# **PUBLIC DISCLOSURE COPY**

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# ARMANINO LLP

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#### \*\* PUBLIC DISCLOSURE COPY \*\*

Form **990** 

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

2018

Open to Public Inspection

Department of the Treasury

Do not enter social security numbers on this form as it may be made public.
 Go to www.irs.gov/Form990 for instructions and the latest information.

A For the 2018 calendar year, or tax year beginning JUL 1 2018 and ending JUN 30, 2019 C Name of organization D Employer identification number Check if applicable: Address change CLIMATE ACTION RESERVE Name change 68 - 0477330Doing business as Initial return Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Final return/ termin-ated 818 WEST 7TH STREET 710 (213) 891-1444 3,786,758. City or town, state or province, country, and ZIP or foreign postal code **G** Gross receipts \$ Amended return LOS ANGELES, CA 90017 H(a) Is this a group return Applica-tion pending F Name and address of principal officer: CRAIG EBERT for subordinates? ..... Yes X No SAME AS C ABOVE **H(b)** Are all subordinates included? Yes Tax-exempt status: X 501(c)(3) 527 501(c) ( ) **◄** (insert no.) 4947(a)(1) or If "No," attach a list. (see instructions) J Website: ► WWW.CLIMATEACTIONRESERVE.ORG **H(c)** Group exemption number ▶ K Form of organization: X Corporation Trust Association Other -Year of formation: 2001 M State of legal domicile: CA Part I Summary Briefly describe the organization's mission or most significant activities: TO DEVELOP PROMOTE & SUPPORT Governance INNOVATIVE CREDIBLE MARKET-BASED CLIMATE CHANGE SOLUTIONS (SCH O) if the organization discontinued its operations or disposed of more than 25% of its net assets. 13 Number of voting members of the governing body (Part VI, line 1a) 13 Number of independent voting members of the governing body (Part VI, line 1b) 4 Activities & 24 Total number of individuals employed in calendar year 2018 (Part V, line 2a) 5 Total number of volunteers (estimate if necessary) 13 6 0. 7 a Total unrelated business revenue from Part VIII, column (C), line 12 **b** Net unrelated business taxable income from Form 990-T, line 38 0. 7h **Prior Year Current Year** 546,001. 212,786. Contributions and grants (Part VIII, line 1h) 8 Revenue 3,546,590. 3,563,849. Program service revenue (Part VIII, line 2g) 1,712 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 7,044. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 4.879 3,079. 11 4,099,182 3,786,758. 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 0. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0. 14 Benefits paid to or for members (Part IX, column (A), line 4) Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 2,392,499. 2,403,471. Expenses 16a Professional fundraising fees (Part IX, column (A), line 11e) 0. **b** Total fundraising expenses (Part IX, column (D), line 25) 2,119,589. 1,940,888. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 4,512,088, 4,344,359. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) -412,906. -557,601. Revenue less expenses. Subtract line 18 from line 12 **Beginning of Current Year End of Year** 5 4,224,995 3,870,030. Total assets (Part X, line 16) 1,898,477 2,101,113. 21 Total liabilities (Part X, line 26) 三年 2,326,518. 1,768,917. Net assets or fund balances. Subtract line 21 from line 20 Part II | Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Signature of officer Date Sign CRAIG EBERT, PRESIDENT Here Type or print name and title Date PTIN Print/Type preparer's name Preparer's signature KATY BROWN KATY BROWN P00650274 Paid self-employed ARMANINO LLP 94-6214841 Preparer Firm's name Firm's EIN ▶ Firm's address 11766 WILSHIRE BLVD NINTH FL Use Only Phone no. (310) 478-4148 LOS ANGELES, CA 90025

No

X Yes

May the IRS discuss this return with the preparer shown above? (see instructions)

Pa	Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		X
1	Briefly describe the organization's mission:		
	TO DEVELOP, PROMOTE AND SUPPORT INNOVATIVE, CREDIBLE MARKET-BASED		
	CLIMATE CHANGE SOLUTIONS THAT BENEFIT ECONOMIES, ECOSYSTEMS AND		
	SOCIETY. THE CLIMATE ACTION RESERVE WAS APPROVED BY THE CALIFORNIA AIR		
	RESOURCES BOARD (ARB) IN 2012 TO SERVE AS AN OFFSET (SEE SCH O)		
2	Did the organization undertake any significant program services during the year which were not liste		
	prior Form 990 or 990-EZ?		Yes X No
	If "Yes," describe these new services on Schedule O.		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program	n services?	Yes X No
	If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three largest program s		· ·
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocat	ions to others, the tota	al expenses, and
	revenue, if any, for each program service reported.		
4a		) (Revenue \$	2,787,794.
	THE CLIMATE ACTION RESERVE IS AN INTERNATIONAL CARBON OFFSETS PROGRAM		
	FOCUSED ON ENSURING ENVIRONMENTAL INTEGRITY OF GHG EMISSIONS REDUCTIONS		
	PROJECTS TO CREATE AND SUPPORT FINANCIAL AND ENVIRONMENTAL VALUE IN THE		
	NORTH AMERICAN VOLUNTARY CARBON MARKET, THE CALIFORNIA CAP-AND-TRADE		
	PROGRAM, AND INTERNATIONAL CAP-AND-TRADE PROGRAMS. IT DOES THIS BY		
	ESTABLISHING HIGH-QUALITY STANDARDS FOR QUANTIFYING AND VERIFYING GHG		
	EMISSIONS REDUCTIONS PROJECTS, OVERSEEING INDEPENDENT THIRD PARTY		
	VERIFICATION BODIES, AND ISSUING CARBON CREDITS GENERATED FROM SUCH		
	PROJECTS AND TRACKING THE CREDITS OVER TIME IN A TRANSPARENT,		
	PUBLICLY-ACCESSIBLE SYSTEM. THESE STANDARDS NOT ONLY ENSURE THE		
	ENVIRONMENTAL INTEGRITY OF USING OFFSETS, BUT THEY ALSO BRING		
	CREDIBILITY AND EFFICIENCIES TO THE CARBON MARKET BY (SEE SCH O)		
4b	(Code:) (Expenses \$ 552,395. including grants of \$	) (Revenue \$	748,441.
	THE CLIMATE ACTION RESERVE IS ALSO ACTIVE IN THE DEVELOPMENT OF CLIMATE		
	CHANGE POLICY. AS A NON-PARTISAN ORGANIZATION, THE CLIMATE ACTION		
	RESERVE WORKS TO BRING TOGETHER THOUGHT LEADERS ON CLIMATE CHANGE,		
	INCLUDING POLICYMAKERS, BUSINESSES, ACADEMICS AND A VARIETY OF NGOS TO		
	ADVOCATE FOR GLOBALLY STANDARDIZED GREENHOUSE GAS REPORTING AND		
	MEASUREMENT STANDARDS. IN 2019 THE CLIMATE ACTION RESERVE SUCCESSFULLY		
	HOSTED THE 17TH ANNUAL NAVIGATING THE AMERICAN CARBON WORLD CONFERENCE		
	IN LOS ANGELES. OVER 500 CLIMATE PROFESSIONALS GATHERED FOR		
	INFORMATION, DISCUSSION AND NETWORKING TO ADVANCE MARKET-BASED		
	SOLUTIONS TO CLIMATE CHANGE. THE CLIMATE ACTION RESERVE ALSO HOSTED		
	SEVERAL PANEL DISCUSSIONS AT COP24 IN KATOWICE, POLAND THAT ALLOWED THE		
	INTERNATIONAL CLIMATE COMMUNITY TO GAIN A DEEPER (SEE SCH O)		
4c		) (Revenue \$	27,614.
	IN FY2019 THE RESERVE CONTINUED TO ENGAGE IN INTERNATIONAL INITIATIVES,		
	INCLUDING THE DEVELOPMENT OF INTERNATIONAL EMISSIONS REDUCTION		
	STANDARDS, COLLABORATING WITH PARTNERS AND SERVING AS AN EXPERT		
	CONSULTANT FOR GOVERNMENTS AND OTHERS. IN FY2019 THE RESERVE CONTINUED		
	TO ACCEPT FORESTRY PROJECTS IN RURAL MEXICO UNDER ITS MEXICO FOREST		
	PROJECT PROTOCOL, INCLUDING THE DEVELOPMENT OF ITS VERIFICATION PROGRAM		
	AND TRAINING VERIFIERS. THE RESERVE ALSO BEGAN EXPANSION INTO CANADA		
	INITIATING THE DEVELOPMENT OF A GRASSLAND PROJECT PROTOCOL.		
4d	Other program services (Describe in Schedule O.)		
	(Expenses \$ including grants of \$ ) (Revenue \$		)
4e	Total program service expenses ▶ 3,290,182.		- 000
			Form <b>990</b> (2018)

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### 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)?			
	If "Yes," complete Schedule A	1	Х	
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			
	public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		х
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		х
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? <i>If</i> "Yes," <i>complete</i>			
	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		х
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		х
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.			
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		х
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	Х	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		Х
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		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Х	
b	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	Х	
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			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
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		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		Х
<b>20</b> a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I, Parts I and II	21		Х

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# Form 990 (2018) CLIMATE ACTION RESERVE Part IV Checklist of Required Schedules (continued)

	· (continued)		V	Na	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		Yes	No	
22	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		х	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current				
20	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		х	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b			
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease				
	any tax-exempt bonds?	24c			
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d			
	Section 501(c)(3), 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		Х	
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and				
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete				
	Schedule L, Part I	25b		Х	
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or				
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"				
	complete Schedule L, Part II	26		Х	
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial				
	contributor or 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		Х	
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV				
	instructions for applicable filing thresholds, conditions, and exceptions):				
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Х	
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Х	
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,				
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		Х	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation				
	contributions? If "Yes," complete Schedule M	30		Х	
31	Did the organization liquidate, terminate, or dissolve and cease operations?				
	If "Yes," complete Schedule N, Part I	31		X	
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			l	
	Schedule N, Part II	32		Х	
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			v	
25	Part V, line 1	34		X	
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a			
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	051			
26	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?	200		Х	
27	If "Yes," complete Schedule R, Part V, line 2	36			
37					
20	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х	
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?  Note. All Form 990 filers are required to complete Schedule O	38	х		
Pa		<sub>1</sub> 30			
	Check if Schedule O contains a response or note to any line in this Part V				
			Yes	No	
10	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		169	140	
b	Enter the number reported in Box 3 of Form 1030. Enter 40- in lot applicable  Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable  1b	-			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming				
J	(gambling) winnings to prize winners?	10	х		

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	990 (2018) CLIMATE ACTION RESERVE 68-04/73	5 0	Р	age <b>ɔ</b>
Par	Tt V Statements Regarding Other IRS Filings and Tax Compliance (continued)			
			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 24			
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 e-file (see instructions)			
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х
	If "Yes," has it filed a Form 990-T for this year? If "No" 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			۱.,
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Х
b	If "Yes," enter the name of the foreign country:			
_	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	_		v
	, , , , , , , , , , , , , , , , , , , ,	<u>5a</u>		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		-
ба	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			x
	any contributions that were not tax deductible as charitable contributions?	<u>6a</u>		
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	۱		
_	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			х
a	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		_
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			x
اہ	to file Form 8282?	7c		
	If "Yes," indicate the number of Forms 8282 filed during the year	70		х
e f	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7e 7f		x
g	If the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		<del></del>
9 h	If the organization received a contribution of qualified intellectual property, and the organization file of office of the organization file a Form 1098-C?	79 7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
Ŭ	sponsoring organization have excess business holdings at any time during the year?	8		
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:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  10b			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders 11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)			
12a	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			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	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			
С	Enter the amount of reserves on hand			
14a	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		х
	If "Yes," see instructions and file Form 4720, Schedule N.			

Form **990** (2018)

Is the organization an educational institution subject to the section 4968 excise tax on net investment income?

If "Yes," complete Form 4720, Schedule O.

Form 990 (2018) CLIMATE ACTION RESERVE 68-0477330 Page **6** 

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.

	to line ed, es, or resistant, decembe the smearhetanees, proceeded, or changes in concedic C. coe metalactions.			
0	Check if Schedule O contains a response or note to any line in this Part VI			Х
Sec	tion A. Governing Body and Management			ı
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 13			
	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 O.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 1			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		Х
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6		Х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a		Х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes." provide the names and addresses in Schedule O	9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		Х
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	X	
	Other officers or key employees of the organization	15b	Х	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶CA			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c)(3)s	only) a	availat	ole
	for public inspection. Indicate how you made these available. Check all that apply.	• • •		
	X Own website Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	financ	ial	
=	statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	GILLIAN CALOF - (213) 542-0281			
	818 WEST 7TH STREET, NO. 710, LOS ANGELES, CA 90017			

Form 990 (2018) CLIMATE ACTION RESERVE 68-0477330 Page **7** 

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

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.

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

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

(A)	(B)	Ju			C)			(D)	(E)	(F)
Name and Title	Average hours per	box	not c , unle: cer ar	heck ss pei	more rson i	than o	n an	Reportable compensation	Reportable compensation	Estimated amount of
	week (list any hours for related organizations below line)	stee or director	In stit utional trustee	Officer	Key employee	Highest compensated employee		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) LINDA ADAMS	1.00									
BOARD CHAIR		Х		Х				0.	0.	0.
(2) GARY GERO	1.00	1								
BOARD VICE CHAIR		Х		Х				0.	0.	0.
(3) PETER M. MILLER	1.00									
BOARD SECRETARY		Х		Х				0.	0.	0.
(4) JEFFREY KIGHTLINGER	1.00									
BOARD TREASURER		Х		Х				0.	0.	0.
(5) JAN SCHORI	1.00									
AUDIT COMMITTEE CHAIR		Х						0.	0.	0.
(6) STEVE CORNELI	1.00									
BOARD MEMBER		Х						0.	0.	0.
(7) TEVEIA BARNES	1.00									
BOARD MEMBER		Х						0.	0.	0.
(8) PETER LIU	1.00									
BOARD MEMBER		Х						0.	0.	0.
(9) BETSY MOLER	1.00									
BOARD MEMBER		Х						0.	0.	0.
(10) HEATHER O'NEILL	1.00									
BOARD MEMBER		Х						0.	0.	0.
(11) TIM PROFETA	1.00									
BOARD MEMBER		Х						0.	0.	0.
(12) DR. STEPHAN SCHWARTZMAN	1.00									
BOARD MEMBER		Х						0.	0.	0.
(13) KATIE SULLIVAN	1.00									
BOARD MEMBER		Х						0.	0.	0.
(14) CRAIG EBERT	40.00									
PRESIDENT				х				202,730.	0.	34,823.
(15) RAMON LEE	40.00									
CONTROLLER				Х	L	L		115,396.	0.	28,121.
(16) GILLIAN CALOF	40.00									
VP OF OPERATIONS				L	L	х		146,404.	0.	24,360.
(17) JOHN NICKERSON	40.00									
VP OF FORESTRY						Х		130,844.	0.	29,077.
										Form 990 (2019)

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Form 990 (2018) CLIMATE ACTION RESERVE 68-0477330 Page 8

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees, (continued)

Section A. Officers, Directors, Trus	tees, key ⊑m	DIOY	ees,	and	וח נ	gnes	ii C	ompensated Employee	<b>S</b> (continued)		
(A)	(B)			(0	C)			(D)	(E)		(F)
Name and title	Average	(-1-		Pos				Reportable	Reportable		Estimated
	hours per	box	, unles	ss per	rson i	than o	n an	compensation	compensation		amount of
	week	offic	cer an	id a di	irecto	or/trus	tee)	from	from related		other
	(list any	ector						the	organizations		compensation
	hours for	or dir				ted		organization	(W-2/1099-MISC	;)	from the
	related	ste c	ruste			eusa		(W-2/1099-MISC)			organization
	organizations	altru	onal t		loyee	S S					and related
	below line)	Individual trustee or director	Institutional trustee	Officer	key employee	Highest compensated employee	Former				organizations
/10) TENNITED METOG		<u> </u>	Ë	JO.	X.	ぎも	요			$\dashv$	
(18) JENNIFER WEISS	40.00	ł						102 515			03.050
VP OF COMMUNICATIONS	10.00	├				X		123,517.		0.	23,858.
(19) MAX DUBUISSON	40.00					l		106.650			4 000
DIRECTOR OF POLICY		├				X		106,652.		0.	4,083.
		<u> </u>				_				_	
		<u> </u>								_	
		<u> </u>									
		<u> </u>								_	
1b Sub-total							<b></b>	825,543.		0.	144,322.
c Total from continuation sheets to Part VI	I, Section A						<b></b>	0.		0.	0.
d Total (add lines 1b and 1c)								825,543.		0.	144,322.
2 Total number of individuals (including but n								eceived more than \$100,	000 of reportable		
compensation from the organization						•			·		6
											Yes No
3 Did the organization list any <b>former</b> officer,	director, or tru	uster	e. ke	v en	olan	vee.	or	highest compensated en	nplovee on		
line 1a? If "Yes," complete Schedule J for s	•		•	•	•	•			. ,		3 X
4 For any individual listed on line 1a, is the su										·	
and related organizations greater than \$150	•							•	•		4 X
5 Did any person listed on line 1a receive or a										"	
rendered to the organization? If "Yes." com	•				•			•			5 X
Section B. Independent Contractors	ipiete Scrieduli	<i>‡ U 1</i> 0	or st	ICII Ļ	Jers						<u> </u>
Complete this table for your five highest co	mnensated inc		nder	nt cc	ntr	acto	re th	nat received more than \$	100 000 of compe	neat	ion from
the organization. Report compensation for										ıısaı	OII IIOIII
(A)	ine calendar ye	zai e	iluli	ig w	iuii c	JI WI	<u> </u>	(B)	zai.		(C)
Name and business	address							Description of s	ervices	С	ompensation
INTERCONTINENTAL HOTELS GROUP							$\dashv$				
900 WILSHIRE BLVD, LOS ANGELES, CA 9	0.017							NACW 2019 EVENT			222,388.
- TOO WILDHIKE DEVD, EOS ANGELES, CA 9	0017						-	NACW 2015 EVEN1			222,300.
		—					$\dashv$				
							_				
							_				
2 Total number of independent contractors (in	ncluding but no	ot lir	nited	to t	thos	se lis	ted	above) who received mo	ore than		

Form **990** (2018)

\$100,000 of compensation from the organization

Form 990 (2018) CLIMATE ACT

		Check if Schedule O conta	ains a response	e or note to any line	e in this Part VIII			
					<b>(A)</b> Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
S S	1 8	Federated campaigns	1a					
ant		Membership dues						
2 8		Fundraising events						
ifts ir A		d Related organizations						
nis, Dist		Government grants (contributi		7,500.				
Sis		All other contributions, gifts, gran						
ber		similar amounts not included above		205,286.				
텵		Noncash contributions included in lines						
Contributions, Gifts, Grants and Other Similar Amounts		<b>Total.</b> Add lines 1a-1f			212,786.			
				Business Code				
ø	2 8	REGISTRY INCOME		900099	2,911,532.	2,911,532.		
, vic	k	CONF REGISTRATION		900099	281,441.	281,441.		
Ser	(	CONTRACT INCOME		900099	224,261.	224,261.		
Program Service Revenue	(	FEE INCOME		611600	126,000.	126,000.		
ng Be	•	WORKSHOP INCOME		900099	20,615.	20,615.		
Pr	f	All other program service reve	nue					
		Total. Add lines 2a-2f		I	3,563,849.			
	3	Investment income (including	dividends, inte	rest, and				
		other similar amounts)		▶	7,044.			7,044.
	4	Income from investment of tax	c-exempt bond	proceeds >				
	5	Royalties		<b>&gt;</b>				
			(i) Real	(ii) Personal				
	6 a	a Gross rents						
	k	Less: rental expenses						
	(	Rental income or (loss)						
	(	d Net rental income or (loss)		<b></b>				
	7 8	Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory						
	k	Less: cost or other basis						
		and sales expenses						
	(	Gain or (loss)						
		d Net gain or (loss)						
nue	8 8	<ul> <li>Gross income from fundraising including \$</li> </ul>	•					
Other Reven		contributions reported on line	1c). See					
<u>بر</u> ا		Part IV, line 18		a				
뀵	k	Less: direct expenses		b				
٥	(	Net income or (loss) from fund	Iraising events	<b>_</b>				
	9 a	a Gross income from gaming ac						
		Part IV, line 19		a				
		Less: direct expenses		b				
		Net income or (loss) from gam						
	10 a	a Gross sales of inventory, less						
		and allowances		a				
		Less: cost of goods sold		b				
}		Net income or (loss) from sales		<u></u>				
}	4.	Miscellaneous Revenue	<u>e</u>	Business Code	2 070			2 070
		MISCELLANEOUS REVENUE		900099	3,079.			3,079.
	k							-
	(					+		+
		d All other revenue			3,079.			
	12	Total. Add lines 11a-11d  Total revenue. See instructions			3,786,758.	3,563,849.	0.	10,123.
		. C.u. 10101140. Out mondulons		🖊 1	, , •	, , , , , , , , , , , , ,	- •	_ ,

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### Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

	Check if Schedule O contains a respons	e or note to any line in the (A)	his Part IX(B)	(C)	
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	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	378,082.	160,941.	211,041.	6,100
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	1,562,706.	1,123,969.	432,796.	5,941
8	Pension plan accruals and contributions (include			·	•
	section 401(k) and 403(b) employer contributions)	22,500.	15,867.	6,516.	117
9	Other employee benefits	295,137.	215,382.	78,519.	1,236
10	Payroll taxes	145,046.	97,375.	46,811.	860
11	Fees for services (non-employees):				
а	Management				
b					
С	I	33,532.		33,532.	
d					
е					
f	Investment management fees				
g					
	column (A) amount, list line 11g expenses on Sch O.)	195,794.	169,555.	26,239.	
12	Advertising and promotion	3,391.	3,391.		
13	Office expenses	69,260.	53,375.	15,885.	
14	Information technology	76,949.	61,404.	15,545.	
15	Royalties				
16	Occupancy	221,347.	148,599.	71,436.	1,312
17	Travel	200,837.	194,064.	6,773.	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	256,887.	254,769.	2,118.	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	13,658.		13,658.	
23	Insurance	78,913.	52,978.	25,467.	468
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 O.)				
а	DEGLEMENT DEE	624,563.	624,563.		
b	EQUIPMENT RENTAL	71,027.	71,027.		
С	OTHER EXPENSES	34,428.	6,197.	28,231.	
d	TAXES	17,513.	9,680.	7,833.	
е	All other expenses	42,789.	27,046.	15,688.	55
25	Total functional expenses. Add lines 1 through 24e	4,344,359.	3,290,182.	1,038,088.	16,089
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)				

Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year 100. 1 88. Cash - non-interest-bearing 1,290,356. 1,404,239. 2 Savings and temporary cash investments Pledges and grants receivable, net 55,071. 3 3 546,171. 1,093,293. Accounts receivable, net Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete 5 Part II of Schedule L Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L 6 7 7 Notes and loans receivable, net Inventories for sale or use 8 126,298. 52,831. 9 Prepaid expenses and deferred charges **10a** Land, buildings, and equipment: cost or other \_\_\_\_\_10a basis. Complete Part VI of Schedule D 99,484. b Less: accumulated depreciation \_\_\_\_\_\_ 10b 41,855. 10c 28,197. Investments - publicly traded securities 11 11 Investments - other securities. See Part IV, line 11 12 12 Investments - program-related. See Part IV, line 11 13 13 14 Intangible assets 14 1,618,022. 1,838,504. 15 Other assets. See Part IV, line 11 15 Total assets. Add lines 1 through 15 (must equal line 34) 4,224,995. 3,870,030. 16 16 227,760. 215,453. Accounts payable and accrued expenses 17 17 18 18 Grants payable 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 Escrow or custodial account liability. Complete Part IV of Schedule D 21 Loans and other payables to current and former officers, directors, trustees, 22 Liabilities key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 Secured mortgages and notes payable to unrelated third parties 23 23 Unsecured notes and loans payable to unrelated third parties 24 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 1,670,717. 1,885,660. Schedule D 25 1,898,477. 2,101,113. 26 **Total liabilities.** Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here 

X
and complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 2,137,055. 1,768,917. 27 27 Unrestricted net assets 189,463. Temporarily restricted net assets 28 28 Permanently restricted net assets 29 29 Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. Capital stock or trust principal, or current funds 30 30 Paid-in or capital surplus, or land, building, or equipment fund 31 Retained earnings, endowment, accumulated income, or other funds 32 32 1,768,917. Total net assets or fund balances 2,326,518. 33 33 4,224,995. 3,870,030. Total liabilities and net assets/fund balances

Act and OMB Circular A-133?

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

Form 990 (2018)

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#### **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 character 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 **Employer identification number** CLIMATE ACTION RESERVE 68-0477330 Reason for Public Charity Status (All organizations must complete this part.) See instructions Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 X An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other n your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) above (see instructions))

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 832021 10-11-18

Schedule A (Form 990 or 990-EZ) 2018

## 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	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
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						
4	Total. Add lines 1 through 3						
	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						
6	Public support. Subtract line 5 from line 4.						
	etion B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
	Amounts from line 4	(4) = 3 · ·	(3) 20 10	(0) = 0 : 0	(4) = 3 · ·	(0) = 0.10	(.,
	Gross income from interest.						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources						
9	Net income from unrelated business						
5	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.)						
11	Total support. Add lines 7 through 10						
	Gross receipts from related activities,	etc (see instruction	nne)			12	
	First five years. If the Form 990 is for			d fourth or fifth to			
10	organization, check this box and stop	· ·		•			ightharpoonup
Sec	ction C. Computation of Publi	c Support Per	centage				
	Public support percentage for 2018 (I			column (f))		14	%
	Public support percentage from 2017		•	* * * *		15	%
	<b>33 1/3% support test - 2018.</b> If the o						
	stop here. The organization qualifies						\
b	33 1/3% support test - 2017. If the		-				
-	and <b>stop here.</b> The organization qual						
17a	10% -facts-and-circumstances test						
. <i>r</i> a	and if the organization meets the "fac						
	meets the "facts-and-circumstances"					-	
h	10% -facts-and-circumstances test						
IJ	more, and if the organization meets the	-					
	organization meets the "facts-and-circ						<b>▶</b> □
12	<b>Private foundation.</b> If the organization		-	•			
	ato roundation. It the organization	ala not oneon a l	20x 011 III 0 10, 10	ه, ۱۰۵, ۱۲۵, ۱۲۱		dule A (Form 990	

#### 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.)

Se	ction A. Public Support						
Cale	endar year (or fiscal year beginning in)	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not						
	include any "unusual grants.")	385,024.	619,894.	485,548.	546,001.	212,786.	2,249,253.
2	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	2,757,258.	2,968,439.	3,682,362.	3,546,590.	3,563,849.	16,518,498.
2	Gross receipts from activities that	2,707,200.	2,500,205.	0,002,002.	0,020,000	0,000,012.	20,020,200
3	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						
6	Total. Add lines 1 through 5	3,142,282.	3,588,333.	4,167,910.	4,092,591.	3,776,635.	18,767,751.
78	Amounts included on lines 1, 2, and 3 received from disqualified persons						0.
k	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	1,027,179.	1,033,664.	1,588,046.	1,386,939.		
	Add lines 7a and 7b	1,027,179.	1,033,664.	1,588,046.	1,386,939.	1,407,563.	6,443,391.
8	Public support. (Subtract line 7c from line 6.)						12,324,360.
Se	ction B. Total Support						
Cale	endar year (or fiscal year beginning in)	(a) 2014	<b>(b)</b> 2015	(c) 2016	<b>(d)</b> 2017	(e) 2018	(f) Total
	Amounts from line 6	3,142,282.	3,588,333.	4,167,910.	4,092,591.	3,776,635.	18,767,751.
10a	a Gross income from interest, dividends, payments received on securities loans, rents, royalties,						
	and income from similar sources	264.	421.	842.	1,712.	7,044.	10,283.
k	Unrelated business taxable income						
	(less section 511 taxes) from businesses acquired after June 30, 1975						
	Add lines 10a and 10b  Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	264.	421.	842.	1,712.	7,044.	10,283.
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	45,418.	153.	1,903.	4,879.	3,079.	55,432.
13	Total support. (Add lines 9, 10c, 11, and 12.)	3,187,964.	3,588,907.	4,170,655.	4,099,182.	3,786,758.	18,833,466.
14	First five years. If the Form 990 is for check this box and stop here	· ·			•	. , . ,	·
Sec	ction C. Computation of Publi	c Support Per		• • • • • • • • • • • • • • • • • • • •	•••••		
	Public support percentage for 2018 (li			olumn (f))		15	65.44 %
	Public support percentage from 2017			Oldifiif (1))		16	67.18 %
	ction D. Computation of Inves			• • • • • • • • • • • • • • • • • • • •		10	70
	Investment income percentage for 20			ne 13 column (fl)		17	.05 %
18						18	.02 %
	a 33 1/3% support tests - 2018. If the	•		n line 14 and line			
130	more than 33 1/3%, check this box ar						► X
k	33 1/3% support tests - 2017. If the	organization did no	ot check a box on	line 14 or line 19a,	and line 16 is mor	re than 33 1/3%, a	·············· -
20	line 18 is not more than 33 1/3%, cher <b>Private foundation.</b> If the organizatio						
20	Frivate iounidation, ii the organizatio	n ala not check a t	лол он IIIIe 14, 19a	i, or rab, crieck thi	o nux anu see insi		

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Schedule A (Form 990 or 990-EZ) 2018

Page 4

### 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")? |f "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 disqualified 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.)

	Yes	No
_		
1		
2		
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За		
3b		
0-		
3c		
4a		
14		
4b		
4-		
4c		
5a		
5b		
5c		
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7		
8		
9a		
-		
9b		
9c		
30		
10a		
10b		

Pai	rt IV   Supporting 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		
b	A family member of a person described in (a) above?	11b		
С	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
	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		
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 year (see instructions	)-		
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instance)	ructions)		L
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	0-		
	that these activities constituted substantially all of its activities.	2a		
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	01-		
_	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	25		
<b>L</b>	trustees of each of the supported organizations? <i>Provide details in Part VI</i> .	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 <b>Part VI</b> the role played by the organization in this regard.	3b		
	or to supported organizations: If Tes. Describe III Fait VI (He role biaved by the organization in this regard	l OD	, ,	

Pa	Type III Non-Functionally Integrated 509(a)(3) Supporting	ng Organi	izations	r age o
1	Check here if the organization satisfied the Integral Part Test as a qualifyi	ng trust on N	Nov. 20, 1970 (explain in F	Part VI.) See instructions. A
	other Type III non-functionally integrated supporting organizations must c	omplete Sec	ctions 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):			
a	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 <b>Part VI</b> ):			
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		d Type III supporting orga	nization (see
	instructions).	. •		•

Schedule A (Form 990 or 990-EZ) 2018

Par	¹t V │ Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	nizations (continued)	
Secti	ion D - Distributions		,	Current Year
1	Amounts paid to supported organizations to accomplish ex			
2	Amounts paid to perform activity that directly furthers exem			
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpos	ses of supported organizations	S	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in <b>Part VI</b> ). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which	the organization is responsive	·	
	(provide details in <b>Part VI</b> ). See instructions.			
9	Distributable amount for 2018 from Section C, line 6			
	Line 8 amount divided by line 9 amount			
	and a mean and a symmetry	(i)	(ii)	(iii)
Secti	ion E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions Pre-2018	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			
С	From 2015			
d	From 2016			
е	From 2017			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2018 distributable amount			
i	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:			
a	Applied to underdistributions of prior years			
	Applied to 2018 distributable amount			
	Remainder. Subtract lines 4a and 4b from 4.			
	Remaining underdistributions for years prior to 2018, if			
	any. Subtract lines 3g and 4a from line 2. For result greater			
	than zero, explain in <b>Part VI.</b> 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 3			
•	and 4c.			
8	Breakdown of line 7:			
	Excess from 2014			
	Excess from 2015			
	Excess from 2016			
	Excess from 2017			
е	Excess from 2018			

Schedule A (Form 990 or 990-EZ) 2018

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 B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

**Schedule of Contributors** 

► Attach to Form 990, Form 990-EZ, or Form 990-PF.

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

OMB No. 1545-0047

Employer identification number

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

CL	68-0477330				
Organization type (check one):					
Filers of:	Section:				
Form 990 or 990-EZ	X 501(c)( <sup>3</sup> ) (enter number) organization				
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation				
	527 political organization				
Form 990-PF	501(c)(3) exempt private foundation				
	4947(a)(1) nonexempt charitable trust treated as a private foundation				
	501(c)(3) taxable private foundation				
	s covered by the <b>General Rule</b> or a <b>Special Rule.</b> (7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule	e. See instructions.			
General Rule					
	n filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling one contributor. Complete Parts I and II. See instructions for determining a contributor's				
Special Rules					
sections 509(a)(1) any one contributo	n described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support that 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount line 1. Complete Parts I and II.	or 16b, and that received from			
year, total contribu	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.				
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the <b>General Rule</b> applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year					
Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).					

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

Parti	Contributors (see instructions). Use duplicate copies of Part I if addition	onal space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$5,000	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$12,500.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$17,500.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$10,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$30,000.	Person X Payroll  Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6		\$12,500.	Person X Payroll Noncash (Complete Part II for

Part I	<b>Contributors</b> (see instructions). Use duplicate copies of Part I if a	dditional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8	Name, address, and Zir + +	\$ 12,500.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
<b>No.</b> 9	Name, address, and ZIP + 4	\$ 12,500.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c) Total contributions	(d)
10	Name, address, and ZIP + 4	\$ 12,500.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
11		\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
12	Ivallie, audi ess, aliu ZIF + 4	\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Part I	<b>Contributors</b> (see instructions). Use duplicate copies of Part I if ac	dditional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions Typ	(d) be of contribution
13		\$ 20,000.   Pa	rson X yroll oncash  blete Part II for sh contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions Typ	(d) be of contribution
14	Name, address, and ZIF + 4	Pe Pa 15,000. (Com	rson X yroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) be of contribution
15		Pe Pa No (Com	rson X yroll ncash blete Part II for sh contributions.)
(a)	(b)	(c)	(d)
16	Name, address, and ZIP + 4	Pe Pa No (Com	rson X yroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions Typ	(d) se of contribution
17	ivalile, audi ess, and EIF + +	Pe Pa No (Com	rson X yroll ncash blete Part II for ash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions Typ	(d) be of contribution
18		Pe Pa No (Com	rson X yroll

Part I	<b>Contributors</b> (see instructions). Use duplicate copies of Part I if	additional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
19		\$\$	Person X Payroll  Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
20	Hamo, address, and En 1 1	\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No. 21	Name, address, and ZIP + 4	\$ 5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions  \$	Person Payroll Complete Part II for noncash contributions.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Tolling data doo; all d Ell   1   7	\$	Person Payroll Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Humo, dudi 655, dilu Zif T T	\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

art II Noi	Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.				
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received		
		\$			
a) lo. om art l	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received		
		\$			
a) lo. om art l	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received		
		\$			
a) o. om ort I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received		
		\$			
a) o. om rt I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received		
		<b>\$</b>			
a) lo. om irt l	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received		
-					
		<b>S</b>	1		

Name of or	rganization		Employer identification number
CLIMATE	ACTION RESERVE		68-0477330
Part III	Exclusively religious, charitable, etc., contributifrom any one contributor. Complete columns (a completing Part III, enter the total of exclusively religious, Use duplicate copies of Part III if additional	) through (e) and the following line er charitable, etc., contributions of \$1,000 or	section 501(c)(7), (8), or (10) that total more than \$1,000 for the year ntry. For organizations r less for the year. (Enter this info. once.) \$\Bigsir \frac{1}{2} \\ \fra
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of git	ift
-	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, a	(e) Transfer of gir nd ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, al	(e) Transfer of gir	ift  Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-		(e) Transfer of git	
-	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee

#### **SCHEDULE D** (Form 990)

Department of the Treasury Internal Revenue Service

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.

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

**Employer identification number** 

	CLIMATE ACTION RESERVE			68-0477330
Par	t I Organizations Maintaining Donor Advised	d Funds or Other Similar Funds	or Accour	its. Complete if the
	organization answered "Yes" on Form 990, Part IV, line	e 6.		
		(a) Donor advised funds	(b) Fur	ids and other accounts
1	Total number at end of year			
2	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in v		sed funds	
	are the organization's property, subject to the organization's	exclusive legal control?		Yes No
6	Did the organization inform all grantees, donors, and donor ad			
	for charitable purposes and not for the benefit of the donor or			
	impermissible private benefit?		•	Yes No
Par				
1	Purpose(s) of conservation easements held by the organization		,	
•	Preservation of land for public use (e.g., recreation or e	·	torically impor	tant land area
	Protection of natural habitat	Preservation of a cer		
	Preservation of open space	i reservation of a cer	tilled Historic	structure
2	Complete lines 2a through 2d if the organization held a qualifi	ind conservation contribution in the form	of a consonya	tion assement on the last
2		led conservation contribution in the form	or a coriserva	
_	day of the tax year.		0-	Held at the End of the Tax Year
b				
С	Number of conservation easements on a certified historic stru			
d	Number of conservation easements included in (c) acquired a	,	l l	
	listed in the National Register			
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or terminated by the	e organization	during the tax
	year ▶			
4	Number of states where property subject to conservation eas	ement is located		
5	Does the organization have a written policy regarding the peri	iodic monitoring, inspection, handling of		
	violations, and enforcement of the conservation easements it	holds?		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, I	handling of violations, and enforcing con	servation ease	ements during the year
	<b></b>			
7	Amount of expenses incurred in monitoring, inspecting, hand	ling of violations, and enforcing conserva	tion easemen	ts during the year
	<b>▶</b> \$			
8	Does each conservation easement reported on line 2(d) above	e satisfy the requirements of section 170	(h)(4)(B)(i)	
	and section 170(h)(4)(B)(ii)?			Yes No
9	In Part XIII, describe how the organization reports conservation	on easements in its revenue and expense	statement, ar	nd balance sheet, and
	include, if applicable, the text of the footnote to the organizat	ion's financial statements that describes	the organizati	on's accounting for
	conservation easements.			
Par	t III Organizations Maintaining Collections of	Art, Historical Treasures, or Of	ther Simila	r Assets.
	Complete if the organization answered "Yes" on Form	990, Part IV, line 8.		
1a	If the organization elected, as permitted under SFAS 116 (AS	C 958), not to report in its revenue stater	nent and bala	nce sheet works of art,
	historical treasures, or other similar assets held for public exh	ibition, education, or research in furthera	nce of public	service, provide, in Part XIII,
	the text of the footnote to its financial statements that describ	oes these items.		
b	If the organization elected, as permitted under SFAS 116 (AS	C 958), to report in its revenue statement	t and balance	sheet works of art. historical
	treasures, or other similar assets held for public exhibition, ed	**		•
	relating to these items:		, [-	
	(i) Revenue included on Form 990, Part VIII, line 1		•	\$
			_	
2	If the organization received or held works of art, historical trea	asuras or other similar assets for financia		
~	- · · · · · · · · · · · · · · · · · · ·		ıı gairi, provide	•
_	the following amounts required to be reported under SFAS 11	· · · · · · · · · · · · · · · · · · ·		¢
	Revenue included on Form 990, Part VIII, line 1			
	Assets included in Form 990, Part X		<b>&gt;</b>	
LHA	For Paperwork Reduction Act Notice, see the Instructions	ior Form 990.		Schedule D (Form 990) 2018

Par	rt III   Organizations Maintaining C	ollections of Ar	t, Histo	rical Tre	asures, or	Other	Similar	Assets	(contin	nued)	
3	Using the organization's acquisition, accession	on, and other record	s, check a	ny of the f	ollowing that	are a sigr	nificant us	e of its c	ollection	items	3
	(check all that apply):										
а	Public exhibition	d	ı 🔲 L	oan or exc	hange progra	ıms					
b	Scholarly research	е	· 🗌 o	ther							
С	Preservation for future generations										
4	Provide a description of the organization's co	llections and explair	n how the	y further th	ne organizatio	n's exem	pt purpos	e in Part	XIII.		
5	During the year, did the organization solicit or	r receive donations o	of art, hist	orical treas	sures, or othe	r similar a	ssets				
	to be sold to raise funds rather than to be ma								Yes		No
Par	rt IV Escrow and Custodial Arrang	gements. Comple	ete if the o	organizatio	n answered "	Yes" on F	orm 990,	Part IV, I	ine 9, or		
	reported an amount on Form 990, Par	t X, line 21.									
1a	1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included										
	on Form 990, Part X?							$\square$	Yes		No
b	If "Yes," explain the arrangement in Part XIII a										
									Amount	t	
С	Beginning balance						1c				
d	Additions during the year						1d				
е	Distributions during the year						1e				
f	Ending balance						1f				
2a	Did the organization include an amount on Fo	orm 990, Part X, line	21, for es	crow or cu	ıstodial accou	unt liability	y?	$\square$	Yes		No
	If "Yes," explain the arrangement in Part XIII.										
Pai	rt V Endowment Funds. Complete in	f the organization an	swered "	es" on Fo	rm 990, Part	IV, line 10	).				
		(a) Current year	<b>(b)</b> Pri	or year	(c) Two year	s back (	<b>d)</b> Three ye	ars back	(e) Four	years	back
1a	Beginning of year balance										
b	Contributions										
С	Net investment earnings, gains, and losses										
d	Grants or scholarships										
е	Other expenditures for facilities										
	and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the curr	ent year end balance	e (line 1g,	column (a)	) held as:						
а	Board designated or quasi-endowment		_%								
b	Permanent endowment	%									
С	Temporarily restricted endowment >	%									
	The percentages on lines 2a, 2b, and 2c shou	uld equal 100%.									
3a	Are there endowment funds not in the posses	ssion of the organiza	tion that	are held ar	nd administer	ed for the	organizat	tion	_		
	by:									Yes	No
	(i) unrelated organizations								3a(i)		
									3a(ii)		
b	If "Yes" on line 3a(ii), are the related organization	tions listed as requir	ed on Sch	nedule R?					3b		
4	Describe in Part XIII the intended uses of the		wment fu	nds.							
Pai	rt VI Land, Buildings, and Equipm										
	Complete if the organization answered	d "Yes" on Form 990	), Part IV,					<u> </u>			
	Description of property	(a) Cost or o basis (investr			or other (other)		cumulated reciation	d	(d) Bool	k valu	e
1a	Land										
	Buildings	l l									
	Leasehold improvements										
	Equipment				127,681.		99,4	84.		28,	197.
	Other	<b>I</b>									
	I. Add lines 1a through 1e. (Column (d) must ed		X. column	(B). line 1	0c.)			▶		28,	197.

Schedule D (Form 990) 2018

Part VIII   Investments - Other Securities			68-0477330 Page
Part VII Investments - Other Securities.			
Complete if the organization answered "Yes" of		-	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or e	end-of-year market 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" of	on Form COO Dort IV line	11a Can Farm 000 Part V line 12	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or e	end-of-vear market value
, , , ,	(b) Book value	(b) Metrica of Valdation: Cost of C	na or your market 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" of	on Form 990, Part IV, line	11d. See Form 990, Part X, line 15.	
(a) [	Description		(b) Book value
(1) SECURITY DEPOSITS			, ,
			20,914.
(2) CLIMATE RESERVE TONNES FOREST BUFFER P	OOL ASSET		<del>- ` ` `</del>
\ <del>-</del> J	OOL ASSET		20,914.
(3)	OOL ASSET		20,914.
(3) (4)	OOL ASSET		20,914.
(3) (4) (5)	OOL ASSET		20,914.
(3) (4) (5) (6)	OOL ASSET		20,914.
(3) (4) (5) (6) (7)	OOL ASSET		20,914.
(3) (4) (5) (6) (7) (8)	OOL ASSET		20,914.
(3) (4) (5) (6) (7) (8) (9)			20,914.
(3) (4) (5) (6) (7) (8) (9)  Total. (Column (b) must equal Form 990, Part X, col. (B) line			20,914.
(3) (4) (5) (6) (7) (8) (9)  Total. (Column (b) must equal Form 990, Part X, col. (B) line  Part X Other Liabilities.	15.)		20,914. 1,817,590.
(3) (4) (5) (6) (7) (8) (9)  Total. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities.  Complete if the organization answered "Yes" of	15.)	11e or 11f. See Form 990, Part X, line	20,914. 1,817,590.
(3) (4) (5) (6) (7) (8) (9)  Total. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities.  Complete if the organization answered "Yes" of the organization of liability	15.)		20,914. 1,817,590.
(3) (4) (5) (6) (7) (8) (9)  Total. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities.  Complete if the organization answered "Yes" of the complete if the organization of liability  (1) Federal income taxes	<i>15.)</i> on Form 990, Part IV, line	11e or 11f. See Form 990, Part X, line 2	20,914. 1,817,590.
(3) (4) (5) (6) (7) (8) (9)  Total. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities.  Complete if the organization answered "Yes" of the organization of liability  (1) Federal income taxes (2) CLIMATE RESERVE TONNES FOREST BUFFER Parts of the organization of liability	<i>15.)</i> on Form 990, Part IV, line	11e or 11f. See Form 990, Part X, line 3 (b) Book value  1,817,590.	20,914. 1,817,590.
(3) (4) (5) (6) (7) (8) (9)  Total. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities.  Complete if the organization answered "Yes" of the complete if the organization of liability  (1) Federal income taxes	<i>15.)</i> on Form 990, Part IV, line	11e or 11f. See Form 990, Part X, line 2	20,914. 1,817,590.
(3) (4) (5) (6) (7) (8) (9)  Total. (Column (b) must equal Form 990. Part X. col. (B) line Part X Other Liabilities.  Complete if the organization answered "Yes" of the complete if the organization of liability  (1) Federal income taxes (2) CLIMATE RESERVE TONNES FOREST BUFFER Page 1997.	<i>15.)</i> on Form 990, Part IV, line	11e or 11f. See Form 990, Part X, line 3 (b) Book value  1,817,590.	20,914. 1,817,590.
(3) (4) (5) (6) (7) (8) (9)  Total. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities.  Complete if the organization answered "Yes" of the complete if the organization of liability  (1) Federal income taxes (2) CLIMATE RESERVE TONNES FOREST BUFFER FORE	<i>15.)</i> on Form 990, Part IV, line	11e or 11f. See Form 990, Part X, line 3 (b) Book value  1,817,590.	20,914. 1,817,590.
(3) (4) (5) (6) (7) (8) (9)  Total. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities.  Complete if the organization answered "Yes" of the distribution of liability (1) Federal income taxes (2) CLIMATE RESERVE TONNES FOREST BUFFER PROBLEM (3) DEFERRED RENT (4)	<i>15.)</i> on Form 990, Part IV, line	11e or 11f. See Form 990, Part X, line 3 (b) Book value  1,817,590.	20,914 1,817,590 1,838,504
(3) (4) (5) (6) (7) (8) (9)  Total. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities.  Complete if the organization answered "Yes" of the distribution of liability  (1) Federal income taxes (2) CLIMATE RESERVE TONNES FOREST BUFFER PROBLEM (3) DEFERRED RENT (4) (5)	<i>15.)</i> on Form 990, Part IV, line	11e or 11f. See Form 990, Part X, line 3 (b) Book value  1,817,590.	20,914. 1,817,590.
(3) (4) (5) (6) (7) (8) (9)  Total. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities.  Complete if the organization answered "Yes" of the organization of liability  (1) Federal income taxes (2) CLIMATE RESERVE TONNES FOREST BUFFER PROBLEM (C) (3) DEFERRED RENT (4) (5) (6) (7)	<i>15.)</i> on Form 990, Part IV, line	11e or 11f. See Form 990, Part X, line 3 (b) Book value  1,817,590.	20,914. 1,817,590.
(3) (4) (5) (6) (7) (8) (9)  Total. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities.  Complete if the organization answered "Yes" of the complete in the organization of liability (1) Federal income taxes (2) CLIMATE RESERVE TONNES FOREST BUFFER PROBLEM (4) (5) (6) (7) (8)	<i>15.)</i> on Form 990, Part IV, line	11e or 11f. See Form 990, Part X, line 3 (b) Book value  1,817,590.	20,914. 1,817,590.
(3) (4) (5) (6) (7) (8) (9)  Total. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities.  Complete if the organization answered "Yes" of the organization of liability  (1) Federal income taxes (2) CLIMATE RESERVE TONNES FOREST BUFFER PROBLEM (C) (3) DEFERRED RENT (4) (5) (6) (7)	15.)on Form 990, Part IV, line	11e or 11f. See Form 990, Part X, line 3 (b) Book value  1,817,590.	20,914. 1,817,590.

832053 10-29-18

organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2018

Par	t XI Reconciliation of Revenue per Audited Financial Sta	tements With R	evenue per Re	turn.	
	Complete if the organization answered "Yes" on Form 990, Part IV, li	ne 12a.			
1	Total revenue, gains, and other support per audited financial statements			1	3,224,873.
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		62,678.		
С	Recoveries of prior year grants				
d	Other (Describe in Part XIII.)	1 4 . 1			
е	Add lines 2a through 2d			2e	62,678.
3	Subtract line 2e from line 1			3	3,162,195.
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.)		624,563.		
	Add lines <b>4a</b> and <b>4b</b>		•	4c	624,563.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12			5	3,786,758.
	t XII Reconciliation of Expenses per Audited Financial St	atements With E	xpenses per F		
	Complete if the organization answered "Yes" on Form 990, Part IV, li				
_				1	3,782,474.
1				-	5,702,171.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	ا مم ا	62,678.		
a	Donated services and use of facilities		02,070.		
b	Prior year adjustments	_		-	
С.	Other losses			-	
d	Other (Describe in Part XIII.)				62 679
	Add lines 2a through 2d			2e	62,678.
3	Subtract line 2e from line 1			3	3,719,796.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1 1			
а	Investment expenses not included on Form 990, Part VIII, line 7b			-	
b	Other (Describe in Part XIII.)	4b	624,563.		
С	Add lines 4a and 4b			4c	624,563.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 1	8.)		5	4,344,359.
Par	t XIII Supplemental Information.				
Provi	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	4; Part IV, lines 1b ar	nd 2b; Part V, line 4	; Part X, lir	ne 2; Part XI,
lines	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide a	ny additional informa	tion.		
PART	XI, LINE 4B - OTHER ADJUSTMENTS:				
REGI	STRY FEE	624,563.			
PART	XII, LINE 4B - OTHER ADJUSTMENTS:				
	·				
REGI	STRY FEE	624,563.			
		,			
FORM	990, SCH D, PARTS IX AND X, LINE 2				
THE	ORGANIZATION ADMINISTERS A BUFFER POOL THAT SERVES AS A	HOLDING			
11115	ORGANIZATION ADMINISTRACE A DOFFER TOOL THAT DERVED AD A	HOLDING			
ACCO	UNT FOR PROJECT CRTS. IF A PROJECT EXPERIENCES AN UNAVOI	DARLE RELEASE			
11000	ON TOO BET CAID. IF A TROOBET EAFERTENCES AN UNAVOID	CIDEL RELEASE			
ᅂ	ARRON THE RIFFER POOT HOLDS COME THAT SERVE AS CREATERS	AGATNSM MHVM			
OF C	ARBON, THE BUFFER POOL HOLDS CRTS THAT SERVE AS CREDITS	TANI IGHIA			
ם זים ם	אכם דאוחס חעם אחשטפטעסטם שס פאומוסט שווא שווים מנוסטאר מאוידי מוויסטארים אוויסטארים אייסטארים אוויסטארים אוויסטארים אוויסטארים אוויסטארי	<b>ЛИМЕМПА</b> Т			
KELE	ASE INTO THE ATMOSPHERE TO ENSURE THAT THE OVERALL ENVIR	OMENTAL			

#### SCHEDULE F (Form 990)

Department of the Treasury

Internal Revenue Service

### Statement of Activities Outside the United States

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

Attach to Form 990.

► 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

Employer identification number

CLIMATE ACTION RESERVE 68-0477330 General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 14b. 1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States. 3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.) (a) Region (b) Number of (c) Number of (d) Activities conducted in the region (e) If activity listed in (d) (f) Total employees, agents, and independent expenditures is a program service, offices (by type) (such as, fundraising, profor and in the region gram services, investments, grants to describe specific type investments contractors recipients located in the region) of service(s) in the region in the region in the region INTERNATIONAL MEXICO 0 PROGRAM SERVICES INITIATIVES 181,816. INTERNATIONAL CANADA 0 PROGRAM SERVICES INITIATIVES 1 14,409. 0 2 196,225. 3 a Subtotal **b** Total from continuation 0 0 sheets to Part I ...... Totals (add lines 3a

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

2

Schedule F (Form 990) 2018

and 3b)

196,225.

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name of organization	<b>(b)</b> IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)		
			ecognized as charities by the f							
by the IRS, or for whice <b>3</b> Enter total number of	by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter  Enter total number of other organizations or entities									

Schedule F (Form 990) 2018

Part III	Grants and Other Assistanc	e to Individuals Outside	the United Sta	tes. Complete i	f the organization answered "Yes" o	on Form 990, Part	IV, line 16.	
	Part III can be duplicated if a	dditional space is needed						
(a) ⊺	ype of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)

	i di digiti di ilia		
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the		
	organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign		
	Corporation (see Instructions for Form 926)	Yes	X No
2	Did the examination have an interest in a foreign trust during the tay year?		
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization		
	may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign		
	Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign	,	. ·
	Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)	. L Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes,"		
	the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To		
	Certain Foreign Corporations (see Instructions for Form 5471)	Yes	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a		
	qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621,		
	Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund		
	(see Instructions for Form 8621)	Yes	X No
5	Did the examination have an expension interest in a fersion partnership during the tay year?		
5	Did the organization have an ownership interest in a foreign partnership during the tax year?   ##Yes,"		
	the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain		X No
	Foreign Partnerships (see Instructions for Form 8865)	Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If		
	"Yes," the organization may be required to separately file Form 5713, International Boycott Report (see		
	Instructions for Form 5713: don't file with Form 990)	Yes	X No

Instructions for Form 5713; don't file with Form 990)

Schedule F (Form 990) 2018

832075 10-31-18 Schedule F (Form 990) 2018

#### SCHEDULE J (Form 990)

**Compensation Information** 

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

➤ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

➤ Attach to Form 990.

Open to Public

Inspection

OMB No. 1545-0047

Internal Revenue Service Name of the organization

Department of the Treasury

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

Name of the organization

CLIMATE ACTION RESERVE

CLIMATE ACTION RESERVE

68-0477330

Part I Questions Regarding Compensation

			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel  Housing allowance or residence for personal use			
	Travel for companions  Payments for business use of personal residence			
	Tax indemnification and gross-up payments  Health or social club dues or initiation fees			
	Discretionary spending account  Personal services (such as maid, chauffeur, chef)			
	Manuschier in the Control of the Con			
D	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or	41.		
•	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,	2		
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's			
3	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	Compensation committee Written employment contract			
	Independent compensation consultant  X Compensation survey or study			
	Torm 990 of other organizations			
	Approval by the board of compensation committee			
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 related organization:			
а	Receive a severance payment or change-of-control payment?	4a		Х
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		Х
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		Х
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(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 compensation			
	contingent on the revenues of:			
а	The organization?	5a		Х
b	Any related organization?	5b		Х
	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			
а	The organization?	6a		Х
b	Any related organization?	6b		Х
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments			
	not described on lines 5 and 6? If "Yes," describe in Part III	7		Х
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		Х
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		1

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

Schedule J (Form 990) 2018

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.

		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and (D) other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	Derients	(6)(1)-(0)	reported as deferred on prior Form 990
(1) CRAIG EBERT	(i)	202,730.	0.	0.	1,200.	33,623.	237,553.	0.
PRESIDENT	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) GILLIAN CALOF	(i)	146,404.	0.	0.	1,200.	23,160.	170,764.	0.
VP OF OPERATIONS	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) JOHN NICKERSON	(i)	130,844.	0.	0.	1,200.	27,877.	159,921.	0.
VP OF FORESTRY	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
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	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

#### **SCHEDULE 0**

(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047 Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

CLIMATE ACTION RESERVE

**Employer identification number**  $68\!-\!0477330$ 

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
THAT BENEFIT ECONOMIES, ECOSYSTEMS AND SOCIETY. THE CLIMATE ACTION
RESERVE WAS APPROVED BY THE CALIFORNIA AIR RESOURCES BOARD (ARB) IN
2012 TO SERVE AS AN OFFSET PROJECT REGISTRY IN ACCORDANCE WITH THE
REGULATIONS IMPLEMENTING THE CALIFORNIA CAP-AND-TRADE PROGRAM. THE
RESERVE HAS HAD MANY OF THE OFFSET PROJECTS IN ITS SYSTEM RECOGNIZED BY
THE ARB FOR REWARDING EARLY ACTIONS TO REDUCE GREENHOUSE GAS EMISSIONS.
FOUR RESERVE OFFSET PROTOCOLS HAVE BEEN ADOPTED AND TWO OTHERS ADAPTED
BY ARB FOR USE IN THE COMPLIANCE OFFSET SYSTEM UNDER THE CAP-AND-TRADE
PROGRAM.
FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
PROJECT REGISTRY IN ACCORDANCE WITH THE REGULATIONS IMPLEMENTING THE
CALIFORNIA CAP-AND-TRADE PROGRAM. THE RESERVE HAS HAD MANY OF THE
OFFSET PROJECTS IN ITS SYSTEM RECOGNIZED BY THE ARB FOR REWARDING EARLY
ACTIONS TO REDUCE GREENHOUSE GAS EMISSIONS. FOUR RESERVE OFFSET
PROTOCOLS HAVE BEEN ADOPTED AND TWO OTHERS ADAPTED BY ARB FOR USE IN
THE COMPLIANCE OFFSET SYSTEM UNDER THE CAP-AND-TRADE PROGRAM.
FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:
CREATING A TRUSTED AND VALUED COMMODITY.
FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:
UNDERSTANDING OF US SUBNATIONAL CLIMATE LEADERSHIP.

FORM 990, PART VI, SECTION B, LINE 11B:

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

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

Schedule O (Form 990 or 990-EZ) (2018)	Page 2					
Name of the organization  CLIMATE ACTION RESERVE	Employer identification number 68-0477330					
LINE 11A EXPLANATION - IT IS THE POLICY OF CLIMATE ACTION RESERVE THAT THE						
AUDIT COMMITTEE AND THEN THE FULL BOARD OF DIRECTORS REVIEW THE FORM 990						
BEFORE IT IS FILED WITH THE IRS. A BOARD RESOLUTION IS NOT REQUIRED IN						
ORDER FOR THE FORM 990 TO BE FILED. THE MEANS OF DELIVERY SHALL BE VIA						
EMAIL TO EACH AUDIT COMMITTEE MEMBER.						
FORM 990, PART VI, SECTION B, LINE 12C:						
THE CLIMATE ACTION RESERVE HAS SCHEDULED MEETINGS TO REVIEW POLICY AND						
PROCEDURES AND CONSISTENTLY MONITORS AND ENFORCES COMPLIANCE WITH THE						
POLICIES DURING THE REVIEW PROCESS. THE RESERVE HAS FULL BOARD OF DIRECTORS						
MEETINGS, AUDIT COMMITTEE MEETINGS, NOMINATING COMMITTEE MEETINGS AND						
EXECUTIVE COMMITTEE MEETINGS. DURING THE REPORTING PERIOD, THE EXECUTIVE						
COMMITTEE GATHERED FOUR TIMES TO REVIEW POLICY AND PROCEDURES TO ENFORCE						
COMPLIANCE.						
FORM 990, PART VI, SECTION B, LINE 15:						
AT SCHEDULED MEETINGS THE BOARD OF DIRECTORS REVIEWS AND MAKES DECISIONS ON						
COMPENSATION FOR THE PRESIDENT AND VP STAFF USING COMPENSATION INFORMATION						
GATHERED FROM THE FORM 990'S OF OTHER ORGANIZATIONS AND LOCAL COMPENSATION	_					
SURVEYS. THE PROCESS IS DONE IN CLOSED SESSION AND DECISIONS ARE FORWARDED						
TO THE PRESIDENT BY ELECTRONIC MAIL, THEN REVIEWED BY THE VP OF OPERATIONS,						
AND FINALLY FORWARDED TO THE CONTROLLER FOR PROCESSING. THIS DELIBERATION	AND FINALLY FORWARDED TO THE CONTROLLER FOR PROCESSING. THIS DELIBERATION					
IS ALSO RECORDED IN THE CORPORATE MINUTES.	_					
FORM 990, PART VI, SECTION C, LINE 19:						
PUBLIC DOCUMENTS AS DETERMINED BY THE ORGANIZATION ARE AVAILABLE UPON						
WRITTEN REQUEST. COPIES OF THE ORGANIZATION'S FINANCIAL STATEMENTS AND						
FORMS 990 ARE ALSO MADE AVAILABLE BY EMAIL REQUEST THROUGH A LINK ON THE						

Name of the organization  CLIMATE ACTION RESERVE	Employer identification number 68-0477330
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ORGANIZATION'S WEBSITE.	