Form **990**

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)

Department of the Treasury Internal Revenue Service

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

<u> 2</u> @10
Open to Public
Inspection

OMB No. 1545-0047

Α	For the	e 2010 cal	endar year, or tax year beginning		, and e	nding		
B	Check if	applicable:	C Name of organization Earth Echo Interna	itional, Inc.		D Empl	oyer identificatio	n number
	Address	334						
\square	Name ch	ange	hone number					
\sqcap	initial retu	E 007E						
\equiv	Terminat	5-0075						
\equiv	Amende	receipts \$	1,125,111					
=								
LJ'	Applicati	on pending	F Name and address of principal officer:	nt Ant E10 Adim	mton 1/6 0	H(a) Is this a group		
			Philippe Cousteau 1401 South Joyce Stre			1		Yes No
1	ax-exem	npt status:	X 501(c)(3) 501(c) () ◀ (insert	no.) 4947(a)(1)	or 527	if "No," attach	a list. (see instru	ctions)
JV	<u>Vebsite</u>	e: ► ww	v.earthecho.org			H(c) Group exempt	tion number 🕨	
KF	orm of a	organization:	X Corporation Trust Association	Other ▶	L Yea	or of formation: 20	∩∩ Mi State o	f legal domicile: CA
	art I		mmary			20	00 1	<u> </u>
	1		escribe the organization's mission or most	significant activit	ies. Earth	Echo Internatio	nal'e mission	ie to
	'		dia and experiences to empower people to				ilai 2 Illi22iOil	15 10
ø			Earth's ocean and freshwater systems.	ase the resource	5 ulai cali is	isiole allo		
Ĕ		protoct	Later 3 Occasi and neonwater 3ystems.					
Activities & Governance	2	Chook	nis box 🕨 🔲 if the organization discontinued its				**********	
ဖိ	3	Number	of voting members of the governing body	Operations or dispos	sed of more tha	III 25% OF ILS NET AS	sets.	44
eŞ S	4		of independent voting members of the governing					11
ž	5		mber of individuals employed in calendar y				5	11
₹ct	6	Total nu	mber of individuals employed in calendar j	year zuru (Fait V	, iiie za).		6	5
•	7a	Total un	related business revenue from Part VIII, or	olumn (C) line 12			7a	
	b	Net unre	elated business taxable income from Form	990-T line 34			7b	
***************************************	†- - -		tatos sosticos taxasio mostro note i otti	030-7, Inte 04 .		Prior Yea		Current Year
	8	Contribu	itions and grants (Part VIII, line 1h)				448,351	1,123,661
J.	9	Progran	service revenue (Part VIII, line 2g)	9,902	1,123,001			
Revenue	10	Investm	ent income (Part VIII, column (A), lines 3, 4	1 and 7d)	,		384	34
ď	11	Other re	venue (Part VIII, column (A), lines 5, 6d, 8	c Oc 10c and 11	 lo\		304	34
	12		enue—add lines 8 through 11 (must equal Part				458,637	1,125,111
	13		and similar amounts paid (Part IX, column (430,037	1,120,111
	14		paid to or for members (Part IX, column (A					
	15		other compensation, employee benefits (Part I				169 602	140 105
Expenses	16a	Professi	onal fundraising fees (Part IX, column (A),	h, column (h), ilic:	5 3 - 10)		168,592	149,195
E C	Ь	Total fur	ndraising expenses (Part IX, column (D), lir	nne i lej na 25\ > -	44 690			The state of the s
ũ	17		spenses (Part IX, column (A), lines 11a-11				467,030	569,134
	18	Total ex	penses. Add lines 13–17 (must equal Part	IX column (A) li	na 25)	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	635,622	718,329
	19		e less expenses. Subtract line 18 from line				176,985	406,782
5 8					1	Beginning of Cur		End of Year
Lesets Balan	20	Total as	sets (Part X, line 16)				98,602	617,370
t. A.B.	21		pilities (Part X, line 26)				136,507	118,307
3.5	22	Net asse	ets or fund balances. Subtract line 21 from	line 20			-37,905	499,063
	irt II	Sig	nature Block					
Und	er penalt	ies of perjur	, I declare that I have examined this return, moliding a	ccompanying schedule	s and statemer	its, and to the best o	f my knowledge	
and	belief, it i	is true, corre	ct, and complete. Deplaration of preparer (other than of	fficer) is based on all in	formation of wh	ich preparer has an	y knowledge.	
Sig	jn		June				1/3/	
He	re	Λ :	Signature of officer			Da	te /	
		/ •	Jill Belasce		Trea	surer		
		Drine	Type or print name and title Type preparer's name Prepare			10	r	Total
Pai	id	\ _		ede signature	5	Date	Check X i	PTIN
	parer	Sco	tt A. Webb, CPA, CFP	ZXG/VIII	CLA	8/29/2011	self-employed	P00025968
	e Only	1	s name > Webb Financial Services, PLLC)		Firm's FIN	▶ 30-012654	
		Firm	s address ► 12844 Parapet Way, Oak Hill, \			Phone no.		
May	the IF		s this return with the preparer shown above		ne)			
	, use it	·~ aiscus	a una ratum with the preparer shown above	er (see instructio	พร์)			X Yes No

Part	V Checklist of Required Schedules			ugo (
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions)	2	Х	<u> </u>
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	— ⊢	Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			1
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,			1
	Part III	5	\vdash	\vdash
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have			İ
	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	$\vdash \vdash \vdash$	X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	7		x
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II			 ^
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"	8		x
0	complete Schedule D, Part III	-	\vdash	 ^
9	X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If</i> "Yes,"			
	complete Schedule D, Part IV	9		x
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or	Ť		$\stackrel{\sim}{\vdash}$
10	quasi-endowments? If "Yes," complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
••	VII, VIII, IX, or X as applicable	100		
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete	11a	X	594 14 NaV3
u	Schedule D, Part VI			
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more			
_	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.	11b		X
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	i l	Х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e		Х
	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		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes,"			
	and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, 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
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,			1
	business, and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV.	14b		X
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	igwdapprox	X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance	١		
	to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services			\ \ \
4.5	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	40		_
40	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	-	X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	40		,
	If "Yes," complete Schedule G, Part III	202	 	X
	Did the organization operate one or more hospitals? <i>If</i> "Yes," complete Schedule H	20a	 	┼^
a	Form 990 filers that operate one or more hospitals must attach audited financial statements to this return? Note. Some	20b		
	FORTH DOD BIOLO CHOICE OF THOSE HOOPITAID HIGH ACCOUNT AGAING BIOLOGIC CONTINUE (DOD BIOLOGICA)			

Par	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? <i>If "Yes," complete Schedule J</i>	23		Х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a		x
h	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		X
	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 24d		X
	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		X
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		х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? <i>If</i> "Yes," <i>complete</i> Schedule L, Part IV	28b		х
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X	<u> </u>
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If</i> "Yes," complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,	ļ		
32	Part I	31		X
	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		х
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		Х
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			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part	37		x
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and			
	19? Note. All Form 990 filers are required to complete Schedule O	38	Х	

95-4789334

Part V

Statements Regarding Other IRS Filings and Tax Compliance	
Check if Schodule O contains a response to any guestion in this Bart V	

	Check if Schedule O contains a response to any question in this Part V			<u>Ш</u>
		TO STREET STREET	Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	<u>3</u>		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	- 100 m	2.	Post C
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	2		संदर्भ जाने ज
	gaming (gambling) winnings to prize winners?	1c	X	10.75.255.5
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 .	5		#
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)	3-	in Aller &	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a 3b	 	X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	30		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		X
b	If "Yes," enter the name of the foreign country:	post a elle		
	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	TOTALISTORY	X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
c	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	<u></u>	
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	ļ	X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	ļ	ļ
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c	95 Tel	X
d	If "Yes," indicate the number of Forms 8282 filed during the year		- Uport	
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	ļ	X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	-	X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	-	╂
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	C.	Mescell, I
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting		å	
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring	8		
9	organization, have excess business holdings at any time during the year?	97.4		
э a	Did the organization make any taxable distributions under section 4966?	9a	40	185
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	14.5	9.2	H.
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			
b	Gross income from other sources (Do not net amounts due or paid to other sources			Since Since
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		1 E. 770)
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	$ \frac{1}{2}$ $\frac{1}{2}$	16.9	4
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			Æ.
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		5 . 16% a
	Note. See the instructions for additional information the organization must report on Schedule O.	64 (14) 54 (14)		
b	Enter the amount of reserves the organization is required to maintain by the states in which		18.	
	the organization is licensed to issue qualified health plans		547	
C	Enter the amount of reserves on hand	14a	e Constant	X
14a	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation in Schedule O</i>	14b	_	+~
b	ii res, mas it med a romi rzo to report mese payments: ii rvo, provide an explanation in concade o	0.	1	

Part VI

95-4789334 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.

-	
	Х

Sect	ion A. Governing Body and Management					LNa
10	Enter the number of voting members of the governing body at the end of the tax year	1a	1	11	Yes	No
b	Enter the number of voting members included in line 1a, above, who are independent	1b		11	牌。	
2	Did any officer, director, trustee, or key employee have a family relationship or a business rela		ip with			4
	any other officer, director, trustee, or key employee?			. 2	Х	SHPERMINE OF SPEIN
3	Did the organization delegate control over management duties customarily performed by or un		e direct			
	supervision of officers, directors or trustees, or key employees to a management company or			. 3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990	was file	ed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization	on's as	sets?	. 5		Х
6	Does the organization have members or stockholders?			. 6		X
7a	Does the organization have members, stockholders, or other persons who may elect one or m	ore m	embers			
	of the governing body?			. 7a		<u>X</u>
b	Are any decisions of the governing body subject to approval by members, stockholders, or other			. 7b	otson City	X
8	Did the organization contemporaneously document the meetings held or written actions under	taken	during	e inter-	,	
	the year by the following:			at Ministra		
a	The governing body?			. <u>8a</u>	X	-
b	Each committee with authority to act on behalf of the governing body?			. 8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot					
C4	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule				L	<u>X</u>
Sect	ion B. Policies (This Section B requests information about policies not required by the	men	iai Revellu	e Code.)	Yes	No
100	Does the organization have local chapters, branches, or affiliates?			. 10a	163	X
	If "Yes," does the organization have written policies and procedures governing the activities of			. 10a		 ^-
b	affiliates, and branches to ensure their operations are consistent with those of the organization			. 10b		
112	Has the organization provided a copy of this Form 990 to all members of its governing body by			105	\vdash	
ı ıa	form?		ing are	. 11a		Ιx
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.				3.0	10.74
12a	Does the organization have a written conflict of interest policy? <i>If "No," go to line 13</i>				1	
b	Are officers, directors or trustees, and key employees required to disclose annually interests t					
	rise to conflicts?			. 12b	X	
С	Does the organization regularly and consistently monitor and enforce compliance with the poli	cy? If	"Yes,"			
	describe in Schedule O how this is done			. 12c	X	
13	Does the organization have a written whistleblower policy?			. 13	Χ	
14	Does the organization have a written document retention and destruction policy?			. 14	X	
15	Did the process for determining compensation of the following persons include a review and a					
	independent persons, comparability data, and contemporaneous substantiation of the deliberation			1 - March 1974 1 1 1 1 1 1 1 1 1		
а	The organization's CEO, Executive Director, or top management official					X
b	Other officers or key employees of the organization			ECSTHAROUS COMMON	The property of	X
	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)				artir	
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar a	_				
L	with a taxable entity during the year?			. <u> 16a</u>	75V	X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization its participation in joint venture arrangements under applicable federal tax law, and taken step					
	the organization's exempt status with respect to such arrangements?			Manager of the second	3.75	
Sact	ion C. Disclosure	• •	· · · · · · · · · · · · · · · · · · ·	· I ion		<u> </u>
17	List the states with which a copy of this Form 990 is required to be filed ► CA, DC, SC, V	Δ				
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, ar		T (501(c)(3))s only)		
	available for public inspection. Indicate how you make these available. Check all that apply.		. (55.(5)(5)	,_ /		
	Own website Another's website X Upon request					
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents of the control	nents.	conflict of in	terest		
. •	policy, and financial statements available to the public.	1		-		
20	State the name, physical address, and telephone number of the person who possesses the b	ooks a	nd records	of the		
-•	organization: ► Scott A. Webb			20-2600		
	12844 Parapet Way, Oak Hill, VA 20171					

Form 990 (2010)					95-47893	34 Page 7		
Part VII	Compensation of Officers, Dire	ctors, Trustee	es, Key Employees, H	lighest Comp	ensated			
	Employees, and Independent C							
	Check if Schedule O contains a re	esponse to any	question in this Part	VII		<u> </u>		
Section A.	Officers, Directors, Trustees, Key I	Employees, and	d Highest Compensate	d Employees				
1a Complete organization's	this table for all persons required to be a tax year.	e listed. Report o	compensation for the cal	endar year end	ing with or withir	the		
of compensat	of the organization's current officers, of tion. Enter -0- in columns (D), (E), and	(F) if no compe	nsation was paid.		-	amount		
 List the 	of the organization's current key emple organization's five current highest co	mpensated emp	oloyees (other than an of	fficer, director, t	rustee, or key er			
	reportable compensation (Box 5 of Fo and any related organizations.	orm W-2 and/or	Box 7 of Form 1099-MIS	C) of more thar	1 \$100,000 from	the		
	of the organization's former officers, ke eportable compensation from the orga		•	ed employees w	ho received mor	e than		
	of the organization's former directors more than \$10,000 of reportable comp		·	•		e of the		
	in the following order: individual trustee I employees; and former such persons		nstitutional trustees; offic	cers; key emplo	yees; highest			
Check th	is box if neither the organization nor a	ny related orgar	nization compensated an	y current officer	, director, or trus	stee.		
	(A)	(B)	(C)	(D)	(E)	(F)		
Name and Title Average hours per week (describe hours for hours f								

(A) Name and Title	(B) Average	Posit	ion (C) k all '	that ap	ply)	(D) Reportable	(E) Reportable	(F) Estimated
Name and Tide	hours per week (describe hours for related organizations in Schedule O)	Individual trustee or director						compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
(1) Janice Cousteau Director	18.	х						5,000		
(2) Michael Rebibo Director	1.	x								
(3) George Buckley Director	1.	х								
(4) Wolcott Henry Chairman	1.	х								
(5) David Sontag Vice Chairman	1.	x			.,					
(6) Dominique Sumian Director	1.	х								
(7) Susan DiMarco Director/Secretary	1.	х		Х						
(8) J. Robert Cox Director	1.	х								
(9) David Vennett Director	1.	х					:			
(10) Jill Belasco Director/Treas.	1.	х		Х						
(11) Amb. Sharon Wilkinson Director	1.	х				:				
(12) Philippe Cousteau President	20.			х				17,500		
(13) Scott A. Webb CFO	6.			x				28,803		
(14) Mia DeMezza	40.			х				69,981		
(15)										
(16)										

(A) Name and title		(B) Average	(C) Position (check all that ap						(D) Reportable	(E) Reportable	(F) Estimated
	Name and title	hours per week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	1 compensation	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
(17)											
(18)											
(19)		-									
(20)											
(21)											
(22)											
(23)											
(24)											
(25)											
(26)											
(27)											
(28)											
1b c d	Sub-total	Section A						. ▶	121,284 121,284		
2	Total number of individuals (including but not reportable compensation from the organization	limited to those	listed	d ab	ove) wi	no re	ceiv		4	
3	Did the organization list any former officer, die employee on line 1a? <i>If</i> "Yes," complete Sche					yee,			est compensate	d 	Yes No
4	For any individual listed on line 1a, is the sum the organization and related organizations greindividual										4 X
5	Did any person listed on line 1a receive or acc for services rendered to the organization? If "										5 X
	tion B. Independent Contractors Complete this table for your five highest comp	anastad indone	ndon	+ 00	ntre		ro th	ot r	ossived more th	an \$100 000 of	
1	compensation from the organization.	ensated indepe	enden	il CC	mu	acio	is ui	at 10		an \$100,000 or	
	(A) Name and business add	ress .							(B) Description of se	rvices	(C) Compensation
								-			·
2	Total number of independent contractors (incl more than \$100,000 in compensation from the	-	mited	to t	hos	e lis	sted a	abo	ve) who receive	d	

Par	t VIII	Statement of Revenue						
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
nts nts	1a	Federated campaigns				通告发育	学是提出	
Contributions, gifts, grants and other similar amounts	b	Membership dues	<u>1b</u>			44.53	1967	
s, (am	С	Fundraising events	1c					
gifts, lar am	d	Related organizations	1d				3.75.14.6	
ini ini	е	Government grants (contribution	ns) 1e				大大大学	\$44 = - T
tior er s	f	All other contributions, gifts, gra	nts, and				ners and	
ibu		similar amounts not included ab	ove 1 <u>f</u>	1,114,232	25 AND RECOGNISHED			
Contributions, and other simi	g	Noncash contributions included in li	nes 1a-1f: \$	60,000				
a C	h	Total. Add lines 1a-1f	<u> </u>	<u> </u>	1,123,661	The state of the s		And Charles
e				Business Code				
Ven	2a	Speakers Fees		812900	1,416	1,416		
å	b							
Program Service Revenue	С							
Ser	d							
E E	e							
J.Bo.	f	All other program service revenu	ле					
Ē	g	Total. Add lines 2a-2f		<u>.</u> . >	1,416			
	3	Investment income (including di						
		other similar amounts)			34			
	4	Income from investment of tax-e	xempt bond pro	oceeds▶				
	5	Royalties	<u> </u>	<u> </u>				
			(i) Real	(ii) Personal			Sea Pleasant	
	6a	Gross Rents						
	b	Less: rental expenses				Belgie Asi		
	С	Rental income or (loss)						
	d	Net rental income or (loss)						
	7a	Gross amount from sales of	(i) Securities	(ii) Other		Charletin		
		assets other than inventory.						
	b	Less: cost or other basis						Total Technical
Ì		and sales expenses				The second	PER 4 45	
	С	Gain or (loss)			Trotada (多种的一些有效	
	d	Net gain or (loss)						
a					September 199			
Ž	8a	Gross income from fundraising			计一个个分数数 计			
ě		events (not including \$						
8		of contributions reported on line				Differences		
Other Revenue		See Part IV, line 18						
8	b	Less: direct expenses				of his		
	С	Net income or (loss) from fundra		<u> </u>		1,2		
	9a	Gross income from gaming activ						
		See Part IV, line 19				Malanana	Section 1	
	b	Less: direct expenses						
		Net income or (loss) from gamin	g activities	<u> ▶</u>				5000E277.5500E8752828284
	10a	Gross sales of inventory, less						
	_	returns and allowances						
		Less: cost of goods sold						
	С	Net income or (loss) from sales	of inventory.					
	44	Miscellaneous Revenue		Business Code				
	11a							
	b							
	C	All other programs						
	d	All other revenue		L				er (a en la companya
	12	Total. Add lines 11a-11d			4 405 444	4 1 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4		Course to Man Annual Con-
- 1	14	Total revenue. See instructions			1,125,111	1,416		

Part IX Statement of Functional Expenses

campaign and fundraising solicitation.

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D). (C) (D) (A) (B) Do not include amounts reported on lines 6b. Total expenses Program service Management and Fundraising 7b, 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21 Grants and other assistance to individuals in 2 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, trustees, and key employees 92.481 68,235 4,770 19.476 Compensation not included above, to disqualified 6 persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 7 Other salaries and wages 37,949 35,503 2.446 Pension plan contributions (include section 401(k) and section 403(b) employer contributions) 9 8,763 6,835 542 1,386 10,002 480 7,801 1,721 10 Fees for services (non-employees): 11 10,266 10,266 b 1,776 2,730 28.803 24,297 C d Professional fundraising services. See Part IV, line 17... е 146,565 45,487 8,110 92,968 g 12 Advertising and promotion 1,266 837 394 13 Information technology 22,793 17,085 5,708 14 15 16 8,451 5,395 2,021 1,035 6,149 17 43,567 32,680 4,738 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 4.019 51 3,714 254 19 Conferences, conventions, and meetings 7,000 7,000 20 21 4.930 4.930 22 Depreciation, depletion, and amortization 3,610 1,567 1,744 299 23 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.) Specialty Plate Costs 2,226 2,226 Education program costs 254,789 254,789 Licenses and registrations 1,172 150 2,027 705 Telephone 2,291 833 527 3,651 Payroll processing fee 2,180 1,700 104 376 All other expenses Misc. 4.238 22,991 17.705 1.048 Total functional expenses. Add lines 1 through 24f. 718,329 582,936 90.703 44.690 25 Joint costs. Check here ▶ if following SOP 98-2 (ASC 958-720). Complete this line only if the organization reported in column (B) joint costs from a combined educational

95-4789334

	990 (2				95-4789334	Page 11
Pa	ırt X	Balance Sheet	Y			
			(A) Beginning of year		(B) End of y	/ear
	1	Cash—non-interest-bearing	62,460	1		387,087
	2	Savings and temporary cash investments		2		
	3	Pledges and grants receivable, net		3		135,000
	4	Accounts receivable, net		4		681
	5	Receivables from current and former officers, directors, trustees, key			And the same of the same	
		employees, and highest compensated employees. Complete Part II of Schedule L		5		
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			A Taraka Majaran Pangaran	
		employers and sponsoring organizations of section 501(c)(9) voluntary			Allen La Alle Alle Alle Alle Alle Alle Alle All	
ş		employees' beneficiary organizations (see instructions)	#HANDARD RELIGION AND CONTROL PROCESSOR AND CONTROL PROCESSOR FOR	6	SYC 2-30 States and your seasons define a Cold in second with	poweded with the second second
Assets	7	Notes and loans receivable, net		7		
Ą	8	Inventories for sale or use		8		57,800
	9	Prepaid expenses and deferred charges	670	9		718
	10a	Land, buildings, and equipment: cost or		34	PARTITION AND	1-21-29
		other basis. Complete Part VI of Schedule D 10a 47,355				
	b	Less: accumulated depreciation 10b 37,424	William College Colleg	10c	E-WOMEN WAS ARRESTED AND COLUMN AND DESCRIPTION OF THE PROPERTY OF THE PROPERT	9,931
	11	Investments—publicly traded securities		11		
	12	Investments—other securities. See Part IV, line 11		12		
	13	Investments—program-related. See Part IV, line 11		13		
	14	Intangible assets	28,769	14		26,153
	15	Other assets. See Part IV, line 11		15		
	16	Total assets. Add lines 1 through 15 (must equal line 34)	98,602	16		617,370
	17	Accounts payable and accrued expenses	43,860	17		30,660
	18	Grants payable		18		
	19	Deferred revenue	5,000	19		
	20	Tax-exempt bond liabilities		20		
es	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21		
<u>:</u>	22	Payables to current and former officers, directors, trustees, key	D. A. C.			
Liabilities		employees, highest compensated employees, and disqualified				
=		persons. Complete Part II of Schedule L	87,647	22		87,647
	23	Secured mortgages and notes payable to unrelated third parties		23		
	24	Unsecured notes and loans payable to unrelated third parties		24		
	25	Other liabilities. Complete Part X of Schedule D		25		
	26	Total liabilities. Add lines 17 through 25	136,507	26		118,307
Se		Organizations that follow SFAS 117, check here ► X and complete lines 27 through 29, and lines 33 and 34.	Bug Sala			
Š	0.7	•	F2 F42	07		207.425
ala	27	Unrestricted net assets	-53,543			207,425
8	28 29		15,638	28 29		291,638
Ĕ	25	Permanently restricted net assets		29 182 %		
Net Assets or Fund Balances		Organizations that do not follow SFAS 117, check here ▶ and complete lines 30 through 34.				
iets	30	Capital stock or trust principal, or current funds		30		
488	31	Paid-in or capital surplus, or land, building, or equipment fund		31		
et /	32	Retained earnings, endowment, accumulated income, or other funds		32		
Ž	33	Total net assets or fund balances	-37,905			499,063
	34	Total liabilities and net assets/fund balances	98,602	34		617,370

Form 9	990 (2010) Earth Echo International, Inc.	95-4	789334	Page 12	2
Part	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	1	,125,111	_
2	Total expenses (must equal Part IX, column (A), line 25)	2		718,329)
3	Revenue less expenses. Subtract line 2 from line 1	3		406,782	<u>?</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		-37,905	<u>;</u>
5	Other changes in net assets or fund balances (explain in Schedule O)	5		130,186	3
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		499,063	3
Part	XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				
				Yes No	_
1	Accounting method used to prepare the Form 990: X Cash Accrual Other		¥	15.77 43.67	74 57
	If the organization changed its method of accounting from a prior year or checked "Other," explain in				Å
	Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	Х	
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	_
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight				_
	the audit, review, or compilation of its financial statements and selection of an independent accountant? .		2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in	1	100		
	Schedule O.		ores of the	100	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were				
	issued on a separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
					Ø
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?		3a	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.		3b		_
			Form	990 (2010)

Form 4562

(Including Information on Listed Property)

Depreciation and Amortization

OMB No. 1545-0172
2010
Attachment

Department of the Treasury Internal Revenue Service

► See separate instructions.

Attach to your tax return.

Sequence No. 67

Name(s) shown on return Business or activity to which this form relates Identifying number Earth Echo International, Inc. 990 95-4789334 Part I **Election To Expense Certain Property Under Section 179** Note: If you have any listed property, complete Part V before you complete Part I. 1 Maximum amount (see instructions) 500,000 2 Total cost of section 179 property placed in service (see instructions). 2 5,543 3 Threshold cost of section 179 property before reduction in limitation (see instructions) 3 2,000,000 4 5 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions 6 (a) Description of property 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 . 9 Tentative deduction. Enter the smaller of line 5 or line 8 9 10 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions) . 11 12 Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11 12 13 Carryover of disallowed deduction to 2011. Add lines 9 and 10, less line 12 Note: Do not use Part II or Part III below for listed property. Instead, use Part V. Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions.) 14 Special depreciation allowance for qualified property (other than listed property) placed in service 15 16 Other depreciation (including ACRS). Part III MACRS Depreciation (Do not include listed property.) (See instructions.) Section A 17 MACRS deductions for assets placed in service in tax years beginning before 2010 18 If you are electing to group any assets placed in service during the tax year into one or more Section B - Assets Placed in Service During 2010 Tax Year Using the General Depreciation System (c) Basis for depreciation (b) Month and (d) Recovery year placed (business/investment use (a) Classification of property (e) Convention (f) Method (g) Depreciation deduction period in service only-see instructions) 19 a 3-year property **b** 5-year property 191 5 HY S/L 19 c 7-year property d 10-year property e 15-year property f 20-year property g 25-year property 25 yrs. S/L h Residential rental 27.5 yrs. MM S/L property 27.5 yrs. MM S/L i Nonresidential real 39 vrs. MM S/L MM S/L Section C - Assets Placed in Service During 2010 Tax Year Using the Alternative Depreciation System 20 a Class life S/L b 12-year 12 yrs. S/L c 40-year MM 40 vrs. S/L Part IV Summary (See instructions.) 1,855 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instructions . 2,315 23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs 23

Form 4562 (2010) Earth Echo International, Inc. 95-4789334 Listed Property (Include automobiles, certain other vehicles, certain computers, and property used for Part V entertainment, recreation, or amusement.) Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable. Section A—Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.) **24a** Do you have evidence to support the business/investment use claimed? Yes No 24b If "Yes," is the evidence written? Yes No (a) (b) (d) (e) **(f)** (g) (i) Basis for depreciation Type of property Date placed Cost or other basis Recovery Method/ Depreciation Elected section 179 investment use (business/ investment (list vehicles first) in service percentage use only) period Convention deduction cost Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use (see instructions) 25 Property used more than 50% in a qualified business use: See statement 1,855 27 Property used 50% or less in a qualified business use: S/L -S/L -S/L -Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1 . 28 1,855 Add amounts in column (i), line 26. Enter here and on line 7, page 1 Section B—Information on Use of Vehicles Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles. (a) (b) (c) (d) (f) (e) Vehicle 1 Vehicle 2 Vehicle 3 Vehicle 4 Vehicle 5 Vehicle 6 30 Total business/investment miles driven during the year (do not include commuting miles) . . . Total commuting miles driven during the year . 32 Total other personal (noncommuting) miles driven 33 Total miles driven during the year. Add lines 30 through 32 34 Was the vehicle available for personal use Yes Yes No Yes No No Yes Yes Yes No No No during off-duty hours? 35 Was the vehicle used primarily by a more than 5% owner or related person? Is another vehicle available for personal use? Section C—Questions for Employers Who Provide Vehicles for Use by Their Employees Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons (see instructions). 37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, Yes No 38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners 40 Do you provide more than five vehicles to your employees, obtain information from your employees about Do you meet the requirements concerning qualified automobile demonstration use? (See instructions.) . . . Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles. Part VI **Amortization** (a) (b) (c) (d) (e) Amortization Description of costs Date amortization Amortizable amount Code section Amortization for this year period or begins 42 Amortization of costs that begins during your 2010 tax year (see instructions):

Total. Add amounts in column (f). See the instructions for where to report

2,615

2.615

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SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

► See separate instructions.

2010
Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

Eart	ı Ec	ho Internation									89334		
Pa	rt I	Reason	for Public Ch	arity Status (All org	ganizatio	ns must o	complete	this par	t.) See ir	struction	S.		
The	o <u>rga</u>		•	lation because it is: (F		•	•	•	•				
1	<u>L</u>	A church, co	nvention of chu	rches, or association	of church	es describ	ed in se d	tion 170	(b)(1)(A)(i).			
2		A school de:	scribed in secti	on 170(b)(1)(A)(ii) . (A	ttach Sch	edule E.)							
3		A hospital or	r a cooperative l	hospital service organ	ization de	scribed in	section	170(b)(1)	(A)(iii).				
4			esearch organizationers	ation operated in conju ate:	unction wi	ith a hospi	ital descri	bed in se	ction 170	(b)(1)(A)	(iii). En	ter the	;
5		An organiza	tion operated fo	r the benefit of a colle (Complete Part II.)	ge or univ	ersity ow	ned or op	erated by	a govern	mental un	it desc	ribed	
6		A federal, st	ate, or local gov	ernment or governme	ental unit c	described	in sectio	n 170(b)(1)(A)(v).				
7	X	•	An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi) . (Complete Part II.)										
8		A communit	y trust described	d in section 170(b)(1)	(A)(vi). (C	Complete i	Part II.)						
9		An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)											
10		An organiza	tion organized a	and operated exclusive	ely to test	for public	safety. S	ee sectio	n 509(a)(4).			
11 e		purposes of 509(a)(3). C a Type By checking persons other	one or more putheck the box that I b this box, I certification.	and operated exclusive blicly supported organ at describes the type of Type II cfy that the organization on managers and other the type of type of the type of type of type of type of the type of	nizations of support Type n is not co	described ing organ e III–Fund entrolled d	in sectior ization an ctionally in irectly or	n 509(a)(1 nd comple ntegrated indirectly) or section te lines 1	on 509(a)(a)(a)(a)(b) through d Tome Tome Towns	(2). See h 11h. ype III qualifie	e secti –Othe d	r
f				a written determinatio	n from the	IRS that	it is a Tyr	a I Tyne	II. or Typ	a III sunn	ortina		
•		-	, check this box							- III supp			
g		-		the organization acce	epted any	gift or cor	tribution	from any	of the				
		following per											
			-	or indirectly controls,		_		•				Yes	No
				verning body of the su							11g(i)		
				person described in (ty of a person describe							11g(ii) 11g(iii)		
h				ation about the suppo							<u> </u>	<u> </u>	L
(i)		e of supported panization	(ii) EiN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	(iv) Is the o	organization sted in your document?	(v) Did y the organ col. (i)	ou notify nization in of your port?	organiza (i) organi	s the tion in col. zed in the S.?	(vii) Amount of support		
					Yes	No	Yes	No	Yes	No			
(A)													
/B\													
(B)	•												
(C)													
(D)													
(E)											!		
Tota	<u> </u>									anderson			

18

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar 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.") 270.000 283,351 304,281 448,351 1,123,661 2,429,644 Tax revenues levied for the organization's 2 benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 3 1,123,661 4 270,000 283,351 304,281 448,351 2,429,644 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11. column (f) 886.782 Public support. Subtract line 5 from line 4. 1,542,862 Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2006 (b) 2007 (c) 2008(d) 2009 (e) 2010 (f) Total 270,000 283.351 304,281 448.351 1,123,661 2,429,644 8 Gross income from interest, dividends. payments received on securities loans, rents, royalties and income from similar sources 190 3,151 1,766 384 34 5,525 9 Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. Add lines 7 through 10 . 11 2,435,169 12 1.416 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) Section C. Computation of Public Support Percentage Public support percentage for 2010 (line 6, column (f) divided by line 11, column (f)) 63.36% Public support percentage from 2009 Schedule A, Part II, line 14 15 33 1/3% support test-2010. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box 16a 33 1/3% support test-2009. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this 10%-facts-and-circumstances test-2010. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported 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 organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly

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.)

Secti	on A. Public Support						
Caler	idar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
	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						
3	Gross receipts from activities that are not an unrelated trade or business under section 513.				•		
	Tax revenues levied for the organization'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						
7a .	Total. Add lines 1 through 5 . Amounts included on lines 1, 2, and 3 received from disqualified persons						
	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						
8	Add lines 7a and 7b . Public support (Subtract line 7c from line 6.)						
	on B. Total Support	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -					
Caler	dar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
10a	Amounts from line 6						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
11	Add lines 10a and 10b						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
	Total support. (Add lines 9, 10c, 11, and 12.)						
	First five years. If the Form 990 is for the organization organization, check this box and stop here						• 🗀
Secti	on C. Computation of Public Support	Percentage					
	Public support percentage for 2010 (line 8, column					15	
	Public support percentage from 2009 Schedule A,					16	
	on D. Computation of Investment Inco			(0)	•	4=	
	Investment income percentage for 2010 (line 10c, Investment income percentage from 2009 Schedul					17	 .
	33 1/3% support tests–2010. If the organization d					18 and line 17 is	
	not more than 33 1/3%, check this box and stop h						
b :	33 1/3% support tests–2009. If the organization dine 18 is not more than 33 1/3%, check this box are	id not check a bo	ox on line 14 or li	ne 19a, and line	16 is more than	33 1/3% and	
1				uy a pubi	TOTAL CHAPPOILED OF	GAINEBUUTI	

		95-4789334	Page 4
	Supplemental Information. Complete this part to provide the explanations required Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional instructions).		0;
Part IV 2006 Ur	nusual Grants - \$200,000		
Part IV 2007 Ur	nusual Grants - \$209,000		
Part IV 2008 Ur	nusual Grants - \$716,000		
Part IV 2009 Ur	nusual Grants - \$116,000		

	•		

SCHEDULE D (Form 990)

Supplemental Financial Statements Complete if the organization answered "Yes," to Form 990,

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Part IV, line 6, 7, 8, 9, 10, 11, or 12. Attach to Form 990.

► See separate instructions.

Open to Public Inspection

Name	of the organization			Employer identification number
Earth	Echo International, Inc.			95-4789334
Par	Organizations Maintaining Done	or Advised Funds or Other Simila	r Fun	ds or Accounts. Complete if
	the organization answered "Yes" to	p Form 990, Part IV, line 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 d			
_	funds are the organization's property, subject			
6	Did the organization inform all grantees, do			
	used only for charitable purposes and not for			
	purpose conferring impermissible private be			
Par		lete if the organization answered "Y		Form 990, Part IV, line 7.
1	Purpose(s) of conservation easements held	· · · · · · · · · · · · · · · · · · ·	• -	
	Preservation of land for public use (e.g., recr	eation or education) Preserva	tion of	an historically important land area
	Protection of natural habitat	Preserva	tion of	a certified historic structure
	Preservation of open space	_		
2	Complete lines 2a through 2d if the organiza	ation held a qualified conservation cont	ibution	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 ear			2b
C	Number of conservation easements on a ce	rtified historic structure included in (a) .		2c
d	Number of conservation easements include	d in (c) acquired after 8/17/06, and not	on a	
	historic structure listed in the National Regis	ter		2d
3	Number of conservation easements modifie	d, transferred, released, extinguished, e	or term	inated by the organization
	during the tax year			
4	Number of states where property subject to		•	
5	Does the organization have a written policy			
6	violations, and enforcement of the conserva Staff and volunteer hours devoted to monito			
•	Stall and volunteer flours devoted to mornito	ring, inspecting, and emorcing conserv	alion e	asements during the year
7	Amount of expenses incurred in monitoring,	inspecting and enforcing conservation	easen	nents during the year
-	▶ \$	produing, and officering concorration	00001	nonto danny the year
8	Does each conservation easement reported	on line 2(d) above satisfy the requirem	ents o	f section
	170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?			Yes No
9	In Part XIV, describe how the organization re	eports conservation easements in its re	venue	and expense statement, and
	balance sheet, and include, if applicable, the		's fina	ncial statements that describes
	the organization's accounting for conservation			
Part	_ •	ons of Art, Historical Treasures, or O	ther Si	milar Assets.
	Complete if the organization answere	d "Yes" to Form 990, Part IV, line 8.		
1a	If the organization elected, as permitted und	er SFAS 116 (ASC 958), not to report i	n its re	venue statement and balance sheet
	works of art, historical treasures, or other sir			
	of public service, provide, in Part XIV, the te			
b	If the organization elected, as permitted und			
	works of art, historical treasures, or other sir		ducatio	on, or research in furtherance
	of public service, provide the following amou	ints relating to these items:		
	(i) Revenues included in Form 990, Part VII	I, line 1		• \$
•	(ii) Assets included in Form 990, Part X			
2	If the organization received or held works of			
_	following amounts required to be reported up			
a	Revenues included in Form 990, Part VIII, lin	1 e 1		> \$
b	Assets included in Form 990, Part X			▶ \$

Page	2

Part								
3	Using the organization's acquisition, a		er records	, check a	ny of the follo	wing that are a signific	cant	
	use of its collection items (check all the	nat apply):						
а	Public exhibition		d 📙	Loan	or exchange _l	programs		
b	Scholarly research		е 🗌	Other				
С	Preservation for future generati	ons						
4	Provide a description of the organizat Part XIV.	ion's collections ar	nd explain	how they	further the o	rganization's exempt p	urpose in	
5	During the year, did the organization assets to be sold to raise funds rather	r than to be mainta	ained as pa	art of the	organization's	s collection?	Yes No	
Part	Part IV 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, included on Form 990, Part X?						Yes No	
b	If "Yes," explain the arrangement in P	art XIV and compl	ete the fol	lowing tal	ble:			
							Amount	
C	Beginning balance							
đ	Additions during the year					1d 1e		
e f	Distributions during the year Ending balance					1f		
2-	Did the organization include an amou						Yes X No	
2a b	If "Yes," explain the arrangement in P		art A, illie	211			res _K_ No	
Part			ation ans	wered "\	es" to Form	990 Part IV line 10	<u> </u>	
ıaıı	Endowment unus. Compi	(a) Current year		or year	(c) Two years			
1a	Beginning of year balance		1	•				
b	Contributions						许多特殊的基础。	
С	Net investment earnings, gains,							
	and losses					A STATE OF THE STA		
d	Grants or scholarships							
е	Other expenditures for facilities							
	and programs							
f	Administrative expenses		-					
g	End of year balance		<u> </u>		l			
2	Provide the estimated percentage of		nce held as	3:				
a	Board designated or quasi-endowme	nt –						
b	Permanent endowment							
C	Term endowment Are there endowment funds not in the	 nossession of the	a organiza	tion that a	are held and a	administered for the		
3a	organization by:	e possession or the	e Organiza	uon mat e		darministered for the	Yes No	
	(i) unrelated organizations						3a(i)	
	(ii) related organizations						3a(ii)	
b	If "Yes" to 3a(ii), are the related organ						3b	
4	Describe in Part XIV the intended use	es of the organizat	ion's endo	wment fu	nds.			
Part	VI Land, Buildings, and Equi	pment. See For	m 990, Pa	art X, line	e 10.			
	Description of investment	(a) Cost or (invest		, ,	ost or other is (other)	(c) Accumulated depreciation	(d) Book value	
1a	Land					2 D. C. (1983)		
b	Buildings							
C	Leasehold improvements				/	20 : 22	0.000	
d	Equipment				42,092	32,163	9,929	
e	Other		000 004	V colum	5,263		0.031	
LOTA	I. Add lines 1a through 1e. (Column (d) must equal Form	i yy u, Pan	A, COIUM	ıı (□), iine 10	(6).)	9,931	

Part VII	Investments—Other Securi	<u>ties. See Form 990, Par</u>	t X, line 12.	
(a	Description of security or category (including name of security)	(b) Book value	(c) Method of v Cost or end-of-year	
(1) Financia	I derivatives			····
	neld equity interests			
(3) Other		-		
(A)				
(<u>B</u>)				
(Ç)		-		
(D)		-		
(0)		-		
(H)		•		
(I)		-		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)	>		
Part VIII	Investments—Program Rela	ated. See Form 990, Pa		
	(a) Description of investment type	(b) Book value	(c) Method of v Cost or end-of-year	
(1)				
(2)	7.11.2			
(3)				
(4)				
(5)				
<u>(6)</u>				
<u>(7)</u> <u>(8)</u>				
(9)				
(10)				
) must equal Form 990, Part X, col. (B) line 13.)	>		
Part IX	Other Assets. See Form 990	, Part X, line 15.	• 0 • 0 • 1 • 0 • 10 • 10 • 10 • 10 • 1	
		(a) Description		(b) Book value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(8)				
(9)				
(10)				
	mn (b) must equal Form 990, Part X	, col. (B) line 15.)		
Part X	Other Liabilities. See Form 9			
1.	(a) Description of liability	(b) Amount		
(1) Federa	income taxes			
(2)				
(3)				
(4)				
(5)				
(6)				
(7) (8)				
(8) (9)				
(10)				
(11)				
	must equal Form 990, Part X, col. (B) line 25.)	>		

2. FIN 48 (ASC 740) Footnote. In Part XIV, 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).

C L	E - L -	1	
ann	-cnc	International	Inc

95-4789334

Schedule D (Form 9	990) 2010	Page 5
Part XIV	Supplemental Information (continued)	
<u></u>		
		
	•••••••••••••••••••••••••••••••••••••••	
		·

SCHEDULE L (Form 990 or 990-EZ)

Transactions With Interested Persons

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

(10)

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

Inspection Employer identification number

Earth Ecl	ho International, Inc.						95	-47893	334			
Part I	Excess Benefit Transactions Complete if the organization ar								=7 Pa	nrtV li	ne 40h	· · · · · · · · · · · · · · · · · · ·
			103 01	11 01111 330, 1 211 14				1 000-	, , ,	v,		rected?
1	(a) Name of disqualified perso	าก			(b) Description	n of trans	saction				Yes	No
(1)												
(2)												
(3)												
(4)												
(5)												
(6)												
i										\$		
3 E	Enter the amount of tax, if any, on lir	ne 2, abo	ove, reim	bursed by the orga	nization				▶	\$		
Part II												
	Complete if the organization ar	nswered	"Yes" or	Form 990, Part IV	, line 26, or	Form 9	90-EZ	, Part	V, line	38a.		
(a) Name of interested person and purpose		, , ,	to or from anization?	(c) Original principal amount	(d) Balance	due	(e) In default?		(f) Approved by board or committee?		(g) Written agreement?	
		То	From				Yes	No	Yes	No	Yes	No
(1) Jai	nice Cousteau To fund prior year leg	Х		87,647	8	37,647		Х	Х		Х	
(2)												
(3)												
(4)												
(5)												
(6)	494											
(7)												
(8)						,						
(9)				<u> </u>								
(10)		<u> </u>										
Total				<u> ▶ \$</u>	8	37,647	15	THE R.			d e	
Part III												
	Complete if the organization ar	nswered	"Yes" or	n Form 990, Part IV	', line 27.	·						
	(a) Name of interested person	(b) F	Relationship	between interested pers organization	on and the		(c) A	mount a	ind type	of assis	tance	
(1)												
(2)						ļ						
(3)												
(4)												
(5)						<u> </u>						
(6)						-						
<u>(7)</u>	to the state of th	ļ										
(8)		ļ				ļ	. -					
(9)		I				1						

Part IV	Business Transactions Invol Complete if the organization ar			8b, or 28c.		
(1	a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	organiz	aring of zation's nues?
/4\					Yes	No
(1) (2)						
(3)						<u> </u>
(4)						
(5)						
(6)						
(7) (8)					<u> </u>	<u> </u>
(9)					+	
(10)					_	
Part V	Supplemental Information		•			
	Complete this part to provide a	dditional information for re	sponses to questions	on Schedule L (see instruction	ns).	
			•			

				* * * * * * * * * * * * * * * * * * * *		

*				•••••		

SCHEDULE M (Form 990)

Noncash Contributions

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

OMB No. 1545-0047

Employer identification number

Open To Public Inspection

Internal Revenue Service Name of the organization

Department of the Treasury ▶Attach to Form 990.

Earth Echo International, Inc. 95-4789334 Part I Types of Property (c) (d) (a) (b) Noncash contribution Check if Number of contributions or Method of determining amounts reported on applicable items contributed noncash contribution amounts Form 990, Part VIII, line 1g Art-Works of art Art—Historical treasures . . . 2 3 Art—Fractional interests . . . Books and publications . . . 5 Clothing and household goods 6 Cars and other vehicles . . . 7 Boats and planes 8 Intellectual property 9 Securities—Publicly traded . . 10 Securities—Closely held stock 11 Securities—Partnership, LLC, or trust interests 12 Securities-Miscellaneous . . Qualified conservation 13 contribution—Historic structures Qualified conservation contribution-Other 15 Real estate—Residential Real estate—Commercial . . . 16 17 Real estate—Other 18 Collectibles 19 Food inventory 20 Drugs and medical supplies. Taxidermy 21 22 Historical artifacts 23 Scientific specimens 24 Archeological artifacts 25 Other ▶ (Flip Cams) 60,000 Fair Market Value at Time of (300 Other ► (_____) 26 27 Other ► (_____) 28 Other ▶ (Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement 29 Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1–28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? 30a b If "Yes," describe the arrangement in Part II. 31 Does the organization have a gift acceptance policy that requires the review of any non-standard 31 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell 32a b If "Yes," describe in Part II. If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.

Schedule M (I	Form 990) (2010) Earth Echo International, Inc.	95-4789334	Page 2
Part II	Supplemental Information. Complete this part to provide the information required by Part	I, lines 30b,	
	32b, and 33. Also complete this part for any additional information.		
	•••••		
			·
	•••••••••••••••••••••••••••••••••••••••		

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No. 1545-0047 Open to Public

Department of the Treasury Internal Revenue Service Name of the organization 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.

Inspection Employer identification number

95-4789334 Earth Echo International, Inc. Form 990, Part III, Line 4d: Program Service Expenses: 1,576, Grants and allocations: 0, Revenue: 679 Speaking Engagements - The organization's personnel are engaged in speaking to various groups as a direct means of educating them about the issues facing the health and well being of the ocean eco systems. Form 990, Part III, Line 4d: Program Service Expenses: 62,664, Grants and allocations: 0, Revenue: 110,000 Stream (STudents Reporting Environmental Action through Media) provides students with the training and resources to bring national attention to stories of environmental and human impact in their own communities, as well as a multi-media digital publishing platform for student journalists to post their stories. Form 990 Part VI Section B Line 11a The organization circulates the form 990 to members of the finance committee for their review and comment prior to filing. Form 990 Part VI Section C Line 19 The organization does not make these documents available to the public Form 990 Part VI Section B Line 12c The organization will take an annual poll of the board and officers to determine if there are any conflicts that may need to be addressed. Form 990 Part VI Section A Line 2 Philippe Cousteau and Jan Cousteau have a family relationship of Son and Mother. Form 990 Part XI Line 5 The adjustment to the fund balance is to reflect the net adjustments for accrual based items that reduce the net income on the information return. The balance sheet is reflected on the return using the accrual basis of accounting. The changes are due to timing differences in recognition of the pledge receivables, prepaid expenses, accounts payable and accrued expenses. Form 990 Part III Line 2 The organization began the STREAM program in 2010. It also became involved in the Gulf oil crisis for a limited period of time. Both programs are more fully

explained in the attachments to Part III.

schedule O (Form 990 or 990-EZ) (2010)		Page Z
lame of the organization Earth Echo International, Inc.	Employer identification number 95-4789334	
Latti Ecilo international, inc.	J30-47 03334	
2009 and so no expenditures are reflected in this report.		
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For	Form 4562 Statement - 990	ıt - 990								i i			12/	12/31/2010		
Item	Description of	Date Placed Asset	Asset	Bus. Use	Cost or	Sec. 179	Credit	Special	Salvage	Recovery	Recovery	Recovery Method	Con-	Prior Accum.	2010	2010
Š	Property	In Service	Code	%	Other	Deduction		Allowance	Value	Basis	Period		vention	Deprec.,	Deprec.	Accum.
					Basis								Code	179, Bonus		Deprec.
_	Air Tanks	6/1/2003	F-10	100.00%	1,342			671		671	7	200DB	£	1,312	30	1,342
=	Computer	9/5/2005	Ή S	100.00%	4,029					4,029	သ	200DB	¥	3,797	232	4,029
13	HP Printer	12/31/2006	Ψ	100.00%	304					304	2	200DB	÷	251	35	286
17	2 Netbooks	7/14/2009	F-5	100.00%	720					720	လ	SUGDS	Ā	72	144	216
24	Copier	10/15/2010	φ	100.00%	191					191	2	SUGDS	¥		19	19
Liste	Listed Property															
Listed	Listed property with more than 50% business use (Line 25 and 26)	50% busines:	s use (L	ine 25 and 26)												
19	Camera	6/10/2010	F-8	100.00%	3,128					3,128	7	SU6DS	¥		223	223
20	Camera Lenses	9/14/2010	Ψ	100.00%	2,224					2,224	7	SUGDS	¥		159	159
9	Notebook	10/13/2009	Т 4	100.00%	962					962	2	SU/GDS	MQ 4	24	192	216
15	Notebook Computer, Mia	1/13/2008	Т 4	100.00%	2,011					2,011	2	SUGDS	Σ	787	402	1.189
16	Notebook Computer, PC	12/14/2008	F-4	100.00%	4,000					4,000	2	SUGDS	Σ	833	800	1,633
4	Wireless Phone	1/13/2008	F-12	100.00%	555					555	7	SU/GDS	MQ 2	148	79	227
	Total listed prop with > 50% business use	% business us	a)		12,880					12,880			'	1,792	1,855	3,647
													•			
	Subtotal Listed Property	perty			12,880					12,880				1,792	1,855	3,647
	Website Development	1/1/2006	6-2	Z-9 100.00%	39,232					39,232	15	S	Ā	10,464	2,615	13,079