020. SAMSUNG'S 100 PERCENT RENEWABLE COMMITMENT REACHES ACROSS THE IT SECTOR, GIVEN SAMSUNG'S

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DOMINANT POSITION AS A MAJOR SUPPLIER OF CRITICAL COMPONENTS TO A BROAD RANGE OF ELECTRONICS BRANDS.

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

LINK TO DEFORESTATION, WITH THE RELEASE OF A SHORT ANIMATED FILM, NARRATED BY OSCAR WINNING ACTRESS EMMA THOMPSON. ACROSS PLATFORMS, THE FILM GENERATED 3.5 MILLION VIEWS TO DATE. THE FILM RECEIVED GLOBAL PRESS COVERAGE.

2. RELEASED TWO-YEAR INVESTIGATION, THE FINAL COUNTDOWN. THE REPORT WAS PICKED UP BY THE ASSOCIATED PRESS AND RAN IN THE NEW YORK TIMES AND WASHINGTON POST AND ACROSS SEVERAL OTHER MARKETS INCLUDING INDONESIA, MALAYSIA, UK, GERMANY, FRANCE, AND THE NETHERLANDS. THE REPORT DOCUMENTS EXTENSIVE DEFORESTATION AND HUMAN RIGHTS ABUSES BY 25 OF THE WORST PALM OIL PRODUCER GROUPS THAT ARE SUPPLYING PALM OIL TRADERS AND CONSUMER COMPANIES. FOLLOWING OUR RELEASE, INDONESIAN PRESIDENT JOKO WIDODO ANNOUNCED A MORATORIUM ON PALM OIL EXPANSION IN NEW FOREST CONCESSIONS.

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

OCEANS - GREENPEACE, INC. IS CAMPAIGNING FOR SUSTAINABLE FISHERIES AND SEAFOOD, OCEAN SANCTUARIES (MARINE RESERVES), AND PHASING OUT SINGLE-USE PLASTICS THAT ARE POLLUTING OUR BODIES, LAND AND OCEANS. OUR CAMPAIGN LEVERAGES THE POWER OF LARGE SEAFOOD BUYERS, SEAFOOD PRODUCERS AND CONSUMERS TO IMPROVE FISHERIES MANAGEMENT; REDUCES THE AMOUNT OF PLASTIC POLLUTION ENTERING THE OCEAN; DEFENDS SEAFOOD WORKERS' RIGHTS; AND SEEKS TO ESTABLISH A NETWORK OF OCEAN SANCTUARIES.

2018 GREENPEACE, INC. OCEAN CAMPAIGN HIGHLIGHTS INCLUDE:



Name of the organization

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1. RELEASED THE TENTH EDITION OF OUR CARTING AWAY THE OCEANS REPORT, DOCUMENTING A DECADE OF TREMENDOUS PROGRESS IN SUSTAINABLE SEAFOOD AMONG U.S. RETAILERS. WHERE EVERY SINGLE RETAILER FAILED IN OUR FIRST ASSESSMENT, BY 2018 TWENTY OUT OF TWENTY-TWO RETAILERS HAD EARNED PASSING SCORES.

2. ORGANIZED DIRECT COMMUNICATIONS AT THE UNITED NATIONS DURING THE FIRST ROUND OF NEGOTIATIONS, AND DEVELOPED PLANS FOR OUR MOST AMBITIOUS EXPEDITION EVER: A TEN MONTH POLE TO POLE EXPEDITION TO BUILD SUPPORT FOR A STRONG GLOBAL OCEAN TREATY.

3. MADE GETTING RID OF SINGLE-USE PLASTIC A RALLYING CRY WITH ENORMOUS MOMENTUM AND POTENTIAL FOR SYSTEMIC CHANGE. COMPANIES WORTH BILLIONS OF DOLLARS ADOPTED SWEEPING NEW COMMITMENTS TO BEGIN REDUCING THEIR PLASTIC FOOTPRINT, AND EVEN PETROCHEMICAL COMPANIES FELT COMPELLED TO START TALKING ABOUT THE NEED TO END PLASTIC POLLUTION.

EXPENSES \$ 4,754,200. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

FORM 990, PART VI, SECTION A, LINE 6:

THE ORGANIZATION HAS VOTING MEMBERS, WHICH ARE ALL IN THE SAME CLASS. THESE MEMBERS ARE DESIGNATED BY THE BOARD OF DIRECTORS BASED ON CRITERIA ESTABLISHED IN THE BYLAWS AND HOLD A TERM OF 2 YEARS.

FORM 990, PART VI, SECTION A, LINE 7A:

ACCORDING TO THE ORGANIZATION'S BYLAWS, THE BOARD OF DIRECTORS IS ELECTED BY VOTING MEMBERS.

FORM 990, PART VI, SECTION B, LINE 11B:

THE 990 IS PREPARED BY AN INDEPENDENT PUBLIC ACCOUNTING FIRM BASED ON DATA

Name of the organization

GREENPEACE, INC.

Employer identification number

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AND SCHEDULES PROVIDED BY THE CONTROLLER, AND REVIEWED BY THE ORGANIZATION'S MANAGEMENT TEAM. THE 990 IS THEN REVIEWED AND APPROVED BY THE FINANCE COMMITTEE. AFTER THIS APPROVAL, THE 990 IS SUBMITTED TO THE FULL BOARD PRIOR TO FILING WITH THE INTERNAL REVENUE SERVICE. THESE VARIOUS LEVELS OF REVIEW ENSURE THE INFORMATION FILED IS COMPLETE, ACCURATE, AND IN COMPLIANCE WITH REGULATIONS.

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

THE ORGANIZATION'S CONFLICT OF INTEREST POLICY IS REVIEWED ANNUALLY BY EACH MEMBER OF THE BOARD OF DIRECTORS. ON AN ANNUAL BASIS, EACH DIRECTOR ALSO COMPLETES A DISCLOSURE FORM IDENTIFYING ANY RELATIONSHIPS, POSITIONS OR CIRCUMSTANCE IN WHICH HE OR SHE BELIEVES COULD CONTRIBUTE TO A CONFLICT. FOLLOWING FULL DISCLOSURE OF A POSSIBLE CONFLICT OF INTEREST, THE BOARD OF DIRECTORS SHALL DETERMINE WHETHER A CONFLICT OF INTEREST EXISTS, AND, IF SO, THE BOARD TAKES ANY ACTION DEEMED NECESSARY TO ADDRESS THE CONFLICT AND PROTECT THE ORGANIZATION'S BEST INTERESTS.

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

THE ORGANIZATION PERIODICALLY BENCHMARKS TRYING TO REMAIN CONSISTENT ACROSS THE INDUSTRY IN TERMS OF SALARY, RESPONSIBILITIES, SENIORITY. WE USE RELEVANT MARKET DATA FOR EACH POSITION TO DETERMINE COMPENSATION. COMPENSATION FOR THE EXECUTIVE DIRECTOR AND TOP MANAGEMENT IS INDEPENDENTLY REVIEWED AND BASED ON ANALYSIS OF COMPARABLE DATA OBTAINED FROM INDUSTRY RESOURCES (E.G. PAY SCALE), PUBLICLY DISCLOSED 990S, PEER ORGANIZATIONS, AND OUR PAYROLL PROCESSING COMPANY. THE RELEVANT LABOR MARKET FOR GREENPEACE, INC.: REGION: MID-ATLANTIC; SIZE: 350 FTE; REVENUE: 50M; INDUSTRY: NOT FOR PROFIT. BENCHMARKING RESULTS ARE ASSEMBLED AND DOCUMENTED BY PEOPLES AND CULTURE DIRECTOR. SENIOR LEVEL SALARY POSITIONS

Name of the organization

GREENPEACE, INC.

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ARE REVIEWED BY THE EXECUTIVE DIRECTOR, COO, THE DIRECTOR PEOPLE AND CULTURE AND THE PROGRAM DIRECTOR IN MOST CASES, WHILE FOR ED AND TOP MANAGEMENT THE BOARDS ARE ALSO INVOLVED IN THE PERIODIC BENCHMARKING REVIEWS.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:

AK, AR, CA, CT, FL, GA, HI, IL, KS, KY, MA, MD, MN, MS, NC, NH, NJ, NY, OK, OR, PA, RI, SC, TN, UT, VA, WI, WV

FORM 990, PART VI, SECTION C, LINE 18:

THE FORM 990 IS POSTED ON THE ORGANIZATION'S WEBSITE. THE 990 IS ALSO MADE AVAILABLE, AS WELL AS FORM 1023, UPON REQUEST IN ACCORDANCE WITH THE U.S. TITLE 26, SUBTITLE F, CHAPTER 61, SUBCHAPTER B, SECTION 6104(D)(1)(B).

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

GREENPEACE, INC.'S ORGANIZATIONAL DOCUMENTS, CODE OF ETHICS (WHICH INCLUDES CONFLICT OF INTEREST POLICY), ANNUAL REPORTS, AND RELATED DOCUMENTS ARE POSTED ON THE ORGANIZATION'S WEBSITE. IN ADDITION, AUDITED FINANCIAL STATEMENTS ARE POSTED TO THE WEBSITE ANNUALLY.