Department of the Treasury Internal Revenue Service

A For the 2012 calendar year, or tax year beginning

Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047 Open to Public

▶ The organization may have to use a copy of this return to satisfy state reporting requirements. Inspection OCT 1, 2012 and ending SEP 30, 2013

EARTHWATCH INSTITUTE, INC. Doing Business As Doin	B	Check if	C Name of organization		D Employer identif	ication number						
Dang Business As 2.3 − 71.68 4.40		□Addre:										
Rounds R	H	□Name			22 5	1160110						
The company of the	H	□Initial		/ouito								
City, town, or post office, state, and ZIP code BOSTON, MA 02134 FName and address of principal officer-ARCOTT MAHESH SAME AS C ABOVE Takewempt status: XI 3010(3) 3010(1) √ (insertino.) 494/(a)(1) or 327 Website	H	_		Suite								
BOSTON, MA 02134	F	Amend	lod	-								
Part Fixer and address of principal officer ARCOTT MAHESH SAME AS C ABOVE Tax-exempt status: X SOT((3) 50 f(6) 1 4947(a)(1) or 527 1 1 1 1 1 1 1 1 1	H	Applic		-								
SAME AS C ABOVE Taxeexempts tables \$ 100 (100)(3) \$ 00 (100)						Vec X No						
Tax-exempt status:												
J Websites: ▶ WWW - EARTHWATCH - ORG Form of organization: XL Corporation Trust	$\overline{}$	Tay.ey		_	• •							
Form of organization: X Corporation Trust Association Other L Year of formation: 1972 M State of legal domicile: MA				_								
Briefly describe the organization's mission or most significant activities: EARTHWATCH INSTITUTE IS A LEADER 1N CITIZEN SCIENCE AND ENGAGES PEOPLE WORLDWIDE IN SCIENTIFIC FIELD 2 Check this box I if the organization discontinued its operations or disposed of more than 25% of its net assets. 3 Number of nodependent voting members of the governing body (Part VI, line 1a) 4 Number of independent voting members of the governing body (Part VI, line 1a) 5 Total number of volunteer (selimate in facessary) 6 Total number of volunteer (selimate in facessary) 7 To Total number of volunteer (selimate in facessary) 8 To Total number of volunteer (selimate in facessary) 8 To Total number of volunteer (selimate in facessary) 9 Program service revenue (Part VIII, column (C), line 12 10 Net urrelated business revenue from Part VIII, column (C), line 12 11 Other revenue (Part VIII, line 1h) 12 Program service revenue (Part VIII, line 2g) 13 Other revenue (Part VIII, column (A), lines 3, 4, and 7d) 14 Other revenue (Part VIII, column (A), lines 5, 6d, 86, 8c, 10c, and 11e) 15 Total revenue. and lines 8 through 11 (must equal Bart VIII, column (A), lines 12) 16 Salaries, other compensation, employee benefits (Part XI, column (A), lines 12) 17 Other revenues (Part XI, column (A), lines 14) 18 Grants and similar amounts paid (Part X, column (A), lines 14) 19 Benefits paid to or for members (Part X, column (A), lines 15) 20 Total assets (Part X, column (A), lines 11a 11d, 11f.24e) 21 Total rundraising expenses (Part X, column (A), line 11e) 22 Total inabilities (Part X, line 16) 23 Total assets (Part X, line 26) 24 Total assets (Part X, line 26) 25 Net assets or fund balances. Subtract line 18 from line 12 26 Total assets (Part X, line 26) 27 Total assets (Part X, line 26) 28 Net assets or fund balances. Subtract line 21 from line 20 29 Total assets (Part X, line 26) 20 Total assets (Part X, line 26) 21 Total liabilities (Part X, line 26) 21 Total liabilities (Part X, line 26) 22 Total liabilities (Part X, line 26) 23 Total liabilit	_											
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No. CITIZEN SCIENCE AND ENGAGES PEOPLE WORLDWIDE IN SCIENTIFIC FIELD	_	1	Briefly describe the organization's mission or most significant activities: EARTHWA	TCH	INSTITUTE	IS A LEADER						
Solution	ü		IN CITIZEN SCIENCE AND ENGAGES PEOPLE WORLD	WIDI	E IN SCIENT	IFIC FIELD						
Solution	rne	2	Check this box if the organization discontinued its operations or disposed of	more	than 25% of its net a	ssets.						
Solution	OVe	3	Number of voting members of the governing body (Part VI, line 1a)		3	•						
Solution	প্ৰ	4	Number of independent voting members of the governing body (Part VI, line 1b)									
Solution	es	5	Total number of individuals employed in calendar year 2012 (Part V, line 2a)									
Solution	Ĭ											
8	Act	7 a	Total unrelated business revenue from Part VIII, column (C), line 12									
Security	_	b	Net unrelated business taxable income from Form 990-T, line 34	 								
9												
1	ne	1										
1	/en	1				_						
12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 8 , 252 , 799 . 8 , 857 , 073 . 13 Grants and similar amounts paid (Part IX, column (A), lines 1:3) 2 , 689 , 891 . 2 , 330 , 501 . 14 Benefits paid to or for members (Part IX, column (A), line 4) 0 . 0 . 0 . 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5:10) 3 , 631 , 683 . 3 , 749 , 402 . 16a Professional fundraising fees (Part IX, column (D), line 11e) 0 . 0 . 0 . 15 Total fundraising expenses (Part IX, column (D), line 25) 383 , 670 . 17 Other expenses (Part IX, column (D), line 25) 383 , 670 . 18 Total expenses. Add lines 13:17 (must equal Part IX, column (A), line 25) 9 , 162 , 229 . 8 , 549 , 452 . 19 Revenue less expenses. Subtract line 18 from line 12 9 , 162 , 229 . 8 , 549 , 452 . 19 Revenue less expenses. Subtract line 18 from line 12 9 , 162 , 229 . 8 , 549 , 452 . 20 Total assets (Part X, line 26) 5 , 861 , 848 . 6 , 664 , 641 . 21 Total liabilities (Part X, line 26) 1 , 299 , 851 . 1 , 653 , 605 . 22 Net assets or fund balances. Subtract line 21 from line 20 4 , 561 , 997 . 20 Total liabilities (Part X, line 26) 5 , 861 , 848 . 21 Signature Block	Be	1										
13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 2,689,891. 2,330,501. 14 Benefits paid to or for members (Part IX, column (A), lines 4) 0. 0. 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 3,631,683. 3,749,402. 16a Professional fundraising fees (Part IX, column (A), line 11e) 0. 0. 17 Other expenses (Part IX, column (A), line 25) 383,670. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 9,162,229. 8,549,452. 19 Revenue less expenses. Subtract line 18 from line 12 9,162,229. 8,549,452. 20 Total assets (Part X, line 16) 5,861,848. 6,664,641. 21 Total liabilities (Part X, line 26) 1,299,851. 1,653,605. 22 Net assets or fund balances. Subtract line 21 from line 20 4,561,997. 5,011,036. Part II Signature Block Signature Block Signature of officer Part IX Signature of officer Part IX Signature of officer PrimiType preparer's name ALEXANDER, ARONSON, FINNING & CO., P.C. Firm's name ALEXANDER, ARONSON, FINNING & CO., P.C. Firm's address 21 EAST MAIN STREET WESTBOROUGH, MA 01581 Phone no. 508-366-9100 Phone no. 508-366-91					17,432	4,004.						
14 Benefits paid to or for members (Part IX, column (A), line 4) 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 3 , 631 , 683 . 3 , 749 , 402 . 16a Professional fundraising fees (Part IX, column (A), line 11e) 0 . 0 . 0 . 0 . 0 . 0 . 0 . 0 . 0 . 0					2 600 001	0,037,073.						
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16a Professional fundraising fees (Part IX, column (A), line 11e) 0.		l			• •							
17 Other expenses (Part IX, Column (A), lines 11a-11d, 111-24e) 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 19 Revenue less expenses. Subtract line 18 from line 12 20 Total assets (Part X, line 16) 21 Total liabilities (Part X, line 26) 22 Net assets or fund balances. Subtract line 21 from line 20 30 Total assets or fund balances. Subtract line 21 from line 20 30 Total liabilities (Part X, line 26) 4	ses	160										
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18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 9,162,229. 8,549,452.	Ä	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		2.840.655.	2.469.549.						
19 Revenue less expenses. Subtract line 18 from line 12 -909, 430. 307,621.					9.162.229	8.549.452.						
Beginning of Current Year End of Year 5,861,848 6,664,641		1										
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Sign Here ARCOTT MAHESH, INTERNATIONAL CFO Type or print name and title Print/Type preparer's name MATTHEW TROIANO, CPA Preparer's signature MATTHEW TROIANO, CPA Firm's name ALEXANDER, ARONSON, FINNING & CO., P.C. Firm's address 21 EAST MAIN STREET WESTBOROUGH, MA 01581 Phone no. 508-366-9100	or											
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Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Sign Here ARCOTT MAHESH, INTERNATIONAL CFO Type or print name and title Print/Type preparer's name MATTHEW TROIANO, CPA Preparer's signature MATTHEW TROIANO, CPA Firm's name ALEXANDER, ARONSON, FINNING & CO., P.C. Firm's address 21 EAST MAIN STREET WESTBOROUGH, MA 01581 Phone no. 508-366-9100	ASS	21										
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true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Sign Here ARCOTT MAHESH, INTERNATIONAL CFO Type or print name and title Print/Type preparer's name MATTHEW TROIANO, CPA MATTHEW TROIANO, CPA Preparer Use Only Firm's name ALEXANDER, ARONSON, FINNING & CO., P.C. Firm's EIN O4-2571780 Phone no. 508-366-9100	Pá	art II	Signature Block									
Sign Here ARCOTT MAHESH, INTERNATIONAL CFO Type or print name and title Print/Type preparer's name MATTHEW TROIANO, CPA MATTHEW TROIANO, CPA Pirm's name ALEXANDER, ARONSON, FINNING & CO., P.C. Firm's EIN Firm's address 21 EAST MAIN STREET WESTBOROUGH, MA 01581 Pote Date Check PTIN Firm's EIN PO1263939 PO1263939 Preparer Use Only PTIN Firm's name ALEXANDER, ARONSON, FINNING & CO., P.C. Firm's EIN Phone no. 508-366-9100	Und	ler pena	lties of perjury, I declare that I have examined this return, including accompanying schedules and ${f s}$	tateme	nts, and to the best of n	ny knowledge and belief, it is						
Here ARCOTT MAHESH, INTERNATIONAL CFO Type or print name and title Print/Type preparer's name MATTHEW TROIANO, CPA MATTHEW TROIANO, CPA 04/22/14 Firm's name ALEXANDER, ARONSON, FINNING & CO., P.C. Firm's EIN 04-2571780 Westborough, MA 01581 Phone no. 508-366-9100	true	, correc	t, and complete. Declaration of preparer (other than officer) is based on all information of which pre	eparer h	nas any knowledge.							
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Use Only Firm's address 21 EAST MAIN STREET WESTBOROUGH, MA 01581 Phone no. 508-366-9100												
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Pai	t III Statement of Program Service Accomplishments
	Check if Schedule O contains a response to any question in this Part III
1	Briefly describe the organization's mission: EARTHWATCH INSTITUTE IS A LEADER IN CITIZEN SCIENCE AND ENGAGES PEOPLE
	WORLDWIDE IN SCIENTIFIC FIELD RESEARCH AND EDUCATION TO PROMOTE THE
	UNDERSTANDING AND ACTION NECESSARY FOR A SUSTAINABLE ENVIRONMENT.
	SINCE 1971, EARTHWATCH HAS EMPOWERED PEOPLE OF ALL AGES AND WALKS OF
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 \$ 7,018,331. including grants of \$ 2,330,501.) (Revenue \$ 4,804.)
	PUBLIC PROGRAM:
	EARTHWATCH'S PUBLIC PROGRAM INVOLVES A GLOBAL COMMUNITY OF RESEARCHERS,
	CONSERVATION VOLUNTEERS, EDUCATORS, STUDENTS, NGO'S AND BUSINESSES
	WORKING TOGETHER TOWARD A SUSTAINABLE ENVIRONMENT. THROUGH ITS
	EXPEDITIONS, EARTHWATCH ENGAGES INDIVIDUALS IN HANDS-ON ENVIRONMENTAL
	RESEARCH ALONGSIDE LEADING SCIENTISTS, WHERE THEY ACTIVELY PARTICIPATE
	IN RESEARCH THAT CONTRIBUTES TO THE UNDERSTANDING OF ENVIRONMENTAL
	CHALLENGES. THE PROGRAM SUPPORTS OVER 45 FIELD RESEARCH PROJECTS
	ACROSS NEARLY 30 COUNTRIES. OF THE \$9 MILLION IN ANNUAL REVENUE
	EARTHWATCH U.S. RAISES, APPROXIMATELY \$3.5 MILLION RELATES TO THE
	EARTHWATCH PUBLIC PROGRAM. OVER 2,100 PEOPLE PARTICIPATED ON
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
_	
4c	(Code:) (Expenses \$
4-1	Other management and (Describe in Cahadula O.)
4d	Other program services (Describe in Schedule O.)
40	(Expenses \$ including grants of \$) (Revenue \$) Total program service expenses ▶ 7,018,331.
<u>4e</u>	Total program service expenses ► 7, 018, 331.

Form 990 (2012) EARTHWATCH I Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
•	public office? If "Yes," complete Schedule C, Part I	3		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
•	during the tax year? If "Yes," complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent		7.7	
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	Х	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		7.7	
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		v	
	Schedule D, Parts XI and XII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?	401-		X
10	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	12b		X
13 14a	Did the organization maintain an office, employees, or agents outside of the United States?	13 14a	Х	
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	ı -r a		
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization	- 1.0		
	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15	Х	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16	Х	
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20 a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 b		

Page 4

Form 990 (2012) EARTHWATCH INSTITUTE Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Х	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to line 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			v
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		_ <u>X</u> _
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	OEL		х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified	25b		
20	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		<u>X</u>
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			37
	contributions? If "Yes," complete Schedule M	30		_X_
31	Did the organization liquidate, terminate, or dissolve and cease operations?	0.4		Х
20	If "Yes," complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	31		
32		32		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	52		
00	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	Х	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		Х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		_X_
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	X	

Form **990** (2012)

Form 990 (2012) EARTHWATCH INSTITUTE, INC. Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response to any question in this Part V										
			Yes	No							
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable										
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0										
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming										
	(gambling) winnings to prize winners?	1c	Х								
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,										
	filed for the calendar year ending with or within the year covered by this return 2a 59										
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х								
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)										
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х							
b	b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O										
4a	4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a										
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X							
b	If "Yes," enter the name of the foreign country: ►										
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.										
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X							
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х							
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		<u> </u>							
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			37							
	any contributions that were not tax deductible as charitable contributions?	6a		X							
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			ĺ							
_	were not tax deductible?	6b									
7	Organizations that may receive deductible contributions under section 170(c).	7-		Х							
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? If "Yes," did the organization notify the donor of the value of the goods or services provided?	7a									
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	7b									
C	to file Form 8282?	7c		х							
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d	,,									
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		х							
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х							
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g									
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h									
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting										
	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8									
9	Sponsoring organizations maintaining donor advised funds.										
а	Did the organization make any taxable distributions under section 4966?	9a		<u> </u>							
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b									
10	Section 501(c)(7) organizations. Enter:										
	Initiation fees and capital contributions included on Part VIII, line 12										
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities										
11	Section 501(c)(12) organizations. Enter:										
	Gross income from members or shareholders										
b	Gross income from other sources (Do not net amounts due or paid to other sources against										
40	amounts due or received from them.)	40									
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a									
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year										
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	120									
а	Is the organization licensed to issue qualified health plans in more than one state?	13a									
Note. See the instructions for additional information the organization must report on Schedule O.b Enter the amount of reserves the organization is required to maintain by the states in which the											
D	organization is licensed to issue qualified health plans										
_	Enter the amount of reserves on hand 13c										
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х							
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b									
	, provide the prov										

Pa	rt VI Governance, Management, and Disclosure For each "Yes" response to lines 2 the to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule Communication.	-		"No" r	espon	se					
						X					
200	Check if Schedule O contains a response to any question in this Part VItion A. Governing Body and Management					Δ					
360	tion A. Governing Body and Management				Yes	No					
10	Enter the number of voting members of the governing body at the end of the tax year	1a	15		162	NO					
Id	If there are material differences in voting rights among members of the governing body, or if the governing	la la									
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.										
b		1b	15								
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationsh										
-	officer, director, trustee, or key employee?			2		Х					
3	Did the organization delegate control over management duties customarily performed by or under the			_							
_	of officers, directors, or trustees, or key employees to a management company or other person?		•	3		Х					
4	Did the organization make any significant changes to its governing documents since the prior Form			4		X					
5											
6	Did the organization have members or stockholders?			6		X					
7a	Did the organization have members, stockholders, or other persons who had the power to elect or a										
	more members of the governing body?			7a		X					
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,	stockh	olders, or								
	persons other than the governing body?			7b		X					
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	ar by th	e following:								
а	The governing body?			8a	X						
b	Each committee with authority to act on behalf of the governing body?			8b	X						
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be real	ached :	at the								
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9		X					
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal F	evenue	e Code.)								
					Yes	No					
	Did the organization have local chapters, branches, or affiliates?			10a		_X_					
b	If "Yes," did the organization have written policies and procedures governing the activities of such of										
	and branches to ensure their operations are consistent with the organization's exempt purposes?			10b	Х						
	Has the organization provided a complete copy of this Form 990 to all members of its governing boo	зу рето	re filing the form?	11a	Λ						
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			10-	Х						
	Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give ris		flicte2	12a 12b	X						
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "			120	22						
C	in Schedule O how this was done		SCIDE	12c	х						
13	Did the organization have a written whistleblower policy?			13	X						
14	Did the organization have a written document retention and destruction policy?			14	X						
15	Did the process for determining compensation of the following persons include a review and approv										
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?										
а	The organization's CEO, Executive Director, or top management official			15a	Х						
	Other officers or key employees of the organization			15b	X						
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).										
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	ment v	vith a								
	taxable entity during the year?			16a		_X_					
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate	ate its p	articipation								
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organic	ınizatio	n's								
	exempt status with respect to such arrangements?			16b							
	tion C. Disclosure	17 ~	m DC Et C3	77.7	T T	77.77					
17	List the states with which a copy of this Form 990 is required to be filed MA, AK, AZ, AR, C					, KS					
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-	ı (Sect	ion 501(c)(3)s only) a	availab	le						
	for public inspection. Indicate how you made these available. Check all that apply.	in Oct	and the Ol								
40	X Own website X Another's website X Upon request Upon request Other (explain			اعاد	-1-1						
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, c	onflict	or interest policy, an	a tinar	icial						
20	statements available to the public during the tax year.	nd *	ordo of the overeiter	tion: ►							
20	State the name, physical address, and telephone number of the person who possesses the books a TARRY STATIR - (978) 450-1211	ııu rec	orus or the organiza	นงก: 🏴	_						

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

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

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

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

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

- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

(A)	(B)	l	111126	((пре	iisai	(D)	(E)	(F)		
Name and Title	Average	(do		Pos	ition	than	one	Reportable	Reportable	Estimated		
	hours per					is bot or/trus		compensation	compensation	amount of other		
	week (list any	ctor						from the	from related organizations	compensation		
	hours for	Individual trustee or director	au au			ated		organization	(W-2/1099-MISC)	from the		
	related organizations	nstee	Institutional trustee		8	Highest compensated employee		(W-2/1099-MISC)		organization and related		
	below	dual tr	ıtional	_	Key employee	st con	jo			organizations		
	line)	Indivi	Institu	Officer	Key er	Highe	Former			3		
(1) WHITNEY L. JOHNSON	1.00											
MEMBER		Х		·				0.	0.	0.		
(2) AMY RUTH BORUN	1.00											
CHAIR		Х		Х				0.	0.	0.		
(3) RICHARD M. BURNES, JR.	1.00								_	_		
MEMBER		Х						0.	0.	0.		
(4) GEORGE A. EBERSTADT	1.00									_		
MEMBER	1 00	Х						0.	0.	0.		
(5) G. KEITH FUNSTON, JR.	1.00									•		
TREASURER	1 00	X		X				0.	0.	0.		
(6) GARY F. GOLDRING	1.00	7,7								0		
MEMBER	1 00	Х						0.	0.	0.		
(7) DONALD R. KENDALL, JR.	1.00	, .							٠ .	0		
(8) DR. MARGARET D. LOWMAN	1.00	Х						0.	0.	0.		
	1.00	Х						0.	0.	0.		
(9) DR. WILLIAM R. MOOMAW	1.00	^						0.	0.			
MEMBER	1.00	x						0.	0.	0.		
(10) DR. DANIEL I. RUBENSTEIN	1.00	^				<u> </u>		0.	•	<u></u>		
MEMBER	1.00	Х						0.	0.	0.		
(11) ROBERT STACK	1.00							0.	•			
MEMBER	1.00	x						0.	0.	0.		
(12) RUTH C. SCHEER	1.00								•			
VICE CHAIR		x		х				0.	0.	0.		
(13) ALEXANDRA GOELET	1.00							-				
MEMBER		х						0.	0.	0.		
(14) KEVIN J. ANTON	1.00											
MEMBER		Х						0.	0.	0.		
(15) SAMUEL M. HAMILL, JR.	1.00											
MEMBER		Х						0.	0.	0.		
(16) EDWARD WILSON	40.00											
PRESIDENT/CEO UNTIL DEC 2012		L	L_	Х	L	L	L	184,849.	0.	13,113.		
(17) ARCOTT MAHESH	20.00											
INTERNATIONAL CFO				Х				64,002.	0.	0.		
										Farm 000 (0010)		

Form 990 (2012) EARTHWAT									43-7.	100	440	Pa	age c
Part VII Section A. Officers, Directors, Trus	tees, Key Em	ploy	ees			ghe	st C	Compensated Employe	es (continued)				
(A)	(B)			_ (0				(D)	(E)		1	(F)	
Name and title	Average	(do	not c	Posi	ition more	than	one	Reportable	Reportable		Es	timate	ed
	hours per	box,	, unle	ss pe	rson	is bot	h an	compensation	compensatio	n	an	nount (of
	week	Offic	cer an	a a a	recto	or/trus	tee)	from	from related		ł	other	
	(list any	ector						the	organization		com	pensa	tion
	hours for	or dir	a.			ited		organization	(W-2/1099-MIS	SC)		om the	
	related	stee	ruste			bens		(W-2/1099-MISC)				anizati	
	organizations below	al tru	onal t		loyee	E co						d relate	
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former				orga	anizatio	ons
(18) LISA CAMPBELL	40.00	드	드	Ð	종	포 등	<u> </u>				 		
SECRETARY AND EXECUTIVE ASSISTANT	40.00	1		х				51,595.		0.		8,2	17.
(19) LAWRENCE MASON	40.00	Н						32,3331				<u> </u>	
PRESIDENT/CEO SINCE JAN 2013		1		х				0.		0.			0.
(20) MARK CHANDLER	40.00												
INT'L DIR. OF RESEARCH		1				Х		113,546.		0.		3,7	80.
(21) JAMES FRY	40.00												
DIRECTOR OF INSTITUTIONAL PARTNERSHI						Х		100,656.		0.		7,8	90.
(22) BRETT RUDY	40.00												_
DIRECTOR FOR DIRECT MARKETING						Х		108,141.		0.	<u> </u>		0.
		1											
											—		
		1											
		H											
		1											
_													
		1						<u> </u>					
1b Sub-total								622,789.		0.	3	3,0	00.
c Total from continuation sheets to Part VI	I, Section A							0.		0.			0.
d Total (add lines 1b and 1c)						<u> </u>		622,789.		0.	3	3,0	00.
2 Total number of individuals (including but n	ot limited to th	ose	liste	ed al	bove	e) wl	ho r	eceived more than \$100	0,000 of reportable	.e			
compensation from the organization		_	_	-								Yes	No
2 Did the every institute list and formal efficient	divertes enter							h:		1		162	INO
3 Did the organization list any former officer, line 1a? If "Yes," complete Schedule J for s	•		e, ke	•	•	•			. ,		3		Х
4 For any individual listed on line 1a, is the su								her compensation from					
and related organizations greater than \$150	•							•	•		4	х	
5 Did any person listed on line 1a receive or a													
rendered to the organization? If "Yes," com	•				•			· ·			5	Х	
Section B. Independent Contractors													
1 Complete this table for your five highest co	mpensated in	depe	ende	nt c	onti	racto	ors t	that received more than	\$100,000 of com	ipens	ation f	rom	
the organization. Report compensation for	the calendar y	ear e	endi	ng v	vith	or w	/ithi	n the organization's tax	year.				
(A)								(B)		_	(C		
Name and business		- D	_	- 1			_	Description of s	services		compe	nsatioi	n
CHURCHILL NORTHERN STUDING JAMES ST, PO BOX 610, CHU) 4				SCIENTIST			1 0	3,7	5 2
AMAZONECO EIRL-BODMER	DKCUTTT	, r	10				-	PCIENTIBI				J, 1.	55.
MALECON TARAPACA 332, IQU	TTTOS TO)RF	፣ጥር)	ΡI	ERI	т	SCIENTIST			10	1,9	30.
<u> </u>	JIIOD L						\dashv	DOILLIII					-
2 Total number of independent contractors (i	ncludina but n	ot lir	mite	d to	tho	se li	stec	d above) who received n	nore than				

\$100,000 of compensation from the organization

Form 990 (2012) EARTHWA
Part VIII Statement of Revenue

		Check if Schedule O con	tains a response	to any question	in this Part VIII			
		GROOK II GORGAAN G GOOT	tains a response	to any queenen	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
ts si	1 a	Federated campaigns	1a					
la al		Membership dues						
اغ"		Fundraising events			-			
ifts		Related organizations			-			
اقنق		Government grants (contributed)			_			
Sir		All other contributions, gifts, grar			_			
iğ E	T			730 524				
를 탈		similar amounts not included abo		730,524.	_			
Contributions, Gifts, Grants and Other Similar Amounts	•	Noncash contributions included in lines			0 720 524			
0 e	h	Total. Add lines 1a-1f			8,730,524.			
				Business Code	9			
ا <u>ز</u>	2 a							
e	b							
Program Service Revenue	С							
e S	d	·						
δ <u>.</u>	е	·						
ا ځ	f	All other program service reve	enue					
\Box	g	Total. Add lines 2a-2f)				
	3	Investment income (including	dividends, intere	est, and				
		other similar amounts)			78,016.			78,016.
	4	Income from investment of ta						
	5	Royalties						
		,	(i) Real	(ii) Personal				
	6 a	Gross rents	``					
		Less: rental expenses			_			
		Rental income or (loss)			_			
		Net rental income or (loss)						
		Gross amount from sales of	(i) Securities	(ii) Other				
	ı a		754,755.					
		assets other than inventory	734,733.		_			
	D	Less: cost or other basis	711 026					
		and sales expenses	13 720		_			
	С.	Gain or (loss)	45,125.		43,729.			43,729.
		Net gain or (loss)		P	43,743.			43,743.
e l	8 a	Gross income from fundraisin						
l e		including \$	of					
- Be		contributions reported on line	,					
Other Reven		Part IV, line 18			_			
₹∣		Less: direct expenses						
		Net income or (loss) from fund		<u></u>				
	9 a	Gross income from gaming a	ctivities. See					
		Part IV, line 19	a					
	b	Less: direct expenses	b					
	С	Net income or (loss) from gan	ning activities	<u></u>				
	10 a	Gross sales of inventory, less	returns					
		and allowances	а					
	b	Less: cost of goods sold						
		Net income or (loss) from sale						
İ		Miscellaneous Revenu		Business Code				
t	11 a	MISCELLANEOUS I		900099	4,804.	4,804.		
	b				,	, , , , , ,		
	C							
		All other revenue		<u> </u>				
					4,804.			
	e	Total. Add lines 11a-11d		?		1 201	0	121 7/5

Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response to any question in this Part IX **(D)** Fundraising (B) Do not include amounts reported on lines 6b. Management and general expenses Total expenses Program service 7b, 8b, 9b, and 10b of Part VIII. expenses expenses Grants and other assistance to governments and 522,532. 522,532. organizations in the United States, See Part IV, line 21 Grants and other assistance to individuals in 193,192. 193,192. the United States. See Part IV. line 22 Grants and other assistance to governments. organizations, and individuals outside the 1,614,777. 1,614,777. United States, See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors. 387,449. 64,429. 181,276. 141,744. trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Other salaries and wages 2,809,860. 2,341,627. 446,334. 21,899. Pension plan accruals and contributions (include 27,789. 5,400. section 401(k) and 403(b) employer contributions) 34,195. 1,006. 50,883. 6,817. Other employee benefits 166,770. 109,070. 9 351,128. 282,366. 53,977. 14,785. Payroll taxes 10 Fees for services (non-employees): Management 19,266. 5.481. 13,785. Legal 45,478. 93,906. 48,428. Accounting Lobbying Professional fundraising services. See Part IV. line 17 Investment management fees _____ Other. (If line 11g amount exceeds 10% of line 25, 292,987. 199,780. 49,707. 43,500. column (A) amount, list line 11g expenses on Sch O.) 161,010. 154,665. 6,345. Advertising and promotion 12 360,914. 234,263. 37,372. 89,279. 13 Office expenses 23,215. 14,756. 8,459. Information technology 14 15 Royalties 295,138. 187,522. 65,580. 42,036. Occupancy 16 477,178. 345,551. 121,508. 10,119. 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings 19 Interest 20 21 Payments to affiliates 35,830. 22,705. 7,998. 5,127. Depreciation, depletion, and amortization 22 96,018. 20,532. 4,332. 120,882. 23 Other expenses. Itemize expenses not covered 24 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.) 497,868. 510,627. 12,722. 37. PROGRAM EXPENSES MISCELLANEOUS 77,285. 58,097. 16,282. 2,906. 837. 837. DUES AND SUBSCRIPTIONS 66. BUILDING REPAIRS AND MA 358. 292. 116. 73. 26. <u> 17.</u> All other expenses 8,549,452. 7,018,331. 1,147,451. 383,670. Total functional expenses. Add lines 1 through 24e 25 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)

Form 990 (2012)

Part X | Balance Sheet

Pa	rt X	Balance Sheet			
		Check if Schedule O contains a response to any question in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	220,706.	1	650,020.
	2	Savings and temporary cash investments	3,737.	2	3,739.
	3	Pledges and grants receivable, net	2,659,095.	3	2,552,949.
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees. Complete			
		Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under			
		section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
		employers and sponsoring organizations of section 501(c)(9) voluntary			
"		employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
Assets	7	Notes and loans receivable, net		7	
Ass	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	94,448.	9	142,993.
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a 1,900,667			
	b	basis. Complete Part VI of Schedule D Less: accumulated depreciation 10a 1,900,667. 10b 1,835,277.	68,658.	10c	65,390. 2,605,001.
	11	Investments - publicly traded securities	2,179,343.	11	2,605,001.
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	635,861.	15	644,549.
	16	Total assets. Add lines 1 through 15 (must equal line 34)	5,861,848.	16	6,664,641.
	17	Accounts payable and accrued expenses	617,231.	17	676,810.
	18	Grants payable	500 500	18	000 000
	19	Deferred revenue	682,620.	19	976,795.
	20	Tax-exempt bond liabilities		20	
ies	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
Liabilities	22	Loans and other payables to current and former officers, directors, trustees,			
-iak		key employees, highest compensated employees, and disqualified persons.			
_		Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X of			
		Schedule D	1,299,851.	25	1,653,605.
	26	Total liabilities. Add lines 17 through 25	1,299,031.	26	1,033,003.
		Organizations that follow SFAS 117 (ASC 958), check here ▶ X and			
Š	07	complete lines 27 through 29, and lines 33 and 34.	-571,449.	07	-277,111.
<u>la</u> n	27	Unrestricted net assets	3,570,984.	27 28	3,708,994.
B	28	Temporarily restricted net assets	1,562,462.	29	1,579,153.
Z L	29	Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here	1,302,402.	29	1,3/5,150
ř		and complete lines 30 through 34.			
ts o	30	Capital stock or trust principal, or current funds		30	
sse	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated income, or other funds		32	
Se	33	Total net assets or fund balances	4,561,997.	33	5,011,036.
	34	Total liabilities and net assets/fund balances	5,861,848.	34	6,664,641.
	1 34	i otal liabilities aliu liet assets/iuliu baidi lees	3,001,040.	J-7	0,004,041

Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	8,85		
2	Total expenses (must equal Part IX, column (A), line 25)	2	8,54		
3	Revenue less expenses. Subtract line 2 from line 1	3			21.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	4,56		
5	Net unrealized gains (losses) on investments	5	14	1,4	18.
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	5,01	1,0	36.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				X
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	О.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	e basis,			
	consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O.			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Audit			
	Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired audit			
	or guidite, explain why in Schodule O and describe any stone taken to undergo auch audite		26		1

SCHEDULE A

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support

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

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

EARTHWATCH INSTITUTE, INC.

Employer identification number

23-7168440

Part I	Reason	tor Public Char	ity Status (All organiz	ations mu	st complet	e this part	:.) See inst	ructions.					
The orgar	nization is not a	a private foundation	because it is: (For lines	1 through	11, check	only one b	ox.)						
1	A church, co	nvention of churche	s, or association of chur	ches desc	ribed in se	ction 170	(b)(1)(A)(i)						
2	A school des	cribed in section 17	'0(b)(1)(A)(ii). (Attach Sc	hedule E.)									
з 🔲			tal service organization		in section	170(b)(1)	A)(iii).						
4	•		operated in conjunction					(b)(1)(A)(ii	i). Enter	the !	hospita	ıl's nam	ne.
	city, and stat		•		•				•		·		,
5 🔲			benefit of a college or ur	niversity o	wned or or	perated by	a governi	mental uni	t describ	ed i	n		
• —	-	(b)(1)(A)(iv). (Comple	-	,		· - · · · · ,	9						
6			ent or governmental uni	t doscribo	d in coctio	n 170/h)/-	IV A V(v)						
7 X								r from the	gonoral	nuh	do door	oribod i	in
/	An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)												
•													
8 📙	A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)												
9 🗀	An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from												
	activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975.												
				tion 511 ta	x) from bu	sinesses a	acquirea b	y tne orga	inization	аπе	r June 3	30, 197	5.
40 🖂		509(a)(2). (Complete					500()(
10			perated exclusively to te										
11 📖	•		perated exclusively for the						•	•	•		or
	more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that												
	describes the type of supporting organization and complete lines 11e through 11h.												
	a	•	·· ·	ype III - Fu		•		• •	e III - No				-
e 📖	, ,	,	at the organization is not		,	,	,		•	•			ın
		-	han one or more publicly		_				9(a)(1) or	sec.	tion 509	9(a)(2).	
f	If the organiz	ation received a writ	tten determination from t	the IRS tha	at it is a Ty	pe I, Type	II, or Type	e III					
	supporting of	rganization, check th	nis box										. 📖
g	_		organization accepted ar			-							
	(i) A perso	n who directly or ind	lirectly controls, either al	one or tog	ether with	persons of	lescribed	in (ii) and (iii) below	,		Yes	No
	-		upported organization?								11g(i)		
			n described in (i) above?								11g(ii)		
	(iii) A 35% d	controlled entity of a	person described in (i) o	or (ii) above	e?						11g(iii))	
h	Provide the f	ollowing information	about the supported or	ganization	(s).								
(i) Name	e of supported	(ii) EIN	(iii) Type of organization		rganization			(vi) Is organizatio		(vii`) Amoun	it of moi	netary
	anization		(described on lines 1-9	in col. (i) listed in your		organizat		(i) organiz U.S	ed in the		sup	pport	
			above or IRC section (see instructions))	governing	document?	(i) of your	Support	U.S	.?	ĺ			
			(000 mondonomoj)	Yes	No	Yes	No	Yes	No	L			
										L			
										_		-	
										<u> </u>			
										1			

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

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

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	7,905,109.	7,952,618.	9,668,454.	8,308,689.	8,730,524.	42,565,394.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
	Total. Add lines 1 through 3	7,905,109.	7,952,618.	9,668,454.	8,308,689.	8,730,524.	42,565,394.
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						7,027,192.
	Public support. Subtract line 5 from line 4.						35,538,202.
	ction B. Total Support					-	
	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
	Amounts from line 4	7,905,109.	7,952,618.	9,668,454.	8,308,689.	8,730,524.	42,565,394.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties	65 450	45 050		46 505		222
	and income from similar sources	67,173.	47,052.	70,066.	46,597.	78,016.	308,904.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain	· ·					
	or loss from the sale of capital	04 004	100 550		45 450		0.55 0.55
	assets (Explain in Part IV.)	91,281.	109,570.	44,269.	17,452.	4,804.	267,376.
11	Total support. Add lines 7 through 10						43,141,674.
	Gross receipts from related activities,					12	
13	First five years. If the Form 990 is for	-			•		
<u>C</u>	organization, check this box and stop						>
	ction C. Computation of Publ						00 20
	Public support percentage for 2012 (I					14	82.38 % 85.97 %
	Public support percentage from 2011					15	,,,
16a	33 1/3% support test - 2012. If the c	-					
	stop here. The organization qualifies						
b	33 1/3% support test - 2011. If the c						
	and stop here. The organization qual						
17a	10% -facts-and-circumstances tes						
	and if the organization meets the "fac						
	meets the "facts-and-circumstances"						
b	10% -facts-and-circumstances tes						
	more, and if the organization meets the		•				
	organization meets the "facts-and-circ						
18	Private foundation. If the organization	n did not check a	box on line 13, 16	a, 16b, 17a, or 17b	o, check this box a	nd see instruction	s ▶Ш

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Se	ction A. Public Support	siew, piedee cein	ipioto i art iii,				
_	endar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
	Gifts, grants, contributions, and		(-/	(-)	(-) =	(-/	(-)
-	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions,						
	merchandise sold or services per-						
	formed, or facilities furnished in						
	any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that						
Ŭ	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
7	ization's benefit and either paid to						
	or expended on its behalf						
_							
5	The value of services or facilities			_			
	furnished by a governmental unit to the organization without charge						
_	· · · ·						
	Total. Add lines 1 through 5						
/ 8	Amounts included on lines 1, 2, and						
L	3 received from disqualified persons						
ı.) Amounts included on lines 2 and 3 received from other than disqualified persons that						
	exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
	Add lines 7a and 7b						
	Public support (Subtract line 7c from line 6.)						
_	ction B. Total Support				1		
	endar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
	Amounts from line 6						
108	a Gross income from interest, dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources						
k	• Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b, whether or not the business is						
	regularly carried on						
12	Other income. Do not include gain						
	or loss from the sale of capital assets (Explain in Part IV.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is for	the organization	's first, second, thi	rd, fourth, or fifth t	ax year as a sectio	on 501(c)(3) organiz	zation,
	check this box and stop here						>
Se	ction C. Computation of Publi	c Support Pe	ercentage				
15	Public support percentage for 2012 (li	ne 8, column (f) o	divided by line 13,	column (f))		15	%
	Public support percentage from 2011					16	%
	ction D. Computation of Inves						
	Investment income percentage for 20					17	%
18	Investment income percentage from 2	2011 Schedule A,	, Part III, line 17			18	%
19a	a 33 1/3% support tests - 2012. If the	organization did	not check the box	on line 14, and line	e 15 is more than 3	33 1/3%, and line	17 is not
	more than 33 1/3%, check this box ar	nd stop here. The	e organization qua	lifies as a publicly	supported organiz	ation	▶□
k	33 1/3% support tests - 2011. If the	organization did	not check a box o	n line 14 or line 19a	a, and line 16 is m	ore than 33 1/3%,	and
	line 18 is not more than 33 1/3%, che	ck this box and s	stop here. The org	anization qualifies	as a publicly supp	orted organization	▶□
20	Private foundation. If the organization	n did not check a	a box on line 14, 19	a, or 19b, check t	his box and see in	structions	<u></u>

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

➤ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ➤ Attach to Form 990. ➤ See separate instructions. OMB No. 1545-0047

2012
Open to Public Inspection

Name of the organization

EARTHWATCH INSTITUTE, INC.

Employer identification number 23 – 7168440

Pai		_	l Funds or Other Similar Fund	Is or Accounts. Complete if the
	organization answe	red "Yes" to Form 990, Part IV, line (o. (a) Donor advised funds	(b) Funds and other accounts
	Total number at and of year	<u> </u>	(a) Bonor davised farias	(b) i dilas ana sensi associno
1		(during year)		
2		(during year)		
3		ring year)		
4	Aggregate value at end of		cate a sign as sign as a sign and the sign as a sign as	
5	-		riting that the assets held in donor adv	
_			xclusive legal control?	
6			visors in writing that grant funds can b	
	· ·		donor advisor, or for any other purpos	
Do				
			nization answered "Yes" to Form 990,	Part IV, line 7.
1	— ` ` ´	easements held by the organization	`	
		for public use (e.g., recreation or ed		istorically important land area
	Protection of natural		Preservation of a ce	rtified historic structure
_	Preservation of open	•		
2	· · · · · · · · · · · · · · · · · · ·	2d if the organization held a qualifie	ed conservation contribution in the form	n of a conservation easement on the last
	day of the tax year.			Hald at the Field of the Tank Year
				Held at the End of the Tax Year
а		· ·		•
b	•			
С			cture included in (a)	
d		` ' '	ter 8/17/06, and not on a historic struc	
_				
3		asements modified, transferred, rele	ased, extinguished, or terminated by the	ne organization during the tax
	year ▶			
4		operty subject to conservation ease		_
5			odic monitoring, inspection, handling of	
_	•	nt of the conservation easements it h		
6			nd enforcing conservation easements	
7			nforcing conservation easements durin	
8			satisfy the requirements of section 17	
_				
9		· ·	n easements in its revenue and expens	
		ext of the footnote to the organization	on's financial statements that describe	s the organization's accounting for
Dai	conservation easements.	Maintaining Callactions of	Art Historical Transcures or (Other Similar Assets
Pai			Art, Historical Treasures, or (Juner Similar Assets.
		anization answered "Yes" to Form 9		
1a		•	958), not to report in its revenue state	
				rance of public service, provide, in Part XIII,
		its financial statements that describ		
b				nt and balance sheet works of art, historical
		assets held for public exhibition, edu	ucation, or research in furtherance of p	ublic service, provide the following amounts
	relating to these items:			
	(ii) Assets included in For			
2			sures, or other similar assets for financ	ial gain, provide
			6 (ASC 958) relating to these items:	
а		n 990, Part VIII, line 1		
b	Assets included in Form 99	90, Part X		> \$

	t III Organizations Maintaining C	CH INSIII		occurso or Oth		23-/1								
3	Using the organization's acquisition, accessing	on, and other record	ls, check any of the	following that are a	significant	use of its	collection	items						
	(check all that apply):													
а														
b														
	c Preservation for future generations 1. Provide a description of the expanization's collections and explain how they further the organization's exempt purpose in Part XIII.													
4														
5	to be sold to raise funds rather than to be maintained as part of the organization?													
Pai	t IV Escrow and Custodial Arran							NO						
<u>. u.</u>	reported an amount on Form 990, Pai		ste ii tile organizatio	iranswered res to	71 01111 990	, raitiv, i	ii ie 9, 0i							
			liary for contribution	s or other assets no	t included									
ıu	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													
h	If "Yes," explain the arrangement in Part XIII						_ 1C3							
-	Too, explain the arrangement in the Arran	and complete the re	nowing table.				Amount							
С	Beginning balance				1c		,							
	Additions during the year													
е	Distributions during the year													
f	Ending balance													
2a	Did the organization include an amount on Fe						Yes	No No						
	If "Yes," explain the arrangement in Part XIII.													
Pai	t V Endowment Funds. Complete i	f the organization an	swered "Yes" to Fo	rm 990, Part IV, line	10.									
		(a) Current year	(b) Prior year	(c) Two years back	(d) Three y	ears back	(e) Four	years back						
1a	Beginning of year balance	1,719,904.	1,531,078.	1,075,698.	9	966,935.		970,529.						
b	Contributions	4,926.		495,074.										
С	Net investment earnings, gains, and losses	147,524.	188,826.	-29,904.	1	.08,763.		-3,594.						
d	Grants or scholarships													
е	Other expenditures for facilities													
	and programs	47,679.		9,790.										
f	Administrative expenses													
g	End of year balance	1,824,675.	1,719,904.		1,0	75,698.		966,935.						
2	Provide the estimated percentage of the curr	rent year end balanc	e (line 1g, column (a	a)) held as:										
а	Board designated or quasi-endowment	21	_%											
b	Permanent endowment 86.54	3 46												
С	Temporarily restricted endowment 1													
2-	The percentages in lines 2a, 2b, and 2c should be there and autment funds not in the page.	•	ation that are hold a	nd administered for	tha araani	-ation								
Sa	Are there endowment funds not in the posse	ession of the organiza	ation that are neid a	na administered for	trie organi.	zation	Г	Yes No						
	by: (i) unrelated organizations						3a(i)	Yes No						
	(*)						3a(ii)	X						
b	If "Yes" to 3a(ii), are the related organizations						3b	+						
4	Describe in Part XIII the intended uses of the						0.0							
Paı	t VI Land, Buildings, and Equipm													
	Description of property	(a) Cost or o	' i 	or other (c) A	Accumulate	ed	(d) Book	value						
	y	basis (investr			preciation	l l	(-,							
	Land													
b	Buildings													
С	Leasehold improvements		6	4,486.	19,6	87.		1,799.						
d	Equipment		68	4,702.	667,2	89.	17	7,413.						
<u>e</u>	Other		1,15	1,479. 1,	148,3	01.	3	3,178.						
Total	I. Add lines 1a through 1e. (Column (d) must e	qual Form 990, Part	X, column (B), line 1	0(c).)			65	390.						

Schedule D (Form 990) 2012

Page (
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Part VII Investments - Other Securities. See	e Form 990, Part X, line	e 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)			
(I) Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related. Se	- F 000 B+ V I	10	
(a) Description of investment type	ee Form 990, Part X, III (b) Book value		: Cost or end-of-year market value
	(b) Book value	(c) Welfied of Valuation	. Cost of end-of-year market value
(1)			
(2)		4	
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
(10)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶			
Part IX Other Assets. See Form 990, Part X, line	15.		
	Description		(b) Book value
(1) LEASE DEPOSIT			25,000.
(2) INTANGIBLE ASSETS			66,895.
(3) INTEREST IN INSURANCE POL	ICY CONTRAC	TS	433,108.
(4) DUE FROM AFFILIATES, NET			119,546.
(5)			
(6)			
(7)			
(8)			
(9)			
(10)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line	e 15)		644,549.
Part X Other Liabilities. See Form 990, Part X, I			
1. (a) Description of liability		(b) Book value	
(1) Federal income taxes			
(2)			
(3)			
(4)			
(5)			
<u>(6)</u>			
(7)			
(8)			
(9)			
(10)			
(11)	- 05)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line			
2. FIN 48 (ASC 740) Footnote. In Part XIII, provide the tex	α or the toothote to th	e organization s financial statem	ients that reports the organization's

Sche	edule D (Form 990) 2012 EARTHWATCH INSTITUTE, INC.			23-	7168440 Page
Pai	t XI Reconciliation of Revenue per Audited Financial Statemer	nts W	ith Revenue per R	etur	
1	Total revenue, gains, and other support per audited financial statements			1	9,094,242
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains on investments	2a	141,418.		
b	Donated services and use of facilities	2b	95,751.		
С	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d			2e	237,169
3	Subtract line 2e from line 1			3	8,857,073
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		•		
	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			_
	Add lines 4a and 4b			4c	0
	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	8,857,073
	rt XII Reconciliation of Expenses per Audited Financial Stateme				
	Total expenses and losses per audited financial statements			1	8,645,203
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1	N 05 751		
	Donated services and use of facilities		95,751.		
	Prior year adjustments				
	Other losses				
	Other (Describe in Part XIII.)	2d			05 751
	Add lines 2a through 2d			2e	95,751
3	Subtract line 2e from line 1			3	8,549,452
	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1 .			
	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
	Other (Describe in Part XIII.)				_
	Add lines 4a and 4b			4c	8,549,452
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	0,349,434
	rt XIII Supplemental Information				0. 5
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III,				2b; Part V, line 4; Part
	e 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to p RT V, LINE 4: EARTHWATCH'S ENDOWMENT ASSETS				MANNED
FAI	(1 V, DINE 4: EARIHWATCH 5 ENDOWMENT ASSETS	AN	E INVESTED I	11 Y	MANNER
THZ	AT IS INTENDED TO PRODUCE LONG-TERM YIELDS	WHI	LE ASSUMING	A C	ONSERVATIVE
RIS	SK. THE ENDOWMENT ASSETS ARE USED TO GENER	RATE	INCOME, BAS	ED	ON AN
<u>A</u> P1	PROVED SPENDING POLICY OF THE BOARD USED TO	SU	PPORT PROGRA	<u>M</u> A	ND
ADI	MINISTRATIVE ACTIVITIES OF EARTHWATCH.				

PART X, LINE 2: EARTHWATCH FOLLOWS THE ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES STANDARD, WHICH REQUIRES EARTHWATCH TO REPORT UNCERTAIN TAX Schedule D (Form 990) 2012

Goricadic D (10111 330) 2012 ==================================
Part XIII Supplemental Information (continued)
POSITIONS, RELATED INTEREST AND PENALTIES, AND TO ADJUST ITS ASSETS AND
LIABILITIES RELATED TO UNRECOGNIZED TAX BENEFITS AND ACCRUED INTEREST AND
PENALTIES ACCORDINGLY. AS OF SEPTEMBER 30, 2013, EARTHWATCH DETERMINED
THAT THERE ARE NO MATERIAL UNRECOGNIZED TAX BENEFITS TO REPORT. NO INCOME
TAX PROVISION HAS BEEN INCLUDED IN THE ACCOMPANYING FINANCIAL STATEMENTS.
EARTHWATCH IS SUBJECT TO AUDIT BY TAX AUTHORITIES. EARTHWATCH BELIEVES
THAT THEY HAVE APPROPRIATE SUPPORT FOR THE POSITIONS TAKEN ON THEIR
INFORMATION RETURNS.

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

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

➤ Attach to Form 990. ➤ See separate instructions.

2012
Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Employer identification number

EARTHWATCH INST	ד אַיינויידי	NC .			23-71684	4.0
			tside the United States. Comple	ete if the organ		
to Form 990, Par	t IV, line 14b.					
			ds to substantiate the amount of its gr the selection criteria used to award the			Yes No
2 For grantmakers. Described States.	ribe in Part V the	e organization's	procedures for monitoring the use of it	s grants and of	ther assistance ou	tside the
3 Activities per Region. (T	he following Part	I, line 3 table ca	an 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 region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	is a prog describe	vity listed in (d) gram service, e specific type ce(s) in region	(f) Total expenditures for and investments in region
CENTRAL AMERICA AND				RESEARCH, E	DUCATION,	
THE CARIBBEAN -	1	1	PROGRAM SERVICES	ENGAGEMENT	,	40,343.
SOUTH AMERICA - ARGENTINA, BOLIVIA,	1	8	PROGRAM SERVICES	RESEARCH, E	DUCATION,	387,323.
		9				427 666
3 a Sub-total b Total from continuation	2	9				427,666.
sheets to Part I c Totals (add lines 3a	0	0				0.
and 3b)	2	9				427,666.

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

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH AMERICA - ARGENTINA, BOLIVIA,	PRINCIPAL INVESTIGATOR	167,534.	WIRE TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND) -	PRINCIPAL INVESTIGATOR	389,540.	WIRE TRANSFER	0.		
			PRINCIPAL INVESTIGATOR	147,754.	WIRE TRANSFER	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	PRINCIPAL INVESTIGATOR	206,900.	WIRE TRANSFER	0.		
			PRINCIPAL INVESTIGATOR	192,025.	WIRE TRANSFER	0.		
			PRINCIPAL INVESTIGATOR	52,323.	WIRE TRANSFER	0.		
	he grantee or couns	el has provided a sectio	recognized as charities by the n 501(c)(3) equivalency letter			xempt by		

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

additional space is neede	d.					
(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
EAST ASIA AND PACIFIC / CHINA	3	109,127.	WIRE TRANSFER	0.		
EUROPE (INCLUDING ICELAND & GREENLAND) -	6	213,796.	WIRE TRANSFER	0.		
NORTH AMERICA - CANADA AND MEXICO, BUT	1	56,180.	WIRE TRANSFER	0.		
SOUTH AMERICA - ARGENTINA, BOLIVIA,	1	34,335.	WIRE TRANSFER	0.		
SUB-SAHARAN AFRICA - ANGOLA,	2	45,263.	WIRE TRANSFER	0.		
	(b) Region EAST ASIA AND PACIFIC / CHINA EUROPE (INCLUDING ICELAND & GREENLAND) - NORTH AMERICA - CANADA AND MEXICO, BUT SOUTH AMERICA - ARGENTINA, BOLIVIA,	EAST ASIA AND PACIFIC / CHINA 3 EUROPE (INCLUDING ICELAND & GREENLAND) - 6 NORTH AMERICA - CANADA AND MEXICO, BUT 1 SOUTH AMERICA - ARGENTINA, BOLIVIA, 1	(b) Region (c) Number of recipients (d) Amount of cash grant EAST ASIA AND PACIFIC / CHINA 3 109,127. EUROPE (INCLUDING ICELAND & GREENLAND) - 6 213,796. NORTH AMERICA - CANADA AND MEXICO, BUT 1 56,180. SOUTH AMERICA - ARGENTINA, BOLIVIA, 1 34,335.	(c) Number of recipients (d) Amount of cash disbursement (e) Manner of cash disbursement (e) M	(c) Number of recipients (d) Amount of cash disbursement (f) Amount of non-cash assistance (e) Manner of cash disbursement (f) Amount of non-cash assistance (f) Amount of non-c	(c) Number of recipients (d) Amount of cash grant (e) Manner of cash disbursement (f) Amount of non-cash assistance (e) Manner of cash disbursement (f) Amount of non-cash assistance (f) Amount of non-cash assis

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) Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization 2 may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A) 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) 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) Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," 5 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) Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report. (see Instructions

for Form 5713)

Schedule F (Form 990) 2012

Part V | Supplemental Information

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

SCHEDULE F, PART I, LINE 2: 1. RECEIVE BOTH SOLICITED AND UNSOLICITED
PRELIMINARY APPLICATIONS FROM THE SCIENCE COMMUNITY

- APPLICATIONS, INCLUDING DRAFT BUDGET, ARE REVIEWED AND EVALUATED ON A ROLLING BASIS
- INITIAL BUSINESS REVIEW BY FIELD MANAGEMENT, RESEARCH,

DEVELOPMENT/CORPORATE PROGRAMS, VOLUNTEER PROGRAMS, ENGAGEMENT, AND

FINANCE DEPARTMENTS; RECOMMENDATION SUBMITTED WHICH IS ACCEPTED OR

REJECTED BY THE INTERNATIONAL EXECUTIVE TEAM.

- IF DECISION IS TO INVITE FULL PROPOSAL, WE INVITE THE SCIENTIST TO SUBMIT A DETAILED PROPOSAL.
- UPON RECEIPT OF PROPOSAL, IT IS SENT TO BE EXTERNALLY REVIEWED TO
 ESTABLISH SCIENTIFIC WORTH (SOME EXCEPTIONS)
- BUDGET AND ALL FIELDING DETAILS ARE CONFIRMED
- FINAL DETAILS APPROVED BY INTERNAL REVIEW COMMITTEE (IF RECOMMEND TO REJECT AT THIS POINT, MUST GO BACK TO THE INTERNATIONAL EXECUTIVE TEAM)
- 2. SELECTED GRANTEES ARE NOTIFIED
- 3. PAYMENTS MADE TO GRANTEES PER BUDGET AND TIMELINE OF PROJECTS
- 4. AT END OF FIELD SEASON, GRANTEE REQUIRED TO SUBMIT RECEIPTS TO

DOCUMENT SPENDING OF FUNDS

- 5. BUDGETS AND FIELDING DETAILS ARE RE-EVALUATED AND APPROVED ON A YEARLY BASIS.
- 6. PROJECTS RE-SUBMIT A SCIENTIFIC PROPOSAL EVERY 3-5 YEARS (SOME EXCEPTIONS)

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" to Form 990, Part IV, line 21 or 22.

► Attach to Form 990.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization EARTHWATC	CH INSTITU	TE, INC.					Employer identification number 23-7168440
Part I General Information on Grants a		•					
 Does the organization maintain records criteria used to award the grants or assi Describe in Part IV the organization's pr 	istance?						
Part II Grants and Other Assistance to					anization answered "\	es" to Form 990, Part	IV, line 21, for any
recipient that received more than		-				,	•
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
ARCHOSAUR FOUNDATION- DEREK MAIN 3009 WINGREN RD							
IRVING, TX 75062	45-2679972		7,200.	0.			PRINCIPAL INVESTIGATOR
BIODIVERSITY RESEARCH INSTITUTE 19 FLAGGY MEADOW RD GORHAM, ME 02038	01-0515381		42,902.	0.			PRINCIPAL INVESTIGATOR
CAPE ELEUTHERA INSTITUTE P O BOX 5910 PRINCETON, NJ 08543	31-1591503		34,290.	0.			PRINCIPAL INVESTIGATOR
MICHAEL JOHNSON LLC 632 CANTRILL DR DAVIS, CA 95618	20-5147757		22,020.	0.			PRINCIPAL INVESTIGATOR
PURDUE UNIVERSITY 2101 EAST COLISEUM BLVD FORT WAYNE, IN 46805	35-6002041		37,700.	0.			PRINCIPAL INVESTIGATOR
SMITHSONIAN INSTITUTION 24412 NETWORK PLACE CHICAGO , IL 60674	53-0206027		9,141.	0.			PRINCIPAL INVESTIGATOR
2 Enter total number of section 501(c)(3) a		uganizations listed in th	,	l			>
3 Enter total number of other organization	is listed in the line	1 table					

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

Part II Continuation of Grants and Other	er Assistance to Go	vernments and Orga	nizations in the U	nited States (Sch	edule I (Form 990), Pa	ırt II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
сущсом							
SATCOM 1347 N ALAM SCHOOL RD							
CHANDLER, AZ 85224	74-2967220		12,114.	0.			PRINCIPAL INVESTIGATOR
,							
THINK ELEPHANTS INTERNATIONAL							
PO BOX 905 STONE RIDGE							
NEW YORK , NY 12484	80-0754268		26,000.	0.			PRINCIPAL INVESTIGATOR
URBAN ECOS (KELANIE RAVDIN) 30 COSO AVE							
SAN FRANCISCO, CA 94110	03-9400338		5,115.	0.			PRINCIPAL INVESTIGATOR

Part III Grants and Other Assistance to Individuals in the Un Part III can be duplicated if additional space is needed.	ited States. Con	nplete if the organiza	ation answered "Yes	to Form 990, Part IV, line 22.	
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
PRINCIPAL INVESTIGATOR	5	191,742.	0.		
COMMUNITY ACTION AWARD	6	1,450.	0.		
Part IV Supplemental Information. Complete this part to provi	de the informatio	n required in Part I,	line 2, Part III, colum	n (b), and any other additional in	oformation.
SCHEDULE I, PART I, LINE 2: 1. RE	CEIVE BO	TH SOLICIT	ED AND UNS	OLICITED	
PRELIMINARY APPLICATIONS FROM THE	SCIENCE	COMMUNITY			
- APPLICATIONS, INCLUDING DRAFT BU	JDGET, AR	E REVIEWED	AND EVALU	ATED ON A	
ROLLING BASIS					
- INITIAL BUSINESS REVIEW BY FIELD	MANAGEM	ENT, RESEA	RCH,		
DEVELOPMENT/CORPORATE PROGRAMS, VC	LUNTEER	PROGRAMS,	ENGAGEMENT	, AND FINANCE	
DEPARTMENTS; RECOMMENDATION SUBMIT	TED WHIC	H IS ACCEP	TED OR REJ	ECTED BY THE	
INTERNATIONAL EXECUTIVE TEAM.					
- IF DECISION IS TO INVITE FULL PR	ROPOSAL,	WE INVITE	THE SCIENT	IST TO SUBMIT	

SCHEDULE J (Form 990)

Compensation Information

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

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

➤ Attach to Form 990. ➤ See separate instructions.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Department of the Treasury

Internal Revenue Service

EARTHWATCH INSTITUTE, INC. Employer identification number

23-7168440 Part I **Questions Regarding Compensation** Yes No 1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Tax indemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (e.g., maid, chauffeur, chef) 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 1b Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a? 2 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. X Compensation committee X Written employment contract Independent compensation consultant Compensation survey or study X Approval by the board or compensation committee Form 990 of other organizations During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization: X Receive a severance payment or change-of-control payment? X **b** Participate in, or receive payment from, a supplemental nonqualified retirement plan? 4b c Participate in, or receive payment from, an equity-based compensation arrangement? X If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: Х a The organization? X **b** Any related organization? If "Yes" to line 5a or 5b, describe in Part III. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: Х The organization? 6a X **b** Any related organization? If "Yes" to line 6a or 6b, describe in Part III. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III Х 7 Were any amounts reported in 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 Х If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in

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

Regulations section 53.4958-6(c)?

Schedule J (Form 990) 2012

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

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

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

		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement a	and	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported as deferred
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation		berients	(6)(()-(U)	in prior Form 990
(1) EDWARD WILSON	(i)	184,849.	0.	0.		0.	13,113.	197,962.	0.
PRESIDENT/CEO UNTIL DEC 2012	(ii)	0.	0.	0.		0.	0.	0.	0.
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
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	(i)								
	(ii)								
	(i)								
	(ii)								

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Department of the Treasury Internal Revenue Service Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

OMB No. 1545-0047

2012
Open to Public Inspection

Name of the organization

EARTHWATCH INSTITUTE, INC.

Employer identification number 23-7168440

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

RESEARCH AND EDUCATION TO PROMOTE THE UNDERSTANDING AND ACTION

NECESSARY FOR A SUSTAINABLE ENVIRONMENT. SINCE 1971, EARTHWATCH HAS

EMPOWERED PEOPLE OF ALL AGES AND WALKS OF LIFE TO CONTRIBUTE TO

HUNDREDS OF CRUCIAL, HANDS-ON ENVIRONMENTAL RESEARCH PROJECTS AROUND

THE GLOBE.

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

LIFE TO CONTRIBUTE TO HUNDREDS OF CRUCIAL, HANDS-ON ENVIRONMENTAL

RESEARCH PROJECTS AROUND THE GLOBE.

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

EARTHWATCH FIELD PROGRAMS DURING THE YEAR, OF WHICH 1,175 WERE PUBLIC

VOLUNTEERS. THESE INDIVIDUALS CONTRIBUTED OVER 60,000 HOURS TO

RESEARCH DATA COLLECTION. THIS HAS ENABLED OUR AFFILIATED SCIENTISTS

TO PRODUCE 65 PEER REVIEWED ARTICLES AND CONTRIBUTE TO 35 ENVIRONMENTAL

MANAGEMENT PLANS AND POLICIES. EARTHWATCH IS DEDICATED TO CREATING AN

ENVIRONMENTAL LEGACY THROUGH ITS RESEARCH PROJECTS, EXPERIENTIAL

EDUCATIONAL PROGRAMS AND HANDS-ON VOLUNTEER OPPORTUNITIES IN FIELD

RESEARCH.

TRUSTS FOUNDATIONS AND INDIVIDUALS:

APPROXIMATELY \$1.4 MILLION OF EARTHWATCH'S REVENUE PERTAINS TO GRANTS
FROM TRUSTS, FOUNDATIONS AND INDIVIDUALS. THIS REVENUE WAS APPLIED TO

UNDERWRITE THE EARTHWATCH FIELD RESEARCH PROGRAMS AND TO FUND THE

EARTHWATCH U.S. HAS PARTNERSHIPS WITH SEVERAL CORPORATE DONORS

INCLUDING HSBC, ALCOA, UPS AND ERNST AND YOUNG ENABLING THEM TO SEND

THEIR STAFF ON EARTHWATCH FIELD RESEARCH PROGRAMS WORLDWIDE FOR HANDS

ON EXPERIENCE AND ENGAGEMENT IN ISSUES OF ENVIRONMENTAL AWARENESS,

CORPORATE RESPONSIBILITY AND INCORPORATING SUSTAINABLE PRACTICES INTO

THEIR COMPANY'S CULTURE IN ORDER TO MEET THEIR INTERNALLY DRIVEN

SUSTAINABILITY GOALS. DURING THE FISCAL YEAR ENDED SEPTEMBER 2013,

EARTHWATCH ENGAGED OVER 800 CORPORATE EMPLOYEES WORLDWIDE ON ITS

PROGRAMS. TOTAL REVENUE FROM CORPORATE PROGRAMS WAS APPROXIMATELY \$2.6

MILLION. DATA FROM THESE RESEARCH PROJECTS IS SHARED WITH NATIONAL AND

LOCAL GOVERNMENTS AS WELL AS LOCAL INSTITUTIONS FOR USE IN ADVANCING

POLICIES AND ACTIONS IN THE RELEVANT AREAS.

FORM 990, PART VI, SECTION B, LINE 11: THE FORM 990 IS PROVIDED TO THE SENIOR LEADERSHIP TEAM FOR REVIEW AND THE FINANCE COMMITTEE FOR REVIEW AND APPROVAL. THE CFO WILL THEN SIGN OFF FOR ELECTRONIC FILING OF THE FORM 990. A COPY OF THE FINAL SIGNED 990 WILL BE SENT TO ALL MEMBERS OF THE BOARD OF DIRECTORS.

FORM 990, PART VI, SECTION B, LINE 12C: THE BOARD OF DIRECTORS MONITOR AND ENFORCE COMPLIANCE WITH THE CONFLICT OF INTEREST POLICY TO ENSURE THAT ALL APPROPRIATE PERSONNEL HAVE SIGNED THE FORMS FOR THE CURRENT FISCAL YEAR.

FORM 990, PART VI, SECTION B, LINE 15: THE COMPENSATION COMMITTEE REVIEWS

AND APPROVES WRITTEN EMPLOYMENT CONTRACTS FOR ALL EMPLOYEES AT THE

EXECUTIVE LEVEL. AFTER EMPLOYMENT CONTRACTS ARE APPROVED BY THE

COMPENSATION COMMITTEE, THE BOARD OF DIRECTORS REVIEW AND APPROVE THE

COMPENSATION CONTRACTS.

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

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

FORM 990, PART VI, SECTION C, LINE 19: EARTHWATCH MAKES ITS GOVERNING

DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE

TO THE PUBLIC UPON REQUEST.

Employer identification number 23-7168440

FORM 990, PART XII, LINE 2C

THE BOARD OVERSEES THE SELECTION OF AUITORS AND MEETS WITH THE AUDITORS
AT THE CONCLUSION OF THE AUDIT TO REVIEW RESULTS.

FORM 990, PART VII, SECTION A:

EARTHWATCH INSTITUTE, INC. AND EARTHWATCH EUROPE (AN UNRELATED U.K. NON-PROFIT ENTITY) ORGANIZED AND INCORPORATED EARTHWATCH INTERNATIONAL, INC. (EARTHWATCH INTERNATIONAL). EARTHWATCH INTERNATIONAL HAS NO ASSETS AND HAD NO ACTIVITY AS OF AND FOR THE YEAR ENDED SEPTEMBER 30, THE BOARD OF DIRECTORS OF EARTHWATCH INTERNATIONAL CONSISTS OF THE BOARD MEMBERS OF EACH OF THE INCORPORATORS, WITH EACH INCORPORATOR HAVING EQUAL VOTING POWER. EARTHWATCH INTERNATIONAL'S PURPOSE IS TO PROVIDE INTERNATIONALLY COORDINATED GOVERNANCE AND ADMINISTRATION FOR THE BENEFIT OF ORGANIZATIONS THROUGHOUT THE WORLD THAT USE EARTHWATCH TRADEMARKS AND BRAND. EACH PARTY MAINTAINS ITS OWN INDEPENDENT GOVERNANCE AND FINANCIAL INTEGRITY. CERTAIN COSTS, KEY EXECUTIVES AND PROGRAM AND ADMINISTRATIVE STAFF SERVE BOTH EARTHWATCH US AND EARTHWATCH EUROPE AND COSTS ARE SHARED UNDER A MEMORANDUM OF AGREEMENT BETWEEN THE ORGANIZATIONS. AS SUCH, THE EXECUTIVE EMPLOYEES THAT ARE SHARED BETWEEN EARTHWATCH U.S. AND EARTHWATCH EUROPE, THAT ARE PAID BY EARTHWATCH U.S., ARE LISTED ON FORM 990, PART VII, SECTION A, AT THEIR FULL COMPENSATION AMOUNTS.

ADDITIONALLY, EARTHWATCH U.S. REIMBURSED EARTHWATCH EUROPE FOR THE SERVICES OF THEIR CFO. THE AMOUNT LISTED ON FORM 990, PART VII,

SECTION A REPRESENTS THE REIMBURSEMENT OF 50% OF HIS SALARY THAT IS

SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

Related Organizations and Unrelated Partnerships

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

► Attach to Form 990.

► See separate instructions.

2012
Open to Public Inspection

Name of the organization

EARTHWATCH INSTITUTE, INC.

Employer identification number 23-7168440

	(b)	(c)	(d)	(e)			(f)	
Name, address, and EIN (if applicable) of disregarded entity	Primary activity	Legal domicile (state or foreign country)		l l	assets	Direct o	controlling ntity	g
CLOCK TOWER FILMS LLC - 34-2005695			1					
114 WESTERN AVENUE			NI .					
BOSTON, MA 02134	VIDEO PRODUCTION	MASSACHUSETTS				1/A		
Part II Identification of Related Tax-Exempt Or organizations during the tax year.)	ganizations (Complete if the organization	answered "Yes" to Form 990,	Part IV, line 34 b	ecause it had one o	or more r	elated tax-exe	mpt	
(a)	(b)	(c)	(d)	(e)		(f)	(9	g) 512(b)(13)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign country)	Exempt Code section	Public charity status (if section	Direc	t controlling entity	cont	rolled tity?
				501(c)(3))			Yes	No
							+	
							1	1

Page 2

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

	organizations are all parameters and an exemptions of the control													
(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)	(j)	(k)			
Name, address, and EIN of related organization	Primary activity	Legal domicile	Direct controlling	Predominant income	Predominant income	Share of total	Share of	Disproportion		Code V-UBI	Genera	or Percentage ownership		
of related organization		(state or foreign	entity	(related, unrelated, excluded from tax under sections 512-514)	income	end-of-year assets	ate allo	cations?	amount in box 20 of Schedule K-1 (Form 1065)	partne	ownership			
		country)		sections 512-514)		400010	Yes	No	K-1 (Form 1065)	Yes N	0			
]													
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	1													
	1													
						". 5								

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	Sec 512(k contr ent Yes	tion b)(13) rolled tity?
								res	NO

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

Yes No

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

1	During the tax year, did the organization engage in any of the following transaction	s with one or more r	related organizations listed in	Parts II-IV?			
а	Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity		-		1a		
b	Gift, grant, or capital contribution to related organization(s)				1b		
	Gift, grant, or capital contribution from related organization(s)						
	Loans or loan guarantees to or for related organization(s)						
	Loans or loan guarantees by related organization(s)						
	, , , , , , , , , , , , , , , , , , , ,						
f	Dividends from related organization(s)				1f		Π
g	Sale of assets to related organization(s)		4		1g		
	Purchase of assets from related organization(s)						
	Exchange of assets with related organization(s)						
	Lease of facilities, equipment, or other assets to related organization(s)						
•	, , , , , , , , , , , , , , , , , , , ,						
k	Lease of facilities, equipment, or other assets from related organization(s)				1k		
- 1	Performance of services or membership or fundraising solicitations for related orga	anization(s)			11		
	Performance of services or membership or fundraising solicitations by related orga						
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization	ion(s)			1n		
	Sharing of paid employees with related organization(s)						
р	Reimbursement paid to related organization(s) for expenses				1p		
	Reimbursement paid by related organization(s) for expenses						
	. ,						
r	Other transfer of cash or property to related organization(s)				1r		
	Other transfer of cash or property from related organization(s)						
	If the answer to any of the above is "Yes," see the instructions for information on w				•	•	
	(a)	(b)	(c)	(d)			
	Name of other organization	Transaction	Amount involved	Method of determining amount	involved		
		type (a-s)					
1)							
2)							
3)							
4)							
5)							_
6)							_
2016	2 10 10 10			Cohodul	la D /Earm	000/ 20	10

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under section 512-514)	Are all partners sec 501(c)(3) orgs.?	(f) Share of total income	(g) Share of end-of-year assets	Disproptionate allocation	or- Code V-UBI amount in box 20 s? of Schedule K-1	General of managin partner?	(k) Percentage ownership
			-0							
			J							

Form **8868** (Rev. January 2013)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No. 1545-1709

Form 8868 (Rev. 1-2013)

ightharpoonup If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form). Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868. Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions), For more details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for Charities & Nonprofits. Automatic 3-Month Extension of Time. Only submit original (no copies needed). A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Name of exempt organization or other filer, see instructions. Employer identification number (EIN) or Type or print EARTHWATCH INSTITUTE, INC. 23-7168440 File by the Number, street, and room or suite no. If a P.O. box, see instructions. Social security number (SSN) due date for filina vour 114 WESTERN AVENUE return. See instructions City, town or post office, state, and ZIP code. For a foreign address, see instructions. BOSTON, MA 02134 Enter the Return code for the return that this application is for (file a separate application for each return) **Application** Return **Application** Return Is For Code Code Form 990 or Form 990-EZ 01 Form 990-T (corporation) 07 Form 990-BL Form 1041-A Form 4720 (individual) Form 4720 03 09 Form 990-PF 04 Form 5227 10 Form 990-T (sec. 401(a) or 408(a) trust) 05 Form 6069 11 Form 990-T (trust other than above) Form 8870 12 LARRY STAUB The books are in the care of ▶ 114 WESTERN AVENUE - BOSTON, MA 02134 Telephone No. \blacktriangleright (978) $45\overline{0-1211}$ FAX No. ▶ 617-522-2799 If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this . If it is for part of the group, check this box \blacktriangleright and attach a list with the names and EINs of all members the extension is for. I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until MAY 15, 2014 to file the exempt organization return for the organization named above. The extension is for the organization's return for: ☐ calendar year OCT 1, 2012 SEP 30, ► X tax vear beginning . and ending If the tax year entered in line 1 is for less than 12 months, check reason: Initial return ☐ Change in accounting period If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. 3a If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. 3b Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required. by using EFTPS (Electronic Federal Tax Payment System). See instructions. Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

For Privacy Act and Paperwork Reduction Act Notice, see instructions.