Internal Revenue Service

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

benefit trust or private foundation)

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

OMB No 1545-0047

AF	For the	2010 calendar year, or tax year beginning and end	ding						
В	Check If	C Name of organization		D Employer identific	cation number				
a	applicable								
	Addres	GLOBAL FOOTPRINT NETWORK, INC.							
	Name change	Doing Business As		73-1	672982				
	Initial return	Number and street (or P 0 box if mail is not delivered to street address) Roo	om/suite	E Telephone numbe	r				
	Termin ated	312 CLAY STREET, SUITE 300		510-839-8879					
	Ameno return	City or town, state or country, and ZIP + 4		G Gross receipts \$	2,291,755.				
	Applic tion	OARLAND, CA 94007		H(a) is this a group re	eturn				
	pendir	F Name and address of principal officer: SUSAN BURNS		for affiliates?	Yes X No				
		312 CLAY STREET, SUITE 300, OAKLAND, CA	946	H(b) Are all affiliates inc	luded? Yes No				
		empt status: X 501(c)(3)	527	If "No," attach a	list. (see instructions)				
		e: ► WWW.GLOBALFOOTPRINTNETWORK.ORG	,	H(c) Group exemptio					
		organization X Corporation	L Year o	of formation 2003 N	A State of legal domicile CA				
P	art F	Summary							
9	1	Briefly describe the organization's mission or most significant activities: ${\color{blue} { ext{SE}} \ \ ext{SC}}$	CHEDU	LE O	 				
Governance	١ .								
er F	1	Check this box I if the organization discontinued its operations or disposed	d of more	1 1	_				
ő		Number of voting members of the governing body (Part VI, line 1a)		3	8				
<u>مح</u>		Number of independent voting members of the governing body (Part VI, line 1b)		4	6				
Ĕ.		Total number of individuals employed in calendar year 2010 (Part V, line 2a)		5	28				
Activities &		Total number of volunteers (estimate if necessary) Et\/FD		6	6				
¥		Total unrelated business revenue from Part-VIII, column (C), line 12		7a	0.				
_	<u> </u>	Net unrelated business taxable income from Form 990-T, line 34		7b					
	۵	1 - 2011 0		Prior Year 1,290,604.	Current Year				
Revenue		Contributions and grants (Part VIII, line 1th)		870,890.	1,060,635. 1,175,300.				
. ē	10	Program service revenue (Part VIII, line 2g) GDEN JT		1,306.	903.				
ď		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		<3,575.					
7		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		2,159,225.	2,291,755.				
ζ_		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.				
Ę Ž		Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.				
		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		1,251,919.	1,365,513.				
ıse	1	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.				
Expenses		Total fundraising expenses (Part IX, column (D), line 25) > 229,648	3.						
Ω	1	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	_	859,904.	793,329.				
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	-	2,111,823.	2,158,842.				
	19	Revenue less expenses. Subtract line 18 from line 12		47,402.	132,913.				
Net Assets or Fund Balances			Bed	inning of Current Year	End of Year				
sets	20	Total assets (Part X, line 16)		1,598,959.	1,494,188.				
d As	21	Total liabilities (Part X, line 26)		364,053.	130,855.				
		Net assets or fund balances. Subtract line 21 from line 20		1,234,906.	1,363,333.				
	art II	Signature Block							
Und	er pena	lties of perjury (I declare that I have examined this return, including accompanying schedules an	nd stateme	nts, and to the best of m	y knowledge and belief, it is				
true	, correc	t, and complete (peclaration of preparer (other than officer) is based on all information of which	preparer	has any knowledge					
		Signature of officer			<u> </u>				
Sig									
Her	e	SUSAN BURNS, CEO							
		Type or print name and title							
D-1-		Print/Type preparer's name Preparer's sign							
Paid		Patricia A. Wintrooth Patricia							
	narer Only	Firm's name PATRICIA A. WINTROATH, (

WALNUT CREEK, CA 94596

May the IRS discuss this return with the preparer shown above? (see instru 032001 02-22-11 LHA For Paperwork Reduction Act Notice, see the see

Form	n 990 (2010) GLOBAL FOOTPRINT NETWORK, INC. 73-1	L67298 <u>2</u>	Page 2
Par	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response to any question in this Part III		X
1	Briefly describe the organization's mission: TO HELP ORGANIZATIONS AROUND THE WORLD TRACK THE EXTENT OF S	SOCIETY'	C
	ENVIRONMENTAL IMPACT THROUGH THE USE OF A RESOURCE MANAGEMEN		<u> </u>
	KNOWN AS THE "ECOLOGICAL FOOTPRINT," THAT MEASURES HOW MUCH	•	<u>n</u>
		IT	
2	Did the organization undertake any significant program services during the year which were not listed on		
_	the prior Form 990 or 990-EZ?	Yes	X No
	If "Yes," describe these new services on Schedule O.		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes	X No
	If "Yes," describe these changes on Schedule O.		
4	Describe the exempt purpose achievements for each of the organization's three largest program services by expenses.		
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants are	nd	
	allocations to others, the total expenses, and revenue, if any, for each program service reported.		
4a	/ // // //		<u>928.</u>)
	RESEARCH AND STANDARDS - THE GLOBAL FOOTPRINT NETWORK (GFN)	SERVES .	
	POWERFUL LEVER FOR FOSTERING SUSTAINABILITY. THE ORGANIZATI		IDES
	A CLEARLY DEFINED AND SCIENTIFICALLY VALID WAY OF MEASURING		
	DEMAND ON A PLANET WITH LIMITED RESOURCES. GFN WORKS COLLAR		
	•	TRANSPAR	
		SE STAND	ARDS
	ARE REVIEWED AND APPROVED BY A SCIENTIFIC REVIEW COMMITTEE.		
			
			<u>-</u>
	· · · · · · · · · · · · · · · · · · ·		
4b	(Code:) (Expenses \$528, 300 • including grants of \$) (Revenue \$	318,	529.)
	OUTREACH & COMMUNITY BUILDING - GLOBAL FOOTPRINT NETWORK (GE		
	TOGETHER THE KEY ORGANIZATIONS AND INDIVIDUALS WHO WORK WITH	I THE	
	ECOLOGICAL FOOTPRINT. GFN PROVIDES A FORUM WHERE PRACTITION	IERS AND	
	SCIENTISTS FROM ACADEMIA, GOVERNMENT, BUSINESS AND NGO'S CAN		HEIR_
	EXPERIENCE, SHARE RESEARCH FINDINGS, AND CREATE NEW APPLICAT		THE
	AREA OF RESOURCE ACCOUNTING. GFN USES ITS WEBSITE, PUBLIC I		· * - · · · · ·
	MEDIA APPEARANCES AND PUBLICATIONS TO PROMOTE THE ECOLOGICAL	_ FOOTPR	INT
	AND SHARE FINDINGS. IN 2010, GFN EXPANDED ITS WORK WITH A	100 / C AN	<u> </u>
	RAPIDLY-EXPANDING NETWORK OF OTHER SUSTAINABILITY-ORIENTED INCOMPANIES-NOW NUMBERING CLOSE TO 100 - TO PROMOTE THE INNOVA		ע
	INGENUITY AND RE-VISIONING NEEDED TO ACHIEVE A SUSTAINABLE I	 _	
	FUTURE.	TOPIAIN	
40	(Code:) (Expenses \$561,319 • including grants of \$) (Revenue \$	663.	741. \
	STRATEGIC PROJECTS. IN 2010, GLOBAL FOOTPRINT NETWORK ENGAGE	ED WITH	· - /
	MORE THAN A DOZEN NATIONS TO INFORM THEM ABOUT THEIR SPECIF		
	TRENDS AND ENCOURAGE THEM TO ADOPT THE FOOTPRINT AS AN INDIC	CATOR.	IT
	PROVIDED SUPPORT FOR GOVERNMENT INITIATIVES IN ECUADOR AND C	CALGARY	
	WHERE OFFICIALS, FOR THE FIRST TIME, COMMITTED TO SPECIFIC H	COLOGIC	AL
	FOOTPRINT TARGETS. IN COLLABORATION WITH GOVERNMENT AND NGO) PARTNE	RS,
	GFN BEGAN BUILDING NEW TOOLS TO APPLY FOOTPRINT DATA FOR TES	STING PO	LICY
	CHOICES.		
4d	Other program services. (Describe in Schedule O.)		
_	(Expenses \$ Including grants of \$) (Revenue \$)	•	
<u>4e</u>	Total program service expenses ► 1,650,938.		

032002 12-21-10

Form **990** (2010)

Part IV Checklist of Required Schedules

•	,		Yes	No_
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?	_	v	
_	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	3		х
	public office? If "Yes," complete Schedule C, Part I	-	_	
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	-	-	
•	similar amounts as defined in Revenue Procedure 98-197 If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			_
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide			
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments?			
	If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,		17	
	Part VI	11a	Х	
Ь	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	446		х
_	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		
С	Did the organization report an amount for investments · program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in	110		
Ū	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		X_
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a		14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	4.44	х	1
15	and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV	14b	_^_	\vdash
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			 -
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	<u> </u>	X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that			
	operate one or more hospitals must attach audited financial statements (see instructions)	20b	<u> </u>	
		Form	990 ((2010)

032003 12-21-10

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

Page 5

Par				_
•	Check if Schedule O contains a response to any question in this Part V			<u>ا با</u>
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming		J.	1
_	(gambling) winnings to prize winners?	1c	X	ļ
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 28			
	, , , , , , , , , , , , , , , , , , , ,		Х	ĺ
В	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Λ	
22	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> . (see instructions) Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	•	х
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		-
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	50		
70	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Х
b	If "Yes," enter the name of the foreign country:			
-	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	ĺ .	X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X
þ	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	ļ	
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			.,
	to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d	_		v
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	 	X
9 h	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7g 7h	-	
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting	./		
•	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8	•	
9	Sponsoring organizations maintaining donor advised funds.	,		
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders 11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)			1
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		ļ
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	12-	-	
a	Is the organization licensed to issue qualified health plans in more than one state?	13a	 	<u> </u>
.	Note. See the instructions for additional information the organization must report on Schedule O.			
U	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
_	Did the organization receive any payments for indoor tanning services during the tax year?	14a	<u> </u>	X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
			990	(2010)

GLOBAL FOOTPRINT NETWORK, INC. 73-1672982 Form 990 (2010) 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 to any question in this Part VI Section A. Governing Body and Management 1a Enter the number of voting members of the governing body at the end of the tax year 1a b Enter the number of voting members included in line 1a, above, who are independent 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X officer, director, trustee, or key employee? 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? 3 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets? 5 6 Does the organization have members or stockholders? 6 7a Does the organization have members, stockholders, or other persons who may elect one or more members of the X governing body? 7a X b Are any decisions of the governing body subject to approval by members, stockholders, or other persons? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? 8a **b** Each committee with authority to act on behalf of the governing body? 8ь 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 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code) Yes No 10a 10a Does the organization have local chapters, branches, or affiliates? b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization? 10b Х 11a Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990. X 12a 12a Does the organization have a written conflict of interest policy? If "No," go to line 13 b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise X 12b c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe Х in Schedule O how this is done 12c X 13 Does the organization have a written whistleblower policy? 13 Х 14 Does the organization have a written document retention and destruction policy? 14 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official 15a X b Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a X taxable entity during the year? 16a b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken 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 ▶CA 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply. ___ Own website X Another's website X Upon request 19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: EMILY DANIEL - 510-839-8879

032006 12-21-10 Form 990 (2010)

312 CLAY STREET, SUITE 300, OAKLAND,

94607

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

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

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

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

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

(A)	(B)			(0				(D)	(E)	(F)
Name and Title	Average			Pos				Reportable	Reportable	Estimated
	hours per		heck all that apply)				ly)	compensation	compensation	amount of
	week (describe	director						from the	from related organizations	other compensation
	hours for	5	8			afed		organization	(W-2/1099-MISC)	from the
	related	uste	arst		88	gens		(W-2/1099-MISC)	,	organization
	organizations	Individual trustee	Institutional trustae	_	ρĺ	st co	*			and related
	In Schedule O)	India.	Instit	Officer	Кеу епріоуее	Highest compensated employee	Form			organizations
SUSAN J. BURNS		-							-	
CEO/DIRECTOR	40.00	X			X			73,667.	0.	2,400
MATHIS WACKERNAGEL						ļ				
EXECUTIVE DIRECTOR/PRESIDE	40.00	X	_	Х	X			79,760.	0.	2,400
ANDRE HOFFMANN						i			_	_
CHAIRMAN OF THE BOARD	1.00	X	<u> </u>	X	<u> </u>	_		0.	0.	0.
KRISTIN COBBLE	1							_		
SECRETARY/TREASURER	1.00	X		X				0.	0.	0,
RAZAN AL MUBARAK	1 00	,,							_	
DIRECTOR	1.00	X				├—		0.	0.	0.
MICHAEL SAALFELD	1.00	v						0.	0.	0.
DIRECTOR	1.00	^	_	_		\vdash		0.	· ·	· ·
HAROLDO MATTOS DE LEMOS DIRECTOR	1.00	x						0.	0.	0.
EVON Z. VOGT	1.00	1				╁╾				
DIRECTOR	1.00	X						0.	0.	ο.
TRACY DOTEN						Г				
COO	40.00					X		125,340.	0.	0.
JENNIFER MITCHELL										
VP EXTERNAL AFFAIRS	40.00					X		110,333.	0.	2,400
	<u> </u>	ļ			_	1				
		ļ				<u> </u>				
				-						
							_			
			L.,	1		<u> </u>	L			L

Form **990** (2010)

ref	T VII Section A. Officers, Directors, T		nplo	yee			High	<u>est</u>	T				
,	(A)	(B))			(D)	(E)		(F)	
	Name and title	Average	١,,		Pos			L.A	Reportable	Reportable	_	stimat	
		hours per week	(CI	neck	all	ınat	app	ıy)	compensation	compensation	a	mount	
		(describe	₫						from	from related	ŀ	other	
		hours for) B				, e		the	organizations		npensa	
		related	8	25			캻		organization (W-2/1099-MISC)	(W-2/1099-MISC)		from th	
		organizations	ETS!	멸		8	E S		(44-2/1099-141130)		1	ganızat nd relat	
		ın Schedule	Individual trustee or director	Institutional frustee	E	Key employee	Highest compensated employee	žį.				anızat	
		O)	Ę	望	Officer	ş.	돌통	Former			"	,	
			-	\vdash			\vdash				 		
						┝	├				+		
							┼				+		
							<u> </u>				1		
								L					
							1	$\overline{}$					
			ŀ	1		ŀ		ŀ					
				-		-	+				+		
				├─	\vdash	\vdash	\vdash						
							<u>Ļ</u>	<u> </u>	200 100		+	7 2	^^
	Sub-total								389,100.	0		1,2	00.
C	Total from continuation sheets to Part	VII, Section A							0.	0			0.
d	Total (add lines 1b and 1c)			,			<u> </u>		389,100.	0	•	7,2	00.
2	Total number of individuals (including but	t not limited to th	ose	liste	ed al	bov	e) wł	no re	eceived more than \$100	,000 in reportable			
	compensation from the organization												2
												Yes	No
3	Did the organization list any former office	er, director or tru	stee	, ke	y em	plo	yee,	or h	nighest compensated er	nployee on		1	
	line 1a? If "Yes," complete Schedule J for						•				3	ĺ	X
4	For any individual listed on line 1a, is the		le co	amo	ensa	atior	n and	to b	her compensation from	the organization			
	and related organizations greater than \$1	-							•	o. gaa	4		Х
5	Did any person listed on line 1a receive of			-						dual for services			
	rendered to the organization? If "Yes," co							CIGI	ed organization or main	dual for services	5	Ì	X
Sec	tion B. Independent Contractors	nnpiete Scheduk	901	UI S	JCH	per	SUII						
			J		-4 -					\$400,000 of a second			
1	Complete this table for your five highest of the organization. NONE	compensated in	rebe	Hue	iii C	Ont	racio	NS I	mat received more than	a rou, ooo or compe	isation	Irom	
								1					
	(A) Name and busine:	ee addreee							(B) Description of s	envices	Comp	C)	'n
	Name and busine.	33 8001633						-1	Description of s	ervices			<i>/</i> 11
								_					
		•											
2	Total number of independent contractors	(including but a	ot le	mite	d +^	tho	ا مو	etec	t above) who received ~	ore than			
-			J. III		٠		0	3100	a above, who received it	iore man			
	\$100,000 in compensation from the orga	mzation -					<u> </u>			<u> </u>		000	0010
											Form	990 (2010)

	rt Vi	III Statement of Rever	iue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	•	 a Federated campaigns b Membership dues c Fundraising events d Related organizations e Government grants (contribut f All other contributions, gifts, gran similar amounts not included abo 	ts, and	060,635.				
i d		9 Noncash contributions included in lines	: 1a-1f \$	194.	1 060 635			
5		h Total. Add lines 1a-1f			1,060,635.			
	2 8	a SERVICE FEES		Business Code 541900	904,854.	904,854.		
Š		b EVENTS & ADMISS	TONS	541900	119,793.		 	
Ser		c HONORARIA		541900	91,973.		•	
e a		d REIMBURSED EXPE	INSES	541900	34,860.			
Program Service Revenue		e LICENSE FEES		541900	23,820.	23,820.		
ا ية	1	f All other program service reve	enue		-			
	•	g Total. Add lines 2a-2f		>	1,175,300.			
	3	Investment income (including other similar amounts)	,	•	903.			903.
	4	Income from investment of ta	x-exempt bond p	proceeds	4 010			4 010
	5	Royalties	0.5.4	P	4,019.			4,019.
		a Gross Rentsb Less: rental expensesc Rental income or (loss)	(i) Real	(II) Personal				
		d Net rental income or (loss)		•				
	7 8	a Gross amount from sales of	(i) Securities	(II) Other				
	1	assets other than inventory b Less: cost or other basis and sales expenses						
	•	c Gain or (loss)						
	•	d Net gain or (loss)		<u> </u>				
venue	8 8	a Gross income from fundraisin including \$	of					
Other Revenu		contributions reported on line Part IV, line 18 b Less: direct expenses	a (1c). See a b					
0		c Net income or (loss) from fund		•	1		•	
		a Gross income from gaming ac Part IV, line 19	-					
	1	b Less: direct expenses	b					
	•	c Net income or (loss) from gam	ning activities	<u> </u>				
	10 a	a Gross sales of inventory, less	returns					
		and allowances	а					
		b Less: cost of goods sold	b					
		c Net income or (loss) from sale		<u>▶</u>				
	44	Miscellaneous Revenu	ie	Business Code 541900		60 052		
	11 8	b EXCHANGE RATE O	ZATNI/TOS	541900	68,053.	68,053. > <17,155.	•	<u> </u>
	'	c EXCHANGE RATE C		341500	11,133.	111177.		
	'	d All other revenue						
		e Total. Add lines 11a-11d			50,898.			
	12			•	2,291,755.	1,226,198.	0.	4,922.
0320					, , , , , ,	, , , , , , , , ,		Form 990 (2010)

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

	All other organizations must comp				
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
_	organizations in the U S See Part IV, line 21				
2	Grants and other assistance to individuals in				
_	the U.S. See Part IV, line 22		-		
3	Grants and other assistance to governments,				
	organizations, and individuals outside the U.S.				
	See Part IV, lines 15 and 16				· · · · · · · · · · · · · · · · · · ·
4	Benefits paid to or for members				······································
5	Compensation of current officers, directors,	201 646	104 610	70 276	16 750
_	trustees, and key employees	281,646.	194,618.	70,276.	16,752.
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)	020 057	710 071	112 000	106 077
7	Other salaries and wages	929,057.	710,071.	112,009.	106,977.
8	Pension plan contributions (include section 401(k)				
_	and section 403(b) employer contributions)	E2 110	25 017	11 000	7 070
9	Other employee benefits	53,119.	35,017.	11,029.	7,073.
10	Payroll taxes	101,691.	75,277.	14,615.	11,/99.
11	Fees for services (non-employees)				
а	Management				
b	Legal	10 515		10 115	
C	Accounting	13,517.	70.	13,447.	
d	Lobbying				
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
9	Other	68,595.	53,715.	9,244.	5,636.
12	Advertising and promotion				
13	Office expenses	7,930.	4,545.	2,694.	691.
14	Information technology	2,330.	1,683.	105.	542.
15	Royalties				
16	Occupancy	120,807.	88,858.	18,022.	13,927.
17	Travel	34,130.	30,107.	676.	3,347.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				· ······
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	21,816.	15,492.	3,338.	2,986.
23	Insurance	6,025.	4,497.	823.	705.
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
а	DIRECT PROGRAM EXPENSES	416,715.	380,390.	3,099.	33,226.
ь	COMPUTER RELATED EXPENS	43,236.	31,898.	6,590.	4,748.
c	POSTAGE & DELIVERY	12,706.	7,282.	409.	5,015.
d	BANK FEES & CHARGES	9,515.	2,112.	2,979.	4,424.
e	MEALS AND ENTERTAINMENT	6,758.	3,827.	1,047.	1,884.
f	All other expenses	29,249.	11,479.	7,854.	9,916.
25	Total functional expenses. Add lines 1 through 24f	2,158,842.	1,650,938.	278,256.	229,648.
		2,130,042.	1,030,930.	210,230.	223,040.
26	Joint costs. Check here 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				
	solicitation				E 000 man

	τ X	Balance Sheet		MEIWORKY INC.	- <u>-</u>	, ,	1072302 Tage II
,					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			224,920.	1	229,362.
	2	Savings and temporary cash investments			291,353.	2	273,540.
	3	Pledges and grants receivable, net			959,178.	3	894,849.
	4	Accounts receivable, net				4	
	5	Receivables from current and former officers, di	rectors	s, trustees, kev			
		employees, and highest compensated employee		· • •			
		of Schedule L				5	
	6	Receivables from other disqualified persons (as		1 171111			
		4958(f)(1)), persons described in section 4958(c					
		employers and sponsoring organizations of sect					
		employees' beneficiary organizations (see instru		· · ·		6	
ets	7	Notes and loans receivable, net	01.01.10	'		7	
Assets	8	Inventories for sale or use				8	
•	9	Prepaid expenses and deferred charges				9	
		Land, buildings, and equipment: cost or other	ı				
		basis. Complete Part VI of Schedule D	10a	110.753			
	h	Less: accumulated depreciation	10b	110,753. 81,953.	50,617.	100	28,800.
	11	Investments - publicly traded securities	100	01/3331	62,854.	11	28,800. 58,925.
	12	Investments - other securities. See Part IV, line 1	11		02,031.	12	30/3231
	13	Investments - program-related. See Part IV, line				13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11			10,037.	15	8.712.
	16	Total assets. Add lines 1 through 15 (must equ	عميا ام	34\	1,598,959.	16	8,712. 1,494,188.
	17	Accounts payable and accrued expenses	ai iii ie i	J-1)	116,003.	17	88,860.
	18	Grants payable		110,000.	18	33/3331	
	19	Deferred revenue			248,050.	19	41,995.
	20	Tax-exempt bond liabilities			210,000	20	11/3331
w	21	Escrow or custodial account liability. Complete	Part IV	of Schedule D		21	
Liabilities	22	Payables to current and former officers, director		l l			
Ē		highest compensated employees, and disqualifi					
Ë		of Schedule L	ea pei	sons. complete rare ii		22	
	23	Secured mortgages and notes payable to unrela	stad th	ird parties		23	
	24	Unsecured notes and loans payable to unrelate		·		24	
	25	Other liabilities. Complete Part X of Schedule D		parties		25	
	26	Total liabilities. Add lines 17 through 25			364,053.		130,855.
		Organizations that follow SFAS 117, check he	ere D	X and complete			
ý		lines 27 through 29, and lines 33 and 34.		and complete			
ဦ	27	Unrestricted net assets			670,969.	27	982,888.
<u>a</u>	28	Temporarily restricted net assets			563,937.	28	380,445.
g p	29	Permanently restricted net assets				29	
Ş		Organizations that do not follow SFAS 117, c	heck t	nere >			
ĕ	Ì	complete lines 30 through 34.					
ţ	30	Capital stock or trust principal, or current funds				30]
SSE	31	Paid-in or capital surplus, or land, building, or ed	ulome	ent fund		31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated in		1		32	
ž	33	Total net assets or fund balances	,	J. 311161 761166	1,234,906.	33	1,363,333.
	34	Total liabilities and net assets/fund balances			1,598,959.	34	1,494,188.
		tal ilabilities and not assets fully balaffees					

Form **990** (2010)

Form	990 (2010) GLOBAL FOOTPRINT NETWORK, INC.	73-	-1672982	Pag	ge 12
Par	t XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI				X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	2,29	1,7	<u>55.</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,15	8,8	42.
3	Revenue less expenses. Subtract line 2 from line 1	3	13:	2,9	13.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,23	4,9	06.
5	Other changes in net assets or fund balances (explain in Schedule O)	5	<-	4,4	86.
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	1,36	3,3	33.
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				\mathbf{X}
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Ο.			ĺ
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
b	Were the organization's financial statements audited by an independent accountant?		2ь	X	
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of th	e audıt,	, [
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O).		
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issue	d on a			
	separate basis, consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sii	ngle Au	dit		
	Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi	ired aud	dit		
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		3ь		<u> </u>
			Form	9 <mark>90</mark> ((2010)

SCHEDULE A

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support

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

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

2010

Open to Public Inspection

Name of the organization

GLOBAL FOOTPRINT NETWORK, INC.

Employer identification number 73–1672982

			TOOTTRINI NE							1012	<u> </u>	
Part I	Reason	for Public Cha	rity Status (All organiz	ations mu	st complet	te this par	t) See ins	tructions.				
he org	anization is not	a private foundation	because it is: (For lines 1	1 through 1	11, check	only one b	oox.)					
1 [A church, co	envention of churche	es, or association of chur	ches desc	ribed in s e	ction 170	(b)(1)(A)(i)).				
2	A school des	scribed in section 1	70(b)(1)(A)(ii). (Attach Sc	hedule E.)								
3	A hospital or	a cooperative hosp	ital service organization o	described	ın section	170(b)(1)	(A)(iii).					
4	A medical re	search organization	operated in conjunction	with a hos	pital desci	ribed in se	ction 170	(b)(1)(A)(i	ii). Enter th	e hospital	's nan	ne,
	city, and sta	te:										
5	An organizat	ion operated for the	benefit of a college or ur	niversity ov	wned or op	perated by	a governi	mental un	t described	d in		·
)(b)(1)(A)(iv). (Compl		-		·	-					
6	7		nent or governmental unit	t described	d in sectio	n 170(b)(1	1)(A)(v).					
7	7	=	ceives a substantial part					or from the	e general pi	ublic desc	ribed	ın
-		(b)(1)(A)(vi). (Comple		o. No oupp		90.0			gorrora. p			
8 🗆	7		•	(Complete	Part II \							
9 X	A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from											
•	•	•	inctions - subject to certa						•	-		
			taxable income (less sect	-		•						
		509(a)(2). (Complet		lion o i i ta	x) 110111 0u	311103303	acquired t	y tile orga	ilization ai	itei oulle c	0, 197	, J.
10 🗀			perated exclusively to te	et for publi	o oofaty (Soo contin	n 500/a)/	41				
11	_	-	perated exclusively for the	•	-			-	y out the n	uroocoo o	on o	٥r
''			ations described in section									Oi
			organization and compl				2). Oee Se (ction sost	ajtoj. Onet	JK THE DOX	llial	
	a Type	· · · · · · · · · · · · · · · · · · ·	¬ _ `		e III - Func		tograted		d 🗀	Type III - 0	Whor	
e 🗀	¬ · · ·		at the organization is not	• •		•	•	r mara dia		• •		
•		•	ū		•	•	•					
4		-	than one or more publicly		-				9(a)(1) or se	ection 509	(a)(2).	
f	_		tten determination from t	tne IRS tha	atitisa iy	pe i, Type	ii, or Type	e III				
		organization, check t							•			
9			organization accepted ar			•					<u> </u>	T
	• •	-	directly controls, either al	one or tog	etner with	persons o	described	in (II) and ((III) below,		Yes	No
	-		supported organization?							11g(i)	├	
		•	n described in (i) above?		_					11g(ii)	├──	-
_			a person described in (i) o							11g(iii)		
h	Provide the	following information	about the supported or	ganization	(s).							
		1	T (III) Tono of	1		τ		1				
(i) Nar	me of supported	(ii) EIN	(iii) Type of organization		rganization		-	Lorganizati	on in col l	(vii) An	nount c	of
0	rganization		(described on lines 1-9	, ,,	sted in your document?		r support?	(i) organiz U S	ed in the	sup	port	
			above or IRC section			1111						
			(see instructions))	Yes	No	Yes	No	Yes	No			
					[
					 							
	<u> </u>											
			 						 			
									 			
					ļ			ļ	<u> </u>			
Total				1	1	1	Į.	1				

032021 12-21-10

Form 990 or 990-EZ.

LHA For Paperwork Reduction Act Notice, see the Instructions for

Schedule A (Form 990 or 990-EZ) 2010

Part II	(Form 990 or 990-EZ) 2010 Support Schedule for C	rganizations	Described in	Sections 170	(b)(1)(A)(iv) an	d 170(b)(1)(A)(Page vi)
•	(Complete only if you checked						
	fails to qualify under the tests I	isted below, plea	se complete Part	III.)			
ection	A. Public Support		•				
alendar ye	ear (or fiscal year beginning in) 🕨 📘	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts,	grants, contributions, and						
meml	pership fees received. (Do not						
Includ	de any "unusual grants.")						
2 Tax re	evenues levied for the organ-						
ızatıo	n's benefit and either paid to						
or exp	pended on its behalf						
3 The v	alue of services or facilities						
furnis	hed by a governmental unit to						
the o	ganization without charge						
4 Total	. Add lines 1 through 3						
•	ortion of total contributions						
by ea	ch person (other than a						
_	nmental unit or publicly						
	orted organization) included						
	e 1 that exceeds 2% of the						
	nt shown on line 11,						
colun	``		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	<u> </u>	. , <u>, , , , , , , , , , , , , , , , , ,</u>		
	c support. Subtract line 5 from line 4					<u> </u>	<u> </u>
	B. Total Support			<u>r </u>		 	т
	ear (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
	ints from line 4						
	s income from interest,						
	ends, payments received on						
	ities loans, rents, royalties						
	ncome from similar sources						
	come from unrelated business	ļ					
	ties, whether or not the						
	ess is regularly carried on Income. Do not include gain						
	s from the sale of capital						
	s (Explain in Part IV.)						
	support. Add lines 7 through 10		11 T				
	receipts from related activities, e	to (see instruction		L		10	i
	five years. If the Form 990 is for t			ed foundbook fifth te		12	
	ization, check this box and stop I		ilist, second, triir	a, lourth, or little te	ax year as a section	n 501(c)(3)	▶□
	C. Computation of Public		rcentage				
	support percentage for 2010 (lin			column (fl)		14	
	support percentage from 2009 s					15	
	3% support test - 2010.If the org			line 13 and line 1	1 ic 33 1/3% or m	i	
	here. The organization qualifies as				7 13 00 1/3/0 01 111	iora, origon this DC	~ and ▶ [
	rrio organization qualifico di	PUPUOIY JUDD	ortou organization				

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2010

and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization

b 10% -facts-and-circumstances test - 2009. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the

meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

Schedule A (Form 990 or 990-EZ) 2010 GLOBAL FOOTPRINT NETWORK, INC. Part III Support Schedule for Organizations Described in Section 509(a)(2)

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

Se	ction A. Public Support	elow, please comp	Diete Fait II.)				
Cale	indar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	460,191.				1059635.	5626636.
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	511,437.		802,114.			4069848.
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge					-	
6	Total. Add lines 1 through 5	971,628.	1936643.	2303731.	2161494.	2322988.	9696484.
7 <i>e</i>	Amounts included on lines 1, 2, and 3 received from disqualified persons						0.
t	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						0.
c	Add lines 7a and 7b						0.
8	Public support (Subtract line 7c from line 6)				,		9696484.
Se	ction B. Total Support						
Cale	indar year (or fiscal year beginning in) 🕨	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9	Amounts from line 6	971,628.	1936643.	2303731.	2161494.	2322988.	9696484.
10a	a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	7,253.	9,361.	15,772.	1,306.	4,922.	38,614.
t	Unrelated business taxable income (less section 511 taxes) from businesses	7,233.	3,301.	13/112.	1,300.	4,522.	30,014.
	acquired after June 30, 1975						
	Add lines 10a and 10b	7,253.	9,361.	15,772.	1,306.	4,922.	38,614.
	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	•	,				
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	4,507.			> <3,575.	><17,155.	><29,327.
	Total support (Add lines 9, 10c, 11, and 12)	983,388.	1938409.	2313994.	2159225.	2310755.	9705771.
14	First five years. If the Form 990 is for	r the organization's	first, second, thir	d, fourth, or fifth ta	x year as a section	n 501(c)(3) organiz	ation,
	check this box and stop here						▶□
<u>Se</u>	ction C. Computation of Publ	ic Support Per	rcentage				
15	Public support percentage for 2010 (line 8, column (f) di	vided by line 13, c	olumn (f))		15	99.90 %
	Public support percentage from 2009					16	99.73 %
	ction D. Computation of Inve					· · · · · · · · · · · · · · · · · · ·	
17	Investment income percentage for 20		•	e 13, column (f))		17	.40 %
18	Investment income percentage from					18	.42 %
19a	33 1/3% support tests - 2010. If the						
_	more than 33 1/3%, check this box a						► X
t	33 1/3% support tests - 2009. If the						and
00	line 18 is not more than 33 1/3%, che						
	Private foundation. If the organization	n did not check a	box on line 14, 19	a, or 19b, check th			▶
0320	23 12-21-10				Sch	edule A /Form 99	D ~= 000 EZ 0040

SCHEDULE D

(Form 990) .

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

Part IV, line 6, 7, 8, 9, 10, 11, or 12.

► Attach to Form 990. ► See separate instructions.

2010 Open to Public Inspection

Name of the organization

GLOBAL FOOTPRINT NETWORK, INC.

Employer identification number 73–1672982

Pai	rt I Organizations Maintaining Donor Advis	ed Funds or Other Similar Funds	or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, III	ne 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advis	ed funds
	are the organization's property, subject to the organization's		Yes No
6	Did the organization inform all grantees, donors, and donor	_	used only
	for charitable purposes and not for the benefit of the donor	or donor advisor, or for any other purpose	conferring
	impermissible private benefit?	• • • •	Yes No
Pa	rt II Conservation Easements. Complete if the o	rganization answered "Yes" to Form 990, F	art IV, line 7.
1	Purpose(s) of conservation easements held by the organiza	ition (check all that apply).	
	Preservation of land for public use (e.g., recreation or		torically important land area
	Protection of natural habitat	Preservation of a cert	
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qua	lified conservation contribution in the form	of a conservation easement on the last
	day of the tax year.		
			Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
c	Number of conservation easements on a certified historic si	tructure included in (a)	2c
d	Number of conservation easements included in (c) acquired	d after 8/17/06, and not on a historic structi	ıre
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, r	eleased, extinguished, or terminated by the	organization during the tax
	year ▶		
4	Number of states where property subject to conservation e	asement is located	
5	Does the organization have a written policy regarding the policy	eriodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements	sit holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting	g, and enforcing conservation easements d	uring the year 🕨
7	Amount of expenses incurred in monitoring, inspecting, and	d enforcing conservation easements during	the year ▶ \$
8	Does each conservation easement reported on line 2(d) about	ove satisfy the requirements of section 170	(h)(4)(B)(ı)
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIV, describe how the organization reports conserva	ation easements in its revenue and expense	statement, and balance sheet, and
	include, if applicable, the text of the footnote to the organiz	ation's financial statements that describes	the organization's accounting for
	conservation easements.		
Pa	rt III Organizations Maintaining Collections		ther Similar Assets.
	Complete if the organization answered "Yes" to Form		
1a	If the organization elected, as permitted under SFAS 116 (A		
	historical treasures, or other similar assets held for public ex	xhibition, education, or research in furthera	nce of public service, provide, in Part XIV,
	the text of the footnote to its financial statements that desc	cribes these items.	
b	If the organization elected, as permitted under SFAS 116 (A	ASC 958), to report in its revenue statement	and balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition,	education, or research in furtherance of pul	blic service, provide the following amounts
	relating to these items:		
	(i) Revenues included in Form 990, Part VIII, line 1		> \$
	(ii) Assets included in Form 990, Part X		> \$
2	If the organization received or held works of art, historical tr	reasures, or other similar assets for financia	l gain, provide
	the following amounts required to be reported under SFAS	116 (ASC 958) relating to these items:	
а	Revenues included in Form 990, Part VIII, line 1		> \$
b	Assets included in Form 990, Part X		> \$

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 032051 12-20-10

Schedule D (Form 990) 2010

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)	
Condition of Art Indiana Condition of Art Indiana Indiana Condition of Art Indiana Access Condition	<i>Jeu)</i>
3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection	tems
(check all that apply):	
a Public exhibition d Loan or exchange programs	
b Scholarly research e Other	
c Preservation for future generations	
4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.	
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?	No_
Part W Escrow and Custodial Arrangements. Complete if the organization answered 'Yes' to 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?	∟ No
b If "Yes," explain the arrangement in Part XIV and complete the following table:	
Amount	
c Beginning balance	
d Additions during the year	
e Distributions during the year	
f Ending balance	
2a Did the organization include an amount on Form 990, Part X, line 21?	∟ No
b If "Yes," explain the arrangement in Part XIV.	
Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.	
	ears 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	
Provide the estimated percentage of the year end balance held as:	
a Board designated or quasi-endowment %	
b Permanent endowment \(\sum_{\text{w}} \)	
c Term endowment ▶%	
3a Are there endowment funds not in the possession of the organization that are held and administered for the organization	
	es No
(i) unrelated organizations	 -
(ii) related organizations 3a(ii)	 -
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 3b	<u> </u>
4 Describe in Part XIV the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10.	
Description of investment (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated (d) Book depreciation	alue
	
1a Land	
b Buildings c Leasehold improvements 11,988. 7,594. 4	,394.
	,222.
	, 184.
	,800.

Schedule D (Form 990) 2010

Sche	dule D (Form 990) 2010 GLOBAL FOOTPRINT NETWORK,	INC.		73-1	<u> 1672982</u>	Page 4
Par	t XI Reconciliation of Change in Net Assets from Form 990 t	o Audited	financial Sta	tement	s	
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1		2,291	755.
2	Total expenses (Form 990, Part IX, column (A), line 25)		2		2,158,	842.
3	Excess or (deficit) for the year. Subtract line 2 from line 1		3		132	913.
4	Net unrealized gains (losses) on investments		4		<3,	929.
5	Donated services and use of facilities		5			
6	Investment expenses		6			
7	Prior period adjustments		7			
8	Other (Describe in Part XIV.)		8		•	< <u>557.</u> >
9	Total adjustments (net). Add lines 4 through 8		9		<4	486.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 a	and 9	10		128	,427.
	t XII Reconciliation of Revenue per Audited Financial Statem		n Revenue per	Return		
1	Total revenue, gains, and other support per audited financial statements			1	2,475	,254.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:					
а	Net unrealized gains on investments	2a	<3,929	9.⊳		
ь	Donated services and use of facilities	2b	187,985	5.		
С	Recoveries of prior year grants	2c				
d	Other (Describe in Part XIV)	2d	<557	7.>		
е	Add lines 2a through 2d			2e	183	,499.
3	Subtract line 2e from line 1			3	183, 2,291	,755.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			" ' '		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a				
b	Other (Describe in Part XIV.)	4b				
С	Add lines 4a and 4b			4c		0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	2,291	,755.
Pa	rt XIII Reconciliation of Expenses per Audited Financial Stater	ments Wi	th Expenses p	er Retu	rn	
1	Total expenses and losses per audited financial statements			1	2,346	,827.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:					
а	Donated services and use of facilities	2a	187,985	5.		
ь	Prior year adjustments	2b				
c	Other losses	2c				
d	Other (Describe in Part XIV.)	2d				
е	Add lines 2a through 2d	•		2e	187	,985.
3	Subtract line 2e from line 1			3	2,158	,842.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:					
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a				
b	Other (Describe in Part XIV.)	4b				
c	Add lines 4a and 4b			4c		0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	2,158	,842.
Pa	rt XIV Supplemental Information					
Com	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part	t III, lines 1a	and 4; Part IV, line	s 1b and 2	2b; Part V, line	4; Part
	e 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also cor					
, 1111						
PA	RT XI, LINE 8 - OTHER ADJUSTMENTS:					
	· · · · · · · · · · · · · · · · · · ·					
NE	I UNREALIZED GAINS(LOSSES) ON EXCHANGE RA	TE				-557.
PA	RT XII, LINE 2D - OTHER ADJUSTMENTS:					
UN:	REALIZED GAIN (LOSS) ON EXCHANGE ACCOUNT					<u>-557.</u>
		<u> </u>				

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

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

OMB No 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service

Employer identification number

Name of the organization					Employer ident	ification number
GLOBAL FOOTPRIN	T NETWOR	K. INC.			73-16729	82
			tside the United States. Comp	ete if the organ		
to Form 990, Par			·			
1 For grantmakers. Does	the organization	maintain record	ds to substantiate the amount of the g	rants or assista	ance, the	_
grantees' eligibility for th	ne grants or assis	stance, and the	selection criteria used to award the gra	ants or assistar	nce?	Yes No
2 For grantmakers. Desc	ribe in Part V the	e organization's	procedures for monitoring the use of g	rant funds outs	side the United St	ates.
2 Antivities and Degles (T	ha fallassuaa Dari	. I line 2 telelo e	an be duplicated if additional space is	acadad)		
(a) Region	(b) Number of	(c) Number of	(d) Activities conducted in region		vity listed in (d)	(f) Total
(a) Hogion	offices	employees,	(by type) (e.g., fundraising, program	1 ' '	gram service,	expenditures
	in the region	agents, and independent	services, investments, grants to	1	specific type	for and Investments
		contractors in region	recipients located in the region)	of service	ce(s) in region	in region
		W				
			PROGRAM SERVICES	EDUCATIONAL	,	
WESTERN EUROPE	0	0	PROGRAM SERVICES	COMMUNICATI	ONS	18,692.
			DOGDAY GERVIORS	DROELLEGY 13	ID DEPODES	26 053
WESTERN EUROPE	0	0	PROGRAM SERVICES	RESEARCH AN	ID REPORTS	26,953.
				EDUCATIONAL		
NORTH AMERICA	0		PROGRAM SERVICES	COMMUNICATI		81.
•		"				
		1		EDUCATIONAL		
SOUTH AMERICA	0	0	PROGRAM SERVICES	COMMUNICATI	ONS	175.
	ļ					
MIDDLE EAST & NORTH				EDUCATIONAL		1
AFRICA	0	0_	PROGRAM SERVICES	COMMUNICATI	ONS	244.
MIDDLE EAST & NORTH						
AFRICA			PROGRAM SERVICES	RESEARCH &	REPORTS	77.
				-		
EAST ASIA & THE				EDUCATIONAL	.	:
PACIFIC	0	0	PROGRAM SERVICES	COMMUNICATI	ONS	2,831.
		1				
EAST ASIA & THE						
PACIFIC	0	· · · · · · · · · · · · · · · · · · ·	PROGRAM SERVICES	RESEARCH &	REPORTS	788.
3 a Sub-total	0	0				49,841.
b Total from continuation sheets to Part I						0.
c Totals (add lines 3a		1				
and 3b)						49,841.

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

Schedule F (Form 990) 2010

2	Enter total number of recipient organizations	listed above that are r	ecognized as charities by the	foreign country,	recognized as tax-ex	cempt by		
	the IRS, or for which the grantee or counsel it	has provided a section	501(c)(3) equivalency letter			>	·	
3	Enter total number of other organizations or	entities				•		

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed. (h) Method of valuation (book, FMV, appraisal, other) (c) Number of (d) Amount of (e) Manner of (f) Amount of (g) Description of (a) Type of grant or assistance (b) Region recipients cash grant cash disbursement non-cash non-cash assistance assistance

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

Schedule F (Form 990) 2010

SCHEDULE L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Transactions With Interested Persons

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

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

2010

Open To Public

Name of the organization

GLOBAL FOOTPRINT NETWORK, INC.

Employer identification number 73–1672982

Part I Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only). Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b. 1 (c) Corrected? (a) Name of disqualified person (b) Description of transaction Yes No 2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under section 4958 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization Loans to and/or From Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a. (f) Approved by board or committee? (a) Name of interested (b) Loan to or from (c) Original principal (d) Balance due (e) In (g) Written agreement? person and purpose the organization? ămount default? То Yes From No Yes No Yes No

Part III Grants or Assistance Benefiting Interested Persons.

Complete if the organization answered	I "Yes" on Form 990, Part IV, line 27.	
(a) Name of Interested person	(b) Relationship between interested person and the organization	(c) Amount and type of assistance

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

Schedule L (Form 990 or 990-EZ) 2010

Total

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

2010 Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

GLOBAL FOOTPRINT NETWORK, INC.

Employer identification number 73–1672982

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

TO HELP ORGANIZATIONS AROUND THE WORLD TRACK THE EXTENT OF SOCIETY'S

ENVIRONMENTAL IMPACT THROUGH THE USE OF A RESOURCE MANAGEMENT TOOL,

KNOWN AS THE "ECOLOGICAL FOOTPRINT," THAT MEASURES HOW MUCH LAND AND

WATER AREA A HUMAN POPULATION REQUIRES TO PRODUCE RESOURCES IT CONSUMES

AND TO ABSORB ITS WASTES, TAKING INTO ACCOUNT PREVAILING TECHNOLOGY.

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

CONSUMES AND TO ABSORB ITS WASTES, TAKING INTO ACCOUNT PREVAILING

TECHNOLOGY.

FORM 990, PART VI, SECTION A, LINE 2: SUSAN BURNS, CEO/VICE PRESIDENT, IS MARRIED TO MATHIS WACKERNAGEL, PRESIDENT/EXECUTIVE DIRECTOR.

FORM 990, PART VI, SECTION A, LINE 7A: PER THE BYLAWS, MATHIS WACKERNAGEL AND SUSAN BURNS HAVE THE AUTHORITY TO EACH APPOINT 2 MEMBERS TO THE BOARD OF DIRECTORS.

FORM 990, PART VI, SECTION B, LINE 11: THE MANAGING DIRECTOR & EXECUTIVE
DIRECTOR THOROUGHLY REVIEW THE FORM 990 AND DISCUSS IT WITH THE PREPARER
AND KEY STAFF. SUBSEQUENTLY, THEY PROVIDE A COPY OF THE FORM 990 TO ALL
MEMBERS OF THE BOARD. THEY HAVE A BOARD TELECONFERENCE WITH THE BOARD
MEMBERS AND AUDITOR/PERPARER. IN THAT CALL, KEY ISSUES AND METRICS ARE
HIGHLIGHTED AND THE BOARD HAS THE OPPORTUNITY TO ASK QUESTIONS. THE CALL
IS ALWAYS SCHEDULED IN ADVANCE OF THE FILING WITH AMPLE OPPORTUNITY TO

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

Schedule O (Form 990 or 990-EZ) (2010)

CORRECT ANY ITEMS, IF NECESSARY.

FORM 990, PART VI, SECTION B, LINE 12C: THE CONFLICT OF INTEREST POLICY IS DISTRIBUTED TO BOARD MEMBERS AND ALL MEMBERS OF THE GOVERNING BODY. ONCE A YEAR EACH MEMBER SIGNS A STATEMENT THAT SHE/HE AGREES WITH IT.

FORM 990, PART VI, SECTION B, LINE 15: THE ORGANIZATION USES STRATEGIC PLANNING TO DETERMINE THE ROLES THE OFFICERS, DIRECTORS AND KEY EMPLOYEES PLAY WITHIN THE ORGANIZATION. THE BOARD OF DIRECTORS LOOKS AT COMPARABILITY DATA (USE OF COMPENSATION SURVEYS) TO TRACK HOW PERSONS IN ANALOGOUS ROLES ARE COMPENSATED IN COMPARIBLE SIZED ORGANIZATIONS, IN THE SAME FIELD, IN THE SAME GEOGRAPHIC AREA. COMPENSATION FOR THE CEO, EXECUTIVE DIRECTOR AND OTHER KEY EMPLOYEES IS THEN DETERMINED SO THAT THEIR COMPENSATION DOES NOT EXCEED THE COMPARABLE SALARIES.

FORM 990, PART VI, SECTION C, LINE 18: THE ORGANIZATION MAKES IT'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS AVAILABLE UPON REQUEST OF AN INDIVIDUAL OR ORGANIZATION. THE FORM 990 IS AVAILABLE ON THE GUIDESTAR WEBSITE.

FORM 990, PART VI, SECTION C, LINE 19: IF THE GOVERNING DOCUMENTS (ARTICLES OF INCORPORATION, BYLAWS) AND CONFLICT OF INTEREST POLICY OF THE ORGANIZATION ARE SUBJECT TO THE FEDERAL PUBLIC DISCLOSURE RULES (OR STATE PUBLIC DISCLOSURE RULES), THESE DOCUMENTS WILL BE MADE PUBLICLY AVAILABLE AS APPLICABLE LAW MAY REQUIRE. OTHERWISE, THE GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY WILL BE PROVIDED TO THE PUBLIC, AT THE DISCRETION OF MANAGEMENT.

FORM 990, PART XI, LINE 5, CHANGES IN NET ASSETS:

Schedule O (Form 990 or 990-EZ) (2010)	Page 2
Name of the organization . GLOBAL FOOTPRINT NETWORK, INC.	Employer identification number 73-1672982
NET UNREALIZED LOSSES ON INVESTMENTS:	-3,929.
NET UNREALIZED GAINS(LOSSES) ON EXCHANGE RATE	-557.
TOTAL TO FORM 990, PART XI, LINE 5	-4,486.
FORM 990, PART XI, LINE 2C	
NO CHANGES TO THE PROCESS HAVE BEEN MADE SINCE THE PRIOR	YEAR.
FORM 990, SCHEDULE L, PART IV, COLUMN B	
THEIR BOARD IS CONTROLLED BY CURRENT AND FORMER GFN TRUST	EES,
DIRECTORS, OFFICERS AND KEY EMPLOYEES.	

SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

Related Organizations and Unrelated Partnerships

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

► Attach to Form 990. ► See separate instructions.

2010
Open to Public Inspection

Employer identification number Name of the organization 73-1672982 GLOBAL FOOTPRINT NETWORK, INC. Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.) Part I (a) (b) (c) (d) (e) **(f)** Legal domicile (state or End-of-year assets Direct controlling Name, address, and EIN Primary activity Total income of disregarded entity entity foreign country) Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt Part II organizations during the tax year.) (a) (b) (c) (d) (e) (f) (g) Section 512(b)(13) Public charity Direct controlling Name, address, and EIN Primary activity Legal domicile (state or Exempt Code controlled of related organization section status (if section entity entity? foreign country) 501(c)(3)) Yes No GLOBAL FOOTPRINT NETWORK, EUROPE, AISBL ENGAGE LEADERS TO 168 AVENUE DE TERVURENLAAN, 7TH FLOOR, MAILB ESTABLISH THE ECOLOGICAL Х N/A N/A B-1150 BRUSSELS, BELGIUM FOOTPRINT AS A GLOBAL BELGIUM AISBL GLOBAL FOOTPRINT NETWORK-SWITZERLAND ENGAGE LEADERS TO FOUNDATION C/O MENDERES HOLDING AG ESTABLISH THE ECOLOGICAL Х FALKNERSTRASSE 3 CH-4001 BASEL SWITZERLAND FOOTPRINT AS A GLOBAL SWITZERLAND STIFTUNG N/A N/A

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

Schedule R (Form 990) 2010

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

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(1	h)	(i)	(i)	(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Share of total	Share of end-of-year assets	Disproj ate allo	portion- cations?	Code V-UBI amount in box 20 of Schedule	General managii partner	or Percentage ownership
		country)		sections 512-514)			Yes	No	K-1 (Form 1065)	Yes N	0
						:					
	,										
		<u> </u>									
										1 1	
											j
-											1
						ļ					
											-
	1]			
			<u> </u>	1		<u> </u>	<u> </u>				

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership

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

Not	te. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.					Yes	No		
1	During the tax year, did the organization engage in any of the following transactions wit	th one or more re	lated organizations listed	ın Parts II-IV?					
а	Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity				1a		Х		
b	Gift, grant, or capital contribution to other organization(s)				1b		Х		
c	Gift, grant, or capital contribution from other organization(s)								
d	Loans or loan guarantees to or for other organization(s)				1d	<u> </u>	X		
е	Loans or loan guarantees by other organization(s)				1e		X		
							<u> </u>		
f	Sale of assets to other organization(s)				1f		X		
g	Purchase of assets from other organization(s)				1g		X		
h	Exchange of assets				1h		Х		
i	Lease of facilities, equipment, or other assets to other organization(s)				1i		X		
					, ,				
j	Lease of facilities, equipment, or other assets from other organization(s)				1j		Х		
k	Performance of services or membership or fundraising solicitations for other organization	on(s)			1k	X			
ı	Performance of services or membership or fundraising solicitations by other organization	on(s)			11		Х		
n	Sharing of facilities, equipment, mailing lists, or other assets				1m		Х		
n	Sharing of paid employees				1n		Х		
0	Reimbursement paid to other organization for expenses				10		Х		
р	Reimbursement paid by other organization for expenses				1p	X			
a	Other transfer of cash or property to other organization(s)				1q		X		
r	Other transfer of cash or property from other organization(s)				1r		X		
2	If the answer to any of the above is "Yes," see the instructions for information on who n	must complete th	is line, including covered	relationships and transaction thresholds.					
	(a)	(b)	(c)	(d)					

(a) Name of other organization	(b) Transaction type (a-r)	(c) Amount involved	(d) Method of determining amount involved
GLOBAL FOOTPRINT NETWORK-SWITZERLAND (1) FOUNDATION	С	98,110.	US DOLLARS RECEIVED
GLOBAL FOOTPRINT NETWORK-SWITZERLAND (2) FOUNDATION	P	51,010.	US DOLLARS SPENT
(3)			
(4)			
<u>(5)</u>	1.		
(6)			

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign	(d) Are all partners section 501(c)(3) organizations?		(e) ers Share of end-of- c)(3) year assets				f) ropor- nate itions?	(g) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(h) General or managing partner?	
		country)	Yes	No		Yes	No	(Form 1065)	Yes	No		
·												
	1											
	†		1									
	4											
						<u> </u>				↓		
	1									1		
						1						
										1		
	1											
·	†											
	-						'					
			+			<u> </u>				_		
						ŀ	;					
						ļ						
]					1						
- 112			1									
	1						1					
	1		Ī									
										}		
			-							—		
									1			
]											
										\vdash		
	1		1							1		
	1		1									
	-									ĺ		
										—		
]											
										1		
										1		
	1											
·		I .				L		2 1 1 2 7	L	—		

Schedule R	(Form 990) 2010	GLOBAL	FOOTPRINT	NETWORK,	INC.	<u>73-1672982</u>	Page 5
Part VII	(Form 990) 2010 Supplemental Inf	ormation				-	
	Complete this part to n	rovide additional	information for reco	nnses to allection	s on Schedule R (see ınstru	ctions)	
	Complete this part to p	TO VICE ACCILIONAL	anormation for resp	ouses to duestion	s on conedule it (see ilisiiu	J., J. J.	
			 				
						-	
							
		*** ***					
				<u> </u>			
							
							