			EXTENDED TO MAY 15, 202	0		
	Ω	00	Return of Organization Exempt Fro	m lı	ncome Tax	OMB No. 1545-0047
Form 990			Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Cod			2018
		of the Treasury	Do not enter social security numbers on this form as it	-	-	Open to Public
		enue Service	► Go to www.irs.gov/Form990 for instructions and the			Inspection
				ng J	UN 30, 2019	
B C a	heck if pplicab	le: C Name of	organization		D Employer identifica	tion number
	Addre		NT SPRING INSTITUTE, INC.			
	Name Chang		usiness as		04-32	37106
	Initial			1/suite	E Telephone number	
	Final	320	NEVADA STREET SUITE 302			332-4288
	termii ated	City or to	own, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	2,632,077.
	Amen		ON, MA 02460		H(a) Is this a group retu	
	Appli tion pend	F Name a	nd address of principal officer: PATTI A. STOLL		for subordinates?	
		SAME	AS C ABOVE	_	H(b) Are all subordinates inclu	
		empt status:		527		t. (see instructions)
			SILENTSPRING.ORG X Corporation Trust Association Other		H(c) Group exemption r	
	orm o Irt I	f organization: Summary		_ Year c	of formation: 1994 M S	state of legal domicile. MA
	1		e the organization's mission or most significant activities: SSI IS	ספס		VANCING
Ce	•	SCIENCE	ON THE INFLUENCE OF ENVIRONMENTAL C	HEM	ICALS ON WOM	EN'S
naı	2		x ► □ if the organization discontinued its operations or disposed o			
Nel	3		ing members of the governing body (Part VI, line 1a)		1 1	11
ğ	4		ependent voting members of the governing body (Part VI, line 1b)			11
ss 8	5		of individuals employed in calendar year 2018 (Part V, line 2a)			23
viti	6		of volunteers (estimate if necessary)			18
Activities & Governance	7a		d business revenue from Part VIII, column (C), line 12			0.
	b	Net unrelated	business taxable income from Form 990-T, line 38		7b	0.
					Prior Year	Current Year
ne	8		and grants (Part VIII, line 1h)	.	2,322,244.	2,388,576.
Revenue	9	•	ce revenue (Part VIII, line 2g)		0.	0.
Be	10		come (Part VIII, column (A), lines 3, 4, and 7d)		60,375.	139,167.
	11 12		(Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		2,384,358.	2,530,454.
	13		nilar amounts paid (Part IX, column (A), lines 1-3)		0.	0.
	14		to or for members (Part IX, column (A), line 4)		0.	0.
ŝ		-		· – –	1,528,263.	1,754,959.
Expenses	16a	Professional fu	compensation, employee benefits (Part IX, column (A), lines 5-10) undraising fees (Part IX, column (A), line 11e) ng expenses (Part IX, column (D), line 25) ► 299,576.		50,480.	46,320.
x pe	b	Total fundraisi	ng expenses (Part IX, column (D), line 25) > 299, 576.			
Ш	17	Other expense	es (Part IX, column (A), lines 11a-11d, 11f-24e)	. 🗌	736,431.	635,571.
	18		s. Add lines 13-17 (must equal Part IX, column (A), line 25)		2,315,174.	2,436,850.
	19	Revenue less	expenses. Subtract line 18 from line 12		69,184.	93,604.
Net Assets or Fund Balances					ginning of Current Year	End of Year
Bala	20	Total assets (F			1,781,386.	1,916,396. 236,562.
let A Ind	21		(Part X, line 26)	·	195,156. 1,586,230.	1,679,834.
	22 Irt II		fund balances. Subtract line 21 from line 20		±,J00,ZJ0•	±,0/9,034.
			declare that I have examined this return, including accompanying schedules and	stateme	ents, and to the best of my k	nowledge and belief it is
			Declaration of preparer (other than officer) is based on all information of which pr			nomougo ana bollot, it is
	20110			sparor		

Sign	Signature of officer		Date						
Here	PATTI A. STOLL, CO-CHA	IR OF THE BOARD							
	Type or print name and title								
	Print/Type preparer's name	Preparer's signature Date	UNCON						
Paid	SANDRA M. BROWN, CPA	11/	'19/19 ^{tf} self-employed P01614103						
Preparer	Firm's name SMITH, SULLIVAN		Firm's EIN 🕨 43-1985162						
Use Only	Firm's address 💊 80 FLANDERS ROAD	- SUITE #200							
WESTBOROUGH, MA 01581 Phone no. (508) 871-71									
May the II	May the IRS discuss this return with the preparer shown above? (see instructions)								
832001 12-3	32001 12-31-18 LHA For Paperwork Reduction Act Notice, see the separate instructions. Form 990 (2018)								

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission: SILENT SPRING INSTITUTE IS DEDICATED TO ADVANCING SCIENCE ON THE
	INFLUENCE OF ENVIRONMENTAL CHEMICALS ON WOMEN'S HEALTH.
2	Did the organization undertake any significant program services during the year which were not listed on the
2	prior Form 990 or 990-EZ? 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 If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
4a	revenue, if any, for each program service reported. (Code:) (Expenses \$ 1,859,896. including grants of \$) (Revenue \$ SILENT SPRING INSTITUTE WAS FOUNDED IN 1994 TO INVESTIGATE ELEVATED DDDD IN 1994 TO INVESTIGATE ELEVATED
	BREAST CANCER RATES ON CAPE COD. SINCE THEN, THE INSTITUTE HAS BECOM A NATIONAL LEADER IN BREAST CANCER PREVENTION THROUGH ENVIRONMENTAL
	HEALTH RESEARCH AND THE STUDY OF ENDOCRINE-DISRUPTING COMPOUNDS
	("EDCS") AND THEIR INFLUENCE ON THE DISEASE. THE INSTITUTE HAS PUBLISHED 114 PEER-REVIEWED ARTICLES AND IS DEVELOPING NEW TECHNOLOGI TO ACCELERATE THE IDENTIFICATION OF CANCER-CAUSING CHEMICALS IN OUR
	EVERYDAY ENVIRONMENTS AND THE TRANSITION TO SAFER CHEMICALS AND
	PRODUCTS. THESE SOLUTIONS HOLD PROMISE FOR DECREASING THE RISK AND
	INCIDENCE OF BREAST CANCER AND OTHER DISEASES.
	AMONG OUR ACCOMPLISHMENTS OVER THE PAST 25 YEARS ARE A NUMBER OF
46	
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$) (Expenses \$) (Revenue \$) (Revenue \$
	Other program services (Describe in Schedule O.)
4d	

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Form 990 (2018) SILENT SPRING INSTITUTE, INC.
Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		v	
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			x
	public office? If "Yes," complete Schedule C, Part I	3		
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	4		x
5	during the tax year? If "Yes," complete Schedule C, Part II	4		- 23
5	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		x
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	-		
·	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	-		
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,		v	
	Part VI	11a	Х	
D	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If</i> "Yes," <i>complete Schedule D, Part VII</i>	11b		x
~	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
U	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		x
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		x
е		11e		Х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If</i> "Yes," <i>complete Schedule E</i>	13		X X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		<u> </u>
a	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		x
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	115		
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	Х	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines		77	
40	1c and 8a? If "Yes," complete Schedule G, Part II	18	Х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	40		x
20-	complete Schedule G, Part III	19 20a		X
	Did the organization operate one or more hospital facilities? <i>If</i> "Yes," <i>complete Schedule H</i> If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a 20b		<u> </u>
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	200		<u> </u>
- '	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		x

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 Form 990 (2018)
 SILENT SPRING INSTITUTE, INC.

 Part IV
 Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		x
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		x
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		x
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
~	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		x
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or	200		
20	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			
	complete Schedule L, Part II	26		x
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial	20		
21	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		x
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV	21		
20	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A compart of former officer diverter to store an low complexes of the complete Cobedule L. Dort IV	28a		х
	A family member of a current or former officer, director, trustee, or key employee? If "Yes, " complete Schedule L, Part IV	28b		X
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	200		
C	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		x
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If</i> "Yes," <i>complete Schedule L</i> , <i>Part IV</i>	200	х	- 23
29 30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	29	- 23	
30		20		x
24	contributions? <i>If "Yes," complete Schedule M</i> Did the organization liquidate, terminate, or dissolve and cease operations?	30		- 23
31		31		x
20	If "Yes," complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	31		- 23
32	Schedule N, Part II	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
_	Part V, line 1	34	ļ	X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			37
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?		v	
Dai	Note. All Form 990 filers are required to complete Schedule O	38	Х	
Pa				
	Check if Schedule O contains a response or note to any line in this Part V			
_			Yes	No
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 34			
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming		v	
	(gambling) winnings to prize winners?	1c	X	(a.c
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Part V

			Yes	No	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,				
	filed for the calendar year ending with or within the year covered by this return 2a 23				
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х		
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)			v	
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X	
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b			
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	10		x	
h	financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country:	4a		- 23	
D	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		х	
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X	
с	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c			
	6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit				
	any contributions that were not tax deductible as charitable contributions?				
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts				
	were not tax deductible?	6b			
7	Organizations that may receive deductible contributions under section 170(c).				
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	X X		
	, 5 , 5 ,				
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	_		v	
	to file Form 8282?	7c		X	
	If "Yes," indicate the number of Forms 8282 filed during the year 7d	7e		х	
e					
f					
	h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?				
8					
-	sponsoring organization have excess business holdings at any time during the year?				
9	Sponsoring organizations maintaining donor advised funds.				
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a			
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b			
10	Section 501(c)(7) organizations. Enter:				
	Initiation fees and capital contributions included on Part VIII, line 12 10a				
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities				
11	Section 501(c)(12) organizations. Enter:				
a	Gross income from members or shareholders 11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against				
12-	amounts due or received from them.) [11b] Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a			
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	120			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.				
	Is the organization licensed to issue qualified health plans in more than one state?	13a			
	Note. See the instructions for additional information the organization must report on Schedule O.				
b	Enter the amount of reserves the organization is required to maintain by the states in which the				
	organization is licensed to issue qualified health plans				
	Enter the amount of reserves on hand 13c				
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х	
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b			
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or				
	excess parachute payment(s) during the year?	15		X	
	If "Yes," see instructions and file Form 4720, Schedule N.			v	
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X	
	If "Yes," complete Form 4720, Schedule O.				

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Form 990	(2018))
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SILENT SPRING INSTITUTE, INC.

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

Х

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

					Yes	
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	11	-		
	If there are material differences in voting rights among members of the governing body, or if the governing					
	body delegated broad authority to an executive committee or similar committee, explain in Schedule 0.					
	Enter the number of voting members included in line 1a, above, who are independent	1b	11	-		
	Did any officer, director, trustee, or key employee have a family relationship or a business relationshi	p with	any other			
	officer, director, trustee, or key employee?			2		+
3	Did the organization delegate control over management duties customarily performed by or under th					
	of officers, directors, or trustees, or key employees to a management company or other person?			3		╀
	Did the organization make any significant changes to its governing documents since the prior Form S			4		+
	Did the organization become aware during the year of a significant diversion of the organization's as			5		┥
	Did the organization have members or stockholders?			6		+
7a	Did the organization have members, stockholders, or other persons who had the power to elect or ap more members of the governing body?	-		7a		
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, s					Ι
	persons other than the governing body?			7b		
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	ar by th	e following:			T
а	The governing body?			8a	Х	
b	Each committee with authority to act on behalf of the governing body?			8b	Х	I
	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be rea					Ι
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9		
ect	tion B. Policies (This Section B requests information about policies not required by the Internal Re	evenue	e Code.)		-	_
					Yes	
0a	Did the organization have local chapters, branches, or affiliates?			10a		
b	If "Yes," did the organization have written policies and procedures governing the activities of such cl	napter	s, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes? \hdots			10b		
1a	Has the organization provided a complete copy of this Form 990 to all members of its governing bod	y befo	re filing the form?	11a	Х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.					
	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a	X	1
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise			12b	X	1
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y in Schedule O how this was done			12c	x	
3	Did the organization have a written whistleblower policy?			13	Х	t
	Did the organization have a written document retention and destruction policy?			14	Х	1
	Did the process for determining compensation of the following persons include a review and approva					t
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	,				
а	The organization's CEO, Executive Director, or top management official			15a	X	I
	Other officers or key employees of the organization			15b	х	1
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).					1
6a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arranger	nent v	rith a			1
	taxable entity during the year?			16a		I
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evalua					T
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ	nizatio	n's			
	exempt status with respect to such arrangements?	<u></u>	·····	16b		1
ect	tion C. Disclosure					
7	List the states with which a copy of this Form 990 is required to be filed $\blacktriangleright MA$					
8	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and	nd 990	T (Section 501(c)(3)s only) avail	la
	for public inspection. Indicate how you made these available. Check all that apply.	in Sch	edule ()			
9	Describe in Schedule O whether (and if so, how) the organization made its governing documents, co		,	d finan	cial	
	statements available to the public during the tax year.		, and be pointy, and			
	State the name, address, and telephone number of the person who possesses the organization's bo	oks ar	d records 🕨			
-	DIANE CZWAKIEL - (617) 332-4288 320 NEVADA STREET SUITE 302, NEWTON, MA 02460		·······			

Part VII	Compensation of Officers,	Directors,	Trustees,	Key E	Employees,	Highest	Compensa	ated
	Employees, and Independe	ent Contra	ctors					

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

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

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

• List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See instructions for definition of "key employee."

• List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

 List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

	week					is bot	h an	Reportable compensation	Reportable compensation	Estimated amount of
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) JEANNE MOCKARD	1.00							0.	0.	0
BOARD MEMBER	0.50	X						0.	0.	0.
(2) GEORGIA MCGAUGHEY BOARD MEMBER	0.50	x						0.	0.	0.
(3) JENNIFER GORKE	0.50								0.	0.
BOARD MEMBER		x						0.	0.	0.
(4) JOHN K. ERBAN, MD	1.50									
BOARD MEMBER		x						0.	Ο.	Ο.
(5) MARGARET KRIPKE	1.00									
BOARD MEMBER		X						0.	0.	0.
(6) PATTI A. STOLL	1.50									
CO-CHAIR		Х		Х				0.	0.	0.
(7) DAVID BELLINGER	1.00									
TREASURER		Х		X				0.	0.	0.
(8) CATHIE RAGOVIN, MD	1.50	.,							0	0
CO-CHAIR	1 00	X		X				0.	0.	0.
(9) CINDY SHULAK-ROME	1.00	x		x				0.	0.	0
CLERK (10) SARAH DEVAN	0.50	^		^				0.	0.	0.
BOARD MEMBER	0.30	x						0.	0.	0.
(11) LISA GOODWIN-ROBBINS	1.00								0.	0.
BOARD MEMBER	1.00	x						0.	0.	0.
(12) JULIA BRODY	40.00									
EXECUTIVE DIRECTOR				x				171,902.	Ο.	20,280.
(13) RUTHANN RUDEL	37.00									
DIRECTOR OF RESEARCH						Х		112,066.	0.	18,955.
		-	-							
		1								
										Form 990 (2018)

	990 (2018) SILENT SI									04-3	237	106	P	age 8
Par	t VII Section A. Officers, Directors, Trus (A) Name and title	tees, Key Em (B) Average hours per week	(do box	not c , unle	(C Pos heck ss pe	c) ition more rson i		one h an	Compensated Employe (D) Reportable compensation from	(E) Reportable compensation from related		an	(F) timate nount other	of
		(list any hours for related organizations below line) 100 100 100 100 100 100 100 100 100 100					IS	compensation						
1b	Sub-total								283,968.		0.	3	9,2	35.
	Total from continuation sheets to Part VI Total (add lines 1b and 1c)								0. 283,968.		0.			
2	Total number of individuals (including but n compensation from the organization	ot limited to th	iose	liste	ed al	bove	e) wł	no r	eceived more than \$100),000 of reportab	le		Yes	2 No
3	Did the organization list any former officer, line 1a? <i>If</i> "Yes," <i>complete Schedule J for s</i>	uch individual			· ·····							3	103	X
4 5	For any individual listed on line 1a, is the su and related organizations greater than \$150 Did any person listed on line 1a receive or a	0,000? If "Yes,	" co	mple	ete S	Sche	edule	e J f	for such individual			4	X	
Sec	rendered to the organization? <i>If "Yes," com</i> tion B. Independent Contractors	plete Schedule	e J f	or si	uch	pers	son .				<u></u>	5		X
1	Complete this table for your five highest co the organization. Report compensation for										npens	ation f	rom	
	(A) (B) Name and business address NONE Description of services								services	C	ompe)		'n	
2	Total number of independent contractors (ii \$100,000 of compensation from the organiz	•	iot lii	mite	d to	tho: (se lis)	stec	d above) who received n	nore than		Form	990 ((2018)

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					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Gifts, Grants lar Amounts		Membership dues	1c	149,637.				
Contributions, Gifts, Grants and Other Similar Amounts	e f g	All other contributions, gifts, grant similar amounts not included abov Noncash contributions included in lines	ts, and /e 1f 1 , 1a-1f: \$	811,583. 427,356. 197,767.	2 200 576			
<u>5</u>	h	Total. Add lines 1a-1f			2,388,576.			
vice	2 a b			Business Code				
Program Service Revenue	c d							
Progr	e f	All other program service reve	nue					
	g	Total. Add lines 2a-2f		🕨				
	3 4	Investment income (including other similar amounts) Income from investment of tax			2,711.			2,711.
	- 5							
	5 6 a	Royalties	(i) Real	(ii) Personal				
	b	Less: rental expenses						
	d	Net rental income or (loss)		►				
		Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
	b	 Less: cost or other basis and sales expenses 						
	d	Gain or (loss) Net gain or (loss)		↓ 				
evenue	8 a	Gross income from fundraising including \$ 149,6 contributions reported on line	37. of					
Other Re	b	Part IV, line 18	а	239,485. 101,623.				
0	с	Net income or (loss) from fund	Iraising events	►	137,862.			137,862.
	9 a	Gross income from gaming ac Part IV, line 19						
		Less: direct expenses						
		Net income or (loss) from gam	-	····· •				
	10 a	Gross sales of inventory, less						
		Less: cost of goods sold	b					
ł	<u> </u>	Net income or (loss) from sales Miscellaneous Revenue		Business Code				
ľ	11 a b	HONORARIUMS	e	541700	1,305.	1,305.		
	c							
		All other revenue						
		Total. Add lines 11a-11d			1,305.			
	12	Total revenue. See instructions		>	2,530,454.	1,305.	0.	140,573.
83200	9 12-3							Form 990 (2018

SILENT SPRING INSTITUTE, INC.

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

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Form 990 (2018)

Part VIII Statement of Revenue

	990 (2018) SILENT SPRII	NG INSTITUTE	, INC.	04-32	237106 Page 10
	on 501(c)(3) and 501(c)(4) organizations must com		ner organizations must co	omplete column (A)	
0000	Check if Schedule O contains a respon		-		X
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	181,550.	130,716.	50,834.	
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	1,201,347.	946,574.	120,261.	134,512.
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	63,028.	49,742.	6,016.	7,270.21,065.
9	Other employee benefits	202,340.	162,699.	18,576.	21,065.
10	Payroll taxes	106,694.	83,222.	12,803.	10,669.
11	Fees for services (non-employees):				
а	Management				
	Legal	2,520.		2,520.	
	Accounting	43,720.		43,720.	
	Lobbying				
	Professional fundraising services. See Part IV, line 17	46,320.			46,320
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,				
-	column (A) amount, list line 11g expenses on Sch 0.)	254,443.	245,451.	917.	8,075
12	Advertising and promotion				
13	Office expenses	40,660.	34,702.	1,457.	4,501.
14	Information technology				
15	Royalties				
16	Occupancy	169,719.	135,775.	16,972.	16,972.
17	Travel	23,749.	20,635.	60.	3,054
18	Payments of travel or entertainment expenses	-			
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	15,406.	13,636.	133.	1,637
20	Interest	-			
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	18,684.	14,758.	2,082.	1,844.
23	Insurance	3,873.	3,099.	387.	387.
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а	PRINTING	34,194.	3,332.	68.	30,794
a b	PROGRAM SUPPLIES	11,825.	10,203.	427.	1,195
c b	EVENTS	8,388.	546.	0.	7,842
d d	MISCELLANEOUS	7,311.	3,727.	145.	3,439
-	All other expenses	1,079.	1,079.		5,255
	Total functional expenses. Add lines 1 through 24e	2,436,850.	1,859,896.	277,378.	299,576.
25	i viai iunciivilai expenses. Auu intes i unougii 24e	2, 30, 000.	±,000,000.	211,510.	

26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)

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Form **990** (2018)

10511119 807818 SILENTSPRING

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2018.05000 SILENT SPRING INSTITUTE, IN SILENTS1

Form 990 (2018)	SILENT	SPRING	INSTITUTE,	INC.
Part X	Balance Sheet	1			

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		Check if Schedule O contains a response or note to any line in this Part X .			
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	3,428.	1	4,958.
	2	Savings and temporary cash investments	1,397,847.		1,549,838.
	3	Pledges and grants receivable, net	257,733.	3	250,020.
	4	Accounts receivable, net		4	1,590.
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees. Complete			
		Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined une	ler		
		section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contribu	ting		
		employers and sponsoring organizations of section 501(c)(9) voluntary			
ţ		employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
Assets	7	Notes and loans receivable, net		7	
Ä	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	41,989.
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D	.9.		
	b	Less: accumulated depreciation 10b 74, 21	.8. 83,482.	10c	68,001.
	11	Investments - publicly traded securities		11	
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	1,781,386.	16	1,916,396.
	17	Accounts payable and accrued expenses	172,314.	17	235,129.
	18	Grants payable		18	
	19	Deferred revenue	22,842.	19	1,433.
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
es	22	Loans and other payables to current and former officers, directors, trustees	,		
ij.		key employees, highest compensated employees, and disqualified persons			
Liabilities		Complete Part II of Schedule L		22	
-	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X of			
		Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	195,156.	26	236,562.
		Organizations that follow SFAS 117 (ASC 958), check here ► X ar	d		
ses		complete lines 27 through 29, and lines 33 and 34.	1 1 5 7 0 0 5		1 4 6 0 4 7 0
anc	27	Unrestricted net assets		27	1,468,472. 211,362.
Fund Balances	28	Temporarily restricted net assets	429,205.	28	211,362.
pu	29	Permanently restricted net assets	<u></u>	29	
		Organizations that do not follow SFAS 117 (ASC 958), check here \blacktriangleright	J		
° or		and complete lines 30 through 34.			
sets	30	Capital stock or trust principal, or current funds		30	
Ast	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Net Assets or	32	Retained earnings, endowment, accumulated income, or other funds		32	
2	33	Total net assets or fund balances		33	1,679,834.
	34	Total liabilities and net assets/fund balances	1,781,386.	34	1,916,396.

Form **990** (2018)

832012 12-31-	18								
				12					
10511119	807818	SILENTSPRING	2018.05000	SILENT	SPRING	INSTITUTE,	IN	SILENTS1	

1		2,53		
2	Total expenses (must equal Part IX, column (A), line 25)	2,43	6,8	50.
3	Revenue less expenses. Subtract line 2 from line 1 3	93,604.		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	1,58	6,2	30.
5	Net unrealized gains (losses) on investments 5			
6	Donated services and use of facilities 6			
7	Investment expenses 7			
8	Prior period adjustments 8			
9	Other changes in net assets or fund balances (explain in Schedule O) 9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,			
		1,67	9,8	34.
Pa	rt XII Financial Statements and Reporting			
	Check if Schedule O contains a response or note to any line in this Part XII	<u></u>		
		_	Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a			
	separate basis, consolidated basis, or both:			
	Separate basis Consolidated basis Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?	2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis,			
	consolidated basis, or both:			
	X Separate basis Consolidated basis Both consolidated and separate basis			
с	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit,			
	review, or compilation of its financial statements and selection of an independent accountant?	2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit			
	Act and OMB Circular A-133?	3a	Х	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b	Х	

Form 990 (2018)

SILENT SPRING INSTITUTE, INC.

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

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		liation of Net A	ssets
Form 990 (2018)	SILEN	T SP

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01111	000		/

SCHEDULE A

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047
2018
Open to Public Inspection

Name of the organization

Name o	of the organization							identification number		
			INSTITUTE, I					4-3237106		
Part	Reason for Public	Charity Status (All organizations must co	omplete th	nis part.) Se	e instruction	S.			
The org	anization is not a private found	dation because it is: (For lines 1 through 12, o	check only	one box.)					
1 🗋	A church, convention of ch	urches, or associatio	on of churches describe	d in sectio	on 170(b)(1	l)(A)(i).				
2	A school described in sect	ion 170(b)(1)(A)(ii).	Attach Schedule E (Forn	n 990 or 9	90-EZ).)					
3	A hospital or a cooperative	hospital service orga	anization described in s e	ection 170)(b)(1)(A)(ii	i).				
4	A medical research organiz	ation operated in co	njunction with a hospita	l describe	d in sectio	n 170(b)(1)(A)(iii). Enter	the hospital's name,		
	city, and state:									
5	An organization operated for	or the benefit of a co	llege or university owne	d or opera	ted by a g	overnmental	unit describ	bed in		
	section 170(b)(1)(A)(iv). (Complete Part II.)									
6	A federal, state, or local go		nental unit described in	section 17	70(b)(1)(A)	(v).				
7 X							he general	public described in		
	section 170(b)(1)(A)(vi). (C						U U			
8	A community trust describe		(1)(A)(vi). (Complete Par	t II.)						
9	An agricultural research or				ed in conju	inction with a	land-grant	college		
	or university or a non-land-	-			-		-	-		
	university:						-			
10	An organization that norma	ally receives: (1) more	than 33 1/3% of its sur	port from	contributio	ons. member	ship fees. a	nd aross receipts from		
	activities related to its exer									
	income and unrelated busi									
	See section 509(a)(2). (Co		(,,,			·····, ····	J	,		
11	An organization organized		ively to test for public sa	afetv. See	section 50)9(a)(4).				
12	An organization organized		•	•			arrv out the	e purposes of one or		
	more publicly supported or	-	-	-			-			
	lines 12a through 12d that									
a	Type I. A supporting orga	• •			-		-	, aivina		
	the supported organization		-	•						
	organization. You must o									
ь	Type II. A supporting org	-		tion with it	ts supporte	ed organizatio	on(s), by ha	vina		
	control or management of	-				-		-		
	organization(s). You mus						-90o oo.p			
с	Type III functionally inte	-		in connec	tion with.	and functiona	llv integrate	ed with		
	its supported organizatio									
d	Type III non-functionally						rted organi	zation(s)		
	that is not functionally inf						-			
	requirement (see instruct			•		-	a an actoric			
e	Check this box if the orga						II Type III			
0	functionally integrated, o					, iype i, iype	in, rype in			
f F	nter the number of supported	3 1	, , ,	0 0						
	rovide the following information									
	(i) Name of supported	(ii) EIN	(iii) Type of organization	(iv) Is the orga	anization listed ing document?	(v) Amount o	f monetary	(vi) Amount of other		
	organization		(described on lines 1-10 above (see instructions))	Yes	No	support (see ir	nstructions)	support (see instructions)		
Total										
	r Paperwork Reduction Act N	Notice, see the Instr	uctions for Form 990 o	or 990-EZ.	832021 10-	11-18 Sche	dule A (For	m 990 or 990-EZ) 2018		

Schedule A (Form 990 or 990-EZ) 2018 SILENT SPRING INSTITUTE, INC.

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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 or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	Section A. Public Support								
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total		
1	Gifts, grants, contributions, and								
	membership fees received. (Do not								
	include any "unusual grants.")	1708273.	2158171.	1453932.	2322244.	2388576.	10031196.		
2	Tax revenues levied for the organ-								
	ization's benefit and either paid to								
	or expended on its behalf								
3	The value of services or facilities								
	furnished by a governmental unit to								
	the organization without charge	1 - 0 0 - 0 - 0		4 4 5 9 9 9 9			1		
	Total. Add lines 1 through 3	1708273.	2158171.	1453932.	2322244.	2388576.	10031196.		
5	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,						700 1 6 1		
-	column (f)						799,161. 9232035.		
	Public support. Subtract line 5 from line 4.						9232035.		
	ction B. Total Support	() 001 ((1) 0015	()0010	(1) 0017	() 0010	(0 T))		
	ndar year (or fiscal year beginning in)	(a)2014 1708273.	(b) 2015 2158171.	(c)2016 1453932.	(d) 2017 2322244.	(e) 2018	(f) Total 10031196.		
	Amounts from line 4	1/002/3.	2130171.	1433932.	2322244.	2300370.	10031190.		
8									
	dividends, payments received on								
	securities loans, rents, royalties,	2,217.	2,383.	5,967.	1,739.	2,711.	15,017.		
0	and income from similar sources Net income from unrelated business	2,217.	2,505.	5,507.	1,755.	2,711.	15,017.		
9	activities, whether or not the								
	business is regularly carried on								
10	Other income. Do not include gain								
10	or loss from the sale of capital								
	assets (Explain in Part VI.)	1,350.	1,049.	10,450.	1,387.	1,305.	15,541.		
11	Total support. Add lines 7 through 10		,		,		10061754.		
	Gross receipts from related activities,	etc. (see instruction	ons)			12	29,357.		
	First five years. If the Form 990 is for		,			n 501(c)(3)			
	organization, check this box and stor	-	· · · ·	<i>, ,</i>	·····				
Sec	ction C. Computation of Publ		rcentage						
	Public support percentage for 2018 (olumn (f))		14	91.75 %		
15	Public support percentage from 2017	' Schedule A, Part	II, line 14			15	85.45 %		
	33 1/3% support test - 2018. If the c					nore, check this bo			
	stop here. The organization qualifies	as a publicly supp	orted organization	I			► X		
b	33 1/3% support test - 2017. If the o								
	and stop here. The organization qual								
17a	10% -facts-and-circumstances tes	t - 2018. If the org	anization did not o	check a box on line	e 13, 16a, or 16b, a	and line 14 is 10%	or more,		
	and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization								
	meets the "facts-and-circumstances"								
b	10% -facts-and-circumstances tes								
	more, and if the organization meets the								
	organization meets the "facts-and-circ								
18	Private foundation. If the organization	n did not check a	box on line 13, 16	a, 16b, 17a, or 17b					
					Sche	dule A (Form 990	or 990-EZ) 2018		

Schedule A (Form 990 or 990-EZ) 2018 SILENT SPRING INSTITUTE, INC. Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

	ndar year (or fiscal year beginning in) 🕨	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2	018	(f) Total
1	Gifts, grants, contributions, and							
	membership fees received. (Do not							
	include any "unusual grants.")							
	Gross receipts from admissions, merchandise sold or services per-							
	formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose							
3	Gross receipts from activities that							
	are not an unrelated trade or bus-							
	iness under section 513							
4	Tax revenues levied for the organ-							
	ization's benefit and either paid to							
	or expended on its behalf							
5	The value of services or facilities							
	furnished by a governmental unit to							
	the organization without charge \dots							
6	Total. Add lines 1 through 5							
7a	Amounts included on lines 1, 2, and							
	3 received from disqualified persons							
	Amounts included on lines 2 and 3 received							
	from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year							
	Add lines 7a and 7b							
8	Public support. (Subtract line 7c from line 6.)							
	tion B. Total Support							
aler	idar year (or fiscal year beginning in) 🕨	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2	018	(f) Total
9	Amounts from line 6							
	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources							
	Unrelated business taxable income							
	(less section 511 taxes) from businesses acquired after June 30, 1975							
	Add lines 10a and 10b							
1	Net income from unrelated business activities not included in line 10b, whether or not the business is							
2	regularly carried on Other income. Do not include gain							
	or loss from the sale of capital assets (Explain in Part VI.)							
	First five years. If the Form 990 is for	the organization'	l s first second thi	I rd fourth or fifth to	I ay year as a sectio	1 = 501(c)(c)	3) organiz	ration
	check this box and stop here	•					organiz	.a.ion,
Sec	tion C. Computation of Publ	ic Support Pe	rcentage					·····
	Public support percentage for 2018 (I			column (f))		15		(
	Public support percentage from 2017					16		(
	tion D. Computation of Invest							
	Investment income percentage for 20		-			17		
	Investment income percentage for 20					17		
	33 1/3% support tests - 2018. If the						and line 1	
		organization diu i						
l9a		nd eten here The		illes as a publiciv s	upponeu organiza	auon		
9a	more than 33 1/3%, check this box a				and line 16 is	aro them o	2 1/20/	and
l9a b	more than 33 1/3%, check this box a 33 1/3% support tests - 2017. If the	organization did r	not check a box or	n line 14 or line 19a				
l9a b	more than 33 1/3%, check this box a 33 1/3% support tests - 2017. If the line 18 is not more than 33 1/3%, che	organization did r ck this box and si	not check a box of t op here. The orga	n line 14 or line 19a Inization qualifies a	as a publicly suppo	orted orga	nization	
19a b 20	more than 33 1/3%, check this box a 33 1/3% support tests - 2017. If the	organization did r ck this box and si	not check a box of t op here. The orga	n line 14 or line 19a Inization qualifies a	as a publicly suppo nis box and see in	orted orga structions	nization	

1

2

3a

3b

3c

4a

4b

4c

5a

5b

5c

6

7

8

9a

9b

9c

10a

10b

Yes

No

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b** Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 8 Did the organization make a loan to a disgualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

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Schedule A (Form 990 or 990-EZ) 2018

Schedule A (Form 990 or 990-EZ) 2018 SILENT SPRING INSTITUTE, INC. Part IV Supporting Organizations (continued)

	Cupporting organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
_	below, the governing body of a supported organization?	11a		
	A family member of a person described in (a) above?	11b		<u> </u>
	A 35% controlled entity of a person described in (a) or (b) above? <i>If</i> "Yes" to a, b, or c, provide detail in Part VI .	11c		L
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		L
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see instructions)			
а	The organization satisfied the Activities Test. <i>Complete</i> line 2 <i>below.</i>			
b	The organization is the parent of each of its supported organizations. <i>Complete</i> line 3 <i>below</i> .			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see ins	tructions	s).	
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		L
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? Provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		1
832025	5 10-11-18 Schedule A (Form 9	90 or 99	ЭО-EZ)	2018
	\perp /			

Schedule A (Form 990 or 990-EZ) 2018	SILENT	SPRING	INSTITUTE,	INC.

 Part V
 Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

 1
 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part

Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI.) See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
с	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other			
	factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
	see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functional	ly integra	ted Type III supporting org	anization (see

instructions).

Schedule A (Form 990 or 990-EZ) 2018

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Schedule A (Form 990 or 990 EZ) 2018 SILENT SPRING INSTITUTE, INC.

Pa	rt V Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	anizations (continued)	
Sect	ion D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exe	mpt purposes		
2	Amounts paid to perform activity that directly furthers exemp			
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose	IS		
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which the	ne organization is responsive	9	
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2018 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
Sect	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
_1	Distributable amount for 2018 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2018 (reason-			
	able cause required- explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2018			
a	From 2013			
b	From 2014			
c	From 2015			
d	From 2016			
e	From 2017			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2018 distributable amount			
<u> i</u>	Carryover from 2013 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2018 from Section D,			
	line 7: \$			
-	Applied to underdistributions of prior years			
	Applied to 2018 distributable amount			
	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2018, if			
	any. Subtract lines 3g and 4a from line 2. For result greater			
	than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2018. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2019. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
	Excess from 2014			
	Excess from 2015			
	Excess from 2016			
	Excess from 2017			
e	Excess from 2018			Farm 000 ar 000 F7) 0040

Schedule A (Form 990 or 990-EZ) 2018

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Schedule A (Form 990 or 990-EZ) 2018	SILENT	SPRING	INSTITUTE,	INC.
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Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:

	÷	1 250			
2014 AMOUNT:		1,350.			
2015 AMOUNT:	\$	1,049.			
2016 AMOUNT:	\$	10,450.		 	
2017 AMOUNT:	\$	1,287.			
2018 AMOUNT:	\$	1,305.			
OTHER INCOME	2				
2017 AMOUNT:	\$	100.			

SCHEDULE D

Department of the Treasury

Internal Revenue Service

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

Go to www.irs.gov/Form990 for instructions and the latest information.



Name of the organization

SILENT SPRING INSTITUTE, INC.

Employer identification number 04 - 3237106

(a) Donor advised funds (b) Funds and other accounts 1 Total number at end of year (c) Punds and other accounts 2 Aggregate value of contributions to (during year) (c) 3 Aggregate value of contributions to (during year) (c) 4 Aggregate value of contributions to (during year) (c) 5 Did the organization inform all grantess, donors, and donor advisors in writing that grant funds can be used only (ve) No 6 Did the organization inform all grantess, donors, and donor advisors in writing that grant funds can be used only (ve) No 7 Monoservation Easements. Complete if the organization answered 'Yee' on Form 990. Part IV, line 7. 1 Purpose(s) of conservation easements held by the organization answered 'Yee' on Form 990. Part IV, line 7. 1 Purpose(s) of conservation easements held by the organization answered 'Yee' on Form 990. Part IV, line 7. 1 Purpose(s) of conservation easements held by the organization answered 'Yee' on Form 990. Part IV, line 7. 1 Purpose(s) of conservation easements held by the organization construction in the form of a instructure include a line (2) or donos advisor. No 2 Complete line 2 at trough 2 of the organization held a qualified conservation easements in cluded in (2) acquired after 7/25/06, and nct on a historically important land area prestruction of anasemates in cluded in (2) acquired after 7/25/06, and n	Pa			her Similar Funds	s or Ac	counts.Complete if the
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2 Aggregate value of contributions to (during year) 4 Aggregate value of contributions to (during year) 4 Aggregate value of ans thor (during year) 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization inform all donors and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor of donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor of donor advisor, for any other purpose conferring memory and for the benefit of the donor of donor advisor, for any other purpose conferring memory and for a for public use (e.g., recreation or education) Preservation of a historically important land area Preservation of and for public use (e.g., recreation or education) Preservation of a historically important land area Preservation of open space 2 Complete ins 2 Attrovidy 25 of the organizzation held a qualified conservation contribution in the form of a conservation easement held by the organizzation induced in (a) Total number of conservation easements Author of donoservation easements Author of donoservation easements included in (a) acquired after 72206s, and not an historical purpose Author of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year Author of states where property subject to conservation easements in located Author of the conservation easements included in (a) availed after 72206s, and not an historical processervation easements during the year Author of asservation easements modified, transferred, released, extinguished, or terminated by the organization' authors		-	(a) Donor a	idvised funds	(b) Funds and other accounts
a Aggregate value of grants from (during year) Aggregate value of a private at on d year bit the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization inform all donors and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? PartIL Conservation Easements held by the organization answered 'Yes' on Form 990, Part IV, Ine 7. Partice of conservation easements held by the organization of a historically important and area Preservation of land for public use (e.g., recreation or education) Preservation of a historically impartments include the organization held a qualified conservation contribution in the form of a conservation easements be the tax year. Preservation of a network of a historical trutcurue Preservation of a certified historic structure are total number of conservation easements be tax year. No Total another of conservation easements be tax year. No Total number of conservation easements be tax year. No Total number of conservation easements be conservation easements be tax year. No Total number of conservation easements be conservation easements be tax year. No Total number of conservation easements be conservation easements be tax year of	1					
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5 Did the organization inform all donors advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?	3					
are the organization is property, subject to the organization's exclusive legal control? Image: the organization inform all grantees, donors, and donor advisor, in or any other purposes conferring impermissible private benefit? No 6 Did the organization inform all grantees, donors, and donor advisor, or for any other purposes conferring impermissible private benefit? No 7 Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of and for public use (e.g., recreation or education) Preservation of a conservation easements held by the organization (check all that apply). 9 Preservation of and for public use (e.g., recreation or education) Preservation of a conservation easement to a conservation easement on a conservation easement to a conservation easement is included in (a) 2a 2 Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure is to conservation easements included in (c) acquired after 7/25/06, and end or and end the year 2a 3 Number of conservation easements included in (c) acquired after 7/25/06, and end or and end organization during the tax year 4 Number of conservation easements in blots? Yes No 4 Number of conservation easements in blots? Yes No 6	4					
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Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X (iii) Assets included on Form 990, Part X (iii) Assets included on Form 990, Part VIII, line 1 (ive following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenue included on Form 990, Part VIII, line 1 (ive following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenue included on Form 990, Part X (ive following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenue included on Form 990, Part X (ve form 990, Part X) (ve form 990, Part X)	Da	conservation easements.	f Art Historica	Trassuras or O	thor S	imilar Assats
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 historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenue included on Form 990, Part X b Assets included in Form 990, Part X c S c Schedule D (Form 990) 2018 	10				mont on	d balance aboat works of art
 the text of the footnote to its financial statements that describes these items. If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenue included on Form 990, Part VIII, line 1 b Assets included in Form 990, Part X b Assets included in Form 990, Part X b Assets included in Form 990, Part X c Schedule D (Form 990) 2018 	Ia					
 b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenue included on Form 990, Part X b Assets included in Form 990, Part X c Assets included in Form 990, Part X 				or research in furthere		dubile service, provide, in Part Alli,
treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenue included on Form 990, Part VIII, line 1 (b Assets included in Form 990, Part X LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Sechedule D (Form 990) 2018	h			a ite rovonuo etatomon	t and ba	lance sheet works of art historical
 relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenue included on Form 990, Part VIII, line 1 b Assets included in Form 990, Part X b Assets included in Form 990, Part X b Assets included in Form 990, Part X b Assets included in Form 990, Part X b Assets included in Form 990, Part X c Schedule D (Form 990) 2018 	U					
 (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenue included on Form 990, Part VIII, line 1 b Assets included in Form 990, Part X c Schedule D (Form 990) 2018 			ducation, or resear	ch in futurerance of pu		nce, provide the following amounts
 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenue included on Form 990, Part VIII, line 1 b Assets included in Form 990, Part X b Assets included in Form 990, Part X b Assets included in Form 990, Part X b Schedule D (Form 990) 2018 		-				► ¢
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the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenue included on Form 990, Part VIII, line 1 b Assets included in Form 990, Part X LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule D (Form 990) 2018	2					
a Revenue included on Form 990, Part VIII, line 1 b Assets included in Form 990, Part X LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule D (Form 990) 2018	2				a yan, p	
b Assets included in Form 990, Part X LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule D (Form 990) 2018	~			-		► ¢
LHAFor Paperwork Reduction Act Notice, see the Instructions for Form 990.Schedule D (Form 990) 2018						· · ·

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2018.05000 SILENT SPRING INSTITUTE, IN SILENTS1 10511119 807818 SILENTSPRING

Sche	dule D (Form 990) 2018 SILENT	SPRING INS	TITU	TE, IN	VC.		0	4-32	37100	6 Page	2
Par	t III Organizations Maintaining C	Collections of A	rt, Hist	torical T	reasures,	or Othe	r Simila	r Asse	ts (contin	nued)	
3	Using the organization's acquisition, access	ion, and other record	ds, checl	k any of the	e following that	at are a sig	gnificant us	se of its	collection	n items	
_	(check all that apply):		. — .								
a		C			change progr						
b	Scholarly research	e		Other							
c	Preservation for future generations							a in Davi	. VIII		
4	Provide a description of the organization's c							e in Pari	XIII.		
5	During the year, did the organization solicit of		-						Yes		lo
Par	to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No art IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or										
	reported an amount on Form 990, Pa			organizatio		103 011	10111000,	r arc iv,	in ie 0, 0i		
- 1a	Is the organization an agent, trustee, custod		diary for	contributio	ns or other as	sets not i	included				
	on Form 990, Part X?		-						Yes		lo
b	If "Yes," explain the arrangement in Part XIII										
	······································								Amount	:	
с	Beginning balance						1c				
	Additions during the year										
	Distributions during the year										
	Ending balance										
	Did the organization include an amount on F								Yes		lo
b	If "Yes," explain the arrangement in Part XIII	. Check here if the ex	xplanatic	on has beer	n provided on	Part XIII					
Par	t V Endowment Funds. Complete	if the organization ar	swered	"Yes" on F	orm 990, Par	t IV, line 1	0.				
		(a) Current year	(b) P	rior year	(c) Two yea	rs back 🚺	d) Three yea	ars back	(e) Four	years bac	:k
	Beginning of year balance										
	Contributions										
	Net investment earnings, gains, and losses										
	Grants or scholarships										
е	Other expenditures for facilities										
	and programs										
	Administrative expenses										
-	End of year balance		<i>(</i>),								
2	Provide the estimated percentage of the cur			g, column (a)) neid as:						
	Board designated or quasi-endowment Permanent endowment	%	_%								
	Temporarily restricted endowment	%									
C	The percentages on lines 2a, 2b, and 2c sho										
39	Are there endowment funds not in the posse		ation the	at are held :	and administe	ared for th	e organiza	tion			
ou	by:						ic organiza		Г	Yes N	
	(i) unrelated organizations								3a(i)	100 1	-
	(ii) related organizations								3a(ii)		
b	If "Yes" on line 3a(ii), are the related organiza										
4	Describe in Part XIII the intended uses of the								LI		
Par	t VI Land, Buildings, and Equipn										
	Complete if the organization answere	d "Yes" on Form 990	0, Part IV	/, line 11a. :	See Form 990), Part X,	line 10.				
	Description of property	(a) Cost or c basis (investr			t or other (other)		cumulated		(d) Bool	k value	
1a	Land										
b	Buildings										
	Leasehold improvements				36,953.		18,03			8,916	
d	Equipment			10)5,266.		56,18	1.	49	9,085	• (
	Other								-		
Tota	. Add lines 1a through 1e. (Column (d) must e	equal Form 990, Part	X, colun	nn (B), line	10c.)				68	8,001	•

Schedule D (Form 990) 2018

832052 10-29-18

	(Form 990) 2018			INSTITUTE,	INC.
Part VII	Investments -	Other Securi	ties.		

Complete if the organization answered "Yes"	on Form 990, Part IV, lir	ne 11b. See Form 990, Pa	art X, line 12.	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valu	ation: Cost or end-of-year n	narket value
(1) Financial derivatives			· · · · ·	
(2) Closely-held equity interests				
(3) Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)				
Part VIII Investments - Program Related.				
Complete if the organization answered "Yes"	on Form 990, Part IV, lir	ne 11c. See Form 990, Pa	rt X, line 13.	
(a) Description of investment	(b) Book value	(c) Method of valu	ation: Cost or end-of-year n	narket value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)				
Part IX Other Assets.				
Complete if the organization answered "Yes"		ne 11d. See Form 990, Pa		
(a)	Description		(b) E	3ook value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Column (b) must equal Form 990, Part X, col. (B) lin Part X Other Liabilities.	e 15.)		▶	
Complete if the organization answered "Yes"	on Form 990, Part IV, lir		90, Part X, line 25.	
1.(a) Description of liability		(b) Book value		
(1) Federal income taxes				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9) Tetel (Column (b) must sound Form 000 Port X, sol. (D) (in	0.05) N			
Total. (Column (b) must equal Form 990, Part X, col. (B) lin	· · · · · · · · · · · · · · · · · · ·			
2. Liability for uncertain tax positions. In Part XIII, provide		-		
organization's liability for uncertain tax positions unde	r ⊢IN 48 (ASC 740). Che	ck here if the text of the f	ootnote has been provided	ın Part XIII 📖

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832053 10-29-18

Sche	edule D (Form 990) 2018 SILENT SPRING INSTITUTE	, INC.	04-3	3237106 Page 4
-	rt XI Reconciliation of Revenue per Audited Financial Sta	tements With Rever		
	Complete if the organization answered "Yes" on Form 990, Part IV, lir	ne 12a.	-	
1	Total revenue, gains, and other support per audited financial statements		1	2,530,454.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
а	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities			
с	Recoveries of prior year grants			
d	Other (Describe in Part XIII.)			
е	Add lines 2a through 2d		2e	0.
3	Subtract line 2e from line 1			2,530,454.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
с	Add lines 4a and 4b		4c	0.
_5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		2,530,454.
Pa	rt XII Reconciliation of Expenses per Audited Financial St	atements With Expe	nses per Retu	rn.
	Complete if the organization answered "Yes" on Form 990, Part IV, lir	- 10-		
		1e 12a.		
1	Total expenses and losses per audited financial statements		1	2,436,850.
1 2	· · · · · · · · · · · · · · · · · · ·		1	2,436,850.
1 2 a	Total expenses and losses per audited financial statements		1	2,436,850.
_	Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities	2a	1	2,436,850.
a	Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities	2a 2b	1	2,436,850.
a	Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses	2a 2b 2c	<u>1</u>	2,436,850.
a b c	Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.)	2a 2b 2c 2d		0.
a b c d	Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d	2a 2b 2c 2d		2,436,850. 0. 2,436,850.
a b c d e	Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.)	2a 2b 2c 2d		0.
a b c d e	Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1:	2a 2b 2c 2d		0.
a b c d 3 4	Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b	2a 2b 2c 2d 2d		0.
a b c d e 3 4 a	Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b	2a 2b 2c 2d 2d 4a 4b	2e 3	0. 2,436,850. 0.
a b c d e 3 4 a b c 5	Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.) Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 1	2a 2b 2c 2d 2d 4a 4b	2e 3	0. 2,436,850.
a b c d e 3 4 a b c 5	Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.) Add lines 4a and 4b	2a 2b 2c 2d 2d 4a 4b	2e 3	0. 2,436,850. 0.

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

Schedule D (Form 990) 2018

SCHEDULE G Supplem	ental Information Regarding	, Fun	drais	ing or Gaming	Activities	OMB No. 1545-0047
	he organization answered "Yes" on organization entered more than \$1				or 19, or if the	2018
Department of the Treasury	Attach to Form 990					Open to Public
Internal Revenue Service	Go to www.irs.gov/Form990 for instr	uction	is and	I the latest informat		Inspection
Name of the organization	SPRING INSTITUTE,	TNO	I		Employer i 04-323	dentification number
	SPRING INSTITUTE, S. Complete if the organization answe			n Form 990 Part IV		
required to complete this p		ereu i	63 0	111 Onn 330, 1 art 10,	inte 17.1 onn 330	EZ mers are not
	e X Solicita f X Solicita g X Special n or oral agreement with any individua Part VII) or entity in connection with p dividuals or entities (fundraisers) purse	tion of tion of fundra l (inclue profess uant to	non-g gover aising ding o ional t agree	overnment grants rnment grants events fficers, directors, true fundraising services?	stees, or	.
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	have c	Did raiser ustody ntrol of utions?	(iv) Gross receipts from activity	to (or retained by fundraiser listed in col. (i)	
SAGE ADVANCEMENT GROUP, LLC -	FUNDRAISING CAPACITY	Yes	No	-		
PO BOX 5431, HAVERHILL, MA FUNDING CHANGE - 175	CONSULTING, APPEAL LETTERS		X	0.	33,20	0. 0.
WACHUSETT STREET, BOSTON, MA	APPEAL LETTERS		x	0.	13,12	0. 0.
·					,	
		+				
Total			. 🕨		46,32	0.
3 List all states in which the organization or licensing.	tion is registered or licensed to solicit	contrik	oution	s or has been notified	d it is exempt fron	n registration

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. SEE PART IV FOR CONTINUATIONS Schedule G (Form 990 or 990-EZ) 2018

832081 10-03-18

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000

			(a) Event #1 ANNUAL GALA	(b) Event #2	(c) Other events NONE	(d) Total events (add col. (a) through col. (c))
			(event type)	(event type)	(total number)	COI. (C))
	1	Gross receipts				389,122
	2	Less: Contributions				149,637
	3	Gross income (line 1 minus line 2)				239,485
	4	Cash prizes				
	5	Noncash prizes				
	6	Rent/facility costs				16,762
	7	Food and beverages				31,237
	8	Entertainment	10,000.			10,000
	9	Other direct expenses	40 004			43,624
1	10	Direct expense summary. Add lines 4 thro			>	101,623
	11	Net income summary. Subtract line 10 fro				137,862
ar	tl		on answered "Yes" on Form	n 990, Part IV, line 19, or	reported more than	
Т		\$15,000 on Form 990-EZ, line 6a.	() 5	(b) Pull tabs/instant		(d) Total gaming (ad
			(a) Bingo		(c) Other gaming	
			(a) Bingo	bingo/progressive bingo	(c) Other gaming	
	1	Gross revenue			(c) Other gaming	
	1	Gross revenue			(c) Other gaming	
		Gross revenue			(c) Other gaming	
					(c) Other gaming	
	2	Cash prizes			(c) Other gaming	col. (a) through col. (a
	2	Cash prizes Noncash prizes Rent/facility costs			(c) Other gaming	
	2 3 4 5	Cash prizes			(c) Other gaming	
	2 3 4 5	Cash prizes Noncash prizes Rent/facility costs Other direct expenses		bingo/progressive bingo	└── Yes% └── No	
	2 3 4 5 7	Cash prizes Noncash prizes Rent/facility costs Other direct expenses Volunteer labor		bingo/progressive bingo	Yes% No	
	2 3 4 5 7 8	Cash prizes Noncash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary. Add lines 2 thro Net gaming income summary. Subtract lin		bingo/progressive bingo	Yes% No	
	2 3 4 5 6 7 8 Ent	Cash prizes Noncash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary. Add lines 2 thro Net gaming income summary. Subtract lin ter the state(s) in which the organization co he organization licensed to conduct gaming		bingo/progressive bingo	Yes% □ No	col. (a) through col. (c
	2 3 4 5 6 7 8 Ent	Cash prizes Noncash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary. Add lines 2 thro Net gaming income summary. Subtract lin ter the state(s) in which the organization co		bingo/progressive bingo	Yes% □ No	col. (a) through col. (
	2 3 4 5 6 7 8 Ent Is t Is t	Cash prizes Noncash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary. Add lines 2 thro Net gaming income summary. Subtract lin ter the state(s) in which the organization co he organization licensed to conduct gaming		bingo/progressive bingo	Yes% □ No	col. (a) through col. (d

832082 10-03-18

Schedule G (Form 990 or 990-EZ) 2018

Sch	edule G (Form 990 or 990-EZ) 2018 SILENT SPRING INSTITUTE, INC. 04-3	23710)6 Page 3
11	Does the organization conduct gaming activities with nonmembers?	Ye:	
13	to administer charitable gaming?		
	The organization's facility	13a	%
	An outside facility		%
	Enter the name and address of the person who prepares the organization's gaming/special events books and records:		
	Name		
	Address ►		
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	🗌 Yes	s 🗌 No
b	If "Yes," enter the amount of gaming revenue received by the organization > \$ and the amount		
	of gaming revenue retained by the third party \blacktriangleright \$		
С	If "Yes," enter name and address of the third party:		
	Name		
	Address ►		
16	Gaming manager information:		
	Name		
	Gaming manager compensation > \$		
	Description of services provided		
	Director/officer Employee Independent contractor		
17	Mandatory distributions:		
	Is the organization required under state law to make charitable distributions from the gaming proceeds to		
	retain the state gaming license?	_ L Ye	s 📖 No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the		
Pa	organization's own exempt activities during the tax year ▶ \$ TIV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Pa 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.	rt III, lines	9, 9b, 10b,
SC	HEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISEF	:S:	
(I) NAME OF FUNDRAISER: SAGE ADVANCEMENT GROUP, LLC		
(I) ADDRESS OF FUNDRAISER: PO BOX 5431, HAVERHILL, MA 01835		
<u>\</u>			
(I) NAME OF FUNDRAISER: FUNDING CHANGE		
/ -		20	
(I) ADDRESS OF FUNDRAISER: 175 WACHUSETT STREET, BOSTON, MA 021	. 50	
83208	33 10-03-18 Schedule G (Form	n 990 or 9	90-EZ) 2018

Schedule G (Form 990 or 990-EZ)	SILENT	SPRING	INSTITUTE,	INC.
Part IV Supplemental Info	rmation (cont	tinued)		

Schedule G (Form 990 or 990-EZ)	832084 04-01-18	В		33					
						Schedule	G (For	m 990 or 990-E2	
									_
									_

sc	HEDULE J	Compensation Information	I	OMB No.	1545-00	47
(Fo	rm 990)	For certain Officers, Directors, Trustees, Key Employees, and Highest		20	10	2
•	-	Compensated Employees		20	10)
Dena	tment of the Treasury	 Complete if the organization answered "Yes" on Form 990, Part IV, line 23. Attach to Form 990. 		Open to	Publ	ic
	al Revenue Service	Go to www.irs.gov/Form990 for instructions and the latest information.		Inspe		
Nan	e of the organizatio		Employer			mber
_		SILENT SPRING INSTITUTE, INC.	04-3	323710	6	
Pa	rt I Question	s Regarding Compensation				
					Yes	No
1a		ate box(es) if the organization provided any of the following to or for a person listed on Form	n 990,			
		line 1a. Complete Part III to provide any relevant information regarding these items.				
	First-class or c	, i i i i i i i i i i i i i i i i i i i				
	Travel for com					
		ation and gross-up payments				
		spending account Personal services (such as maid, chauffer	ur, cnet)			
h	If any of the bayes	an line to are absolved, did the exercitation follow a written policy respective powerst ar				
b	•	on line 1a are checked, did the organization follow a written policy regarding payment or provision of all of the expenses described above? If "No," complete Part III to explain		1b		
2				di		
2		n require substantiation prior to reimbursing or allowing expenses incurred by all directors, rs, including the CEO/Executive Director, regarding the items checked on line 1a?		2		
	trustees, and onice					
3	Indicate which if a	ny, of the following the filing organization used to establish the compensation of the organization	ation's			
•		ector. Check all that apply. Do not check any boxes for methods used by a related organization				
		ation of the CEO/Executive Director, but explain in Part III.				
	Compensation					
	·	compensation consultant \overline{X} Compensation survey or study				
	·	ther organizations I I I I I I I I I I I I I I I I I I I	committee			
		5				
4	During the year, did	any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing				
	organization or a re	lated organization:				
а	Receive a severand	e payment or change-of-control payment?		4a		Х
b	Participate in, or re	ceive payment from, a supplemental nonqualified retirement plan?		4b		X
с	Participate in, or re	ceive payment from, an equity-based compensation arrangement?		4c		X
	If "Yes" to any of lin	nes 4a-c, list the persons and provide the applicable amounts for each item in Part III.				
		c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.				
5	For persons listed	on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensati	on			
	contingent on the r					
						X
b		ation?		5b		X
		or 5b, describe in Part III.				
6		on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensati	on			
	contingent on the r					37
а						X
b		ation?		6b		X
		or 6b, describe in Part III.				
7		on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payment				37
_		nes 5 and 6? If "Yes," describe in Part III		7		X
8		reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the				v
~		ption described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III		8		X
9		id the organization also follow the rebuttable presumption procedure described in		-		
		n 53.4958-6(c)?				
LHA	For Paperwork R	eduction Act Notice, see the Instructions for Form 990.	Scheo	dule J (Forr	n 990)) 2018

04-3237106

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

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns	(F) Compensation in column (B)
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	benefits	(B)(i)-(D)	reported as deferred on prior Form 990
(1) JULIA BRODY	(i)	171,902.	0.	0.	9,673.	10,607.	192,182.	0.
EXECUTIVE DIRECTOR	(ii)	0.	0.	0.		0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
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	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

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Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Schedule J (Form 990) 2018

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Open to Public

. Inspection

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Department of the Treasury Internal Revenue Service

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

►

Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization

Name of the organization					Employer identification number
	SILENT	SPRING	INSTITUTE,	INC.	04-3237106
Part I Types of F	Property				

		(a)	(b)	(c)	(d)			
		Check if	Number of	Noncash contribution	Method of de		0	
		applicable	contributions or items contributed	amounts reported on Form 990, Part VIII, line 1g	noncash contribu	ition a	mount	S
1	Art - Works of art							
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities - Publicly traded	Х	1	197,767.	FAIR MARKET	VA	LUE	
10	Securities - Closely held stock							
11	Securities - Partnership, LLC, or							
	trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation contribution -							
	Historic structures							
14	Qualified conservation contribution - Other							
15	Real estate - Residential							
16	Real estate - Commercial							
17	Real estate - Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other 🕨 ()							
26	Other ()							
27	Other ► ()							
28	Other 🕨 ()							
29	Number of Forms 8283 received by the organiz							
	for which the organization completed Form 828	33, Part IV, I	Donee Acknowled	gement 29				
							Yes	No
30a	During the year, did the organization receive by				-			
	must hold for at least three years from the date							
	exempt purposes for the entire holding period?	?				30a		X
b	If "Yes," describe the arrangement in Part II.							37
31	Does the organization have a gift acceptance p					31		X
32a	Does the organization hire or use third parties of	or related or	ganizations to soli	cit, process, or sell noncash				37
	contributions?					32a		X
	If "Yes," describe in Part II.							
33	If the organization didn't report an amount in c	olumn (c) fo	r a type of propert	y for which column (a) is che	ecked,			
	describe in Part II.							

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule M (Form 990) 2018

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2018.05000 SILENT SPRING INSTITUTE, IN SILENTS1 10511119 807818 SILENTSPRING

04-3237106 Page **2**

Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete Part II this part for any additional information.

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11119 807818 SILENTSPRING	G 2018.05000 SILENT SPRING INSTITUTE, IN SILENTS1

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Name of the organization Supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or 990-EZ. Go to www.irs.gov/Form990 for the latest information.

INC.



04-3237106

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

SILENT SPRING INSTITUTE,

HEALTH.

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

IMPORTANT "FIRSTS":

-FIRST TO DETECT HORMONE-DISRUPTING CHEMICALS, INCLUDING BPA, IN

GROUNDWATER (1998).

-FIRST TO MEASURE HOUSEHOLD EXPOSURE TO 30 EDCS, AND FIRST TO IDENTIFY

HORMONE-DISRUPTING FLAME RETARDANTS AS A HEALTH RISK IN U.S. HOMES

(2003).

-FIRST TO QUANTIFY THE PRESENCE OF 55 EDCS IN 213 CONSUMER PRODUCTS

(2012).

-FIRST TO COMPILE A COMPREHENSIVE DATABASE OF BREAST CARCINOGENS (2007)

AND THE FIRST TO DEMONSTRATE THAT FOOD PACKAGING IS A MAJOR SOURCE OF

EXPOSURE TO HORMONE-DISRUPTING BPA AND PHTHALATES (2011).

-FIRST TO MEASURE TOXIC PFAS CHEMICALS IN DRINKING WATER ON CAPE

COD-UNREGULATED CONTAMINANTS FOUND IN 75% OF PUBLIC WATER DRINKING

SUPPLIES (2010).

-FIRST TO DEMONSTRATE LINK BETWEEN CALIFORNIA FURNITURE FLAMMABILITY

STANDARDS AND INCREASED LEVELS OF FLAME RETARDANTS IN PEOPLE'S BLOOD

AND URINE, AS WELL AS THEIR HOUSEHOLD DUST (2008); FIRST TO

SUBSEQUENTLY DOCUMENT LEVELS OF NEW FLAME RETARDANTS IN CALIFORNIA

HOMES FOLLOWING THE BAN OF PBDES (2012); AND FIRST TO FIND STUDENTS ON

COLLEGE CAMPUSES ARE EXPOSED TO HIGH LEVELS OF TOXIC FLAME RETARDANTS

IN DORMITORY DUST, INCLUDING SOME OF THE HIGHEST LEVELS EVER REPORTED

LHAFor Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.Schedule O (Form 990 or 990-EZ) (2018)83221110-10-18

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Schedule O (Form 990 or 990-EZ) (2018)	Page 2		
Name of the organization SILENT SPRING INSTITUTE, INC.	Employer identification number 04-3237106		
(2017).			
-FIRST TO CREATE A PRIORITY LIST OF 17 BREAST CARCINOGENS	AND METHODS		
FOR MEASURING THEM IN PEOPLE AS A TOOL FOR REDUCING EXPOS	URES (2014).		
-FIRST TO DEMONSTRATE THAT HIGHLY FLUORINATED CHEMICALS (PFASS) ARE		
COMMONLY FOUND IN U.S. FAST FOOD PACKAGING (2017).			
-FIRST PROTOTYPE GENE PANEL DEVELOPED FOR RAPIDLY SCREENI	NG CHEMICALS		
FOR BREAST CANCER RISK (2018).			
-FIRST TO MEASURE CONCENTRATIONS OF EDCS IN A VARIETY OF HAIR PRODUCTS			
MARKETED AT BLACK WOMEN (2018).			
-FIRST STUDY TO OBSERVE AN ASSOCIATION BETWEEN DIFFERENT	SOURCES OF		
FOOD AND PFAS EXPOSURES IN THE U.S. POPULATION (2019).			
ALSO OF NOTE, IN 2016 WE LAUNCHED A FREE MOBILE APP CALLE	D DETOX ME		
THAT OFFERS CONSUMERS SCIENCE-BASED TIPS ON HOW TO AVOID	HARMFUL		
CHEMICALS IN CONSUMER PRODUCTS AND LEAD A HEALTHIER LIFE. TO DATE, THE			
APP HAS MORE THAN 150,000 USERS. LATER THAT YEAR, WE LAUNCHED DETOX ME			
ACTION KIT, THE FIRST CROWDFUNDED BIOMONITORING STUDY TO	ASSESS THE		
U.S. POPULATION'S EXPOSURE TO EDCS IN EVERYDAY CONSUMER ITEMS AND TO			
ENGAGE CONSUMERS IN REDUCING THEIR EXPOSURES.			
WE ALSO PUBLISHED A CRITICAL REVIEW OF 158 EPIDEMIOLOGICA	L STUDIES ON		
ENVIRONMENTAL CHEMICALS AND BREAST CANCER FROM THE PAST 10 YEARS,			
MAKING IT THE MOST THOROUGH ASSESSMENT TO DATE OF EVIDENC	E FROM HUMAN		
STUDIES (2016). THESE SCIENTIFIC ADVANCES COMBINED HAVE EMPOWERED			

CONSUMERS TO MAKE BETTER CHOICES AND HAVE HELPED ADVANCE POLICIES THAT

PROTECT PUBLIC HUMAN HEALTH BY ENCOURAGING THE TRANSITION TO SAFER

CHEMICALS.

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Schedule O	(Form 990	or 990-EZ)	(2018)	1
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Name of the organization

SILENT SPRING INSTITUTE, INC.

CURRENT RESEARCH PROJECTS INCLUDE:

-CHEMICALS AND BREAST CANCER: BUILDING ON NATIONAL INITIATIVES FOR

CHEMICAL SAFETY SCREENING, DEVELOP INNOVATIVE METHODS (HIGH THROUGHPUT

SCREENING) TO RAPIDLY SCREEN CHEMICALS FOR EFFECTS ON BREAST

DEVELOPMENT AND BREAST CANCER (BCSCREEN).

-WOMEN FIREFIGHTERS BIOMONITORING COLLABORATIVE: INVESTIGATING

ON-THE-JOB EXPOSURES TO BREAST CARCINOGENS IN FEMALE FIREFIGHTERS

THROUGH A STUDY OF THE HUMAN EXPOSOME.

-PERSONAL EXPOSURE RIGHT-TO-KNOW: DEVELOPING AND EVALUATING ETHICAL AND

EFFECTIVE METHODS FOR REPORTING RESULTS TO PARTICIPANTS IN

BIOMONITORING AND ENVIRONMENTAL EXPOSURE STUDIES.

-PFAS CONTAMINANTS IN DRINKING WATER: UNDERSTANDING HOW PEOPLE ARE

EXPOSED TO PFASS THROUGH DRINKING WATER AND HOW THESE CHEMICALS AFFECT

HUMAN HEALTH.

-GREEN HOUSING STUDY: MEASURING THE IMPACT OF GREEN RENOVATIONS ON

INDOOR AIR POLLUTANTS.

-OPEN DATA PRACTICES FOR ENVIRONMENTAL HEALTH STUDIES: EVALUATING

ONLINE SHARING OF DATA, MEASURING ETHICAL CONCERNS ABOUT POSSIBLE

RE-IDENTIFICATION OF STUDY PARTICIPANTS.

-HEALTHY GREEN CAMPUS PROJECTS: PARTNERING WITH COLLEGES TO HELP THEM

INCORPORATE HEALTH INTO THEIR SUSTAINABILITY PLANS AND PROVIDE THEM

WITH TOOLS FOR REDUCING EXPOSURES TO TOXIC CHEMICALS ON CAMPUSES.

-EARLY LIFE EXPOSURES TO ENVIRONMENTAL CHEMICALS: INVESTIGATING WHETHER

EXPOSURE TO HORMONE DISRUPTING CHEMICALS DURING ADOLESCENCES INCREASES

SUSCEPTIBILITY TO BREAST CANCER IN ADULTHOOD.

-DETOX ME ACTION KIT: ASSESSING THE U.S. POPULATION'S EXPOSURE TO EDCS

IN EVERYDAY CONSUMER ITEMS THROUGH A BIOMONITORING PROJECT IN WHICH 832212 10-10-18
Schedule O (Form 990 or 990-EZ) (2018) 41

Schedule O (Form 990 or 990-EZ) (2018)	Page 2			
Name of the organization SILENT SPRING INSTITUTE, INC.	Employer identification number 04-3237106			
CONSUMERS LEARN WHAT CHEMICALS ARE IN THEIR BODIES AND HOW TO REDUCE				
THEIR EXPOSURES.				
-CONSUMER PRODUCTS AND EXPOSURE DISPARITIES: TESTING CONS	UMER PRODUCTS			
COMMONLY USED BY BLACK AND LATINA WOMEN FOR CHEMICALS THAT CONTRIBUTE				
TO BREAST CANCER, AND EXAMINING RACIAL AND ETHNIC DIFFERENCES IN				
PRODUCT USE TO BETTER UNDERSTAND DISPARITIES IN EXPOSURE.				
OUR OUTREACH AND COMMUNICATIONS PROGRAM LINKS OUR RESEARCH WITH PUBLIC				
HEALTH POLICY AND INFORMS INDIVIDUALS AND COMMUNITIES. OUTREACH				
INCLUDES A POPULAR WEBSITE, LAY SUMMARIES OF OUR SCIENTIFIC STUDIES, AN				
E-NEWSLETTER, CONSUMER TIP SHEETS, AND A GROWING PRESENCE	ON SOCIAL			
MEDIA. EVERY YEAR, OUR RESEARCH TEAM PARTICIPATES IN DOZENS OF ADVISORY				
PANELS, CONFERENCES, SEMINARS AND COMMUNITY EVENTS ACROSS THE COUNTRY.				
OUR RESEARCH HAS RECEIVED WIDESPREAD COVERAGE BY NATIONAL NEWS MEDIA				
OUTLETS INCLUDING THE NEW YORK TIMES, BLOOMBERG, CNN, NEWSWEEK,				
WASHINGTON POST, NPR, CBS NEWS, BBC WORLD NEWS, HUFFINGTO	N POST,			
SCIENTIFIC AMERICAN, CONSUMER REPORTS, AND DOZENS MORE.				
FORM 990, PART VI, SECTION B, LINE 11B:				

A COPY OF FORM 990 IS DISTRIBUTED TO ALL BOARD MEMBERS FOR REVIEW AND

APPROVAL BEFORE FORM 990 IS FILED.

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

SILENT SPRING INSTITUTE ANNUALLY DISTRIBUTES A CONFLICT OF INTEREST

QUESTIONAIRE TO BE COMPLETED AND RETURNED BY ALL KEY EMPLOYEES AND BOARD OF

DIRECTOR MEMBERS.

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

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Schedule O (Form 990 or 990-EZ) (2018)

Schedule O (Form 990 or 990-EZ) (2018) Name of the organization	Page 2 Employer identification number
SILENT SPRING INSTITUTE, INC.	04-3237106
THE EXECUTIVE DIRECTOR'S SALARY IS REVIEWED AND APPROVED	ANNUALLY BY THE
BOARD OF DIRECTORS AT AN EXECUTIVE SESSION MEETING. SALA	RAIES OF EXECITIVE
DIRECTORS AT COMPARABLE AGENCIES ARE USED TO DETERMINE T	HE EXECUTIVE
DIRECTOR'S SALARY.	
FORM 990, PART VI, SECTION C, LINE 19:	
GOVERNING DOCUMENTS, POLICIES AND STATEMENTS ARE AVAILAB	LE TO THE PUBLIC
UPON REQUEST.	
FORM 990, PART IX, LINE 11G, OTHER FEES:	
SUBCONTRACTED SERVICES:	
PROGRAM SERVICE EXPENSES	226,121.
MANAGEMENT AND GENERAL EXPENSES	596.
FUNDRAISING EXPENSES	1,361.
TOTAL EXPENSES	228,078.
CONTRACTED SERVICES:	
PROGRAM SERVICE EXPENSES	19,330.
MANAGEMENT AND GENERAL EXPENSES	321.
FUNDRAISING EXPENSES	6,714.
TOTAL EXPENSES	26,365.
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	254,443.
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43 511119 807818 SILENTSPRING 2018.05000 SILENT SPRING INST	TITUTE, IN SILENTS1