

Form **990**

**Return of Organization Exempt From Income Tax**  
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047

**2015**

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.  
▶ Information about Form 990 and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

**A For the 2015 calendar year, or tax year beginning and ending**

<b>B</b> Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C</b> Name of organization <b>GREENPEACE, INC.</b>		<b>D</b> Employer identification number <b>52-1541501</b>		
	Doing business as				
	Number and street (or P.O. box if mail is not delivered to street address)		Room/suite	<b>E</b> Telephone number	
	<b>702 H STREET, NW</b>		<b>300</b>	<b>202-462-1177</b>	
	City or town, state or province, country, and ZIP or foreign postal code <b>WASHINGTON, DC 20001</b>		<b>G</b> Gross receipts \$ <b>36,893,837.</b>		
<b>F</b> Name and address of principal officer: <b>ANNE MARIE LEONARD</b> <b>SAME AS C ABOVE</b>		<b>H(a)</b> Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<b>I</b> Tax-exempt status: <input type="checkbox"/> 501(c)(3) <input checked="" type="checkbox"/> 501(c) ( <b>4</b> ) ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		<b>H(b)</b> Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>J</b> Website: ▶ <b>WWW.GREENPEACEUSA.ORG</b>		<b>H(c)</b> Group exemption number ▶			
<b>K</b> Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		<b>L</b> Year of formation: <b>1987</b>		<b>M</b> State of legal domicile: <b>CA</b>	

**Part I Summary**

<b>Activities &amp; Governance</b>	<b>1</b> Briefly describe the organization's mission or most significant activities: <b>TO PROMOTE THE PROTECTION AND PRESERVATION OF THE ENVIRONMENT</b>
	<b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.
	<b>3</b> Number of voting members of the governing body (Part VI, line 1a) ..... <b>3</b> <b>8</b>
	<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b) ..... <b>4</b> <b>7</b>
	<b>5</b> Total number of individuals employed in calendar year 2015 (Part V, line 2a) ..... <b>5</b> <b>2461</b>
	<b>6</b> Total number of volunteers (estimate if necessary) ..... <b>6</b> <b>12481</b>
	<b>7a</b> Total unrelated business revenue from Part VIII, column (C), line 12 ..... <b>7a</b> <b>0.</b>
<b>b</b> Net unrelated business taxable income from Form 990-T, line 34 ..... <b>7b</b> <b>0.</b>	
<b>Revenue</b>	<b>8</b> Contributions and grants (Part VIII, line 1h) ..... <b>33,462,321.</b> <b>Prior Year</b> <b>36,638,929.</b> <b>Current Year</b>
	<b>9</b> Program service revenue (Part VIII, line 2g) ..... <b>3,515.</b> <b>3,515.</b> <b>141,167.</b>
	<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d) ..... <b>2,518.</b> <b>2,518.</b> <b>11,190.</b>
	<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) ..... <b>60,196.</b> <b>60,196.</b> <b>102,281.</b>
	<b>12</b> Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) ..... <b>33,528,550.</b> <b>33,528,550.</b> <b>36,893,567.</b>
	<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1-3) ..... <b>218,495.</b> <b>218,495.</b> <b>235,660.</b>
<b>Expenses</b>	<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4) ..... <b>0.</b> <b>0.</b> <b>0.</b>
	<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) ..... <b>21,512,642.</b> <b>21,512,642.</b> <b>21,584,423.</b>
	<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e) ..... <b>841,539.</b> <b>841,539.</b> <b>903,104.</b>
	<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) ▶ <b>4,466,430.</b>
	<b>17</b> Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) ..... <b>13,171,621.</b> <b>13,171,621.</b> <b>13,467,708.</b>
	<b>18</b> Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) ..... <b>35,744,297.</b> <b>35,744,297.</b> <b>36,190,895.</b>
<b>Net Assets or Fund Balances</b>	<b>19</b> Revenue less expenses. Subtract line 18 from line 12 ..... <b>-2,215,747.</b> <b>-2,215,747.</b> <b>702,672.</b>
	<b>20</b> Total assets (Part X, line 16) ..... <b>4,583,575.</b> <b>Beginning of Current Year</b> <b>3,754,860.</b> <b>End of Year</b>
	<b>21</b> Total liabilities (Part X, line 26) ..... <b>5,197,617.</b> <b>5,197,617.</b> <b>3,674,250.</b>
	<b>22</b> Net assets or fund balances. Subtract line 21 from line 20 ..... <b>-614,042.</b> <b>-614,042.</b> <b>80,610.</b>

**Part II Signature Block**

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

<b>Sign Here</b>	Signature of officer	Date			
	<b>MARK ROYAL CONHEADY, CHIEF FINANCIAL OFFICER</b> Type or print name and title				
<b>Paid Preparer Use Only</b>	Print/Type preparer's name <b>DAVID TRIMNER</b>	Preparer's signature 	Date <b>08/03/16</b>	Check if self-employed <input type="checkbox"/>	PTIN <b>P00444822</b>
	Firm's name ▶ <b>CLIFTONLARSONALLEN LLP</b>	Firm's EIN ▶ <b>41-0746749</b>	Firm's address ▶ <b>4250 N. FAIRFAX DRIVE, SUITE 1020 ARLINGTON, VA 22203</b>		
Phone no. <b>571-227-9500</b>					

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

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission: GREENPEACE IS AN INDEPENDENT CAMPAIGNING ORGANIZATION THAT USES PEACEFUL, CREATIVE CONFRONTATION TO EXPOSE GLOBAL ENVIRONMENTAL PROBLEMS, AND TO FORCE SOLUTIONS THAT ARE ESSENTIAL TO A GREEN AND PEACEFUL FUTURE.

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

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

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 \$ 10,862,447. including grants of \$ 116,501.) (Revenue \$ 243,448.) OUTREACH & EDUCATION & ACTIONS - GREENPEACE, INC. FURTHERS ITS MISSION OF PROTECTING THE ENVIRONMENT THROUGH RESEARCH, PUBLIC INFORMATION AND EDUCATION, OUTREACH AND ADVOCACY, AND LITIGATION. IN 2015, GREENPEACE INC USED SEVERAL NOVEL APPROACHES FOR ENGAGING NEW CONSTITUENCIES AND MOBILIZING EVEN MORE PEOPLE OVERALL TO HELP ACHIEVE WINS FOR THE ENVIRONMENT. THESE INCLUDE:

GPUS'S 2015 DIRECT ACTION TRAINING CAMP ATTRACTED 75 PARTICIPANTS FROM IMPACTED COMMUNITIES AND ENVIRONMENTAL JUSTICE STRUGGLES ACROSS THE COUNTRY, AND BROUGHT TOGETHER 40 TRAINERS FROM A VARIETY OF LOCAL AND NATIONAL ORGANIZATIONS. THE PURPOSE OF THIS CAMP IS TO LEARN VARIOUS TACTICS OF ORGANIZING TO ENSURE SUCCESS IN THEIR CAMPAIGNS.

4b (Code: ) (Expenses \$ 8,540,973. including grants of \$ 115,771.) (Revenue \$ ) CLIMATE (ENERGY & ARCTIC) - GREENPEACE IS CAMPAIGNING FOR A RAPID AND JUST TRANSITION TO A CLEAN ENERGY ECONOMY. OUR WORLD IS HOTTER NOW THAN IT HAS BEEN IN TWO THOUSAND YEARS AND, IF CURRENT TRENDS CONTINUE, BY THE END OF THE CENTURY THE GLOBAL TEMPERATURE WILL LIKELY CLIMB HIGHER THAN AT ANY TIME IN THE PAST TWO MILLION YEARS. THE ARCTIC IS WARMING FASTER THAN THE REST OF THE GLOBE AND IS EXPERIENCING SOME OF THE MOST SEVERE CLIMATE IMPACTS ON THE PLANET. IN THE U.S., COAL-FIRED POWER PLANTS ARE THE SINGLE LARGEST SOURCE OF GLOBAL WARMING POLLUTION. THE EXPANSION OF U.S. COAL EXPORTS THREATENS TO BECOME THE COUNTRY'S SINGLE LARGEST NEW SOURCE OF CARBON POLLUTION. GREENPEACE U.S. IS WORKING WITH ALLIES TO BLOCK INVESTMENTS IN DIRTY ENERGY PROJECTS, AND MOBILIZING BROAD PUBLIC SUPPORT FOR A HIGH ARCTIC SANCTUARY TO PROTECT

4c (Code: ) (Expenses \$ 6,106,240. including grants of \$ 2,133.) (Revenue \$ ) OCEANS - GREENPEACE IS CAMPAIGNING FOR SUSTAINABLE FISHERIES AND THE SUSTAINED THOUGH MINIMAL FOCUS ON OCEAN SANCTUARIES (MARINE RESERVES). DESTRUCTIVE FISHING AND OVERFISHING ARE AMONG THE MOST SIGNIFICANT THREATS FACING THE WORLD'S OCEANS. IN ADDITION TO WREAKING HAVOC ON FISH POPULATIONS, DESTRUCTIVE FISHING PRACTICES HARM MARINE BIRDS AND MAMMALS, COASTAL FISHING GROUNDS THAT MANY COMMUNITIES RELY ON, AND DEEPWATER HABITATS THAT ARE ESSENTIAL FOR MANY SPECIES TO SURVIVE. GREENPEACE U.S. IS USING CUTTING-EDGE SCIENTIFIC RESEARCH, AND COLLABORATING WITH TRIBAL COMMUNITIES, SCIENTISTS, NGO ALLIES, AND SEAFOOD RETAILERS TO PRESSURE THE U.S. FISHERIES BODIES TO SUPPORT / IMPLEMENT SUSTAINABLE FISHERIES MANAGEMENT.

4d Other program services (Describe in Schedule O.) (Expenses \$ 3,407,031. including grants of \$ 1,254.) (Revenue \$ )

4e Total program service expenses 28,916,691.

**Part IV Checklist of Required Schedules**

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

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

	Yes	No
<b>20a</b> Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i> .....		X
<b>b</b> If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .....		
<b>21</b> Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i> .....	X	
<b>22</b> Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i> .....		X
<b>23</b> Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i> .....	X	
<b>24a</b> Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i> .....		X
<b>b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? .....		
<b>c</b> Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? .....		
<b>d</b> Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? .....		
<b>25a</b> <b>Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i> .....		X
<b>b</b> Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i> .....		X
<b>26</b> Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i> .....	X	
<b>27</b> Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i> .....		X
<b>28</b> Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
<b>a</b> A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> .....		X
<b>b</b> A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> .....		X
<b>c</b> An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i> .....		X
<b>29</b> Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> .....		X
<b>30</b> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> .....		X
<b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> .....		X
<b>32</b> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i> .....		X
<b>33</b> Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i> .....		X
<b>34</b> Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i> .....		X
<b>35a</b> Did the organization have a controlled entity within the meaning of section 512(b)(13)? .....		X
<b>b</b> If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> .....		
<b>36</b> <b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> .....		
<b>37</b> Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i> .....		X
<b>38</b> Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? .....		
<b>Note.</b> All Form 990 filers are required to complete Schedule O .....	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

Input box for Schedule O

Main table with columns for question ID, description, and Yes/No checkboxes. Includes rows 1a-14b with various tax-related questions and numerical inputs.

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

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

**Section A. Governing Body and Management**

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

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

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

**Section C. Disclosure**

- 17** List the states with which a copy of this Form 990 is required to be filed **AL, AK, AR, CA, CT, FL, GA, HI, IL, KS, KY, MD**
- 18** Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.  
 Own website     Another's website     Upon request     Other (explain in Schedule O)
- 19** Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records: **COSTAS DOUMAS, CONTROLLER - 202-462-1177**  
**702 H STREET, NW, NO. 300, WASHINGTON, DC 20001**

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

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

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

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

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

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) KAREN TOPAKIAN CHAIR	5.00	X		X				19,895.	0.	0.
(2) STUART CLARKE BOARD MEMBER	1.00	X						0.	0.	0.
(3) ALNOOR LADHA BOARD MEMBER	1.00	X						0.	0.	0.
(4) MICHAEL LEON GUERRERO BOARD MEMBER	1.00	X						0.	0.	0.
(5) TRACY STURDIVANT BOARD MEMBER	1.00	X						0.	0.	0.
(6) BRYONY SCHWAN BOARD MEMBER	1.00	X						0.	0.	0.
(7) GUILLERMO QUINTEROS BOARD MEMBER	1.00	X						0.	0.	0.
(8) LARRY KOPALD BOARD MEMBER	1.00	X						0.	0.	0.
(9) RAJASVINI BHANSALI BOARD MEMBER	1.00	X						0.	0.	0.
(10) ANNE MARIE LEONARD EXECUTIVE DIRECTOR	20.00			X				96,101.	0.	15,326.
(11) FRANKLYN DARNELL BAKER CHIEF OPERATING OFFICER	24.00			X				113,102.	0.	20,084.
(12) MARK ROYAL CONHEADY CHIEF FINANCIAL OFFICER	24.00			X				93,834.	0.	12,187.
(13) THOMAS W. WETTERER GENERAL COUNSEL/SECRETARY	32.00			X				105,557.	0.	12,068.
(14) BRITT COCANOUR DIRECTOR OF PUBLIC OUTREACH	40.00				X			152,922.	0.	36,837.
(15) NICOLA DAVIES CAMPAIGNS DIRECTOR	40.00				X			160,149.	0.	17,538.
(16) BRIAN ANDERSON CHIEF DEVELOPMENT OFFICER	28.00					X		124,061.	0.	13,688.
(17) MICHAEL SILBERMAN GLOBAL DIRECTOR OF DIGITAL INNOVATIO	40.00					X		160,031.	0.	17,279.





**Part VIII Statement of Revenue**

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

				(A)	(B)	(C)	(D)	
				Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
<b>Contributions, Gifts, Grants and Other Similar Amounts</b>	<b>1 a</b> Federated campaigns .....	<b>1a</b>						
	<b>b</b> Membership dues .....	<b>1b</b>						
	<b>c</b> Fundraising events .....	<b>1c</b>						
	<b>d</b> Related organizations .....	<b>1d</b>						
	<b>e</b> Government grants (contributions) .....	<b>1e</b>						
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above .....	<b>1f</b>	36,638,929.					
	<b>g</b> Noncash contributions included in lines 1a-1f: \$ .....							
	<b>h Total.</b> Add lines 1a-1f .....			36,638,929.				
<b>Program Service Revenue</b>	<b>2 a</b> TUITION AND FEES .....	<b>Business Code</b>	611710	141,167.	141,167.			
	<b>b</b> .....							
	<b>c</b> .....							
	<b>d</b> .....							
	<b>e</b> .....							
	<b>f</b> All other program service revenue .....							
	<b>g Total.</b> Add lines 2a-2f .....			141,167.				
<b>Other Revenue</b>	<b>3</b> Investment income (including dividends, interest, and other similar amounts) .....			1,715.			1,715.	
	<b>4</b> Income from investment of tax-exempt bond proceeds .....			9,541.			9,541.	
	<b>5</b> Royalties .....							
	<b>6 a</b> Gross rents .....	(i) Real	(ii) Personal					
		<b>b</b> Less: rental expenses .....						
		<b>c</b> Rental income or (loss) .....						
		<b>d</b> Net rental income or (loss) .....						
	<b>7 a</b> Gross amount from sales of assets other than inventory .....	(i) Securities	(ii) Other					
		204.						
		<b>b</b> Less: cost or other basis and sales expenses .....			270.			
		<b>c</b> Gain or (loss) .....			-66.			
	<b>d</b> Net gain or (loss) .....				-66.		-66.	
	<b>8 a</b> Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18 .....	<b>a</b>						
		<b>b</b> Less: direct expenses .....	<b>b</b>					
		<b>c</b> Net income or (loss) from fundraising events .....						
<b>9 a</b> Gross income from gaming activities. See Part IV, line 19 .....	<b>a</b>							
	<b>b</b> Less: direct expenses .....	<b>b</b>						
	<b>c</b> Net income or (loss) from gaming activities .....							
<b>10 a</b> Gross sales of inventory, less returns and allowances .....	<b>a</b>							
	<b>b</b> Less: cost of goods sold .....	<b>b</b>						
	<b>c</b> Net income or (loss) from sales of inventory .....							
Miscellaneous Revenue			<b>Business Code</b>					
<b>11 a</b> REBATES AND OTHER .....	<b>900099</b>		102,281.	102,281.				
	<b>b</b> .....							
	<b>c</b> .....							
	<b>d</b> All other revenue .....							
	<b>e Total.</b> Add lines 11a-11d .....			102,281.				
<b>12 Total revenue.</b> See instructions. ....			36,893,567.	243,448.	0.	11,190.		

**Part IX Statement of Functional Expenses**

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

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

<i>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</i>	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
<b>1</b> Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	207,762.	207,762.		
<b>2</b> Grants and other assistance to domestic individuals. See Part IV, line 22				
<b>3</b> Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	27,898.	27,898.		
<b>4</b> Benefits paid to or for members				
<b>5</b> Compensation of current officers, directors, trustees, and key employees	855,600.	656,095.	184,662.	14,843.
<b>6</b> Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
<b>7</b> Other salaries and wages	16,496,154.	13,528,857.	1,058,505.	1,908,792.
<b>8</b> Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	325,814.	225,564.	33,563.	66,687.
<b>9</b> Other employee benefits	3,089,476.	2,656,777.	140,209.	292,490.
<b>10</b> Payroll taxes	817,379.	580,542.	83,549.	153,288.
<b>11</b> Fees for services (non-employees):				
<b>a</b> Management				
<b>b</b> Legal	227,659.	202,388.	20,045.	5,226.
<b>c</b> Accounting				
<b>d</b> Lobbying	40,998.	16,121.	20,620.	4,257.
<b>e</b> Professional fundraising services. See Part IV, line 17	903,104.			903,104.
<b>f</b> Investment management fees	496.		496.	
<b>g</b> Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch. O.)	3,415,083.	2,756,990.	413,416.	244,677.
<b>12</b> Advertising and promotion	238,143.	219,426.	557.	18,160.
<b>13</b> Office expenses	2,400,494.	1,934,926.	46,992.	418,576.
<b>14</b> Information technology	1,156,476.	626,452.	291,000.	239,024.
<b>15</b> Royalties				
<b>16</b> Occupancy	1,723,760.	1,206,028.	243,562.	274,170.
<b>17</b> Travel	1,365,326.	1,241,351.	38,572.	85,403.
<b>18</b> Payments of travel or entertainment expenses for any federal, state, or local public officials				
<b>19</b> Conferences, conventions, and meetings	834,973.	696,910.	78,900.	59,163.
<b>20</b> Interest	127,104.	49,981.	63,926.	13,197.
<b>21</b> Payments to affiliates				
<b>22</b> Depreciation, depletion, and amortization	189,567.	121,235.	35,731.	32,601.
<b>23</b> Insurance	156,793.	108,383.	24,827.	23,583.
<b>24</b> Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
<b>a</b> <u>DIRECT MAIL</u>	1,187,141.	987,211.	0.	199,930.
<b>b</b> <u>LIST RENTAL</u>	149,001.	115,687.	0.	33,314.
<b>c</b> <u>TAXES, PERMITS, AND FEE</u>	81,874.	50,145.	8,301.	23,428.
<b>d</b> <u>ALLOCATION OF FUNDRAISI</u>	0.	556,627.		-556,627.
<b>e</b> All other expenses	172,820.	143,335.	20,341.	9,144.
<b>25</b> <b>Total functional expenses.</b> Add lines 1 through 24e	36,190,895.	28,916,691.	2,807,774.	4,466,430.
<b>26</b> <b>Joint costs.</b> Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

Check here  if following SOP 98-2 (ASC 958-720)

**Part X Balance Sheet**

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

		(A) Beginning of year		(B) End of year
<b>Assets</b>	<b>1</b> Cash - non-interest-bearing .....	1,151,836.	<b>1</b>	1,064,172.
	<b>2</b> Savings and temporary cash investments .....		<b>2</b>	
	<b>3</b> Pledges and grants receivable, net .....		<b>3</b>	
	<b>4</b> Accounts receivable, net .....	21,221.	<b>4</b>	4,739.
	<b>5</b> Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L .....		<b>5</b>	
	<b>6</b> Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L .....		<b>6</b>	
	<b>7</b> Notes and loans receivable, net .....		<b>7</b>	
	<b>8</b> Inventories for sale or use .....		<b>8</b>	
	<b>9</b> Prepaid expenses and deferred charges .....	629,055.	<b>9</b>	586,298.
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D .....	<b>10a</b> 2,635,846.		
	<b>b</b> Less: accumulated depreciation .....	<b>10b</b> 1,800,627.		
	<b>11</b> Investments - publicly traded securities .....	821,004.	<b>10c</b>	835,219.
	<b>12</b> Investments - other securities. See Part IV, line 11 .....	69,162.	<b>11</b>	62,292.
	<b>13</b> Investments - program-related. See Part IV, line 11 .....		<b>12</b>	
	<b>14</b> Intangible assets .....		<b>13</b>	
	<b>15</b> Other assets. See Part IV, line 11 .....	1,891,297.	<b>14</b>	
<b>16</b> <b>Total assets.</b> Add lines 1 through 15 (must equal line 34) .....	4,583,575.	<b>15</b>	1,202,140.	
		<b>16</b>	3,754,860.	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses .....	2,046,720.	<b>17</b>	2,207,289.
	<b>18</b> Grants payable .....		<b>18</b>	
	<b>19</b> Deferred revenue .....		<b>19</b>	
	<b>20</b> Tax-exempt bond liabilities .....		<b>20</b>	
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D .....		<b>21</b>	
	<b>22</b> Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L .....		<b>22</b>	
	<b>23</b> Secured mortgages and notes payable to unrelated third parties .....		<b>23</b>	
	<b>24</b> Unsecured notes and loans payable to unrelated third parties .....	2,298,951.	<b>24</b>	700,974.
	<b>25</b> Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D .....	851,946.	<b>25</b>	765,987.
	<b>26</b> <b>Total liabilities.</b> Add lines 17 through 25 .....	5,197,617.	<b>26</b>	3,674,250.
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117 (ASC 958), check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27 through 29, and lines 33 and 34.</b>			
	<b>27</b> Unrestricted net assets .....	-614,042.	<b>27</b>	80,610.
	<b>28</b> Temporarily restricted net assets .....		<b>28</b>	
	<b>29</b> Permanently restricted net assets .....		<b>29</b>	
	<b>Organizations that do not follow SFAS 117 (ASC 958), check here</b> <input type="checkbox"/> <b>and complete lines 30 through 34.</b>			
	<b>30</b> Capital stock or trust principal, or current funds .....		<b>30</b>	
	<b>31</b> Paid-in or capital surplus, or land, building, or equipment fund .....		<b>31</b>	
	<b>32</b> Retained earnings, endowment, accumulated income, or other funds .....		<b>32</b>	
<b>33</b> Total net assets or fund balances .....	-614,042.	<b>33</b>	80,610.	
<b>34</b> Total liabilities and net assets/fund balances .....	4,583,575.	<b>34</b>	3,754,860.	

**Part XI Reconciliation of Net Assets**

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	36,893,567.
2	Total expenses (must equal Part IX, column (A), line 25)	2	36,190,895.
3	Revenue less expenses. Subtract line 2 from line 1	3	702,672.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	-614,042.
5	Net unrealized gains (losses) on investments	5	-8,020.
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	80,610.

**Part XII Financial Statements and Reporting**

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

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

Form 990 (2015)

**Schedule B**

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

Department of the Treasury  
Internal Revenue Service

**Schedule of Contributors**

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.  
▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No. 1545-0047

**2015**

Name of the organization

GREENPEACE, INC.

Employer identification number

52-1541501

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

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

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

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

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

501(c)(3) taxable private foundation

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

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

**General Rule**

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

**Special Rules**

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

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

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

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

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>1</u>	 <hr/> <hr/> <hr/>	\$ <u>25,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>2</u>	 <hr/> <hr/> <hr/>	\$ <u>5,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>3</u>	 <hr/> <hr/> <hr/>	\$ <u>5,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>4</u>	 <hr/> <hr/> <hr/>	\$ <u>5,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>5</u>	 <hr/> <hr/> <hr/>	\$ <u>20,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>6</u>	 <hr/> <hr/> <hr/>	\$ <u>5,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	<hr/> <hr/> <hr/>	\$ <u>5,100.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
8	<hr/> <hr/> <hr/>	\$ <u>5,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
9	<hr/> <hr/> <hr/>	\$ <u>5,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
10	<hr/> <hr/> <hr/>	\$ <u>10,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
11	<hr/> <hr/> <hr/>	\$ <u>5,135.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
12	<hr/> <hr/> <hr/>	\$ <u>5,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
13	<hr/> <hr/> <hr/>	\$ <u>5,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
14	<hr/> <hr/> <hr/>	\$ <u>10,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
15	<hr/> <hr/> <hr/>	\$ <u>6,049.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
16	<hr/> <hr/> <hr/>	\$ <u>5,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
17	<hr/> <hr/> <hr/>	\$ <u>5,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
18	<hr/> <hr/> <hr/>	\$ <u>5,300.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)



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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
19	<hr/> <hr/> <hr/>	\$ 13,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
20	<hr/> <hr/> <hr/>	\$ 6,542,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
21	<hr/> <hr/> <hr/>	\$ 3,466,926.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<hr/> <hr/> <hr/>	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<hr/> <hr/> <hr/>	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<hr/> <hr/> <hr/>	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

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

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

Name of organization <b>GREENPEACE, INC.</b>	Employer identification number <b>52-1541501</b>
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**Part III** Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) ▶ \$ \_\_\_\_\_  
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2015

Open to Public Inspection

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

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

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include total number at end of year, aggregate value of contributions, grants, and end of year, and two yes/no questions about donor property and grant fund usage.

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

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include purpose of easements, total number and acreage, number of easements on historic structures, and monitoring details.

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

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include reporting requirements for art and historical treasures.

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

	Yes	No
(i) unrelated organizations	3a(i)	
(ii) related organizations	3a(ii)	
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?	3b	

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

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

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		1,452,818.	868,648.	584,170.
d Equipment		989,648.	841,122.	148,526.
e Other		193,380.	90,857.	102,523.
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				835,219.

**Part VII Investments - Other Securities.**

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

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

**Part VIII Investments - Program Related.**

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

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

**Part IX Other Assets.**

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

(a) Description	(b) Book value
(1) DUE FROM STITCHTING GP COUNCIL	396,405.
(2) DUE FROM GP FUND INC	763,475.
(3) DUE FROM OTHER GP AFFILIATES	42,260.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	1,202,140.

**Part X Other Liabilities.**

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) DEFERRED RENT	690,169.
(3) DUE TO OTHER GP AFFILIATES	47,920.
(4) DUE TO STITCHTING GP COUNCIL	27,898.
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	765,987.

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

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

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

<b>1</b>	Total revenue, gains, and other support per audited financial statements	<b>1</b>	36,885,051.
<b>2</b>	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
<b>a</b>	Net unrealized gains (losses) on investments	<b>2a</b>	-8,020.
<b>b</b>	Donated services and use of facilities	<b>2b</b>	
<b>c</b>	Recoveries of prior year grants	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIII.)	<b>2d</b>	
<b>e</b>	Add lines <b>2a</b> through <b>2d</b>	<b>2e</b>	-8,020.
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b>	<b>3</b>	36,893,071.
<b>4</b>	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b	<b>4a</b>	496.
<b>b</b>	Other (Describe in Part XIII.)	<b>4b</b>	
<b>c</b>	Add lines <b>4a</b> and <b>4b</b>	<b>4c</b>	496.
<b>5</b>	Total revenue. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 12.)	<b>5</b>	36,893,567.

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

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

<b>1</b>	Total expenses and losses per audited financial statements	<b>1</b>	36,190,399.
<b>2</b>	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
<b>a</b>	Donated services and use of facilities	<b>2a</b>	
<b>b</b>	Prior year adjustments	<b>2b</b>	
<b>c</b>	Other losses	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIII.)	<b>2d</b>	
<b>e</b>	Add lines <b>2a</b> through <b>2d</b>	<b>2e</b>	0.
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b>	<b>3</b>	36,190,399.
<b>4</b>	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b	<b>4a</b>	496.
<b>b</b>	Other (Describe in Part XIII.)	<b>4b</b>	
<b>c</b>	Add lines <b>4a</b> and <b>4b</b>	<b>4c</b>	496.
<b>5</b>	Total expenses. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 18.)	<b>5</b>	36,190,895.

**Part XIII Supplemental Information.**

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

**PART X, LINE 2:**

THE ORGANIZATION IS RECOGNIZED AS A TAX-EXEMPT ORGANIZATION UNDER SECTION 501(C)(4) OF THE INTERNAL REVENUE CODE, AND IS EXEMPT FROM INCOME TAXES EXCEPT FOR TAXES ON UNRELATED BUSINESS ACTIVITIES. NO TAX EXPENSE IS REFLECTED IN THE ACCOMPANYING FINANCIAL STATEMENTS FOR THE YEARS ENDED DECEMBER 31, 2015 AND 2014, AS THERE WERE NO UNRELATED BUSINESS ACTIVITIES. MANAGEMENT EVALUATED THE ORGANIZATION'S TAX POSITIONS AND CONCLUDED THAT THE ORGANIZATION HAS TAKEN NO UNCERTAIN TAX POSITIONS THAT QUALIFY FOR EITHER RECOGNITION OR DISCLOSURE IN THE ACCOMPANYING FINANCIAL STATEMENTS.











**Part IV Foreign Forms**

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

Schedule F (Form 990) 2015

**Part V Supplemental Information**

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

**PART I, LINE 2:**

SCHEDULE F, PART I, LINE 2 GRANT REQUESTS ARE SUBMITTED IN WRITING AND MUST CONTAIN INFORMATION ABOUT HOW THE RECEIVING ORGANIZATION WILL UTILIZE THE GRANT FUNDS. GRANTS MADE TO ORGANIZATIONS ARE FOR CURRENT ACTIVITIES OR A SPECIFIC EVENT OF THE RECEIVING ORGANIZATION GRANTS ARE MADE BY GREENPEACE INC IN FURTHERANCE OF THE ORGANIZATION'S EXEMPT PURPOSE TO PROMOTE THE PROTECTION AND PRESERVATION OF THE ENVIRONMENT.

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

**Supplemental Information Regarding Fundraising or Gaming Activities**  
Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.  
▶ Attach to Form 990 or Form 990-EZ.  
▶ Information about Schedule G (Form 990 or 990-EZ) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No. 1545-0047

**2015**

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

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

**Part I Fundraising Activities.** Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

- 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.
- a  Mail solicitations
  - b  Internet and email solicitations
  - c  Phone solicitations
  - d  In-person solicitations
  - e  Solicitation of non-government grants
  - f  Solicitation of government grants
  - g  Special fundraising events
- 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?  Yes  No
- b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
SD&A TELESERVICES - 5757 WEST CENTURY BLVD, SUITE 300, LOS	TELEMARKETING		X	471,049.	288,043.	183,005.
DONOR SERVICES GROUP (DSG) - 6715 SUNSET BLVD., LOS	TELEMARKETING AND OTHER DIRECT MARKETING		X	163,833.	116,694.	47,140.
PUBLIC INTEREST COMMUNICATIONS (PIC) - 7700	OUTBOUND TELEMARKETING		X	143,921.	136,283.	7,638.
APPCO GROUP - 40 RECTOR STREET 21ST SUITE 1504, NEW	CANVASSING		X	7,085.	31,013.	-23,928.
ELEVENTY MARKETING GROUP, LLC - 453 SOUTH HIGH STREET,	DATA MODELING COMPANY		X	0.	16,205.	-16,205.
BKV - 3390 PEACHTREE ROAD, 10TH FLOOR, ATLANTA, GA	EMAIL MARKETING		X	0.	72,539.	-72,539.
<b>Total</b>				785,888.	660,777.	125,111.

- 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.
- AL, AK, AZ, AR, CA, CO, CT, DE, FL, GA, HI, ID, IL, IN, IA, KS, KY, LA, ME, MD, MA, MI, MN, MS, MO, MT, NE, NV, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, SD, TN, TX, UT, VT, VA, WA, WV, WI, WY

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

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

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

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

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

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

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

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

Name ▶ \_\_\_\_\_

Address ▶ \_\_\_\_\_

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

Name ▶ \_\_\_\_\_

Address ▶ \_\_\_\_\_

16 Gaming manager information:

Name ▶ \_\_\_\_\_

Gaming manager compensation ▶ \$ \_\_\_\_\_

Description of services provided ▶ \_\_\_\_\_

\_\_\_\_\_

Director/officer       Employee       Independent contractor

17 Mandatory distributions:

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

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

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

(I) NAME OF FUNDRAISER: SD&A TELESERVICES

(I) ADDRESS OF FUNDRAISER:

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

(I) NAME OF FUNDRAISER: DONOR SERVICES GROUP (DSG)

(I) ADDRESS OF FUNDRAISER: 6715 SUNSET BLVD., LOS ANGELES, CA 90028



**Part IV** Supplemental Information (continued)

(I) NAME OF FUNDRAISER: PUBLIC INTEREST COMMUNICATIONS (PIC)

(I) ADDRESS OF FUNDRAISER:

7700 LEESBURG PIKE, STE 301 N, FALLS CHURCH, VA 22043

(I) NAME OF FUNDRAISER: APPCO GROUP

(I) ADDRESS OF FUNDRAISER:

40 RECTOR STREET 21ST SUITE 1504, NEW YORK, NY 10006

(I) NAME OF FUNDRAISER: ELEVENTY MARKETING GROUP, LLC

(I) ADDRESS OF FUNDRAISER:

453 SOUTH HIGH STREET, SUITE 101, AKRON, OH 44311

(I) NAME OF FUNDRAISER: BKV

(I) ADDRESS OF FUNDRAISER:

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

**SCHEDULE I  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

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

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

▶ Attach to Form 990.

▶ Information about Schedule I (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No. 1545-0047

**2015**

Open to Public  
Inspection

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

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

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  Yes  No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
EARTH DAY NETWORK 1616 P ST. NW WASHINGTON DC, DC 20036	13-3798288	C CORPORATION	10,000.	0.			TO SUPPORT PEOPLE'S RALLY FOR CLIMATE JUSTICE
ALIGN 50 BROADWAY SUITE 29 NEW YORK CITY, NY 10004	20-0559291	501(C)(3)	10,000.	0.			TO SUPPORT PEOPLE'S CLIMATE MOVEMENT DAY OF ACTION
GRASSROOTS CLOBAL JUSTICE P.O. BOX 610663 NORTH MIAMI, FL 33261	26-4633127	501(C)(3)	10,000.	0.			SUPPORT FOR COP21 GGJ DELEGATION
COMING CLEAN BOX 370402 WEST HARTFORD, CT 06137	04-3429794	501(C)(3)	10,000.	0.			COALITION TO PREVENT CHEMICAL DISASTERS GRASSROOTS LEADERSHIP AND ORGANIZING
SOCIAL GOOD FUN P.O. BOX 5473 RICHMOND, CA 94805	46-1323531	501(C)(3)	10,000.	0.			GENERAL SUPPORT FOR CDC EDUCATION AND OUTREACH 2015
MIND POWER COLLECTIVE 1435 3RD AVENUE #106 OAKLAND, CA 94606	20-8752553	501(C)(3)	7,000.	0.			BP 5YR COMMEMORATION AND ORGANIZING STIPEND

- 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **6.**
- 3 Enter total number of other organizations listed in the line 1 table **1.**

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

Schedule I (Form 990) (2015)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part 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
THE OTHER 98% LAB P.O. BOX 1434 VASHON, WA 98070	46-3440243	501(C)(3)	16,758.	0.			EMAIL ACQUISITION OBAMA/ARCTIC DRILLING PETITION

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

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

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

PART I, LINE 2:

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

**SCHEDULE J  
(Form 990)**

**Compensation Information**

OMB No. 1545-0047

**2015**

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

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

▶ Attach to Form 990.

▶ Information about Schedule J (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

Name of the organization

**GREENPEACE, INC.**

Employer identification number

**52-1541501**

**Part I Questions Regarding Compensation**

**1a** Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- |  |  |
|--|--|
| <input type="checkbox"/> First-class or charter travel             | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions                     | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees   |
| <input type="checkbox"/> Discretionary spending account            | <input type="checkbox"/> Personal services (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 .....

**2** Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a? .....

**3** Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- |   |   |
|---|---|
| <input type="checkbox"/> Compensation committee                     | <input checked="" type="checkbox"/> Written employment contract                     |
| <input type="checkbox"/> Independent compensation consultant        | <input checked="" type="checkbox"/> Compensation survey or study                    |
| <input checked="" type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

**4** During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment? .....
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan? .....
- c** Participate in, or receive payment from, an equity-based compensation arrangement? .....
- 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), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.**

**5** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization? .....
- b** Any related organization? .....
- If "Yes" to line 5a or 5b, describe in Part III.

**6** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization? .....
- b** Any related organization? .....
- If "Yes" on line 6a or 6b, describe in Part III.

**7** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described on lines 5 and 6? If "Yes," describe in Part III .....

**8** Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III .....

**9** If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)? .....

	Yes	No
<b>1b</b>		
<b>2</b>		
<b>4a</b>		<b>X</b>
<b>4b</b>		<b>X</b>
<b>4c</b>		<b>X</b>
<b>5a</b>		<b>X</b>
<b>5b</b>		<b>X</b>
<b>6a</b>		<b>X</b>
<b>6b</b>		<b>X</b>
<b>7</b>		<b>X</b>
<b>8</b>		<b>X</b>
<b>9</b>		

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

Schedule J (Form 990) 2015

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) BRITT COCANOUR DIRECTOR OF PUBLIC OUTREACH	(i)	152,922.	0.	0.	6,454.	30,383.	189,759.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) NICOLA DAVIES CAMPAIGNS DIRECTOR	(i)	160,149.	0.	0.	9,674.	7,864.	177,687.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) MICHAEL SILBERMAN GLOBAL DIRECTOR OF DIGITAL INNOVATIO	(i)	160,031.	0.	0.	9,088.	8,191.	177,310.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) MATTHEW DAGGETT GLOBAL CAMPAIGN LEADER	(i)	152,103.	0.	0.	9,661.	34,932.	196,696.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) DAVID J BARRE INTERIM CAMPAIGNS DIRECTOR	(i)	137,009.	0.	0.	8,326.	9,181.	154,516.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							









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

Department of the Treasury  
Internal Revenue Service

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

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

▶ Attach to Form 990 or 990-EZ.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No. 1545-0047

**2015**

Open to Public  
Inspection

Name of the organization

GREENPEACE, INC.

Employer identification number

52-1541501

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

OUR ONLINE VOLUNTEER ORGANIZING PLATFORM GREENWIRE CELEBRATED ITS FIRST ANNIVERSARY. SINCE ITS INCEPTION, GREENWIRE HAS GROWN TO 8,000 ACTIVE PARTICIPANTS FROM ACROSS THE COUNTRY, FACILITATED 2,000 INTRODUCTIONS BETWEEN INTERESTED VOLUNTEERS, AND PROVIDED COMMUNITY SPACE FOR VOLUNTEERS TO WORK TOGETHER ON ISSUES SUCH AS THE ARCTIC AND TUNA.

GPUS FORMALLY ADOPTED AN INDIGENOUS PEOPLES POLICY EFFECTIVE JUNE 1, 2015. THE POLICY DEMONSTRATES OUR INTENTION TO IMPROVE THE WAY WE INTERACT AND WORK WITH INDIGENOUS COMMUNITIES.

IN THE LEAD UP TO POPE FRANCIS' HISTORIC VISIT TO THE U.S., GPUS COLLABORATED WITH A NETWORK OF U.S. FAITH BASED ORGANIZATIONS, BUILDING RELATIONSHIPS THAT WILL BE IMPORTANT FOR ACHIEVING LONG TERM SUCCESS ON OUR CAMPAIGNS.

THE CREATION OF OUR MOVEMENT SUPPORT HUB MARKED THE INVESTMENT IN OUTREACH AND EDUCATION OF MULTIPLE OF INDIVIDUALS AND COMMUNITIES WITH SMALL GRANTS AND TRAININGS.

WE ALSO LAUNCHED GREENNET OUR VERSION OF FACEBOOK FOR GREEN ACTIVIST AROUND THE NATION WHO ARE INTERESTED IN ACTIVATING THEIR COMMUNITIES. OUR NATIONAL ACTIVIST NETWORK ENGAGES AND EDUCATES THESE ACTIVISTS ON OUR CAMPAIGNS AND LOCAL CAMPAIGNS.

Name of the organization

GREENPEACE, INC.

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52-1541501

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

THE REGION FROM OIL DRILLING AND OTHER INDUSTRIAL EXPLOITATION. AT THE SAME TIME, GREENPEACE IS BUILDING DEMAND FOR CLEAN ENERGY AND FOR U.S. CORPORATE AND GOVERNMENT LEADERS TO CHAMPION A CLEAN ENERGY TRANSITION AT HOME AND ABROAD.

2015 GREENPEACE INC CLIMATE (ENERGY AND ARCTIC) CAMPAIGN HIGHLIGHTS

INCLUDE:

1. APPLE ANNOUNCED AN \$850 MILLION SOLAR DEAL THAT WILL ULTIMATELY DELIVER 280 MW OF CLEAN ENERGY TO THE COMPANY'S CALIFORNIA HEADQUARTERS, DATA CENTER AND RETAIL OPERATIONS, MARKING THE LARGEST COMMERCIAL SOLAR PURCHASE AGREEMENT EVER MADE. LATER, APPLE ANNOUNCED IT PLANS TO BUILD TWO LARGE SOLAR PROJECTS IN THE SICHUAN PROVINCE OF CHINA.

2. GOOGLE ANNOUNCED A \$750 MILLION FUND TO FINANCE ROOFTOP SOLAR PROJECTS IN PARTNERSHIP WITH SOLARCITY, MARKING GOOGLE'S LARGEST RE INVESTMENT TO DATE AND THE LARGEST FUND EVER CREATED FOR RESIDENTIAL SOLAR. GOOGLE ALSO ANNOUNCED A 61 MW SOLAR DEAL IN NORTH CAROLINA, MAKING IT THE FIRST COMPANY TO USE DUKE ENERGY'S GREEN SOURCE RIDER PROGRAM.

3. GP RECEIVED AN EFFIE AWARD FOR POSITIVE CHANGE NORTH AMERICA FOR THE CLEAN OUR CLOUD CAMPAIGN.

4. #PADDLEINSEATTLE - NEARLY 2000 PEOPLE IN ALL TOOK TO THE WATER IN MAY TO PROTEST SHELL'S ARCTIC DRILLING PLANS. PARTICIPANTS INCLUDED 500

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"KAYACTIVISTS," SEVERAL INDIGENOUS 'CANOE FAMILIES', HOUSEBOAT COMMUNITIES AND A GIANT MUSICAL SOLAR POWERED BARGE KNOWN AS 'THE PEOPLE'S PLATFORM.' MEDIA COVERAGE WAS EXTENSIVE.

5. ON JULY 29TH, KAYAKTIVISTS AND GPUS CLIMBERS HANGING FROM THE ST JOHN'S BRIDGE IN PORTLAND, OR PREVENTED SHELL'S ICE BREAKER FROM DEPARTING THE HARBOR FOR FORTY HOURS. MEDIA COVERAGE WAS EXTENSIVE, AND INTEREST IN GREENPEACE VISUALS FROM THE ACTION WAS ALSO STRONG. ONLINE, THE ACTION WAS A HUGE SENSATION: FACEBOOK POSTS OF THE ACTION WERE SEEN BY OVER 1.6 MILLION.

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

2015 GREENPEACE INC OCEAN CAMPAIGN HIGHLIGHTS INCLUDE:

1. IN JANUARY, THE UN COMMITTED TO DEVELOPING A NEW, LEGALLY BINDING AGREEMENT TO PROTECT MARINE LIFE IN THE HIGH SEAS. PRESSURE FROM GPUS WAS KEY FOR SHORING UP GOVERNMENT AND NGO ALLIES' SUPPORT FOR UN ACTION TO ESTABLISH A GLOBAL NETWORK OF MARINE RESERVES.

2. 2 OF 18 GPUS'S FIRST TUNA GUIDE, WHICH RANKS 14 WELL -KNOWN CANNED TUNA BRANDS, WAS IMMENSELY SUCCESSFUL ONLINE AND GENERATED A SIGNIFICANT AMOUNT OF MEDIA ATTENTION. THE MEDIA ATTENTION HELPED GAIN GPUS LEVERAGE IN NEGOTIATING CHANGES TO THE INDUSTRY FOR THE ENVIRONMENT AND WORKERS.

3. THE ASSOCIATED PRESS RAN A DEVASTATING STORY ABOUT SLAVERY AT SEA, "AP INVESTIGATION: ARE SLAVES CATCHING THE FISH YOU BUY?" DIRECTLY NAMING THAI UNION, OWNER OF GPUS TARGET CHICKEN OF THE SEA. A FOLLOW UP

Name of the organization

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AP INVESTIGATION AGAIN LINKED THAI UNION WITH FORCED LABOR AND HORRIFIC WORKING CONDITIONS IN THAILAND.

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

FORESTS - GREENPEACE IS CAMPAIGNING FOR ZERO DEFORESTATION IN THE WORLD'S ANCIENT FORESTS. AS MUCH AS 80% OF THE WORLD'S FORESTS HAVE BEEN DEGRADED OR DESTROYED. ANCIENT FORESTS ARE HOME TO TWO-THIRDS OF ALL PLANT AND ANIMAL SPECIES FOUND ON LAND, AND MILLIONS OF PEOPLE RELY ON THEM FOR SURVIVAL. FORESTS ALSO STORE VAST AMOUNTS OF CARBON IN THEIR TREES AND SOIL, WHICH IS RELEASED INTO THE ATMOSPHERE WHEN THEY ARE BURNED OR CLEARED. CURRENTLY, DEFORESTATION IS RESPONSIBLE FOR 10-20% OF GLOBAL GREENHOUSE GAS EMISSIONS, SECOND ONLY TO THE FOSSIL FUEL SECTOR. GREENPEACE U.S. IS SECURING ZERO DEFORESTATION COMMITMENTS FROM INFLUENTIAL U.S.-BASED COMPANIES TO RID THEIR SUPPLY CHAINS OF DESTRUCTIVELY HARVESTED TROPICAL FOREST AND AGRICULTURAL PRODUCTS, AND TO SUPPORT POLITICAL SOLUTIONS THAT WILL PROVIDE LONG-TERM TROPICAL FORESTS PROTECTION.

2015 GREENPEACE INC FOREST CAMPAIGN HIGHLIGHTS INCLUDE:

1. 3M (THE FORTUNE 500 MAKER OF POST IT NOTES) FINALIZED A GLOBAL PAPER SOURCING POLICY THAT HAS STRONG STANDARDS TO PROTECT HIGH CONSERVATION VALUE AND HIGH CARBON STOCK FORESTS, ENSURE WORKERS' RIGHTS, AND SUPPORT THE FREE PRIOR AND INFORMED CONSENT OF INDIGENOUS PEOPLES. GPUS COLLABORATED WITH ALLIES AT FORESTETHICS TO DELIVER THIS WIN. EXPENSES \$ 3,198,233. INCLUDING GRANTS OF \$ 1,001. REVENUE \$ 0.

Name of the organization <b>GREENPEACE, INC.</b>	Employer identification number <b>52-1541501</b>
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TOXICS - GREENPEACE IS CAMPAIGNING FOR ZERO DISCHARGE OF TOXIC CHEMICALS IN THE GLOBAL SOUTH, AND FOR SAFER PROCESSES AT HIGH-RISK CHEMICAL FACILITIES IN THE U.S. TEXTILE FACTORIES DUMP TOXIC CHEMICALS IN LOCAL WATERWAYS ACROSS THE GLOBAL SOUTH. MANY OF THESE CHEMICALS ARE HAZARDOUS AT VERY LOW LEVELS AND BUILD UP IN THE ENVIRONMENT OVER TIME. IN THE U.S., MORE THAN 470 CHEMICAL FACILITIES PUT THE HEALTH OF OVER 100 MILLION PEOPLE IN DANGER SHOULD ACCIDENTS OR TERRORIST ATTACKS OCCUR. GREENPEACE U.S. IS CALLING FOR ZERO DISCHARGE COMMITMENTS FROM U.S. APPAREL COMPANIES TO RID TOXICS FROM THEIR SUPPLY CHAINS TO PREVENT THESE CHEMICALS FROM ENTERING WATERWAYS OF THE GLOBAL SOUTH. TO PROTECT U.S. COMMUNITIES FROM CHEMICAL DISASTERS, GREENPEACE U.S. IS WORKING WITH A DIVERSE COALITION OF ENVIRONMENTAL JUSTICE, PUBLIC HEALTH AND OTHER GROUPS TO PERSUADE THE OBAMA ADMINISTRATION TO REQUIRE HIGH-RISK CHEMICAL FACILITIES TO SWITCH TO INHERENTLY SAFER PROCESSES.

2015 GREENPEACE INC TOXICS CAMPAIGN HIGHLIGHTS INCLUDE:

1. 2015 ACTIVITIES BEGAN IN FEBRUARY WITH AN ALL-DAY PLANNING MEETING OF THE COALITION TO PREVENT CHEMICAL DISASTERS WITH ALLIES FROM AROUND THE U.S. IN WASHINGTON, DC. THIS WAS PLANNED ALONG WITH COALITION MEETINGS WITH THE WHITE HOUSE AND EPA. IN MARCH THE COALITION ISSUED A LETTER TO PRESIDENT OBAMA FROM OVER 100 GROUPS URGING HIM TO DIRECT THE EPA TO ISSUE NEW CHEMICAL PLANT SAFETY RULES EARLY IN 2015.

2. THROUGHOUT THE YEAR THE COALITION HAD MAJOR RELEASES ON SIGNIFICANT DATES SUCH AS THE ANNIVERSARY OF THE WEST, TEXAS DISASTER, THE ANNIVERSARY OF OBAMA'S EXECUTIVE ORDER CALLING FOR NEW REGULATIONS.

Name of the organization

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3. IN JUNE THE EPA ISSUED AN "ALERT" TO INDUSTRY DESCRIBING HOW THE USE OF INHERENTLY SAFER TECHNOLOGIES (IST) WERE THE BEST WAY TO PREVENT CHEMICAL DISASTERS. THE COALITION ISSUED A RESPONSE CRITIQUING THE VOLUNTARY NATURE OF THE ALERT.

4. IN JULY THE COALITION REQUESTED A MEETING WITH EPA ADMINISTRATOR GINA MCCARTHY TO DISCUSS ISSUING NEW REGULATIONS.

5. IN OCTOBER THE COALITION RELEASED A NATIONAL POLL SHOWING A MAJORITY OF REPUBLICAN AND DEMOCRATIC LIKELY VOTERS SUPPORT NEW FEDERAL REQUIREMENTS ON CHEMICAL FACILITIES TO USE IST TO PREVENT FUTURE DISASTERS. THE COALITION SENT THE POLL TO THE PRESIDENT SIGNED BY OVER 100 ORGANIZATIONS.

6. ON OCTOBER 13TH GINA MCCARTHY AGREED TO MEET WITH THE COALITION, HOWEVER, THE MEETING WAS VERY DISAPPOINTING, BECAUSE SHE SAID THE NEW RULE WOULD NOT REQUIRE CHEMICAL PLANTS TO USE SAFER ALTERNATIVES (IST) BUT MIGHT REQUIRE THEM TO EVALUATE SAFER ALTERNATIVES. THE COALITION RESPONDED WITH A LETTER REMINDING HER THAT THE 2009 OBAMA ADMINISTRATION PRINCIPLES ON CHEMICAL PLANT SAFETY INCLUDED REQUIRING IST WHEREVER FEASIBLE.

7. IN NOVEMBER, THE EPA BEGAN A REQUIRED SMALL BUSINESS REVIEW OF THE PROPOSED RULE WHICH WAS LEAKED IN DECEMBER. THIS LEAK GAVE EVERYONE A CLUE TO WHAT WOULD BE IN THE PROPOSED RULE IN EARLY 2016. THIS LEAK ALSO INFORMED OUR PLAN FOR THE RELEASE OF A REPORT ON CHLORINE BLEACH PLANTS, THE HIGHEST RISK PLANTS IN THE U.S. THE EPA WAS CONSIDERING EXEMPTING ALMOST HALF OF THESE PLANTS FROM REQUIREMENTS TO EVALUATE SAFER ALTERNATIVES (IST).

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GREENPEACE'S ROLE IN THE COALITION HAS CONSISTENTLY BEEN TO PROVIDE STRATEGIC LEADERSHIP ON POLITICAL AND MEDIA WORK AND TECHNICAL KNOWLEDGE OF THE INDUSTRY. IN ADDITION WE MAINTAIN A COALITION WEB SITE AT: [HTTPS://PREVENTCHEMICALDISASTERS.ORG/PRESS/PRESS-RELEASE/](https://preventchemicaldisasters.org/press/press-release/) EXPENSES \$ 208,798. INCLUDING GRANTS OF \$ 253. REVENUE \$ 0.

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

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

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

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

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

THE 990 IS PREPARED BY AN INDEPENDENT PUBLIC ACCOUNTING FIRM AND REVIEWED BY THE ORGANIZATION'S MANAGEMENT TEAM. THE 990 IS THEN REVIEWED AND APPROVED BY THE FINANCE/AUDIT COMMITTEE. AFTER THIS APPROVAL, THE 990 IS PROVIDED TO THE FULL BOARD PRIOR TO FILING WITH THE INTERNAL REVENUE SERVICE. THESE VARIOUS LEVELS OF REVIEW ENSURE THE INFORMATION FILED IS COMPLETE, ACCURATE, AND IN COMPLIANCE WITH REGULATIONS.

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

THE ORGANIZATION'S CONFLICT OF INTEREST POLICY IS REVIEWED ANNUALLY BY EACH MEMBER OF THE BOARD OF DIRECTORS. ON AN ANNUAL BASIS, EACH DIRECTOR ALSO COMPLETES A DISCLOSURE FORM IDENTIFYING ANY RELATIONSHIPS, POSITIONS OR



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CIRCUMSTANCES IN WHICH HE OR SHE BELIEVES COULD CONTRIBUTE TO A CONFLICT. FOLLOWING FULL DISCLOSURE OF A POSSIBLE CONFLICT ON INTEREST, THE BOARD OF DIRECTORS SHALL DETERMINE WHETHER A CONFLICT OF INTEREST EXISTS, AND, IF SO, THE BOARD TAKES ANY ACTION DEEMED NECESSARY TO ASSESS THE CONFLICT AND PROTECT THE ORGANIZATION'S BEST INTERESTS.

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

COMPENSATION FOR THE EXECUTIVE DIRECTOR IS INDEPENDANTLY REVIEWED AND BASED ON ANALYSIS OF COMPARABLE DATA OBTAINED FROM INDUSTRY RESOURCES, PUBLICLY DISCLOSED 990S, AND PEER ORGANIZATIONS. REVIEW AND APPROVALS ARE DOCUMENTED BY THE BOARD OF DIRECTORS OR DELEGATED COMMITTEES. A SIMILAR PROCEDURE IS FOLLOWED FOR ALL OTHER OFFICERS AND KEY EMPLOYEES.

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

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

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

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

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

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

Name of the organization <b>GREENPEACE, INC.</b>	Employer identification number <b>52-1541501</b>
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FORM 990, PART XII, LINE 2C:

GREENPEACE INC. HAS AN AUDIT COMMITTEE THAT ASSUMES RESPONSIBILITY FOR OVERSIGHT OF THE AUDIT OF ITS FINANCIAL STATEMENTS AND SELECTION OF AN INDEPENDENT ACCOUNTANT. THE AUDIT COMMITTEE REVIEWS AND APPROVES THE AUDIT REPORT AND FINANCIAL STATEMENTS AND RECOMMENDS THEIR ACCEPTANCE TO THE FULL BOARD.