Continue to the continue to		orm <b>990-T</b>	Exe	empt Organization E	Buşi	ness Incom	ne Ta	x Return	l		OMB No. 154	5-0687
Point Earth 15   Replace	F	orm 390-1	For colondor voc	, , ,				6/30	2019		201	7
Description of the Process of Language   Description of the process of Language   Description and the process of Language   Description of Language   Description (Language   Description of Language   Description (Language   Description										-	<b>4</b> 0 i	•
Describe to part of the part	Depar	tment of the Treasury		<del>-</del>					c)(3).	Open 5016	to Public In	spection for
B Exempt under section   Print   Earth I sland Institute, Inc.		Check box if	·							Employe	r identificat	on number
Service   Serv	RF			Earth Island Instit	tute	, Inc.				(Employe instruction	ees' trust, se ons.)	e
408(e)   200(e)   190   190   191			or	2150 Allston Way, S						94-2	288968	4 .
Legal Section   Solid Section   Sec			(e) Type	Berkeley, CA 94704					E	Unrelate	ed business See instruction	activity
E Book value of all avails at all avails at an all avails at 14, 951, 821.  If 14, 951, 821.  If Chook organization type	_	<b>⊣</b>	(a)							·		,
end of year 14, 951, 821. G Check organization type \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \										5111	L20	
Poescribe the organization's primary unrelated business activity.	C e	nd of year	O Charl				Пгол		Плоти		По	
During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group.   Yes   No II Yes, enter the name and identifying number of the parent corporation   Yes, enter the name and identifying number of the parent corporation   Yes, enter the name and identifying number of the parent corporation   Yes, enter the name and identifying number of the parent corporation   Yes, enter the name and identifying number of the parent corporation   Yes, enter the name and identifying number of the parent corporation   Yes, enter the name and identified   Yes, enter the name and a settle of the name and a settle of yes, enter the name and yes, enter the name and a settle of yes, enter the name and yes,			<u> </u>		501(0	c) corporation		(c) trust	401(8	trust	По	iner trust
M Yes, 'enter the name and identifying number of the parent corporation   Telephone number   (510)   859-913     The books are in care of   Mil chael   Sowle   (A) Income   (B) Expenses   (C) Net     Telephone number   (510)   859-913     Total Compliance   (A) Income   (B) Expenses   (C) Net     Telephone number   (C) Net     Telephone	H	Advertising	in period	icals								
The books are in care of	1	During the tax year,	was the corpo	ration a subsidiary in an affilia	ited gr	oup or a parent	-subsidi	iary controlled	d group.	▶	Yes	ΧΝο
Tagros receipts or sales				The second of th	porati	on 🟲						
1 a Gross receipts or sales.   b Lass returns and allowances.   c Balance   1 c   2   2   3   3   3   3   3   3   3   3						(8) 1		<del>,</del>		<u>(510)</u>		
b Less returns and allowances.	200000000000000000000000000000000000000	20247477707494		usiness income		(A) Incon	ne	(B) Exp	enses		(C) Ne	et
2 Cost of goods sold (Schedule A, line 7). 2 3 3 4 4 Capital gain net income (attach Schedule D). 4a 4 Capital gain net income (attach Schedule D). 4a 4 5 4 Capital gain net income (attach Schedule D). 4a 5 5 6 Capital loss deduction for trusts. 4a 6 4 5 6 6 7 4 5 7 6 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7		•			10							
3 Gross profit. Subtract line 2 from line 1c					1							
b Net gain (loss) (Form 4787, Part II, line 17) (attach Form 4797)		=	· ·	·								
c Capital loss deduction for trusts	4 a	a Capital gain net in	come (attach	Schedule D)	4a				100 A			
Solution   Compensation of officers, directors, and trustees (Schedule K)   Solutions and maintenance   Solution   Solu	1	Net gain (loss) (Form 4	797, Part II, line 1	7) (attach Form 4797)	4b							
(attach statement).	_				4c							
Rent income (Schedule C)	5	Income (loss) from (attach statement)	n partnerships	and S corporations	5							
8 Interest, annuities, royalties, and rents from controlled organizations (Schedule 6) 9 Investment income of a section SPI(c)(7), (9), or (17) organization (Schedule 6) 10 Exploited exempt activity income (Schedule 1). 11 Advertising income (Schedule J). 12 Other income (See instructions; attach schedule). 13 Total. Combine lines 3 through 12. 14 Interest (See instructions for limitations on deductions.) (Except for contributions, deductions must be directly connected with the unrelated business income.) 14 Compensation of officers, directors, and trustees (Schedule K). 15 Salaries and wages. 16 Repairs and maintenance. 16 Repairs and maintenance. 16 Interest (attach schedule). 18 Interest (attach schedule). 19 Charitable contributions (See instructions for limitation rules). 20 Charitable contributions (See instructions for limitation rules). 21 Less depreciation (attach Form 4562). 22 Less depreciation (attach Form 4562). 23 Depletion. 24 Contributions to deferred compensation plans. 25 Employee benefit programs. 26 Excess exempt expenses (Schedule 1). 27 Excess readership costs (Schedule 1). 28 Charitable unions (attach schedule). 29 Total deductions, Add lines 14 through 28 Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13. 30 —4,007. 31 Net operating loss deduction (limited to the amount on line 30). 31 Unrelated business taxable income before specific deduction. Subtract line 29 from line 3. 32 Unrelated business taxable income before specific deductions. Subtract line 31 from line 30. 33 Unrelated business taxable income before specific deductions for exceptions). 33 Unrelated business taxable income before specific deductions for exceptions). 33 Unrelated business taxable income before specific deductions for exceptions). 34 Unrelated business taxable income before specific deduction for exceptions). 35 Poetific deduction (Generally \$1,000, but see line 33 instructions for exceptions).	6											* **
9   Investment income of a section 501(c)(7), (9), or (17) organization (Schedule 6)   9	7	Unrelated debt-fina	anced income	(Schedule E)	7							
10   Exploited exempt activity income (Schedule I).	8	Interest, annuities, royal	lties, and rents fro	m controlled organizations (Schedule F)	8						-	
11	9				9							
12 Other income (See instructions; attach schedule)  13 Total. Combine lines 3 through 12.  13 1,930. 5,9374,007.  Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions.) (Except for contributions, deductions must be directly connected with the unrelated business income.)  14 Compensation of officers, directors, and trustees (Schedule K)  15 Salaries and wages. 15  16 Repairs and maintenance 16  17 Bad debts 17  18 Interest (attach schedule) 18  19 Taxes and licenses 19  20 Charitable contributions (See instructions for limitation rules) 20  21 Depreciation (datach Form 4562) 21  22 Less depreciation claimed on Schedule A and elsewhere on return 22a 22b  23 Depletion 23  24 Contributions to deferred compensation plans 25  25 Employee benefit programs 25  26 Excess exempt expenses (Schedule I) 26  27 Excess readership costs (Schedule J) 27  28 Other deductions, Add lines 14 through 28  30 Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13 30 -4,007.  31 Net operating loss deduction (limited to the amount on line 30) 32  32 Unrelated business taxable income before specific deductions. Subtract line 31 from line 30 32 -4,007.  33 Specific deduction (Generally \$1,000, but see line 33 instructions for exceptions) 33  34 Unrelated business taxable income before specific deductions. Subtract line 32 enter the smaller of zero or line 32. 34 -4,007.	10		-									
12   13   Total. Combine lines 3 through 12   13   1,930.   5,937.   -4,007.					11	1	<u>,930.</u>					
Total. Combine lines 3 through 12. 13 1,930. 5,9374,007.  Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions.) (Except for contributions, deductions must be directly connected with the unrelated business income.)  14 Compensation of officers, directors, and trustees (Schedule K). 14  15 Salaries and wages. 15  16 Repairs and maintenance. 16  17 Bad debts. 17  18 Interest (attach schedule). 18  19 Taxes and licenses. 19  20 Charitable contributions (See instructions for limitation rules). 20  21 Depreciation (attach Form 4562). 21  22 Less depreciation claimed on Schedule A and elsewhere on return. 22a 22b  23 Depletion. 23  24 Contributions to deferred compensation plans. 24  25 Employee benefit programs. 25  26 Excess exempt expenses (Schedule J). 27  27 Other deductions (attach schedule). 28  29 Total deductions. Add lines 14 through 28. 29  30 Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13. 30 -4,007. 31  Net operating loss deduction (limited to the amount on line 30). 31  20 Unrelated business taxable income before specific deductions. Subtract line 31 from line 30. 32 -4,007. 33  34 Unrelated business taxable income before specific deductions for exceptions). 33  34 Unrelated business taxable income. Subtract line 33 instructions for exceptions). 33  34 Unrelated business taxable income. Subtract line 33 instructions for exceptions). 34  35 Poecific deduction (Generally \$1,000, but see line 33 instructions for exceptions). 34  36 Unrelated business taxable income. Subtract line 33 from line 32, enter the smaller of zero or line 32. 34  36 Unrelated business taxable income. Subtract line 33 from line 32, enter the smaller of zero or line 32. 34  37 Unrelated business taxable income. Subtract line 33 from line 32, enter the smaller of zero or line 32. 34  38 Unrelated business taxable income. Subtract line 33 from line 32, enter the smaller of zero or line 32. 34  39 Unrelated business taxable income. Subtract line 3	12	Other income (See	e instructions;	attach schedule)	10				14			
Part II         Deductions Not Taken Elsewhere (See instructions for limitations on deductions.) (Except for contributions, deductions must be directly connected with the unrelated business income.)           14         Compensation of officers, directors, and trustees (Schedule K).         14           15         Salaries and wages.         15           16         Repairs and maintenance.         16           17         Is all debts.         17           18         Interest (attach schedule).         18           19         Charitable contributions (See instructions for limitation rules).         20           20         Charitable contributions (See instructions for limitation rules).         20           21         Depreciation (attach Form 4562).         21           22         Less depreciation claimed on Schedule A and elsewhere on return.         22a         22b           23         2d         22b           24         Excess depreciation claimed on Schedule A and elsewhere on return.         23         22b           25         Exployee benefit programs.         25         25           26         Excess exempt expenses (Schedule I).         26           27         Excess readership costs (Schedule J).         27           20         Other deductions (attach schedule).         2	12	Total Combine line	as 3 through 1	9		1	020		F 025			4 007
contributions, deductions must be directly connected with the unrelated business income.)  14 Compensation of officers, directors, and trustees (Schedule K)						s for limitation	<u>, 930 .</u> ons on	deduction:	5,937 s ) (Ex	cent f	or	4,007.
15       Salaries and wages.       15         16       Repairs and maintenance.       16         17       Bad debts.       17         18       Interest (attach schedule).       18         19       Taxes and licenses.       19         20       Charitable contributions (See instructions for limitation rules).       20         21       Depreciation (attach Form 4562).       21         22       Less depreciation claimed on Schedule A and elsewhere on return.       22 a         23       24         24       25         25       Excess depreciation claimed on Schedule I).       26         25       Employee benefit programs.       24         26       Excess exempt expenses (Schedule I).       26         27       Excess readership costs (Schedule J).       27         28       29       Other deductions, Add lines 14 through 28.       29         29       Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13.       30       -4,007.         31       Net operating loss deduction (limited to the amount on line 30).       31         32       Unrelated business taxable income before specific deduction. Subtract line 31 from line 30.       32       -4,007.         33<	L	contribution	ons, deducti	ons must be directly con	necte	ed with the u	nrelate	ed busines	s incor	ne.)	01	
16       Repairs and maintenance.       16         17       Bad debts.       17         18       Interest (attach schedule).       18         19       Taxes and licenses.       19         20       Charitable contributions (See instructions for limitation rules).       20         21       Depreciation (attach Form 4562).       21         22       Less depreciation claimed on Schedule A and elsewhere on return.       22a       22b         23       Depletion.       23         24       Contributions to deferred compensation plans.       24         25       Employee benefit programs.       25         26       Excess exempt expenses (Schedule I).       26         27       Excess readership costs (Schedule J).       27         28       Total deductions (attach schedule)       28         29       Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13.       30       -4,007.         31       Net operating loss deduction (limited to the amount on line 30).       31       31         32       Unrelated business taxable income before specific deduction. Subtract line 31 from line 30.       32       -4,007.         33       Unrelated business taxable income. Subtract line 33 instructions for exceptions).	14	· ·								1		
17   18   Interest (attach schedule)												
Interest (attach schedule)												
Taxes and licenses												
Charitable contributions (See instructions for limitation rules).  Depreciation (attach Form 4562).  Less depreciation claimed on Schedule A and elsewhere on return.  Depletion.  Contributions to deferred compensation plans.  Employee benefit programs.  Excess exempt expenses (Schedule I).  Excess readership costs (Schedule J).  Other deductions (attach schedule).  Total deductions. Add lines 14 through 28.  Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13.  Unrelated business taxable income before specific deduction. Subtract line 31 from line 30.  Specific deduction (Generally \$1,000, but see line 33 instructions for exceptions).  Unrelated business taxable income. Subtract line 33 from line 32. If line 33 is greater than line 32, enter the smaller of zero or line 32.  20  21  22b  22b  22b  22b  22c  22b  22b									1			
Depreciation (attach Form 4562). 21 22b 22b 22b 22b 22b 22b 22b 22b 22b									<u> </u>			<del> </del>
Less depreciation claimed on Schedule A and elsewhere on return.  Depletion.  Contributions to deferred compensation plans.  Employee benefit programs.  Employee benefit programs.  Excess exempt expenses (Schedule I).  Excess readership costs (Schedule J).  Other deductions (attach schedule).  Total deductions. Add lines 14 through 28.  Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13.  Net operating loss deduction (limited to the amount on line 30).  Unrelated business taxable income before specific deduction. Subtract line 31 from line 30.  Specific deduction (Generally \$1,000, but see line 33 instructions for exceptions).  Junelated business taxable income. Subtract line 33 from line 32. If line 33 is greater than line 32, enter the smaller of zero or line 32.  Junelated business taxable income. Subtract line 33 from line 32. If line 33 is greater than line 32, enter the smaller of zero or line 32.						1						
Contributions to deferred compensation plans  Employee benefit programs  Excess exempt expenses (Schedule I)  Excess readership costs (Schedule J)  Other deductions (attach schedule)  Total deductions. Add lines 14 through 28.  Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13.  Unrelated business taxable income before specific deduction. Subtract line 31 from line 30.  Specific deduction (Generally \$1,000, but see line 33 instructions for exceptions).  Jurelated business taxable income. Subtract line 33 from line 32, enter the smaller of zero or line 32.  Jurelated business taxable income. Subtract line 33 from line 32, enter the smaller of zero or line 32.	22	Less depreciation	claimed on Scl	hedule A and elsewhere on ret	turn					******		
Employee benefit programs	23	Depletion		***************************************					23			
Excess exempt expenses (Schedule I)	24	Contributions to de	eferred comper	nsation plans					24	ļ Ī		
27 Excess readership costs (Schedule J)	25									;		
Other deductions (attach schedule).  28  29 Total deductions. Add lines 14 through 28.  29  30 Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13.  30 —4,007.  31 Net operating loss deduction (limited to the amount on line 30).  31 Unrelated business taxable income before specific deduction. Subtract line 31 from line 30.  32 —4,007.  33 Specific deduction (Generally \$1,000, but see line 33 instructions for exceptions).  34 Unrelated business taxable income. Subtract line 32 from line 32. If line 33 is greater than line 32, enter the smaller of zero or line 32.  34 —4,007.												
Total deductions. Add lines 14 through 28				·								
Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13												
Net operating loss deduction (limited to the amount on line 30)												4,007.
Specific deduction (Generally \$1,000, but see line 33 instructions for exceptions)	31											
34 Unrelated business taxable income. Subtract line 33 from line 32. If line 33 is greater than line 32, enter the smaller of zero or line 32 34 -4,007.				-								4,007.
												4 007
					greater				34 34			

<b>-</b>	- 000 T (0017)				<b>.</b>
	1 990-T (2017) Earth Island Institute, Inc.			94-2889684	Page
	rt III Tax Computation				
50	Organizations Taxable as Corporations. See instructions for tax computation.				
	Controlled group members (sections 1561 and 1563) check here See instr				
•	a Enter your share of the \$50,000, \$25,000, and \$9,925,000 taxable income bracks	ets (in ti	nat order):		
	(1) \( \\$ \\  \\  \\$ \\  \\  \\$ \\ \\ \\ \\ \\ \\ \\ \\  \\  \\	بدا			
,	Enter organization's share of: (1) Additional 5% tax (not more than \$11,750)				
	(2) Additional 3% tax (not more than \$100,000)			25.	0
	: Income tax on the amount on line 34			► 35 c	0.
36				26	
37	on line 34 from: Tax rate schedule or Schedule D (Form 1041)  Proxy tax. See instructions				
38	Alternative minimum tax			37	
39	Tax on Non-Compliant Facility Income. See instructions.				
40	Total. Add lines 37, 38 and 39 to line 35c or 36, whichever applies			. 40	0
	t IV Tax and Payments				•
	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)	41 a			
	Other credits (see instructions)	41 b			
	General business credit. Attach Form 3800 (see instructions)	41 c			
	Credit for prior year minimum tax (attach Form 8801 or 8827)	41 d	*		
	e Total credits. Add lines 41a through 41d				0.
42	Subtract line 41e from line 40		• • • • • • • • • • • • • • • • • • • •	. 42	0.
43	Other taxes. Check if from: Form 4255 Form 8611 Form 8697 Form		•		
	Other (attach schedule)				
44	Total tax. Add lines 42 and 43			. 44	0.
	Payments: A 2016 overpayment credited to 2017	45 a			
	2017 estimated tax payments	45 b			
	: Tax deposited with Form 8868	45 c			
	Foreign organizations: Tax paid or withheld at source (see instructions)	45 d			
	Backup withholding (see instructions)	45 e			
t	Credit for small employer health insurance premiums (Attach Form 8941)	45 f			
ć	Other credits and payments: Form 2439				
	☐ Form 4136 ☐ Other ☐ Total ►	45 g			
46	Total payments. Add lines 45a through 45g			. 46	0 .
47	Estimated tax penalty (see instructions). Check if Form 2220 is attached			47	
48	Tax due. If line 46 is less than the total of lines 44 and 47, enter amount owed			▶ 48	
49	Overpayment. If line 46 is larger than the total of lines 44 and 47, enter amount	overpai	d	▶ 49	
50	Enter the amount of line 49 you want: Credited to 2018 estimated tax ►	•	Refunded	▶ 50	
Pai	t V Statements Regarding Certain Activities and Other Informa				
51	At any time during the 2017 calendar year, did the organization have an interest in or a	a signatu	re or other authority	over a	Yes No
	financial account (bank, securities, or other) in a foreign country? If YES, the organiza	ition ma	y have to file FinC	EN Form 114,	
	Report of Foreign Bank and Financial Accounts. If YES, enter the name of the fo	reign co	ountry here ►		X
52	During the tax year, did the organization receive a distribution from, or was it the				P. X
	If YES, see instructions for other forms the organization may have to file.	5		,	71
53	Enter the amount of tax-exempt interest received or accrued during the tax year ►	Ś	٥		
		dules and	statements, and to the be	est of my knowledge and	d and a second
Sig	Under penalties of perjury, I declare that I have examined this return, including accompanying scheduling belief, it is true except, and complete paclaration of preparer (other than taxpayer) is based on all	informatio	on of which preparer has	any knowledge.	s this return with

_ <b>53</b> Ente			ed or accrued during the	. ,	\$ .	0.	
Sign	Under penalties of perju belief, it is true correct,	ry, I declare that I have ex and complete. Declaratio	xamined this return, including in of preparer (other than tax	oayer) is based or	n all information of wh	nich preparer has any	knowledge,
Here	Signature of officer	wo Phily	n 03/2	0/2019	Executive Title	Director	May the IRS discuss this return with the preparer shown below (see instructions)?
Paid	Print/Type preparer's name		Preparer's signature	Maria de la companya	Date 3/14/19	Check if	PTIN
Pre-	Hiep Pham		Hiep Pham		3/14/18	self-employed	P01346204
parer	Firm's name R.	J. Ricciard	li, Inc.			Firm's EIN ►	20-1398210
Use	Firm's address 11	01 Fifth Ave	enue, Suite 36	0			
Only	Sa	n Rafael, CA	A 94901			Phone no.	415-457-1215
BAA			TEEA0202	2L 03/26/18			Form <b>990-T</b> (2017)

	STAIR THSCIC				94-	2009004	raye 3	
Schedule A — Cost of Goo	ods Sold. Enter n	nethod of inv	entory valuation 🟲					
1 Inventory at beginning of ye	ear 1		6 Invent	ory at	end of year	6		
2 Purchases	2		7 Cost o	of good	ds sold. Subtract			
3 Cost of labor					ine 5. Enter here	7		
4 a Additional section 263A costs (attack	ch schedule)		and iii	raili	i, iiile 2	/	Yes No	
1		а	8 Do the	rulos	of section 263A (with	rospost to	res No	
b Other costs (attach sch)	4	b			duced or acquired for			
5 Total. Add lines 1 through 4	1b 5		to the	organi	ization?			
Schedule C - Rent Income	e (From Real Pi	roperty an	d Personal Property	/ Lea	sed With Real Pro	perty) (see i	nstructions)	
1 Description of property								
(1)	-							
(2)	·							
(3)								
(4)								
	2 Rent received o	r accrued						
(a) From personal prop	perty	(b) From r	eal and personal propert	У	<b>3(a)</b> Deductions	ions directly connected with e in columns 2(a) and 2(b)		
(if the percentage of rent for property is more than 10%	r personal	(If the perc	entage of rent for person ceeds 50% or if the rent	ial is	(attac	114 2(8)		
more than 50%)		based	on profit or income)					
(1)						<del> </del>		
(2)								
(3)								
(4)								
Total	Tot	al			(1) T   1   1   1			
(c) Total income. Add totals of cohere and on page 1, Part I, line 6					(b) Total deductions. En here and on page 1, Part I, line 6, column (B)	ter •		
Schedule E — Unrelated De			instructions\		I, line 6, column (5)	<u> </u>		
Official E Official Current	CDC-1 mancca n	icome (see	instructions)	120	aduationa divantly con-	anatad with as	allegable to	
d December of July			2 Gross income from	30	eductions directly conr debt-financ	ed property	allocable to	
1 Description of debi	t-financed property		or allocable to debt- financed property dep		(a) Straight line	(b) Other d	eductions	
					reciation (attach sch)			
(1)				<b> </b>				
(2)								
(3)				·				
(4)								
4 Amount of average	5 Average adjust	ted basis of	6 Column 4		7 Gross income	8 Allocable		
acquisition debt on or allocable to debt-financed	or allocable to de property (attach		divided by column 5	rep	oortable (column 2 x column 6)	(column 6 columns 3(a		
property (attach schedule)	property (attach	i scricuaic)	Column	İ	coluinin o)	COMMINS S(a)	) and S(b))	
(1)			00					
(2)			00					
(3)			olo					
(4)			%					
•				Ente	r here and on page 1, I, line 7, column (A).	Enter here an	d on page 1,	
•				Part	i, iine 7, column (A).	Part I, line 7,	column (B).	
Totals	• • • • • • • • • • • • • • • • • • • •		· · · · · · · · · · · · · · · · · · ·	·L				
Total dividends-received deducti	ons included in col	umn 8			· · · · · · · · · · · · · · · · · · ·			
BAA		TE	EA0203L 10/04/17			Form	990-T (2017)	

Schedule F — Interest, A		, ,			trol <b>l</b> ed O							
1 Name of controlled organization	ider	Employer ntification number	ìnc	3 Net unrelated income (loss) (see instructions)		4	4 Total of specific payments made		ified de that is included the control organizations in the control organization org		n C	eductions directly onnected with ome in column 5
(1)												
(2)	. ,_					+				-		
(3)						+						
(4)						+						
Nonexempt Controlled Organiza	ations											
7 Taxable Income		et unrelated	9 Tc	ntal of	f specifie	d I	10 Part of	colum	n Q that ic	<del></del>	I1 Deduc	tions directly
inc				ayments made		۱	10 Part of colum included in the organization's gro		he controlling		connected with income in column 10	
(1)												
(2)												***
(3)	-									1		
(4)		•										· · · · · · · · · · · · · · · · · · ·
Totals				-			Add columns here and on p 8, co		, Part I, line		and on p	6 and 11. Enter age 1, Part I, line umn (B).
Schedule G - Investmen	t Inco	me of a Se	ction !	5016	(7) (9	). 0	r (17) Orga	nizati	on (see ins	truction	e)	
1 Description of income		2 Amount of income		3 Deductions directly connected (attach schedule)		4 Set-asides (attach schedule)		5 Total deduction set-asides (colu				
/1\			****			acii.	scriedule)				Pit	15 COIGITIT 4)
(1)					,							
(3)					****							·
(4)												
TotalsSchedule I — Exploited E	►	Enter here an Part I, line 9,	column	í (A).	er Tha	n A	dvertising	Incon	ne (see inst	70	Part I, li	re and on page 1 ne 9, column (B).
1 Description of exploited ac		2 Gross unrelate business income fro trade or business	d s orn	Expension connection produced connection con	ses directly cted with luction nrelated ss income	4 N from or to	let income (loss) m unrelated trade business (column inus column 3). a gain, compute imns 5 through 7.	5 Gross activi unrela	s income from ty that is not ited business income		enses able to	7 Excess exempt expenses (column 6 minus column 5, but not more than column 4).
(1)												
(2)												
(3)												
(4)												
Totals		Enter here on page Part I, line column (	age 1, on part		here and page 1, I, line 10, imn (B).		CONTROL OF THE PROPERTY OF THE			100 100 100 100 100 100 100 100 100 100		Enter here and on page 1, Part II, line 26.
Schedule J — Advertising	Inco	ne (See inst	ructions	:)	-	ķ						
Part I Income From Per				<u> </u>	nsolida	ted	Basis			<del></del>		
1 Name of periodical		2 Gross advertisir income		<b>3</b> D adve	irect rtising sts	4 A (lo	dvertising gain or ss) (col. 2 minus ol. 3). If a gain, compute cols. 5		rculation ncome		lership sts	7 Excess readership costs (col. 6 minus col. 5, but not more than col. 4).
(1)							through 7.					
(2)		<del> </del>				t						
(3)		1					# 100 1100 1100 1100					
(4)												2
Totals (carry to Part II, line (5))	<b>•</b>									•		
BAA		1		TCI	= A0204 L	10/04	/17					orm <b>990-T</b> (2017)

Total. Enter here and on page 1, Part II, line 14.

BAA

Form 990-T (2017)

Form 990-T (2017) Earth Island	Institute,	Inc.			94-2889684	Page <b>5</b>
Part II Income From Periodica 7 on a line-by-line basis.)	ls Reported or	n a Separate E	<b>Basis</b> (For each p	eriodical listed in	Part II, fill in col	umns 2 through
1 Name of periodical	2 Gross advertising income	<b>3</b> Direct advertising costs	4 Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5 Circulation income	6 Readership costs	7 Excess readership costs (col. 6 minus col. 5, but not more than col. 4).
(1) (2) (3) (4)						
Totals from Part I						
	Enter here and on page 1, Part I, line 11, column (A)	Enter here and on page 1, Part I, line 11, column (B).	- E			Enter here and on page 1, Part II, line 27.
Totals, Part II (lines 1−5)			1			
Schedule K — Compensation of	Officers, Dire	ctors, and Tru	<b>ıstees</b> (see instru	uctions)		
1 Name			<b>2</b> Title	3 Percent o time devote to business	d to unrela	ation attributable ited business
				:	90	
				:	%	
				:	%	

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