

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)

OMB No. 1545-0047

**2008**

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

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

**A For the 2008 calendar year, or tax year beginning JUL 1, 2008 and ending JUN 30, 2009**

<b>B</b> Check if applicable:  <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Termination <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type.  See Specific Instructions.	<b>C Name of organization</b> GREATERGOOD.ORG Doing Business As Number and street (or P.O. box if mail is not delivered to street address) Room/suite 600 UNIVERSITY AVENUE 1000 City or town, state or country, and ZIP + 4 SEATTLE, WA 98101	<b>D Employer identification number</b> 20-4846675
		<b>E Telephone number</b> 206-268-5400	<b>G Gross receipts \$</b> 3,128,451.
		<b>H(a) Is this a group return for affiliates?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>H(b) Are all affiliates included?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions) <b>H(c) Group exemption number</b> ▶	
		<b>I Tax-exempt status:</b> <input checked="" type="checkbox"/> 501(c) ( 3 ) (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527	
		<b>J Website:</b> ▶ WWW.GREATERGOOD.ORG	
		<b>K Type of organization:</b> <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶	
		<b>L Year of formation:</b> 2006 <b>M State of legal domicile:</b> WA	

Part I Summary				
	1	Briefly describe the organization's mission or most significant activities: GREATERGOOD.ORG IS DEVOTED TO ADDRESSING HEALTH AND WELL-BEING OF PEOPLE (PARTICULARLY WOMEN AND		
	2	Check this box <input checked="" type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its assets.		
Activities & Governance	3	Number of voting members of the governing body (Part VI, line 1a)	3 4	
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4 4	
	5	Total number of employees (Part V, line 2a)	5 0	
	6	Total number of volunteers (estimate if necessary)	6 7	
	7a	Total gross unrelated business revenue from Part VIII, line 12, column (C)	7a 0.	
	7b	Net unrelated business taxable income from Form 990-T, line 34	7b 0.	
	Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year 1,610,794. Current Year 1,506,158.
9		Program service revenue (Part VIII, line 2g)		
10		Investment income (Part VIII, column (A), lines 3, 4, and 7d)		
11		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1,548,606. 1,622,293.	
12		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	3,159,400. 3,128,451.	
Expenses		13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	2,745,907. 3,414,087.
		14	Benefits paid to or for members (Part IX, column (A), line 4)	
		15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	
		16a	Professional fundraising fees (Part IX, column (A), line 11e)	
		16b	Total fundraising expenses (Part IX, column (D), line 25) ▶	
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	17,992. 5,087.	
18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	2,763,899. 3,419,174.		
19	Revenue less expenses. Subtract line 18 from line 12	395,501. -290,723.		
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	Beginning of Year 802,435. End of Year 509,821.	
	21	Total liabilities (Part X, line 26)	1,891.	
	22	Net assets or fund balances. Subtract line 21 from line 20	800,544. 509,821.	

<b>Part II Signature Block</b>			
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.			
<b>Sign Here</b>	Signature of officer _____ LISA J. HALSTEAD, PRESIDENT Type or print name and title	Date	
<b>Paid Preparer's Use Only</b>	Preparer's signature _____ Firm's name (or yours if self-employed), address, and ZIP + 4 CLARK NUBER, PS 10900 NE 4TH STREET, SUITE 1700 BELLEVUE, WA 98004	Date	Check if self-employed <input type="checkbox"/> Preparer's identifying number (see instructions) EIN ▶ Phone no. ▶ 425-454-4919

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

Part III Statement of Program Service Accomplishments (see instructions)

1 Briefly describe the organization's mission: SEE SCHEDULE O FOR CONTINUATION GREATERGOOD.ORG IS DEVOTED TO ADDRESSING THE HEALTH AND WELL-BEING OF PEOPLE (PARTICULARLY WOMEN AND CHILDREN), ANIMALS, AND THE PLANET. THE ORGANIZATION WILL MAKE EDUCATIONAL MATERIALS AVAILABLE TO THE GENERAL PUBLIC AND PROVIDE FUNDING TO OTHER REGISTERED CHARITABLE

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 and allocations to others, the total expenses, and revenue, if any, for each program service reported.

SEE SCHEDULE O FOR CONTINUATION(S)

4a (Code: ) (Expenses \$ 890,847. including grants of \$ 890,847. ) (Revenue \$ ) BREAST CANCER & WOMEN'S HEALTH:

\$890,847 RAISED AND GRANTED TO NON-PROFIT PARTNERS TO PAY FOR FREE MAMMOGRAMS FOR WOMEN IN NEED. FUNDS WERE DELIVERED TO VARIOUS HOSPITALS AND CLINICS IN THE U.S. WHERE MAMMOGRAM SCREENING SERVICES WERE PROVIDED. AN ULTRA SOUND MACHINE WAS ALSO PROVIDED TO A HOSPITAL IN SOUTH AFRICA.

4b (Code: ) (Expenses \$ 532,400. including grants of \$ 532,400. ) (Revenue \$ ) LITERACY & CHILDREN'S EDUCATION:

\$532,400 RAISED AND GRANTED TO VARIOUS NON-PROFIT GROUPS PROVIDING PROGRAMS THAT SUPPORT CHILDREN'S LITERACY, EDUCATION AND BASIC HEALTH IN THE US AND ABROAD. FUNDS WERE USED TO DISTRIBUTE BOOKS TO UNDERPRIVILEGED CHILDREN DOMESTICALLY AND SUPPLY LOCAL LANGUAGE BOOKS IN SCHOOLS OVERSEAS, IN ADDITION TO PROVIDING SHOES, SUPPLIES AND UNIFORMS TO SCHOOL AGED GIRLS IN AFRICA AND AFGHANISTAN. FUNDS WERE ALSO USED TO PROVIDE BASIC HEALTH SERVICES, SUCH AS THE ADMINISTRATION OF VITAMIN A TO PREVENT CHILDHOOD ILLNESS AND DISEASE, PROVIDE HIV TESTING TO NEWBORNS, FUND AMPUTEE AND MOBILE HEALTH SERVICES TO CHILDREN IN HAITI, AND SUPPLY CLEAN CHILDBIRTH KITS TO THIRD WORLD

4c (Code: ) (Expenses \$ 526,101. including grants of \$ 526,101. ) (Revenue \$ ) HUNGER & POVERTY:

\$526,101 RAISED AND DISTRIBUTED TO CHARITIES ADDRESSING HUNGER AND POVERTY IN THE US AND INTERNATIONALLY. FUNDS SUPPORTED PROGRAMS TO DISTRIBUTE FOOD, PROVIDE STOVES FOR DISPLACED PEOPLE IN DARFUR, PROVIDE HIGH YIELD SEEDS IN AGRICULTURAL AREAS IN AFRICA, PROVIDE CLEAN WATER IN AFRICAN COMMUNITIES, HIGH-CALORIE, NUTRITIOUS FOOD FOR INFANTS AND MOTHERS IN NIGER AND BASIC SURVIVAL SUPPLIES IN AREAS AFFECTED BY DISASTERS.

4d Other program services. (Describe in Schedule O.) (Expenses \$ 1,464,739. including grants of \$ 1,464,739. ) (Revenue \$ )

4e Total program service expenses ► \$ 3,414,087. (Must equal Part IX, Line 25, column (B).)

**Part IV Checklist of Required Schedules**

		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i> .....	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? .....	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i> .....		X
4	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities? <i>If "Yes," complete Schedule C, Part II</i> .....		X
5	<b>Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations.</b> Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? <i>If "Yes," complete Schedule C, Part III</i> .....		
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i> .....		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i> .....		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i> .....		X
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i> .....		X
10	Did the organization hold assets in term, permanent, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i> .....		X
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? <i>If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable</i> .....		X
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII</i> .....		X
13	Is the organization a school as described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i> .....		X
14a	Did the organization maintain an office, employees, or agents outside of the U.S.? .....		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U.S.? <i>If "Yes," complete Schedule F, Part I</i> .....	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? <i>If "Yes," complete Schedule F, Part II</i> .....	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? <i>If "Yes," complete Schedule F, Part III</i> .....		X
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? <i>If "Yes," complete Schedule G, Part I</i> .....		X
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i> .....		X
19	Did the organization report more than \$15,000 on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i> .....		X
20	Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H</i> .....		X
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i> .....	X	
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i> .....		X
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? <i>If "Yes," complete Schedule J</i> .....		X
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? <i>If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to question 25</i> .....		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? .....		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? .....		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? .....		
25a	<b>Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i> .....		X
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? <i>If "Yes," complete Schedule L, Part I</i> .....		X
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? <i>If "Yes," complete Schedule L, Part II</i> .....		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III</i> .....		X

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

		Yes	No
<b>28</b>	During the tax year, did any person who is a current or former officer, director, trustee, or key employee:		
<b>a</b>	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? <i>If "Yes," complete Schedule L, Part IV</i> .....		X
<b>b</b>	Have a family member who had a direct or indirect business relationship with the organization? <i>If "Yes," complete Schedule L, Part IV</i> .....		X
<b>c</b>	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? <i>If "Yes," complete Schedule L, Part IV</i> .....		X
<b>29</b>	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> .....		X
<b>30</b>	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> .....		X
<b>31</b>	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> .....		X
<b>32</b>	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i> .....	X	
<b>33</b>	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i> .....		X
<b>34</b>	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i> .....		X
<b>35</b>	Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> .....		X
<b>36</b>	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> .....		X
<b>37</b>	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i> .....		X

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

		Yes	No
<b>1a</b>	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable		
	<b>1a</b> 0		
<b>b</b>	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
	<b>1b</b> 0		
<b>c</b>	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		
	<b>1c</b>		
<b>2a</b>	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		
	<b>2a</b> 0		
<b>b</b>	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)		
	<b>2b</b>		
<b>3a</b>	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?		X
<b>b</b>	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		
	<b>3b</b>		
<b>4a</b>	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)?		X
<b>b</b>	If "Yes," enter the name of the foreign country: See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
	<b>4a</b>		
<b>5a</b>	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
<b>b</b>	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
<b>c</b>	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?		
	<b>5c</b>		
<b>6a</b>	Did the organization solicit any contributions that were not tax deductible?		X
<b>b</b>	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
	<b>6b</b>		
<b>7</b>	<b>Organizations that may receive deductible contributions under section 170(c).</b>		
<b>a</b>	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?		X
<b>b</b>	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
	<b>7b</b>		
<b>c</b>	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
<b>d</b>	If "Yes," indicate the number of Forms 8282 filed during the year	<b>7d</b>	
<b>e</b>	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
	<b>7e</b>		
<b>f</b>	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
	<b>7f</b>		
<b>g</b>	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		
	<b>7g</b>		
<b>h</b>	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?		
	<b>7h</b>		
<b>8</b>	<b>Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		
	<b>8</b>		
<b>9</b>	<b>Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.</b>		
<b>a</b>	Did the organization make any taxable distributions under section 4966?		
	<b>9a</b>		
<b>b</b>	Did the organization make a distribution to a donor, donor advisor, or related person?		
	<b>9b</b>		
<b>10</b>	<b>Section 501(c)(7) organizations.</b> Enter: <b>N/A</b>		
<b>a</b>	Initiation fees and capital contributions included on Part VIII, line 12	<b>10a</b>	
<b>b</b>	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	<b>10b</b>	
<b>11</b>	<b>Section 501(c)(12) organizations.</b> Enter: <b>N/A</b>		
<b>a</b>	Gross income from members or shareholders	<b>11a</b>	
<b>b</b>	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	<b>11b</b>	
<b>12a</b>	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?		
<b>b</b>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year <b>N/A</b>	<b>12b</b>	

**Part VI Governance, Management, and Disclosure** (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

**Section A. Governing Body and Management**

For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

		Yes	No
<b>1a</b>	Enter the number of voting members of the governing body		4
<b>b</b>	Enter the number of voting members that are independent		4
<b>2</b>	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	X	
<b>3</b>	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		X
<b>4</b>	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?		X
<b>5</b>	Did the organization become aware during the year of a material diversion of the organization's assets?		X
<b>6</b>	Does the organization have members or stockholders?		X
<b>7a</b>	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?		X
<b>b</b>	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		X
<b>8</b>	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
<b>a</b>	The governing body?	X	
<b>b</b>	Each committee with authority to act on behalf of the governing body?	X	
<b>9a</b>	Does the organization have local chapters, branches, or affiliates?		X
<b>b</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?		
<b>10</b>	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990		X
<b>11</b>	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		X

**Section B. Policies**

		Yes	No
<b>12a</b>	Does the organization have a written conflict of interest policy? If "No," go to line 13	X	
<b>b</b>	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
<b>c</b>	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	X	
<b>13</b>	Does the organization have a written whistleblower policy?		X
<b>14</b>	Does the organization have a written document retention and destruction policy?		X
<b>15</b>	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision:		
<b>a</b>	The organization's CEO, Executive Director, or top management official?		X
<b>b</b>	Other officers or key employees of the organization? Describe the process in Schedule O. (see instructions)		X
<b>16a</b>	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
<b>b</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 **WA**
- 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     Another's website     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: **LISA HALSTEAD - 206-268-5400**  
**600 UNIVERSITY AVENUE, SUITE 1000, SEATTLE, WA 98101**





Part 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		
Contributions, gifts, grants and other similar amounts	1 a	Federated campaigns .....						
	b	Membership dues .....						
	c	Fundraising events .....						
	d	Related organizations .....						
	e	Government grants (contributions)						
	f	All other contributions, gifts, grants, and similar amounts not included above .....	1,506,158.					
	g	Noncash contributions included in lines 1a-1f: \$						
	h	<b>Total.</b> Add lines 1a-1f .....		1506158.				
	Program Service Revenue	Business Code						
2 a		.....						
b		.....						
c		.....						
d		.....						
e		.....						
f		All other program service revenue .....						
g	<b>Total.</b> Add lines 2a-2f .....							
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts) .....						
	4	Income from investment of tax-exempt bond proceeds .....						
	5	Royalties .....		1622293.		1,622,293.		
	6 a	Gross Rents .....	(i) Real					
			(ii) Personal					
			b	Less: rental expenses .....				
			c	Rental income or (loss) .....				
	d	Net rental income or (loss) .....						
	7 a	Gross amount from sales of assets other than inventory .....	(i) Securities					
			(ii) Other					
			b	Less: cost or other basis and sales expenses .....				
			c	Gain or (loss) .....				
	d	Net gain or (loss) .....						
	8 a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18 .....	a					
			b	Less: direct expenses .....				
			c	Net income or (loss) from fundraising events .....				
	9 a	Gross income from gaming activities. See Part IV, line 19 .....	a					
b			Less: direct expenses .....					
c			Net income or (loss) from gaming activities .....					
10 a	Gross sales of inventory, less returns and allowances .....	a						
		b	Less: cost of goods sold .....					
		c	Net income or (loss) from sales of inventory .....					
Miscellaneous Revenue		Business Code						
11 a	.....							
b	.....							
c	.....							
d	All other revenue .....							
e	<b>Total.</b> Add lines 11a-11d .....							
12	<b>Total Revenue.</b> Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e .....		3128451.	0.	0.	1,622,293.		

**Part IX Statement of Functional Expenses**

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

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21 .....	2,291,728.	2,291,728.		
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 .....	1,122,359.	1,122,359.		
4 Benefits paid to or for members .....				
5 Compensation of current officers, directors, trustees, and key employees .....				
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) .....				
7 Other salaries and wages .....				
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions) .....				
9 Other employee benefits .....				
10 Payroll taxes .....				
11 Fees for services (non-employees):				
a Management .....				
b Legal .....				
c Accounting .....	3,825.		3,825.	
d Lobbying .....				
e Professional fundraising services. See Part IV, line 17 .....				
f Investment management fees .....				
g Other .....				
12 Advertising and promotion .....				
13 Office expenses .....	149.		149.	
14 Information technology .....				
15 Royalties .....				
16 Occupancy .....				
17 Travel .....				
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 .....				
23 Insurance .....				
24 Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.) .....				
a <b>FILING FEES</b> .....	1,093.		1,093.	
b <b>BANK SERVICE FEES</b> .....	20.		20.	
c .....				
d .....				
e .....				
f All other expenses .....				
25 <b>Total functional expenses.</b> Add lines 1 through 24f	3,419,174.	3,414,087.	5,087.	0.
26 <b>Joint Costs.</b> Check here <input type="checkbox"/> if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation ...				

**Part X Balance Sheet**

		(A) Beginning of year		(B) End of year
<b>Assets</b>	<b>1</b> Cash - non-interest-bearing .....	214,121.	<b>1</b>	347.
	<b>2</b> Savings and temporary cash investments .....		<b>2</b>	
	<b>3</b> Pledges and grants receivable, net .....		<b>3</b>	
	<b>4</b> Accounts receivable, net .....	588,314.	<b>4</b>	509,474.
	<b>5</b> Receivables from current and former officers, directors, trustees, key employees, or other related parties. Complete Part II of Schedule L .....		<b>5</b>	
	<b>6</b> Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L .....		<b>6</b>	
	<b>7</b> Notes and loans receivable, net .....		<b>7</b>	
	<b>8</b> Inventories for sale or use .....		<b>8</b>	
	<b>9</b> Prepaid expenses and deferred charges .....		<b>9</b>	
	<b>10a</b> Land, buildings, and equipment: cost basis ... <b>10a</b>			
	<b>b</b> Less: accumulated depreciation. Complete Part VI of Schedule D ... <b>10b</b>		<b>10c</b>	
	<b>11</b> Investments - publicly traded securities .....		<b>11</b>	
	<b>12</b> Investments - other securities. See Part IV, line 11 .....		<b>12</b>	
	<b>13</b> Investments - program-related. See Part IV, line 11 .....		<b>13</b>	
	<b>14</b> Intangible assets .....		<b>14</b>	
	<b>15</b> Other assets. See Part IV, line 11 .....		<b>15</b>	
<b>16 Total assets.</b> Add lines 1 through 15 (must equal line 34) .....	802,435.	<b>16</b>	509,821.	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses .....	1,891.	<b>17</b>	
	<b>18</b> Grants payable .....		<b>18</b>	
	<b>19</b> Deferred revenue .....		<b>19</b>	
	<b>20</b> Tax-exempt bond liabilities .....		<b>20</b>	
	<b>21</b> Escrow account liability. Complete Part IV of Schedule D .....		<b>21</b>	
	<b>22</b> Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L .....		<b>22</b>	
	<b>23</b> Secured mortgages and notes payable to unrelated third parties .....		<b>23</b>	
	<b>24</b> Unsecured notes and loans payable .....		<b>24</b>	
	<b>25</b> Other liabilities. Complete Part X of Schedule D .....		<b>25</b>	
	<b>26 Total liabilities.</b> Add lines 17 through 25 .....	1,891.	<b>26</b>	0.
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.</b>			
	<b>27</b> Unrestricted net assets .....	800,544.	<b>27</b>	509,821.
	<b>28</b> Temporarily restricted net assets .....		<b>28</b>	
	<b>29</b> Permanently restricted net assets .....		<b>29</b>	
	<b>Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.</b>			
	<b>30</b> Capital stock or trust principal, or current funds .....		<b>30</b>	
	<b>31</b> Paid-in or capital surplus, or land, building, or equipment fund .....		<b>31</b>	
	<b>32</b> Retained earnings, endowment, accumulated income, or other funds .....		<b>32</b>	
<b>33</b> Total net assets or fund balances .....	800,544.	<b>33</b>	509,821.	
<b>34</b> Total liabilities and net assets/fund balances .....	802,435.	<b>34</b>	509,821.	

**Part XI Financial Statements and Reporting**

		Yes	No
<b>1</b>	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other		
<b>2a</b>	Were the organization's financial statements compiled or reviewed by an independent accountant? .....		X
<b>2b</b>	Were the organization's financial statements audited by an independent accountant? .....		X
<b>2c</b>	If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? .....		
<b>3a</b>	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? .....		X
<b>3b</b>	If "Yes," did the organization undergo the required audit or audits? .....		



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

(Complete only if you checked the box on line 5, 7, or 8 of Part I.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in)▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....			531,122.	1,610,794.	1,506,158.	3,648,074.
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge .....						
<b>4 Total.</b> Add lines 1 - 3 .....			531,122.	1,610,794.	1,506,158.	3,648,074.
<b>5</b> 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) .....						407,022.
<b>6 Public Support.</b> Subtract line 5 from line 4.						3,241,052.

**Section B. Total Support**

Calendar year (or fiscal year beginning in)▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
<b>7</b> Amounts from line 4 .....			531,122.	1,610,794.	1,506,158.	3,648,074.
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources .....			1,032,744.	1,548,606.	1,622,293.	4,203,643.
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on .....						
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) .....						
<b>11 Total support.</b> Add lines 7 through 10						7,851,717.
<b>12</b> Gross receipts from related activities, etc. (see instructions) .....					12	

**13 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) organization, check this box and **stop here**

**Section C. Computation of Public Support Percentage**

<b>14</b> Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f)) .....	<b>14</b>		%
<b>15</b> Public support percentage from 2007 Schedule A, Part IV-A, line 26f .....	<b>15</b>		%
<b>16a 33 1/3% support test - 2008.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization .....		<input type="checkbox"/>	
<b>b 33 1/3% support test - 2007.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization .....		<input type="checkbox"/>	
<b>17a 10% -facts-and-circumstances test - 2008.</b> 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 <b>stop here.</b> Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization .....		<input type="checkbox"/>	
<b>b 10% -facts-and-circumstances test - 2007.</b> 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 <b>stop here.</b> Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization .....		<input type="checkbox"/>	
<b>18 Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions .....		<input type="checkbox"/>	

**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.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in)▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....						
<b>2</b> 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 .....						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513 .....						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge ...						
<b>6 Total.</b> Add lines 1 - 5 .....						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons						
<b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000 .....						
<b>c</b> Add lines 7a and 7b .....						
<b>8 Public support</b> (Subtract line 7c from line 6.)						

**Section B. Total Support**

Calendar year (or fiscal year beginning in)▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
<b>9</b> Amounts from line 6 .....						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources ...						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 .....						
<b>c</b> Add lines 10a and 10b .....						
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on .....						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) .....						
<b>13 Total support</b> (Add lines 9, 10c, 11, and 12.)						

**14 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) organization, check this box and **stop here**

**Section C. Computation of Public Support Percentage**

<b>15</b> Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f)) .....	<b>15</b>	%
<b>16</b> Public support percentage from 2007 Schedule A, Part IV-A, line 27g .....	<b>16</b>	%

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for <b>2008</b> (line 10c, column (f) divided by line 13, column (f)) .....	<b>17</b>	%
<b>18</b> Investment income percentage from <b>2007</b> Schedule A, Part IV-A, line 27h .....	<b>18</b>	%

**19a 33 1/3% support tests - 2008.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

**b 33 1/3% support tests - 2007.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

**20 Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

**Schedule B**  
(Form 990, 990-EZ,  
or 990-PF)

Department of the Treasury  
Internal Revenue Service

**Schedule of Contributors**

▶ Attach to Form 990, 990-EZ, and 990-PF.

OMB No. 1545-0047

**2008**

Name of the organization

GREATGOOD.ORG

Employer identification number

20-4846675

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)( 3 ) (enter number) organization

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

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

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

501(c)(3) taxable private foundation

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

**General Rule**

For organizations filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

**Special Rules**

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

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

For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, some contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. (If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year.) ..... ▶ \$ \_\_\_\_\_

**Caution.** Organizations that are not covered by the General Rule and/or the Special Rules do not file Schedule B (Form 990, 990-EZ, or 990-PF), but they **must** answer "No" on Part IV, line 2 of their Form 990, or check the box in the heading of their Form 990-EZ, or on line 2 of their Form 990-PF, to certify that they do not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. These instructions will be issued separately.

Schedule B (Form 990, 990-EZ, or 990-PF) (2008)

Name of organization

Employer identification number

**GREATERGOOD.ORG**

**20-4846675**

**Part I Contributors** (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1		\$ 277,239.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

**Schedule F  
(Form 990)**

**Statement of Activities Outside the United States**

OMB No. 1545-0047

**2008**

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

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

<b>Name of the organization</b> GREATERGOOD.ORG	<b>Employer identification number</b> 20-4846675
--	---

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

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

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

**3 Activities per Region.** (Use Schedule F-1 (Form 990) if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures in region
CENTRAL AMERICA AND THE CARIBBEAN	0	0	GRANT-MAKING	N/A	125,615.
EAST ASIA AND THE PACIFIC	0	0	GRANT-MAKING	N/A	68,842.
MIDDLE EAST AND NORTH AFRICA	0	0	GRANT-MAKING	N/A	6,188.
NORTH AMERICA	0	0	GRANT-MAKING	N/A	50,791.
RUSSIA AND THE NEWLY INDEPENDENT STATES	0	0	GRANT-MAKING	N/A	10,900.
SOUTH AMERICA	0	0	GRANT-MAKING	N/A	35,498.
SOUTH ASIA	0	0	GRANT-MAKING	N/A	376,551.
SUB-SAHARAN AFRICA	0	0	GRANT-MAKING	N/A	447,774.
<b>Totals</b> .....					1,122,359.

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

Schedule F (Form 990) 2008

**Part II** **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000  Use Schedule F-1 (Form 990) if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EAST ASIA AND THE PACIFIC	CHILDREN'S HEALTH & WELL BEING	13,587.	CHECK	0.		
		SOUTH ASIA	CHILDREN'S HEALTH & WELL BEING	10,861.	CHECK	0.		
		SUB-SAHARAN AFRICA	CHILDREN'S HEALTH & WELL BEING	26,885.	CHECK	0.		
		SUB-SAHARAN AFRICA	LITERACY & CHILDREN'S EDUCATION	50,870.	CHECK	0.		
		SUB-SAHARAN AFRICA	LITERACY & CHILDREN'S EDUCATION	12,480.	CHECK	0.		
		SOUTH ASIA	LITERACY & CHILDREN'S EDUCATION	128,242.	CHECK	0.		
		SOUTH ASIA	CHILDREN'S HEALTH & WELL BEING	7,140.	CHECK	0.		
		SUB-SAHARAN AFRICA	CHILDREN'S HEALTH & WELL BEING	18,120.	CHECK	0.		

2 Enter total number of organizations that are recognized as charities by the foreign country or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter ▶ 34

3 Enter total number of other organizations or entities ▶ 0



**Part IV** Supplemental Information

Complete this part to provide the information required by Part I, line 2, and any other additional information.

SCHEDULE F, PART I, LINE 2: EACH NON-PROFIT THAT RECEIVES GRANTS FROM GREATERGOOD.ORG IS REQUIRED TO SUPPLY PROOF OF THEIR NON-PROFIT STATUS UNDER THE LAWS OF THE COUNTRY IN WHICH IT WAS FORMED PRIOR TO RECEIVING FUNDS. THEY MUST ALSO SIGN A MEMO OF UNDERSTANDING THAT OUTLINES OUR INTENTIONS FOR USE OF FUNDS AND THAT THEY AGREE TO USE THE FUNDS AS WE SPECIFY. AFTER THE END OF OUR FISCAL YEAR, WE REQUIRE A REPORT FROM EACH CHARITY THAT RECAPS HOW FUNDS WERE USED. IF FUNDS ARE NOT USED PROPERLY OR DOCUMENTATION FOR HOW FUNDS WERE USED IS NOT PROVIDED, FUTURE FUNDS CAN BE WITHHELD. WHEN POSSIBLE, ACTUAL SITE VISITS ARE CONDUCTED TO SEE ACTUAL EVIDENCE OF THE USE OF FUNDS.



Part II Continuation of Grants and Other Assistance or Entities Outside the United States. (Schedule F (Form 990), Part II)								
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	HUNGER & POVERTY	10,129.	CHECK	0.		
		SUB-SAHARAN AFRICA	RESCUED ANIMALS	6,717.	CHECK	0.		
		SOUTH AMERICA	CHILDREN'S HEALTH & WELL BEING	1,620.	WIRE TRANSFER	0.		
		SOUTH AMERICA	HUNGER & POVERTY	6,070.	WIRE TRANSFER	0.		
		SOUTH AMERICA	LITERACY & CHILDREN'S EDUCATION	1,620.	WIRE TRANSFER	0.		
		SUB-SAHARAN AFRICA	HUNGER & POVERTY	88,193.	CHECK	0.		
		SUB-SAHARAN AFRICA	HUNGER & POVERTY	5,575.	CHECK	0.		
		SUB-SAHARAN AFRICA	CHILDREN'S HEALTH & WELL BEING	12,825.	CHECK	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	HUNGER & POVERTY	18,099.	CHECK	0.		

Part II Continuation of Grants and Other Assistance or Entities Outside the United States. (Schedule F (Form 990), Part II)								
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH AMERICA	CHILDREN'S HEALTH & WELL BEING	1,591.	CHECK	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	HUNGER & POVERTY	7,920.	CHECK	0.		
		SUB-SAHARAN AFRICA	CHILDREN'S HEALTH & WELL BEING	6,430.	CHECK	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	RESCUED ANIMALS	2,360.	CHECK	0.		
		EAST ASIA AND THE PACIFIC	RESCUED ANIMALS	2,087.	CHECK	0.		
		RUSSIA AND THE NEWLY INDEPENDENT STATES	RESCUED ANIMALS	1,700.	CHECK	0.		
		SOUTH ASIA	RESCUED ANIMALS	96,287.	CHECK	0.		
		SUB-SAHARAN AFRICA	RESCUED ANIMALS	12,294.	CHECK	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	HUNGER & POVERTY	715.	CHECK	0.		

<b>Part II</b> Continuation of Grants and Other Assistance or Entities Outside the United States. (Schedule F (Form 990), Part II)								
<b>1</b> (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EAST ASIA AND THE PACIFIC	HUNGER & POVERTY	740.	CHECK	0.		
		MIDDLE EAST AND NORTH AFRICA	HUNGER & POVERTY	6,188.	CHECK	0.		
		RUSSIA AND THE NEWLY INDEPENDENT STATES	HUNGER & POVERTY	9,200.	CHECK	0.		
		SOUTH ASIA	HUNGER & POVERTY	4,695.	CHECK	0.		
		SUB-SAHARAN AFRICA	HUNGER & POVERTY	38,480.	CHECK	0.		
		SUB-SAHARAN AFRICA	CHILDREN'S HEALTH & WELL BEING	6,521.	CHECK	0.		
		SUB-SAHARAN AFRICA	HUNGER & POVERTY	105,968.	CHECK	0.		
		NORTH AMERICA	PROTECTING/RESTORING ENVIRONMENT	21,522.	CHECK	0.		
		SOUTH ASIA	CHILDREN'S HEALTH & WELL BEING	28,706.	CHECK	0.		

Part II	Continuation of Grants and Other Assistance or Entities Outside the United States. (Schedule F (Form 990), Part II)							
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		NORTH AMERICA	RESCUED ANIMALS	6,802.	CHECK	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	CHILDREN'S HEALTH & WELL BEING	84,821.	CHECK	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	HUNGER & POVERTY	11,700.	CHECK	0.		
		EAST ASIA AND THE PACIFIC	BREAST CANCER & WOMEN'S HEALTH	3,256.	CHECK	0.		
		EAST ASIA AND THE PACIFIC	CHILDREN'S HEALTH & WELL BEING	9,734.	CHECK	0.		
		EAST ASIA AND THE PACIFIC	HUNGER & POVERTY	13,253.	CHECK	0.		
		SUB-SAHARAN AFRICA	PROTECTING/RESTORING ENVIRONMENT	14,768.	CHECK	0.		
		NORTH AMERICA	PROTECTING/RESTORING ENVIRONMENT	20,123.	CHECK	0.		
		SOUTH ASIA	LITERACY & CHILDREN'S EDUCATION	34,346.	CHECK	0.		

Part II Continuation of Grants and Other Assistance or Entities Outside the United States. (Schedule F (Form 990), Part II)								
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	HUNGER & POVERTY	8,355.	CHECK	0.		
		SUB-SAHARAN AFRICA	PROTECTING/RESTORING ENVIRONMENT	14,768.	CHECK	0.		
		EAST ASIA AND THE PACIFIC	BREAST CANCER & WOMEN'S HEALTH	3,990.	CHECK	0.		
		EAST ASIA AND THE PACIFIC	LITERACY & CHILDREN'S EDUCATION	2,125.	CHECK	0.		
		SOUTH ASIA	RESCUED ANIMALS	46,982.	CHECK	0.		
		EAST ASIA AND THE PACIFIC	CHILDREN'S HEALTH & WELL BEING	11,380.	CHECK	0.		
		SUB-SAHARAN AFRICA	LITERACY & CHILDREN'S EDUCATION	5,040.	CHECK	0.		
		SOUTH ASIA	HUNGER & POVERTY	6,450.	CHECK	0.		
		SOUTH AMERICA	PROTECTING/RESTORING ENVIRONMENT	19,706.	CHECK	0.		

**SCHEDULE I  
(Form 990)**

**Grants and Other Assistance to Organizations,  
Governments, and Individuals in the U.S.**

OMB No. 1545-0047

2008

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Department of the Treasury  
Internal Revenue Service

▶ **Complete if the organization answered "Yes," on Form 990, Part IV, lines 21 or 22.**  
▶ **Attach to Form 990.**

Name of the organization

**GREATERGOOD.ORG**

**Employer identification number  
20-4846675**

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

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

**Part II Grants and Other Assistance to Governments and Organizations in the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed ...

<b>1 (a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
FEEDING AMERICA 35 EAST WACKER DRIVE, STE 2000 CHICAGO, IL 60601	36-3673599	501(C)(3)	155,211.	0.			HUNGER & POVERTY
FIRST BOOK 119 F STREET NW, STE 1000 WASHINGTON, DC 20004	52-1779606	501(C)(3)	42,881.	0.			LITERACY & CHILDREN'S EDUCATION
HUMANE SOCIETY UNITED STATES 2100 L STREET NW WASHINGTON, DC 20037	53-0225390	501(C)(3)	8,633.	0.			RESCUED ANIMALS
INTERNATIONAL FUND FOR ANIMAL WELFARE - 290 SUMMER STREET - YARMOUTH PORT, MA 02675	31-1594197	501(C)(3)	92,571.	0.			RESCUED ANIMALS
MAYO CLINIC 200 FIRST ST SW ROCHESTER, MN 55905	41-1937751	501(C)(3)	125,000.	0.			BREAST CANCER & WOMEN'S HEALTH
MERCY CORPS INTERNATIONAL 3030 SW FIRST AVENUE PORTLAND, OR 97201	91-1148123	501(C)(3)	838.	0.			HUNGER & POVERTY

- 2** Enter total number of section 501(c)(3) and government organizations ..... ▶ **14.**
- 3** Enter total number of other organizations ..... ▶ **0.**

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

Schedule I (Form 990) 2008

**Part III** **Grants and Other Assistance to Individuals in the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22.  
Use Schedule I-1 (Form 990) if additional space is needed.

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

**Part IV** **Supplemental Information.** Complete this part to provide the information required in Part I, line 2, and any other additional information.

SCHEDULE I, PART I, LINE 2: EACH NON-PROFIT THAT RECEIVES GRANTS FROM GREATERGOOD.ORG IS REQUIRED TO SUPPLY PROOF OF THEIR NON-PROFIT STATUS PRIOR TO RECEIVING FUNDS. THEY MUST ALSO SIGN A MEMO OF UNDERSTANDING THAT OUTLINES OUR INTENTIONS FOR USE OF FUNDS AND THAT THEY AGREE TO USE THE FUNDS AS WE SPECIFY. AFTER THE END OF OUR FISCAL YEAR, WE REQUIRE A REPORT FROM EACH CHARITY THAT RECAPS HOW FUNDS WERE USED. IF FUNDS ARE NOT USED PROPERLY OR DOCUMENTATION FOR HOW FUNDS WERE USED IS NOT PROVIDED, FUTURE FUNDS CAN BE WITHHELD.

**SCHEDULE I-1  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Continuation Sheet for Schedule I (Form 990)  
▲ Attach to Form 990 to list additional information for  
Part II and Part III, Schedule I (Form 990).**

OMB No. 1545-0047

**2008**

**Open to Public  
Inspection**

Name of the organization

**GREATERGOOD.ORG**

Employer identification number

**20-4846675**

**Part I** Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NATIONAL BREAST CANCER FOUNDATION 2600 NETWORK BLVD., STE 300 FRISCO, TX 75034	75-2391148	501(C)(3)	745,971.	0.			BREAST CANCER & WOMEN'S HEALTH
NORTH SHORE ANIMAL LEAGUE 25 DAVIS AVENUE PORT WASHINGTON, NY 11050	11-1666852	501(C)(3)	91,915.	0.			RESCUED ANIMALS
PACIFIC MARINE MAMMAL CENTER 20612 LAGUNA CANYON ROAD LAGUNA BEACH, CA 92651	51-0144434	501(C)(3)	11,850.	0.			RESCUED ANIMALS
PATIENT ACCESS NETWORK FOUNDATION 900 19TH STREET NW, SUITE 200 WASHINGTON, DC 20006	20-1184743	501(C)(3)	8,430.	0.			BREAST CANCER & WOMEN'S HEALTH
PATIENT ACCESS NETWORK FOUNDATION 900 19TH STREET NW, SUITE 200 WASHINGTON, DC 20006	20-1184743	501(C)(3)	1,228.	0.			CHILDREN'S HEALTH & WELL BEING
PATIENT ACCESS NETWORK FOUNDATION 900 19TH STREET NW, SUITE 200 WASHINGTON, DC 20006	20-1184743	501(C)(3)	1,123.	0.			HUNGER & POVERTY
PETFINDER.COM FOUNDATION PO BOX 16385 TUCSON, AZ 85732	87-0694641	501(C)(3)	586,690.	0.			RESCUED ANIMALS
PROSTHETICS OUTREACH FOUNDATION 400 EAST PINE STREET, STE 225 SEATTLE, WA 98122	91-1453216	501(C)(3)	12,825.	0.			CHILDREN'S HEALTH & WELL BEING

**2** Enter total number of Section 501(c)(3) and government organizations .....

**3** Enter total number of other organizations .....

**SCHEDULE I-1  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Continuation Sheet for Schedule I (Form 990)  
▲ Attach to Form 990 to list additional information for  
Part II and Part III, Schedule I (Form 990).**

OMB No. 1545-0047

**2008**

**Open to Public  
Inspection**

Name of the organization

**GREATERGOOD.ORG**

Employer identification number

**20-4846675**

**Part I** Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
REMOTE AREA MEDICAL VOLUNTEER CORPS - 1834 BEECH STREET - KNOXVILLE, TN 37920	62-1650446	501(C)(3)	3,948.	0.			HUNGER & POVERTY
REMOTE AREA MEDICAL VOLUNTEER CORPS - 1834 BEECH STREET - KNOXVILLE, TN 37920	62-1650446	501(C)(3)	49,934.	0.			RESCUED ANIMALS
THE FUND FOR ANIMALS 200 WEST 57TH STREET #705 NEW YORK, NY 10019	13-6218740	501(C)(3)	343,528.	0.			RESCUED ANIMALS

**2** Enter total number of Section 501(c)(3) and government organizations ..... **▶**

**3** Enter total number of other organizations ..... **▶**



**Part I Liquidation, Termination, or Dissolution** (continued)

**Note.** If the organization distributed all of its assets during the tax year, then Form 990, Part X, column (B) should equal -0-

<b>3</b>	Did the organization distribute its assets in accordance with its governing instrument(s)? If "No," describe in Part III .....	<b>3</b>	<input type="checkbox"/>	<input type="checkbox"/>
<b>4a</b>	Did the organization request or receive a determination letter from EO Determinations that the organization's exempt status was terminated? .....	<b>4a</b>	<input type="checkbox"/>	<input type="checkbox"/>
<b>b</b>	(If "Yes," provide the date of the letter. ▶ _____ )		<input type="checkbox"/>	<input type="checkbox"/>
<b>5a</b>	Is the organization required to notify the attorney general or other appropriate state official of its intent to dissolve, liquidate, or terminate? .....	<b>5a</b>	<input type="checkbox"/>	<input type="checkbox"/>
<b>b</b>	If "Yes," did the organization provide such notice? .....	<b>5b</b>	<input type="checkbox"/>	<input type="checkbox"/>
<b>6</b>	Did the organization discharge or pay all liabilities in accordance with state laws? .....	<b>6</b>	<input type="checkbox"/>	<input type="checkbox"/>
<b>7a</b>	Did the organization have any tax-exempt bonds outstanding during the year? .....	<b>7a</b>	<input type="checkbox"/>	<input type="checkbox"/>
<b>b</b>	Did the organization discharge or defease tax-exempt bond liabilities in accordance with the Internal Revenue Code and state laws? .....	<b>7b</b>	<input type="checkbox"/>	<input type="checkbox"/>
<b>c</b>	If "Yes," describe in Part III how the organization defeased or otherwise settled these liabilities. If "No," explain in Part III.			

**Part II Sale, Exchange, Disposition, or Other Transfer of More Than 25% of the Organization's Assets.** Complete this part if the organization answered "Yes" to Form 990, Part IV, line 32, or Form 990-EZ, line 36. Use Schedule N-1 if additional space is needed.

<b>1</b>	<b>(a)</b> Description of asset(s) distributed or transaction expenses paid	<b>(b)</b> Date of distribution	<b>(c)</b> Fair market value of asset(s) distributed or amount of transaction expenses	<b>(d)</b> Method of determining FMV for asset(s) distributed or transaction expenses	<b>(e)</b> EIN of recipient	<b>(f)</b> Name and address of recipient	<b>(g)</b> IRC section of recipient(s) (if tax-exempt) or type of entity
	PROGRAM EXPENSE	06/30/09	3,414,087.	ACTUAL COST		SEE SCHEDULE I	SEE SCHED I

<b>2</b>	Did or will any officer, director, trustee, or key employee of the organization:	<b>Yes</b>	<b>No</b>
<b>a</b>	Become a director or trustee of a successor or transferee organization? .....	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>b</b>	Become an employee of, or independent contractor for, a successor or transferee organization? .....	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>c</b>	Become a direct or indirect owner of a successor or transferee organization? .....	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>d</b>	Receive, or become entitled to, compensation or other similar payments as a result of the organization's significant disposition of assets? .....	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>e</b>	If the organization answered "Yes" to any of the questions in this line, provide the name of the person involved and explain in Part III.		

**Part III** **Supplemental Information.** Complete this part to provide the information required by Part I, lines 2e, 7c; or Part II, line 2e; and any additional information.

DURING THE TAXABLE YEAR ENDED JUNE 30, 2009, GREATERGOOD.ORG HAD PROGRAM EXPENSES OF \$3,414,087. THIS AMOUNT WAS EXPENDED IN THE ORDINARY COURSE OF THE OPERATION OF ITS EXEMPT FUNCTION ACTIVITIES BUT REPRESENTS OVER 25% OF GREATERGOOD.ORG'S NET ASSETS OF \$800,544 AT THE BEGINNING OF THE TAXABLE YEAR ENDED JUNE 30, 2009. GREATERGOOD.ORG'S EXPENDITURE DOES NOT CONSTITUTE A "SUBSTANTIAL CONTRACTION" UNDER THE DEFINITION IN REG. SEC. 1.6043-3 AS THE DISTRIBUTION WAS SUBSTANTIALLY OUT OF CURRENT INCOME. THERE IS NO PLAN TO LIQUIDATE OR CONTRACT THE ORGANIZATION.

**SCHEDULE O**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Information to Form 990**

▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

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Inspection

Name of the organization

GREATERGOOD.ORG

Employer identification number

20-4846675

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

CHILDREN), ANIMALS, AND THE PLANET.

THE ORGANIZATION WILL MAKE EDUCATIONAL MATERIALS AVAILABLE TO THE

GENERAL PUBLIC AND PROVIDE FUNDING TO OTHER REGISTERED CHARITABLE

ORGANIZATIONS THAT ALLEVIATE AND ADDRESS THE ROOT CAUSES OF WORLD

HUNGER AND FOOD INSECURITY, EARLY DETECTION & TREATMENT OF BREAST

CANCER, PREVENTION & TREATMENT OF CHILDHOOD ILLNESS & DISEASE,

CHILDREN'S EDUCATION, PROTECTING AND RESTORING THE ENVIRONMENT, AND

PROVIDING FUNDING FOR THE CARE & FEEDING OF RESCUED ANIMALS.

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

ORGANIZATIONS FOCUSING PRIMARILY WITHIN THE FOLLOWING AREAS AND

CONCERNS:

1. ALLEVIATING AND ADDRESSING THE ROOT CAUSES OF WORLD HUNGER AND FOOD  
INSECURITY

2. EARLY DETECTION AND TREATMENT OF BREAST CANCER AND OTHER WIDE-SPREAD  
HEALTH CONCERNS

3. PREVENTION AND TREATMENT OF CHILDHOOD ILLNESS, DISEASE AND OTHER  
CHILDREN'S HEALTH AND WELL-BEING CONCERNS

4. CHILDREN'S EDUCATION

5. PROTECTING AND RESTORING THE ENVIRONMENT

6. PROVIDING FUNDING FOR THE CARE AND FEEDING OF RESCUED ANIMALS IN  
SHELTERS AND SANCTUARIES AND ADDRESSING THE ROOT CAUSES OF THEIR  
CONDITIONS

7. RELATED ISSUES THAT MAY BE ASSOCIATED WITH THE AREAS ABOVE

**SCHEDULE O**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Information to Form 990**

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20-4846675

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

MOTHERS.

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

ANIMAL WELFARE(RESCUED ANIMALS):

\$1,373,852 RAISED AND GRANTED TO CARE FOR ANIMALS IN NO-KILL SHELTERS.

FUNDS WERE DISTRIBUTED TO NON-PROFIT PARTNERS AND COVERED THE COST OF FOOD, CARE, INOCULATIONS, AND SPAY & NEUTER SERVICES TO ANIMALS IN SHELTERS AND SANCTUARIES IN THE U.S.

EXPENSES \$ 1373852. INCLUDING GRANTS OF \$ 1373852. REVENUE \$ 0.

PROTECTING/RESTORING THE ENVIRONMENT.

EXPENSES \$ 90887. INCLUDING GRANTS OF \$ 90887. REVENUE \$ 0.

FORM 990, PART VI, SECTION A, LINE 2: LISA HALSTEAD & JULIA

CHRISTOPHERSEN - BUSINESS RELATIONSHIP.

FORM 990, PART VI, SECTION A, LINE 10: THE 990 IS REVIEWED BY THE

PRESIDENT AND TREASURER PRIOR TO FILING. IT IS PROVIDED TO THE REMAINING BOARD MEMBERS ONCE IT HAS BEEN FILED.

FORM 990, PART VI, SECTION B, LINE 12C: OUR CONFLICT OF INTEREST POLICY APPLIES TO ANY DIRECTOR, PRINCIPAL OFFICER OR MEMBER OF A COMMITTEE WITH GOVERNING BOARD DELEGATED POWERS, WHO HAS DIRECT OR INDIRECT FINANCIAL INTEREST. WE HAVE JUST 4 PEOPLE WHO FALL UNDER THIS DEFINITION.

**SCHEDULE O**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Information to Form 990**

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**1. DUTY TO DISCLOSE**

IN CONNECTION WITH ANY ACTUAL OR POSSIBLE CONFLICTS OF INTEREST, AN INTERESTED PERSON MUST DISCLOSE THE EXISTENCE AND NATURE OF HIS OR HER FINANCIAL INTEREST TO THE BOARD OF DIRECTORS (BOARD) [OR SPECIAL COMMITTEES WITH BOARD DELEGATED POWERS (E.G. CONFLICTS OR COMPENSATION COMMITTEES)] CONSIDERING THE PROPOSED TRANSACTION OR ARRANGEMENT.

**2. DETERMINING WHETHER A CONFLICT OF INTEREST EXISTS**

AFTER DISCLOSURE OF THE FINANCIAL INTEREST, THE INTERESTED PERSON SHALL LEAVE THE BOARD OR COMMITTEE MEETING WHILE THE FINANCIAL INTEREST IS DISCUSSED AND VOTED UPON. THE REMAINING BOARD OR COMMITTEE MEMBERS SHALL DECIDE IF A CONFLICT OF INTEREST EXISTS.

**3. PROCEDURES FOR ADDRESSING THE CONFLICT OF INTEREST**

**A.** THE CHAIRPERSON OF THE BOARD OR COMMITTEE SHALL, IF APPROPRIATE, APPOINT A DISINTERESTED PERSON OR COMMITTEE TO INVESTIGATE ALTERNATIVES TO THE PROPOSED TRANSACTION OR ARRANGEMENT.

**B.** AFTER EXERCISING DUE DILIGENCE, THE BOARD OR COMMITTEE SHALL DETERMINE WHETHER THE CORPORATION CAN OBTAIN A MORE ADVANTAGEOUS TRANSACTION OR ARRANGEMENT WITH REASONABLE EFFORTS FROM A PERSON OR ENTITY THAT WOULD NOT GIVE RISE TO A CONFLICT OF INTEREST.

**C.** IF A MORE ADVANTAGEOUS TRANSACTION OR ARRANGEMENT IS NOT REASONABLY ATTAINABLE UNDER CIRCUMSTANCES THAT WOULD NOT GIVE RISE TO A CONFLICT OF INTEREST, THE BOARD OR COMMITTEE SHALL DETERMINE BY A MAJORITY VOTE OF THE DISINTERESTED DIRECTORS WHETHER THE TRANSACTION OR ARRANGEMENT IS IN THE

**SCHEDULE O  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Information to Form 990**

▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

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GREATERGOOD.ORG

Employer identification number

20-4846675

CORPORATION'S BEST INTEREST AND FOR ITS OWN BENEFIT AND WHETHER THE TRANSACTION IS FAIR AND REASONABLE TO THE CORPORATION AND SHALL MAKE ITS DECISION AS TO WHETHER TO ENTER INTO THE TRANSACTION OR ARRANGEMENT IN CONFORMITY WITH SUCH DETERMINATION.

**4. VIOLATIONS OF THE CONFLICT OF INTEREST POLICY**

**A. IF THE BOARD OR COMMITTEE HAS REASONABLE CAUSE TO BELIEVE THAT A MEMBER HAS FAILED TO DISCLOSE ACTUAL OR POSSIBLE CONFLICTS OF INTEREST, IT SHALL INFORM THE MEMBER OF THE BASIS FOR SUCH BELIEF AND AFFORD THE MEMBER AN OPPORTUNITY TO EXPLAIN THE ALLEGED FAILURE TO DISCLOSE.**

**B. IF, AFTER HEARING THE RESPONSE OF THE MEMBER AND MAKING SUCH FURTHER INVESTIGATION AS MAY BE WARRANTED IN THE CIRCUMSTANCES, THE BOARD OR COMMITTEE DETERMINES THAT THE MEMBER IS AN INTERESTED PERSON AND HAS FAILED TO DISCLOSE AN ACTUAL OR POSSIBLE CONFLICT OF INTEREST, IT SHALL TAKE APPROPRIATE DISCIPLINARY AND CORRECTIVE ACTION.**

FORM 990, PART VI, SECTION C, LINE 19: THE 990 IS POSTED ON OUR WEBSITE AT WWW.GREATERGOOD.ORG. GOVERNING DOCUMENTS ARE AVAILABLE ON REQUEST.

FORM 990, PART I, LINE 6

FOUR OF OUR VOLUNTEERS SERVE ON THE BOARD. THE REMAINING VOLUNTEERS FUNCTION IN ADMINISTRATIVE AND ACCOUNTING ROLES.