	Form	99 <b>0</b>	1													OMB No. 1545-0047
	FOITI	550	l				-			<b>xempt</b> ernal Revenu						2018
Depa	rtment of t	he Treasury le Service			► Do	not en	ter socia	l security	numbers	on this form tructions a	as it n	nav be ma	ade public.			Open to Public Inspection
		2018 calend	dar vear.				-					nd endir		/31		, 2019
	Check if a		C		,		5	<u>, , , , ,</u>		, -	-,-		<u> </u>	-	yer iden	tification number
	Addre	ess change	Clima	te l	Found	lati	on							26-	-2077	719
	Name	e change	3 Lit											E Teleph	none num	iber
	Initial	return	Woods	Ho	le, N	1A 02	2543							800	278	-7662
	Final re	eturn/terminated														
	Amer	nded return												<b>G</b> Gross	receipts	\$ 478,548.
	Applie	cation pending	F Name	and ad	dress of	principal	officer:						H(a) Is thi	s a group retu	irn for su	, , , , , , , , , , , , , , , , , , , ,
			Same	As (	C Abo	ove							H(b) Are a	all subordinate o," attach a lis	es include	ed? Yes No
I	Tax-exe	mpt status:	X 501(c)	)(3)	501	(C) (	)	<ul> <li>(insert</li> </ul>	no.)	4947(a)(1)	) or	527		o, attach a lis	st. (See ii	isit detions)
J	Webs	ite:► ht	tp//w	ww.c	lima	tefo	ounda	tion.	org/				H(c) Grou	p exemption i	number I	•
κ	Form of	organization:	X Corpor	ration	Trus	t	Associat	tion C	Other ►		L Yea	ar of forma	tion: 200	07 M	State of	legal domicile: OR
Pa	rtl	Summar	у													
																lobal food
e S		ecurity														
Governance		ntegrat oof to													olar	s under one
veri		heck this bo								ations or di						
<u>6</u>		umber of vo													3	3
<u>৯</u>		umber of ind													4	1
Activities		otal number													5	2
stiv		otal number													6	11
Ă		otal unrelate et unrelated													7a 7b	0.
	DING		DUSITIES	is laxa		Joine		JIII 990-	T, IIIe S	00				Prior Yea		0. Current Year
	<b>8</b> Co	ontributions	and gra	nts (F	Part VII	I. line	1h)							602,		459,868.
nue		rogram serv	-				-								065.	15,346.
Revenue	<b>10</b> In	vestment in	icome (P	art VI	II, colu	ımn (A	N), lines	s 3, 4, ar	nd 7d)					,	2.	2.
ŭ		ther revenue														3,332.
		otal revenue												640,	320.	478,548.
		rants and si			•	•										
		enefits paid			-											
es		alaries, othe												4,	998.	126,846.
Expense		rofessional														
ă.		otal fundrais	• •		•				·				_			
"		ther expens												184,		642,404.
		otal expense					•							189,		769,250.
	<b>19</b> Re	evenue less	expense	es. Si	ubtract	line 18	s from	line 12.						451,		-290,702.
Net Assets or Fund Balances	<b>20</b> To	otal assets (	(Dart V I	lina 1	5)									ning of Curre		End of Year
\sse Bala		otal liabilitie												1,563, 1,131,		<u>1,334,802.</u> 1,193,121.
det / und		et assets or			-									432,		
_		Signatur			3. Oubi	nact m			20					432,	505.	141,681.
		5			vamined	this retu	rn includ	ing accomp	anving sch	nedules and st	tatemer	nts and to	the hest of	my knowleda	e and he	lief it is true correct and
comp	olete. Decla	aration of prepa	rer (other th	han offic	cer) is ba	sed on a	all informa	ation of whi	ch prepare	er has any kno	wledge	9.	the best of	ing knowledg		lief, it is true, correct, and
Sig		Signatur	re of officer										[	Date		
He	re		an Vor										Dire	ector		
		51	print name		е		D.	ula a' i				D-+-		-1		DTIN
		Print/Type p						r's signatur				Date		Check	if	PTIN
Pai		Sat Mi				<u>.</u>		Mitar						self-emplo	yed	P01883408
Pre	eparer	Firm's name					ncia	l Ser	vices	LLC.				-		F 41 0 C 0 F
US	e Only	Firm's addre			x 11		n/ ~-	F 6 8						Firm's EIN		-5419625
			Sa	anta	ı Cru	lz, N	IM 87	567						Phone no.	(50	5)-614-6739

		bhanifaa rinanoitai boivioob 110.	
Use Only	Firm's address	▶ PO Box 1194	Firm's EIN ► 45-5419625
		Santa Cruz, NM 87567	Phone no. (505) -614-6739
May the IRS	discuss this r	eturn with the preparer shown above? (see instructions)	X Yes No
BAA For Pa	perwork Red	uction Act Notice, see the separate instructions.	TEEA0101L 08/20/18 Form <b>990</b> (2018)

Form	1990 (2018) Climate Fou	undation	26-2077719 Page <b>2</b>
Par	, , , , , , , , , , , , , , , , , , , ,	am Service Accomplishments	
	Check if Schedule O cor	ntains a response or note to any line in this Part III	X
1	Briefly describe the organization	n's mission:	
	To educate and rese	arch global food security and carbon bal	lance in soils and seas, to
	build_multidiscipli	nary integrative design teams by gatheri	ing diverse researchers and
	<u>scholars under one</u>	roof to learn, collaborate and solve glo	bal climate challenges.
	<b>D</b> . 1	· · · · · · · · · · · · · · · · · · ·	
2		ny significant program services during the year which were not listed	
	If "Yes," describe these new servi	iere en Sebedule O	Yes X No
3		iducting, or make significant changes in how it conducts, any pro-	
3	If "Yes," describe these changes of		ogram services? Yes X No
А	-	or schedule of.	gram services as measured by expenses
-	Section 501(c)(3) and 501(c)(4) and revenue, if any, for each p	) organizations are required to report the amount of grants and	allocations to others, the total expenses,
4 a	(Code:) (Expenses	s \$ 586,589. including grants of \$ 450,0	)000.)(Revenue \$)
	See Schedule 0		
4 6	(Codo: ) (Evpopoo	a c 01 001 including grants of c	) (Revenue \$ 15,346.)
40		s \$ 81,921. including grants of \$	
		elp build multidisciplinary integrative	
		e challenges. Part of this involves pro	
		le, learn and collaborate, who would oth	
		ate House provides such a location to co	
		olution collaboration.	
4 c	: (Code: ) (Expenses	s \$ including grants of \$	) (Revenue \$
4 d	Other program services (Descri		
			venue é
۸.	(Expenses \$ • Total program service expenses	including grants of \$ ) (Rev	venue \$ )

Par	t IV Checklist of Required Schedules			
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete		Yes	No
2	Schedule A	1	X X	<u> </u>
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If 'Yes,' complete Schedule C, Part I</i>	3	21	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? <i>If 'Yes,' complete Schedule C, Part III.</i>	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If 'Yes,' complete Schedule D, Part I</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? <i>If 'Yes,' complete Schedule D, Part II</i>	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If 'Yes,' complete Schedule D, Part III.</i>	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? <i>If 'Yes,' complete Schedule D, Part IV</i>	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If 'Yes,' complete Schedule D, Part V</i>	10		Х
	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI.	11 a	Х	
	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.	11 b		Х
	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	11 c		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	11 d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e		Х
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If 'Yes,' complete Schedule D, Part X</i>	11 f		Х
12 a	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
14 a	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? <i>If 'Yes,' complete Schedule F, Parts II and IV</i>	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? <i>If 'Yes,' complete Schedule F, Parts III and IV</i>	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? <i>If 'Yes,' complete Schedule G, Part I</i> (see instructions)	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? <i>If 'Yes,' complete Schedule G, Part II</i>	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
20a	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? <i>If 'Yes,' complete Schedule I, Parts I and II.</i>	21		Х
BAA	TEEA0103L 08/03/18		990	(2018)

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Form 990 (2018) Climate Foundation 
 Form 990 (2018)
 Climate Foundation

 Part IV
 Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	22		Х
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J</i> .	23		Х
24	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
I	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		
(	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 :	a 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
I	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? <i>If 'Yes,' complete Schedule L, Part II.</i>	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? <i>If 'Yes,' complete Schedule L, Part III.</i>	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):			
i	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		Х
I	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV.	28b		Х
(	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? <i>If 'Yes,' complete Schedule L, Part IV</i>	20.		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	28c		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
50	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		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete 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? <i>If 'Yes,' complete Schedule R, Part L</i>	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Part II, III, or IV, and Part V, line 1.	34		Х
35 a	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
I	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If 'Yes,' complete Schedule R, Part VI</i>	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O.	38	Х	
Pa	Art V         Statements Regarding Other IRS Filings and Tax Compliance           Check if Schedule O contains a response or note to any line in this Part V.         Statements V.			
	טופנא זו סטופעעוב ט טטונמוזא מ ופאטטואל טו ווטנב נט מוזץ ווויב ווו נוווא רמול ע		Yes	
1	a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 10			
I	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
	c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	10	X	
BAA			1 990 (	(2018)

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Form 990 (2018) Climate Foundation 26-207771	9	F	age 5
Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)		1	
		Yes	No
<b>2 a</b> Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return <b>2 a</b>			
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2 b	Х	
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
<b>3 a</b> Did the organization have unrelated business gross income of \$1,000 or more during the year?	3 a		Х
<b>b</b> If 'Yes,' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation in Schedule O.	3 b		
<b>4a</b> At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	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).			
<b>5a</b> Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a		X
<b>b</b> Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		Х
<b>c</b> If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5 c		
<b>6 a</b> Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6 a		х
<b>b</b> If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6 b		
7 Organizations that may receive deductible contributions under section 170(c).			
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		X
<b>b</b> If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7 b		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7 c		х
d If 'Yes,' indicate the number of Forms 8282 filed during the year 7d			
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 e		Х
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		Х
<b>g</b> If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 g		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7 h		х
8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	0		X
	8		Λ
<ul><li>9 Sponsoring organizations maintaining donor advised funds.</li><li>a Did the sponsoring organization make any taxable distributions under section 4966?</li></ul>	0		
<b>b</b> Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9a 9b		
10 Section 501(c)(7) organizations. Enter:	90		
a Initiation fees and capital contributions included on Part VIII, line 12			
<b>b</b> Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities <b>10b</b>	-		
11 Section 501(c)(12) organizations. Enter:	-		
a Gross income from members or shareholders			
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.).	-		
12 a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
<b>b</b> If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year <b>12b</b>			
13 Section 501(c)(29) qualified nonprofit health insurance issuers.			
<b>a</b> 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			
c 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>b</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.			
16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If 'Yes,' complete Form 4720, Schedule O.	16		Х

			Yes	NO
If th	er the number of voting members of the governing body at the end of the tax year <b>1 a</b> 3 ere are material differences in voting rights among members ne governing body, or if the governing body delegated broad nority to an executive committee or similar committee, explain in Schedule O.	_		
	er the number of voting members included in line 1a, above, who are independent 1b			
2 Did a	any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			v
	er, director, trustee, or key employee?	2		Х
of of	fficers, directors, or trustees, or key employees to a management company or other person?	3		Х
	the organization make any significant changes to its governing documents			v
	e the prior Form 990 was filed?	4		X
	the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
	the organization have members or stockholders?	6		Х
	the organization have members, stockholders, or other persons who had the power to elect or appoint one or more nbers of the governing body?	7 a		Х
stoc	any governance decisions of the organization reserved to (or subject to approval by) members, kholders, or persons other than the governing body?	7 b		Х
8 Did t the t	the organization contemporaneously document the meetings held or written actions undertaken during the year by following:			
	governing body?	8 a	Х	
<b>b</b> Eacl	h committee with authority to act on behalf of the governing body?	8 b	Х	
	nere any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the anization's mailing address? <i>If 'Yes,' provide the names and addresses in Schedule O</i>	9		Х
Section	B. Policies (This Section B requests information about policies not required by the Internal R	eveni	le Co	ode.)
			Yes	No
<b>10 a</b> Did	the organization have local chapters, branches, or affiliates?	10 a		Х
	es,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their ations are consistent with the organization's exempt purposes?	10 b		
-	the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10 D	Х	
	cribe in Schedule O the process, if any, used by the organization to review this Form 990. See Schedule O	IIa	Λ	
	the organization have a written conflict of interest policy? If 'No,' go to line 13	12a		Х
	e officers, directors, or trustees, and key employees required to disclose annually interests that could give rise	12.0		Λ
to co	onflicts?	12b		
Sch	the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in edule O how this was done	12 c		
	the organization have a written whistleblower policy?	13		Х
14 Did	the organization have a written document retention and destruction policy?	14		Х
	the process for determining compensation of the following persons include a review and approval by independent sons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
•	organization's CEO, Executive Director, or top management official	15a		Х
	er officers or key employees of the organization.	15b		X
	es' to line 15a or 15b, describe the process in Schedule O (see instructions).			
	the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
taxa	ble entity during the year?	16 a		Х
part	es,' did the organization follow a written policy or procedure requiring the organization to evaluate its icipation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the anization's exempt status with respect to such arrangements?	16 b		
	C. Disclosure			
17 List	the states with which a copy of this Form 990 is required to be filed  MA_OR			
avail	tion 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 50 lable for public inspection. Indicate how you made these available. Check all that apply. Own website Another's website X Upon request Other (explain in Schedule O)	)1(c)(3	s) on	ly)
19 Descr	ribe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements availa	ble to		
	ublic during the tax year. See Schedule O e the name, address, and telephone number of the person who possesses the organization's books and records			
Br	ian Von Herzen 1805 N Carson Ste 345 Carson City NV 89701 800-278-7662			
BAA	TEEA0106L 12/31/18	Form	990 (	(2018)

Section A. Governing Body and Management

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Form 990 (2018) Climate Foundation									26-20777	19 Page <b>7</b>
Part VII Compensation of Officers, Directo Independent Contractors	ors, Tru	stee	es, I	Key	/ Er	nplo	oye	es, Highest C		
Check if Schedule O contains a response of	or note to	anv	line	in t	his	Part	VII			
Section A. Officers, Directors, Trustees, Ke										<u> </u>
1 a Complete this table for all persons required to be listed	2	-				-				
organization's tax year.				ما الم م		ن بانه م	ماريم	-		a such of
• List all of the organization's <b>current</b> officers, direcompensation. Enter -0- in columns (D), (E), and (F) if							dua	is or organization	s), regardless of an	nount of
• List all of the organization's <b>current</b> key employe	-							-		
<ul> <li>List the organization's five current highest comp who received reportable compensation (Box 5 of Form organization and any related organizations.</li> </ul>										
• List all of the organization's <b>former</b> officers, key of reportable compensation from the organization and any	employee related or	es, ai ganiz	nd h atior	ighe 1s.	est c	omp	ens	ated employees v	who received more t	han \$100,000:
<ul> <li>List all of the organization's former directors or trustee organization, more than \$10,000 of reportable compen</li> </ul>										
List persons in the following order: individual trustees				-						npensated
employees; and former such persons.		,					,	oo		
Check this box if neither the organization nor any relate	ed organiz	ation	con	nper	isate	d an	y cu	rrent officer, direct	or, or trustee.	
				(C)						
(A)	(B)	thar	n one	box,	unles	eck mo s pers	son	(D)	(E)	(F)
Name and Title	Average hours	15	s both dire	ector	truste	and a ee)		Reportable compensation from the organization	Reportable compensation from	Estimated amount of other
	per week	Indi or d	Inst	Officer	Key	emp	Former	(W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compensation from the organization
	(list any hours for related organiza-	lirect	itutic	ĉer	Key employee	Highest co employee	mer			and related organizations
	organiza- tions	or tr.	mali		bloye	e e				
	below dotted	Individual trustee or director	Institutional trustee		ð	Highest compensated employee				
	line)		8			ated				
(1) Brian Von Herzen	30									
Executive Dir.	0	Х		Х				111,000.	0.	0.
(2) Tom Kelly	1								_	
Director	0	Х		Х				0.	0.	0.
_(3)_Rebecca_Truman	5							F 000		0
Treasurer	0	Х		Х				5,800.	0.	0.
		1								
(0)										
(6)		•								
		<u> </u>								
·										
(9)										

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# Form 990 (2018) Climate Foundation

Form	990 (2018) Climate Foundation		Kasi	<b>F</b>	mla				l llinhaat Cam	26-207771	
Par	VII Section A. Officers, Directors, Tru	(B)	ney	Em	<u>pic</u> (0	-	es, a	anc	a Hignest Corr	ipensated Emp	loyees (continued)
	<b>(A)</b> Name and title	Average hours per week	box	, unles	Pos heck	sition more erson directe	e than c is both pr/truste	ee)	(D) Reportable compensation from	<b>(E)</b> Reportable compensation from	<b>(F)</b> Estimated amount of other
		(list any hours for related organiza - tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(15)											
(16)											
(17)											
(18)											
(19)											
(20)											
(21)											
(22)											
(23)			•								
(24)											
(25)											
С	Sub-total Total from continuation sheets to Part VII, Section Total (add lines 1b and 1c)	on A					<sup>1</sup>		116,800. 0. 116,800.	0. 0. 0.	0. 0. 0.
2	Total number of individuals (including but not limited from the organization  1							ved			
3	Did the organization list any <b>former</b> officer, direction list any <b>former</b> officer, direction line 1a? <i>If 'Yes,' complete Schedule J for suc</i>	tor, or tru h individu	istee, <i>ial</i>	key	em	nploy	/ee, c	or h	ighest compensa	ted employee	Yes No
	For any individual listed on line 1a, is the sum of the organization and related organizations greate such individual	r than \$1	50,00	00?	lf 'Y	es,	com	plei	te Schedule J for		. 4 X
5	Did any person listed on line 1a receive or accrue for services rendered to the organization? If 'Yes	e comper ,' comple	nsatio e <i>te Sc</i>	n fro ched	om a ule	any <i>J fo</i>	unrel <i>r suci</i>	ate h pe	d organization or	individual	
	ion B. Independent Contractors	ممامما أبمما		ما م بم ا			1040			aan \$100,000 of	
-	Complete this table for your five highest compension compensation from the organization. Report compension	sated ind sation for	the c	alent	cor dar y	year	endir	tha 1g w	vith or within the or	ganization's tax year	
	(A) Name and business addr	ess							(B) Description o	of services	(C) Compensation
	Total number of independent contractors (including b \$100,000 of compensation from the organization		ited to	o tho	se l	istec	l abov	/e) \	who received more	than	

Page 9

		Check if Schedule O contains a res	ponse or note to any	line in this Part VI	II		
				<b>(A)</b> Total revenue	<b>(B)</b> Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
nts nts		Federated campaigns 1a					
Grai		Membership dues 1b					
Contributions, Gifts, Grants and Other Similar Amounts		Fundraising events 1 c					
		Related organizations 1 d					
ions, r Sim		Government grants (contributions) 1 e					
the		All other contributions, gifts, grants, and similar amounts not included above 1 f	459,868.				
ontr of C	-	Noncash contributions included in lines 1a-1f: \$					
<u>ی م</u>	h	Total. Add lines 1a-1f	Business Code	459,868.			-
ňus	22	Climate House		15 246	15 246		
Program Service Revenue	za b	<u>Climate House</u>	541700	15,346.	15,346.		
еF	c						
evi	d						
s m	е						
gra	f	All other program service revenue					
Pro	g	Total. Add lines 2a-2f		15,346.			
	3	Investment income (including dividend	ls, interest and		-		
		other similar amounts)		2.	2.		
	4 5	Royalties					
	5	(i) Real	(ii) Personal				
	6 a	Gross rents	(				
		Less: rental expenses					
		Rental income or (loss)					
	d	Net rental income or (loss)					
	7 a	Gross amount from sales of	(ii) Other				
	b	Less: cost or other basis					
		and sales expenses					
		Gain or (loss)					
	-	Net gain or (loss)	ł				
ne	8 a	Gross income from fundraising events (not including \$					
Other Revenue		of contributions reported on line 1c).					
Be		See Part IV, line 18	a				
er	b		b				
Ð		Net income or (loss) from fundraising	events ►				
-	9 a	Gross income from gaming activities. See Part IV, line 19	a				
	b	Less: direct expenses					
		Net income or (loss) from gaming acti					
		Gross sales of inventory, less returns					
		and allowances	-				
		Less: cost of goods sold					
	С	Net income or (loss) from sales of inv	-				
	1 -	Miscellaneous Revenue	Business Code				
		Reimbused Expenses Income		3,332.	3,332.		
	b						
	с - С	All other revenue					
		<b>Total.</b> Add lines 11a-11d	▶	3,332.			
		Total revenue. See instructions	-	478,548.	18,680.	0.	0.
							,,

	t IX Statement of Functional Expension				
Sec	tion 501(c)(3) and 501(c)(4) organizations must com				
	Check if Schedule O contains a re				
Do 6b,	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	<b>(A)</b> Total expenses	<b>(B)</b> Program service expenses	(C) Management and general expenses	<b>(D)</b> 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 for- eign 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	116,800.	83,500.	33,300.	0.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7	Other salaries and wages				
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	950.		950.	
10	Payroll taxes	9,096.		9,096.	
11	Fees for services (non-employees):				
i	Management				
I	Legal	13,535.		13,535.	
(	Accounting	3,564.		3,564.	
	Lobbying	3,301.		5,501.	
	Professional fundraising services. See Part IV, line 17				
	Investment management fees				
	Other. (If line 11g amount exceeds 10% of line 25, <u>c</u> olumn				
	(A) amount, list line 11g expenses on Schedule 0. $ m Sch$ . $Q$	437,868.	437,868.		
12	Advertising and promotion.				
13	Office expenses	627.		627.	
14	Information technology				
15	Royalties				
16	Occupancy	5,856.	5,856.		
17	Travel.	45,401.	45,401.		
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	3,018.	3,018.		
20	Interest	28,291.		28,291.	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	22,881.	22,881.		
23	Insurance	8,614.		8,614.	
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.)				
i	Program Supplies	65,744.	65,744.		
	• <u>Software</u>	3,057.	3,057.		
	Taxes	1,654.		1,654.	
	Repairs	599.	599.	, +	
	All other expenses	1,695.	586.	1,109.	
	<b>Total functional expenses.</b> Add lines 1 through 24e	769,250.	668,510.	100,740.	0.
	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)				

# Form 990 (2018)Climate FoundationPart IXStatement of Functional Expenses

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# Form 990 (2018) Climate Foundation Part X Balance Sheet

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		Check if Schedule O contains a response or note to	o any line i	n this Part X			
					<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash – non-interest-bearing			754,541.	1	498,767.
	2	Savings and temporary cash investments		2			
	3	Pledges and grants receivable, net		3			
	4	Accounts receivable, net			78,532.	4	77,859.
	5	Loans and other receivables from current and former trustees, key employees, and highest compensated e Part II of Schedule L	5 000	_			
	6	Loans and other receivables from other disqualified p section 4958(f)(1)), persons described in section 4958(c)( employers and sponsoring organizations of section 501(c) beneficiary organizations (see instructions). Complete	5,000.	5			
ŵ	7	Notes and loans receivable, net.				7	40.005
Assets		Inventories for sale or use				8	49,995.
SS	8					8 9	
	9	Prepaid expenses and deferred charges	1 1			9	
		Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D		839,922.			
		Less: accumulated depreciation		131,742.	725,466.	10 c	708,180.
	11	Investments – publicly traded securities				11	
	12	Investments – other securities. See Part IV, line 11				12	
	13	Investments - program-related. See Part IV, line 11.				13	
	14	Intangible assets.		-		14	
	15	Other assets. See Part IV, line 11				15	1.
	16	Total assets. Add lines 1 through 15 (must equal line	34)		1,563,539.	16	1,334,802.
	17	Accounts payable and accrued expenses			555,774.	17	633,105.
	18	Grants payable				18 19	
	19	Tax-exempt bond liabilities				20	
Ø	20 21	Escrow or custodial account liability. Complete Part I				20	
Liabilities	22	Loans and other payables to current and former office key employees, highest compensated employees, and Complete Part II of Schedule L	ers, directo d disqualifie	rs, trustees, ed persons.		21	
	23	Secured mortgages and notes payable to unrelated th			570,383.	23	560,016.
	24	Unsecured notes and loans payable to unrelated third	•		570,505.	24	500,010.
	25	Other liabilities (including federal income tax, payable and other liabilities not included on lines 17-24). Com	•		4,999.	25	
	26	Total liabilities. Add lines 17 through 25		• • • • • • • • • • • • • • • • • • • •	1,131,156.	26	1,193,121.
s		Organizations that follow SFAS 117 (ASC 958), check he lines 27 through 29, and lines 33 and 34.					. ,
ő	27	Unrestricted net assets				27	
alai	28	Temporarily restricted net assets		-		28	
ă	29	Permanently restricted net assets		-		29	
Net Assets or Fund Balances	25	Organizations that do not follow SFAS 117 (ASC 958), ch and complete lines 30 through 34.					
ō	30	Capital stock or trust principal, or current funds				30	
ets	30 31	Paid-in or capital surplus, or land, building, or equipm				30	
(ss	32	Retained earnings, endowment, accumulated income,			432,383.	32	1/1 601
àt.≱	33	Total net assets or fund balances			432,383.	33	141,681.
ž	33 34	Total liabilities and net assets/fund balances				33 34	141,681.
BA	-	וסנמו המשחותוכס מחת חבר מססבנס/ותות שמומוונכס	TEEA0111L		1,563,539.	J <del>4</del>	<u>1,334,802.</u> Form <b>990</b> (2018)

Forn	1 990	(2018)	Climate Foundation 26-2	077719		Page 12
Pa	t XI	Reco	nciliation of Net Assets			
		Check	if Schedule O contains a response or note to any line in this Part XI.			
1	Tota	l revenue	e (must equal Part VIII, column (A), line 12)	1	478	3,548.
2	Tota	l expens	es (must equal Part IX, column (A), line 25)	2	76	9,250.
3	Reve	enue less	expenses. Subtract line 2 from line 1	3		),702.
4	Net a	assets or	fund balances at beginning of year (must equal Part X, line 33, column (A))	4	432	2,383.
5	Net ı	unrealize	d gains (losses) on investments	5		
6	Dona	ated serv	rices and use of facilities	6		
7	Inves	stment e	xpenses	7		
8	Prior	r period a	adjustments	8		
9	Othe	er change	es in net assets or fund balances (explain in Schedule O)	9		0.
10			fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,	10	1 /	L,681.
Pa			icial Statements and Reporting	10	14.	1,001.
. u	<u>, , , , , , , , , , , , , , , , , , , </u>		if Schedule O contains a response or note to any line in this Part XII			
			······································			es No
1	Acco	ounting m	nethod used to prepare the Form 990: Cash X Accrual Other			
	lf the in Sc	e organiz chedule (	ation changed its method of accounting from a prior year or checked 'Other,' explain D.			
28	Were	e the org	anization's financial statements compiled or reviewed by an independent accountant?		2a	Х
		rate bas	k a box below to indicate whether the financial statements for the year were compiled or reviewed is, consolidated basis, or both: te basis Consolidated basis Both consolidated and separate basis	l on a		
	Were	• the ora	anization's financial statements audited by an independent accountant?		2 b	х
•	lf 'Y€	es,' chec s, consol	k a box below to indicate whether the financial statements for the year were audited on a separat idated basis, or both: te basis Consolidated basis Both consolidated and separate basis			
(	: If 'Ye revie	es' to line ew, or co	2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, mpilation of its financial statements and selection of an independent accountant?		2 c	
	in So	chedule (				
38			a federal award, was the organization required to undergo an audit or audits as set forth in the Single d OMB Circular A-133?		3 a	Х
ł			e organization undergo the required audit or audits? If the organization did not undergo the required audit olain why in Schedule O and describe any steps taken to undergo such audits		3 b	
BAA			TEEA0112L 08/03/18		Form 9	<b>90</b> (2018)

SCHEDULE A (Form 990 or 990-EZ)

# **Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. ► Attach to Form 990 or Form 990-EZ.

2018

OMB No. 1545-0047

Open to Public

Departr Interna	nent of the Treasury Revenue Service	► (	Go to <i>www.irs.gov/Fo</i>	rm990 for instructions	and the	latest i	nformation.	Inspection
Name o	of the organization						Employer identific	ation number
Cli	mate Founda						26-207771	
Part				ganizations must o				tions.
The o	<u> </u>		•	For lines 1 through 12,		-	,	
1				nurches described in sect			(i).	
2				Schedule E (Form 990 or				
3				ization described in sec				
4		-	tion operated in conju	unction with a hospital of	describe	d in sec	:tion 170(b)(1)(A)(iii). ⊢	nter the hospital's
-	name, city, a							
5	An organizati	ion operated for b)(1)(A)(iv). (Co	the benefit of a colle mplete Part II.)	ge or university owned	or oper	ated by	a governmental unit de	escribed in
6	A federal, sta	ate, or local gov	ernment or governme	ntal unit described in s	ection 1	70(b)(1)	(A)(∨).	
7	An organization in section 17	on that normally r <b>0(b)(1)(A)(vi).</b> (	receives a substantial p Complete Part II.)	art of its support from a	governm	ental uni	it or from the general pu	blic described
8	A community	trust described	in section 170(b)(1)(	A)(vi). (Complete Part I	l.)			
9		r a non-land-grai	nt college of agriculture	tion 170(b)(1)(A)(ix) operative (see instructions). Enter	the nan	ne, city,		
10	from activitie investment ir June 30, 197	on that normally r s related to its e ncome and unre 5. See <b>section</b> !	receives: (1) more than exempt functions—sub lated business taxable <b>509(a)(2).</b> (Complete F	33-1/3% of its support fr bject to certain exception e income (less section Part III.)	om conti ons, and 511 tax)	ributions (2) no i from bi	more than 33-1/3% of i usinesses acquired by	ts support from gross
11	An organizati	ion organized a	nd operated exclusive	ly to test for public safe	ety. See	sectior	n 509(a)(4).	
12 a	granization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must							)(3). Check the box in
b	Type II. A sup	ft IV, Sections A pporting organiz of the supporting te Part IV, Sect	zation supervised or c organization vested in	ontrolled in connection the same persons that co	with its ontrol or	support manage	ted organization(s), by the supported organizat	having control or ion(s). <b>You</b>
С		,		ion operated in connection olete Part IV, Sections	n with, ai <b>A. D. an</b>	nd functio d E.	onally integrated with, its	supported
d	Type III non-fi	unctionally intog	rated A supporting org	anization operated in cor must satisfy a distribu s A and D, and Part V.	naction	with ite e	supported organization(s	) that is not
е	Check this bo	ox if the organiz	ation received a writte	en determination from t supporting organization	the IRS			
	Enter the number	er of supported	organizations					
g	Provide the follo	wing informatio	n about the supported	d organization(s).				
(	i) Name of supported of	organization	<b>(ii)</b> EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	in your g	s the tion listed overning ment?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
					Yes	No		
(A)								
(B)								
(C)								
(D)								
(E)								
Total								

000	tion A. Fublic Support						
Cale begi	ndar year (or fiscal year nning in) ►	<b>(a)</b> 2014	<b>(b)</b> 2015	<b>(c)</b> 2016	<b>(d)</b> 2017	<b>(e)</b> 2018	<b>(f)</b> Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.')						
2	Tax revenues levied for the organization'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						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support.Subtract line 5from line 4						
Sec	tion B. Total Support	1		1			
begi	ndar year (or fiscal year nning in) ►	<b>(a)</b> 2014	<b>(b)</b> 2015	<b>(c)</b> 2016	<b>(d)</b> 2017	<b>(e)</b> 2018	<b>(f)</b> Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activ	vities, etc. (see ins	structions)			12	
	First five years. If the Form 990 is organization, check this box and	stop here					·····
	tion C. Computation of Pu						
	Public support percentage for 20 Public support percentage from	-					<u> </u>
16a	33-1/3% support test-2018. If t and stop here. The organization	qualifies as a pul	d not check the b plicly supported o	rganization	d line 14 is 33-1/3	5% or more, check	
b	33-1/3% support test–2017. If the and stop here. The organization	ne organization did qualifies as a pu	d not check a box blicly supported c	on line 13 or 16a	a, and line 15 is 3	3-1/3% or more, c	heck this box ·····►
17a	<b>10%-facts-and-circumstances te</b> or more, and if the organization the organization meets the 'facts	meets the 'facts-a	and-circumstance	s' test, check this	box and stop her	e. Explain in Part	VI how
	<b>10%-facts-and-circumstances te</b> or more, and if the organization organization meets the 'facts-an	meets the 'facts-a d-circumstances'	and-circumstance test. The organiza	s' test, check this ation qualifies as	box and stop her a publicly support	e. Explain in Part ed organization.	VI how the
18	Private foundation. If the organi	zation did not che	ck a box on line	13, 16a, 16b, 17a	, or 17b, check th	is box and see ins	tructions 🕨 🗌

Schedule A (Form 990 or 990-EZ) 2018

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

# Section A. Public Support

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Page 2

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.)

<u> </u>	fails to qualify under the te	,,,					
	tion A. Public Support			( ) 0010			
	dar year (or fiscal year beginning in)	<b>(a)</b> 2014	<b>(b)</b> 2015	<b>(c)</b> 2016	(d) 2017	<b>(e)</b> 2018	<b>(f)</b> Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.')	17,509.	3,408.	32,106.	450,648.	459,868.	963,539.
	that are not an unrelated trade	64,630.	20,095.	31,352.	186,721.	15,346.	318,144.
4	or business under section 513. Tax revenues levied for the organization's benefit and either paid to or expended on its behalf.						0.
5	The value of services or facilities furnished by a governmental unit to the organization without charge						0.
	Total. Add lines 1 through 5	82,139.	23,503.	63,458.	637,369.	475,214.	1,281,683.
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons	0.	0.	0.	0.	0.	0.
b	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 upper				0		
	for the year.	0.	0.	0.	0.	0.	0.
-	Add lines 7a and 7b.	0.	0.	0.	0.	0.	0.
	Public support. (Subtract line 7c from line 6.)						1,281,683.
	dar year (or fiscal year beginning in)	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	<b>(e)</b> 2018	(f) Total
	Amounts from line 6	82,139.	23,503.	63,458.	637,369.	475,214.	1,281,683.
	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from						····
b	similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	260.	1.	32.	2.	2.	<u> </u>
	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	260.	1.	32.	2.	2.	<u> </u>
12	Other income. Do not include gain or loss from the sale of						
	čapital assets (Explain in Part VI.) See Part VI					3,332.	3,332.
13	Total support. (Add lines 9,	82,399.	23,504.	63,490.	637,371.		
						478,548. a section 501(c)(3	<u>1,285,312.</u>
14 Sec	Total support. (Add lines 9, 10c, 11, and 12.) First five years. If the Form 990 organization, check this box and tion C. Computation of Pul	is for the organiza stop here blic Support Po	tion's first, second ercentage	d, third, fourth, or	fifth tax year as	478,548. a section 501(c)(3	<u>1,285,312.</u>
14 Sec 15	Total support. (Add lines 9, 10c, 11, and 12.) First five years. If the Form 990 organization, check this box and tion C. Computation of Pul Public support percentage for 20	is for the organiza stop here blic Support Pe 18 (line 8, column	tion's first, second ercentage (f), divided by lin	e 13, column (f)	fifth tax year as	478, 548. a section 501(c)(3	<u>1,285,312.</u>
14 Sec 15 16	Total support. (Add lines 9, 10c, 11, and 12.) First five years. If the Form 990 organization, check this box and tion C. Computation of Pul Public support percentage for 20 Public support percentage from	is for the organiza stop here blic Support Po 118 (line 8, column 2017 Schedule A,	tion's first, second ercentage (f), divided by lin Part III, line 15.	e 13, column (f)	fifth tax year as	478, 548. a section 501(c)(3	1,285,312. <sup>3)</sup> ▶□
14 Sec 15 16	Total support. (Add lines 9, 10c, 11, and 12.) First five years. If the Form 990 organization, check this box and tion C. Computation of Pul Public support percentage for 20	is for the organiza stop here blic Support Po 118 (line 8, column 2017 Schedule A,	tion's first, second ercentage (f), divided by lin Part III, line 15.	e 13, column (f)	fifth tax year as	478, 548. a section 501(c)(3	1,285,312. <sup>3)</sup> ► □ 99.72 %
14 Sec 15 16	Total support. (Add lines 9, 10c, 11, and 12.) First five years. If the Form 990 organization, check this box and tion C. Computation of Pul Public support percentage for 20 Public support percentage from	is for the organiza stop here blic Support Pe 18 (line 8, column 2017 Schedule A, restment Incon	tion's first, second ercentage (f), divided by lin Part III, line 15 ie Percentage	d, third, fourth, or e 13, column (f))	fifth tax year as	478, 548. a section 501(c)(3 	1,285,312. 3) 99.72 % 99.82 % 0.02 %
14 <u>Sec</u> 15 16 <u>Sec</u> 17 18	Total support. (Add lines 9, 10c, 11, and 12.) First five years. If the Form 990 organization, check this box and tion C. Computation of Pul Public support percentage for 20 Public support percentage from tion D. Computation of Inv Investment income percentage f	is for the organiza stop here blic Support Pe 18 (line 8, column 2017 Schedule A, restment Incon or 2018 (line 10c, rom 2017 Schedul	tion's first, second ercentage (f), divided by lin Part III, line 15 te Percentage column (f), divided e A, Part III, line	d, third, fourth, or e 13, column (f)) d by line 13, colu	fifth tax year as	478,548. a section 501(c)(3 	1,285,312. 3) 99.72 % 99.82 % 0.02 % 0.18 %
14 <u>Sec</u> 15 16 <u>Sec</u> 17 18	Total support. (Add lines 9, 10c, 11, and 12.) First five years. If the Form 990 organization, check this box and tion C. Computation of Pul Public support percentage for 20 Public support percentage from tion D. Computation of Inv Investment income percentage f	is for the organiza stop here blic Support Pe 18 (line 8, column 2017 Schedule A, restment Incon or 2018 (line 10c, rom 2017 Schedul- the organization di	tion's first, second ercentage (f), divided by lin Part III, line 15 te Percentage column (f), divided e A, Part III, line d not check the bo	d, third, fourth, or e 13, column (f)) d by line 13, colu 17 ox on line 14, and	fifth tax year as mn (f))	478,548. a section 501(c)(3 	1,285,312. 3) 99.72 % 99.82 % 0.02 % 0.18 % d line 17
14 <u>Sec</u> 15 16 <u>Sec</u> 17 18 19a	Total support. (Add lines 9, 10c, 11, and 12.) First five years. If the Form 990 organization, check this box and tion C. Computation of Pul Public support percentage for 20 Public support percentage from tion D. Computation of Inv Investment income percentage f Investment income percentage f 33-1/3% support tests-2018. If	is for the organiza stop here blic Support Pe 18 (line 8, column 2017 Schedule A, restment Incon or 2018 (line 10c, rom 2017 Schedul- the organization di this box and stop the organization di	tion's first, second ercentage (f), divided by lin Part III, line 15 te Percentage column (f), divided e A, Part III, line d not check the bo here. The organiz d not check a box	d, third, fourth, or e 13, column (f)) d by line 13, colu 17 ox on line 14, and zation qualifies a on line 14 or line	fifth tax year as mn (f)) d line 15 is more s a publicly suppo e 19a, and line 16	478,548. a section 501(c)(3 15 16 17 18 than 33-1/3%, an orted organization 5 is more than 33-	1,285,312. 3) 99.72 % 99.82 % 0.02 % 0.18 % d line 17 
14 <u>Sec</u> 15 16 <u>Sec</u> 17 18 19a b	Total support. (Add lines 9, 10c, 11, and 12.) First five years. If the Form 990 organization, check this box and tion C. Computation of Pull Public support percentage for 20 Public support percentage from tion D. Computation of Inv Investment income percentage f 33-1/3% support tests–2018. If is not more than 33-1/3%, check 33-1/3% support tests–2017. If the support tests–2017.	is for the organiza stop here blic Support Pe 18 (line 8, column 2017 Schedule A, restment Incom or 2018 (line 10c, rom 2017 Schedul- the organization di this box and stop the organization di 5, check this box a	tion's first, second ercentage (f), divided by lin Part III, line 15. <b>De Percentage</b> column (f), divided e A, Part III, line d not check the bo here. The organized not check a box nd stop here. The	d, third, fourth, or e 13, column (f)) d by line 13, colu 17 ox on line 14, and zation qualifies a on line 14 or line organization qua	fifth tax year as mn (f)). d line 15 is more s a publicly suppo e 19a, and line 16 alifies as a publicl	478,548. a section 501(c)(3 15 16 17 18 than 33-1/3%, an orted organization 5 is more than 33- y supported organ	1,285,312. 3) 99.72 % 99.82 % 0.02 % 0.18 % d line 17 

### Part IV Supporting Organizations

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

# Section A. All Supporting Organizations

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

6

7

8

9a

9b

9c

10a

10b

Yes

1

2

3a

3b

3c

4a

Δh

No

		Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?			
a 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>b</b> A family member of a person described in (a) above?	11b		
c 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		

# Section B. Type I Supporting Organizations

- 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.
- 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.*

#### Section 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 <b>Part VI</b> how control or management of the			
	supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1		

### Section 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 <b>Part VI</b> how the organization maintained a close and continuous working relationship with the supported organization(s).			
	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 <b>Part VI</b> the role the organization's supported organizations played			
	in this regard.	3		

# Section 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).
  - a 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.*
  - c The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).

#### 2 Activities Test. Answer (a) and (b) below.

- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If 'Yes,' then in **Part VI identify those supported** organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- **b** Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? *If 'Yes,' explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.*
- 3 Parent of Supported Organizations. Answer (a) and (b) below.
- a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *Provide details in Part VI.*
- **b** Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If 'Yes,' describe in **Part VI** the role played by the organization in this regard.

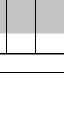
Yes

1

2

No

26-2077719



Yes

2a

2b

3a

3h

No

1	Check here if the organization satisfied the Integral Part Test as a qualifying trust <b>instructions.</b> All other Type III non-functionally integrated supporting organization	t on N ns mu	ov. 20, 1970 (explain ir st complete Sections A	n Part VI). <b>See</b> through E.
Sec	tion 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		
Sec	tion 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):			
â	Average monthly value of securities	1a		
ł	Average monthly cash balances	1b		
	: Fair market value of other non-exempt-use assets	1c		
C	I Total (add lines 1a, 1b, and 1c)	1d		
e	e Discount claimed for blockage or other factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sec	tion 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	<b>Distributable Amount.</b> 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-functionally integrated Type III supporting organization (see instructions).

BAA

Schedule A (Form 990 or 990-EZ) 2018

Part V Type III Non-Functionally Integrated 509(a)(3) Su Section D – Distributions			Current Year
1 Amounts paid to supported organizations to accomplish exempt pu	rnoses		eurient reur
<ul> <li>Amounts paid to supported organizations to decomprish exempt purposes of in excess of income from activity</li> </ul>		IS,	
3 Administrative expenses paid to accomplish exempt purposes of su	pported organizations		
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 in <b>Part VI</b> ). See instructions.	on is responsive (provide	e details	
9 Distributable amount for 2018 from Section C, line 6			
10 Line 8 amount divided by line 9 amount			
Section E – Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
1 Distributable amount for 2018 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2018 (reasonable cause required – explain in Part VI). See instructions.			
<b>3</b> Excess distributions carryover, if any, to 2018			
a From 2013			
<b>b</b> From 2014			
c From 2015			
<b>d</b> From 2016			
e From 2017			
f Total of lines 3a through e			
<b>g</b> 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			
<b>b</b> Applied to 2018 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2018, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
<b>6</b> Remaining underdistributions for 2018. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7 Excess distributions carryover to 2019. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2014			
b Excess from 2015			
c Excess from 2016			
d Excess from 2017			
e Excess from 2018			

BAA

Schedule A (Form 990 or 990-EZ) 2018

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.) Part VI

# Part III, Line 12 - Other Income

Nature and Source	2018	2017	2016	2015	2014
Total	<u>\$ 3,332.</u> \$ 3,332.	\$ 0.	<u>\$0.</u>	\$ 0.	\$ 0.

26-2077719

2018

# Schedule of Contributors

► Attach to Form 990. Form 990-EZ, or Form 990-PF. ► Go to www.irs.gov/Form990 for the latest information.

Department of the Treasury Internal Revenue Service Name of the organization

Name of the organization		Employer identification number
Climate Foundation		26-2077719
Organization type (check one):		
Filers of:	Section:	
Form 990 or 990-EZ	$\overline{\mathrm{X}}$ 501(c)( 3) (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 priv	ate foundation
	501(c)(3) taxable private foundation	

Check if your organization is covered by the General Rule or a Special Rule.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

#### General Rule

X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

#### Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33-1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

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 crueity 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 General Rule 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).

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

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

SCHEDULE D (Form 990)	90) ► 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. ft <sup>the Treasury</sup> ► Co to www irs gov/Form900 for instructions and the latest information				
Internal Revenue Service Name of the organization	rnal Revenue Service				Inspection dentification number
Climate I	Foundation tions Maintaining Dono	or Advised Funds or Other S	Similar Funds or	26-207	
Complete	if the organization ans	wered 'Yes' on Form 990, P	,	<u></u>	
1 Total number at e	end of year	(a) Donor advised fund	ls	(b) Funds and	other accounts
	ntributions to (during year).				
	ants from (during year).				
	at end of year				
		nor advisors in writing that the ass organization's exclusive legal con			Yes No
for charitable pur	poses and not for the benefi	rs, and donor advisors in writing th t of the donor or donor advisor, or	for any other purpos	se conferring	
		·			Yes No
	tion Easements.				
		wered 'Yes' on Form 990, P y the organization (check all that a			
	of land for public use (e.g.,	· · · · _	Preservation of a hist	orically importa	nt land area
	natural habitat		Preservation of a cert	5 1	
	of open space				
	through 2d if the organization	held a qualified conservation contribu	tion in the form of a c	onservation ease	ement on the
				Held at the	End of the Tax Year
				-	
Ũ		ments.			
		fied historic structure included in (	· · · · · · · · · · · · · · · · · · ·	С	
structure listed in	the National Register	n (c) acquired after 7/25/06, and n		-	20
tax year 🕨		-	erriniated by the organ	lization uunny ti	IC
		ervation easement is located ►			
and enforcement	of the conservation easeme	garding the periodic monitoring, ir nts it holds?			Yes No
6 Staff and volunteer ►	r hours devoted to monitoring,	inspecting, handling of violations, and	d enforcing conservation	on easements di	uring the year
7 Amount of expense ►\$	es incurred in monitoring, insp	ecting, handling of violations, and enf	forcing conservation ea	asements during	the year
8 Does each conse and section 170(h	rvation easement reported o )(4)(B)(ii)?	n line 2(d) above satisfy the requir	ements of section 17	70(h)(4)(B)(i)	Yes No
9 In Part XIII, descril include, if applica conservation ease	able, the text of the footnote	s conservation easements in its rever to the organization's financial state	nue and expense state ements that describe	ement, and balan is the organizat	ce sheet, and ion's accounting for
Part III Organizat Complete	tions Maintaining Colle if the organization ans	ections of Art, Historical Tre wered 'Yes' on Form 990, P	asures, or Other art IV, line 8.	r Similar Ass	sets.
art, historical treas	sures, or other similar assets h	r SFAS 116 (ASC 958), not to report and for public exhibition, education, or notial statements that describes the	research in furtheran	tement and ball ce of public serv	ance sheet works of ice, provide,
historical treasures following amount	s, or other similar assets held f s relating to these items:	r SFAS 116 (ASC 958), to report in or public exhibition, education, or res	earch in furtherance o	f public service,	e sheet works of art, provide the
		line 1			
(II) Assets includ	iea in Form 990, Part X		·····	▶\$	
2 If the organization amounts required	received or held works of art, I to be reported under SFAS	nistorical treasures, or other similar a 116 (ASC 958) relating to these ite 1	ssets for financial gair ems:	n, provide the fol	iowing
		• • • • • • • • • • • • • • • • • • • •		•	
BAA For Paperwork R	Reduction Act Notice, see the	e Instructions for Form 990.	TEEA3301L 10/10/18	Sched	lule D (Form 990) 2018

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

Schedule D (Form 990) 2018 Clima				26-207		Page 2
Part III Organizations Mainta	ining Colle	ctions of Art, Histo	orical Treasures, or	Other Similar Ass	<b>ets</b> (continu	ied)
<b>3</b> Using the organization's acquisition items (check all that apply):	, accession, ar	d other records, check a	ny of the following that ar	e a significant use of its o	collection	
<b>a</b> Public exhibition		<b>d</b> Loan	or exchange programs			
<b>b</b> Scholarly research		e Other				
c Preservation for future gener						
4 Provide a description of the organiz Part XIII.						
5 During the year, did the organiza to be sold to raise funds rather the sold to raise funds the the sold to raise funds rather the sold to rather the sold to raise funds rather the sold to rather the sold to rather the sold to rather the sold to raise funds rather the sold to rathe	ition solicit or	receive donations of ar	t, historical treasures, o	r other similar assets	Yes	No
Part IV Escrow and Custodia						
line 9, or reported an	amount on	Form 990, Part X,	line 21.			,
<b>1 a</b> Is the organization an agent, trus on Form 990, Part X?	stee, custodia	n or other intermediary	for contributions or othe	er assets not included	Yes	No
<b>b</b> If 'Yes,' explain the arrangement						
		·	0		Amount	
<b>c</b> Beginning balance				1c		
<b>d</b> Additions during the year				1d		
e Distributions during the year						
<b>f</b> Ending balance						
2 a Did the organization include an a				,		No
<b>b</b> If 'Yes,' explain the arrangement	in Part XIII. (	Check here if the explai	nation has been provide	d on Part XIII	· · · · · · · · · · · · L	
					10	
Part V Endowment Funds. C	omplete if i (a) Current				(e) Four year	a haak
<b>1 a</b> Beginning of year balance	(a) Current	year (D) Prior yea	(C) TWO years back	(u) Three years back	(e) rour year	S DACK
<b>b</b> Contributions						
c Net investment earnings, gains, and losses						
d Grants or scholarships						
e Other expenditures for facilities and programs						
f Administrative expenses						
g End of year balance						
2 Provide the estimated percentag		nt year end balance (lir	ne 1g, column (a)) held a	as:		
a Board designated or quasi-endowm		<u> </u>				
<b>b</b> Permanent endowment	%	0,				
c Temporarily restricted endowmen		6 Tuol 100%				
The percentages on lines 2a, 2b, a						
<b>3a</b> Are there endowment funds not in to organization by:	the possession	of the organization that a	are held and administered	for the	Yes	No
(i) unrelated organizations					3a(i)	
(ii) related organizations					3a(ii)	<u> </u>
<b>b</b> If 'Yes' on line 3a(ii), are the rela					3b	<u> </u>
4 Describe in Part XIII the intended					11	<u>I</u>
Part VI Land, Buildings, and	Equipment	•				
Complete if the organ			m 990, Part IV, line	11a. See Form 99	0, Part X, Iii	ne 10.
Description of property		(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	<b>(d)</b> Book va	alue
<b>1 a</b> Land		. ,	1,000.		1	,000.
<b>b</b> Buildings			820,482.	118,337.		,145.
c Leasehold improvements						
<b>d</b> Equipment	[		5,595.	560.	5	,035.
e Other			12,845.	12,845.		0.
Total. Add lines 1a through 1e. (Colum	nn (d) must eq	ual Form 990, Part X,	column (B), line 10c.)	▶		,180.
BAA				Sched	ule D (Form 990	J) 2018

Part VII	Investments – Other Securities.		N/A	
	Complete if the organization answered			
	ription of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-	of-year market value
. ,	ial derivatives			
.,	-held equity interests			
(3) Other				
(A)				
(B)				
<u>(C)</u>				
(D)				
<u>(E)</u>				
<u>(F)</u>				
<u>(G)</u>				
<u>(H)</u>				
<u>( )</u>				
	nn (b) must equal Form 990, Part X, column (B) line 12.) 🕨		)T / 7	
Part VIII	Discrete Structure Program Related. Complete if the organization answered	'Yes' on Form 990	N/A Part IV_line 11c_See Form 9	90 Part X line 13
	(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end	
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
Total. (Colum	nn (b) must equal Form 990, Part X, column (B) line 13.) 🕨			
Part IX	Other Assets.	N/A		
	Complete if the organization answered	scription	J, Part IV, line 11d. See Form S	(b) Book value
(1)	(a) De:	scription		
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9) (10)				
		$\sum i = 15$		
	lumn (b) must equal Form 990, Part X, column (b	3) line 15.)	•••••••••••••••••••••••••••••••••••••••	
Part X	Other Liabilities. Complete if the organization answered 'Yes' on F	orm 990 Part IV line 1	1e or 11f See Form 990 Part X line 25	
	(a) Description of liability	(b) Book value		•
(1) Fede	ral income taxes			
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10) (11)				
	nn (b) must equal Form 990, Part X, column (B) line 25.)	•		
	r uncertain tax positions. In Part XIII, provide the text of the for		nancial statements that reports the organization's	liability for uncertain
—• ∟iabiiity 10	י מהססוגמות נמג פססונוסווס. ווד מוג אות, פרטעועל נוול נכאג טר נוול 10	otholo to the organization 5 m	nanoiai statomonts that repults the organization s	maxing for uncortalli

Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII.

Schedule D (Form 990) 2018 Climate Foundation	26-2077719	Page 4
Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue pe	r Return. N/A	
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.		
1 Total revenue, gains, and other support per audited financial statements	1	
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a Net unrealized gains (losses) on investments 2a		
b Donated services and use of facilities		
c Recoveries of prior year grants 2c		
d Other (Describe in Part XIII.)		
e Add lines <b>2a</b> through <b>2d</b>	2e	
3 Subtract line 2e from line 1	3	
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b Other (Describe in Part XIII.)		
c Add lines <b>4a</b> and <b>4b</b>	4c	
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses	per Return. N/A	
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.		
1 Total expenses and losses per audited financial statements	1	
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a Donated services and use of facilities 2a		
b Prior year adjustments		
c Other losses.		
d Other (Describe in Part XIII.)		
e Add lines 2a through 2d	2e	
3 Subtract line 2e from line 1	3	
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b Other (Describe in Part XIII.)		
c Add lines 4a and 4b		
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	
Part XIII Supplemental Information.		

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

# SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

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

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number 26-2077719

# Climate Foundation

## Form 990, Part III, Line 4a - Program Service Accomplishments

Climate Foundation further has been researching and designing Marine Permaculture technologies that can restore overturning circulation in the ocean and provide food, feed, fertilizer and biofuels to ocean countries globally. It can also reverse coral bleaching in key areas and potentially mitigate the worst effects of climate change in oceanic and coastal environments.. Marine Permaculture grows seaweed, fish habitat and fish feed for growing hundreds of tons of fish and thousands of tons of marine biomass each year per array. Over the past several years, Climate Foundation has observed the mass coral bleaching globally. The coral bleaching observed in Hawaii in 2015 was the worst bleaching event in the last half a century on Hawaii. Climate Foundation conducted planning meetings with the Honolulu SeaWater Air Conditioning corporation, planning the development of a reef cooling system for protecting coral reef from peak summer temperatures. This system will utilize the outfall temperatures of cool seawater without transferring nutrients. A successful demonstration of this infrastructure will pave the way to protect high-value reefs across the tropical oceans.

# Form 990, Part VI, Line 11b - Form 990 Review Process

Members of the governing body are given copies of the 990 by email for review before filing the return.

# Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available

The organization's form 990 filing are available on written request.

Climate Foundation

# Name of the organization Employer identification number 26-2077719

# Form 990, Part IX, Line 11g Other Fees For Services

	(A)		(B)	(C)		(D)	
	Total		Program Services	Manageme: <u>&amp; Genera</u>		 Fund- raising	
	437,868.	_	437,868.	·			
Total <u>\$</u>	437,868.	\$	437,868.	\$	0.	\$	0.