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DLN: 93493222013480

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

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

OMB No 1545-0047

Open to Public

A Fo	r the :	2009 cale	ndar yea	r, or tax year beginning (01-01-2009	and ending 12-31-200	9		•
B Ch	eck ıf a	pplicable p	lease	C Name of organization Climate Solutions				D Employer	identification number
☐ Ad	dress ch	ange	se IRS abel or					91-1123	
∏ Na	me cha	nge p	rint or ype. See	Doing Business As				E Telephone	
┌ Ind	ial retu	rn S	pecific	Number and street (or P O	box if mail is	not delivered to street addre	ss) Room/suite	(360) 35	
Те	mınate	d t i	nstruc- ions.	219 Legion Way SW Suite 2	201			G Gross recei	ots \$ 1,765,701
┌ Am	ended	return		City or town, state or coun	ntry, and ZIP +	4		i	
ГАр	olication	n pending		Olympia, WA 98501					
		-	F Nan	ne and address of princip	oal officer		H(a) is th	■ ıs a group ret	urn for
			Gregg S					ites?	⊤Yes ▽ No
				gion Way SW Suite 201 a, WA 98501			H(h) Are a	II affiliates incl	uded? Yes V No
							1 ' '		st (see instructions)
I Ta	x-exem	npt status	501(c))(3) ◀ (insert no)	47(a)(1) or 「	527		up exemption	
J W	ebsite	e: ► www.c	lımateso	olutions org					
K For	n of or	ganization 🔽	Corporat	ion Trust Association	Other 🕨		L Year of fo	rmation 1998	M State of legal domicile
		_			other r		1	mation 1330	WA WA
Pa	rt I		•	. ,					
	1	•		e organization's mission accelerate practical and	_		ng by galvanız	ıng leadershı	p, growing investment and
ቋ		bridging d			•				
ĕ									
Governance									
Š	2	Check thi	s box ►	tf the organization disc	ontinued its	operations or disposed	of more than	25% of its ne	et assets
26	3	Number o	f voting r	nembers of the governing	g body (Part	VI, line 1a)			313
Activities	4	Number o	fındepen	ident voting members of	the governin	g body (Part VI, line 11)		413
Ĭ	5	Total num	ber of en	nployees (Part V , line 2a	1)			519	
្ន	6	Total num	ber of vo	lunteers (estimate if nec	essary) .			6	
		_		ted business revenue fro	•		7a 0		
	b	Net unrela	ated busi	ness taxable income from	m Form 990-	T, line 34			7b
		0			4.1.		Prio	or Year	Current Year
ā	8			d grants (Part VIII, line		1,609,969			
Ravenue	9 10			revenue (Part VIII, line ne (Part VIII, column (A				156,434 4,859	<u> </u>
Æ	11			art VIII, column (A), line				19,314	· ·
	12		=	dd lines 8 through 11 (m	e	15,511	33,633		
		12) .			<u> </u>			1,790,576	1,707,155
	13			ar amounts paid (Part IX,				0	
	14			r for members (Part IX, o			_		0
83	15	Salaries, 10)	, other co	ompensation, employee b	penefits (Pari	: IX, column (A), lines!	5-	1,048,688	1,311,279
Š.	16a	•	onal fund	raising fees (Part IX, col	lumn (A), line	e 11e)			0
Expenses	ь			enses (Part IX, column (D), lır		•			
Ш	17			(Part IX, column (A), line				593,841	674,663
	18	Total exp	penses /	Add lines 13–17 (must e	equal Part IX	, column (A), line 25)		1,642,529	1,985,942
	19	Revenue	less exp	enses Subtract line 18	from line 12			148,047	-278,787
\$ 8 8								g of Current	End of Year
Net Assets or Fund Balances	30	T-4-1-:	note /D-	+ V line 15\			 	1 1 4 6 0 4 E	
A B	20 21			t X, line 16)				1,146,845 75,041	<u> </u>
製造	22			d balances Subtract line				1,071,804	
Pa	it II		ture Blo						,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
				rjury, I declare that I have ex	amined this ret	urn, including accompanying	schedules and s	tatements, and	to the best of my knowledge
		and belief,	it is true,	correct, and complete Declara	ation of prepare	r (other than officer) is base	d on all informat	ion of which pre	parer has any knowledge
Sigr		*****	:				2010	-08-10	
Her			re of office	er			Date	-00-10	
		Grega S	Small Exec	utive Director					
_				e and title					
	_	Preparer's					Check If		entifying number
Paid		signature		1cGinness			self- empolyed 🕨 🦵	(see instruction	ons)
Prep	arer's	1		HUEBNER DOOLEY & MC	•	· · · · · · · · · · · · · · · · · · ·			
Use	Only	ıf self-empl address, ar		1424 NE 155TH ST STE 1		EIN ▶			
				SHORELINE, WA 981557	Phone no 🕨 (206) 522-8000				
May	the IR	S discuss	this retu	rn with the preparer show		ee instructions)			⊤Yes

Part III Statement of Program Service Accomplishments

 Briefly describe the organization 	ı′s	missior
---	-----	---------

The mission is to accelerate practical and profitable solutions to global warming by galvanizing leadership, growing investment and bridging divides

2	-	· -	nt program services during	the year which were not listed on	┌ Yes ┌ No
	If "Yes," describe	these new services on Sch	nedule O		
3			ake significant changes in	how it conducts, any program	┌ Yes ┌ No
	If "Yes," describe	these changes on Schedul	e O		
4	Section 501(c)(3)	and 501(c)(4) organization		n's three largest program service) trusts are required to report the program service reported	
4a	(Code) (Expenses \$	1,616,059 including grant	s of \$) (Revenue	\$ 1,665,944)
		lture, environmentalists, govern	natives in the Pacific Northwest, v	while supporting and building a strong ba to create practical and profitable climate	
4b	(Code) (Expenses \$	ıncludıng grants	s of \$) (Revenue	\$)
	-				
4c	(Code) (Expenses \$	including grants	of \$) (Revenue	\$)
	(, (, , , , , , , , , , , , , , , , , , , ,	,
4d	Other program s	ervices (Describe in Sche	dule O)		
	(Expenses \$	ınclu	ding grants of \$) (Revenue \$)
4e	Total program se	rvice expenses►\$	1,616,059		

art IV	Chec	klist o	f Dec	uired	Sche	dules
	CITEC	NIISL U	I Keu	ıuıı cu	30116	uuics

			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	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors? 🕏	2	Yes	
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		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4	Yes	
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts where 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		No
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		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 😼	8		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in term, permanent,or quasiendowments? If "Yes," complete Schedule D, Part V	10		No
11	Is the organization's answer to any of the following questions "Yes"? If so,complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	11	Yes	
	◆ Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.			
	◆ 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.			
	◆ 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.			
	◆ 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.			
	◆ Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.			
	◆ 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? If "Yes," complete Schedule D, Part X.			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12	Yes	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional 12A No	ļ	Į	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		Νο
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S? <i>If</i> " <i>Yes," complete Schedule F, Part II</i>	15		No
16	Did the organization report on Part IX, column (A), line 3, more than $$5,000$ of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Part III	16		No
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		No
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	Yes	
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		Νο
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		No

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Νo
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		No
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 questions 24b-24d and complete Schedule K. If "No," go to line 25	24a		No
ь	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
с	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		Νo
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
25a	Section 501(c)(3) and 501(c)(4) 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		No
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		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III </i>	27		No
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			
		28a		Νo
	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes,"</i> complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or owner? <i>If</i> " <i>Yes,"</i> complete Schedule L, Part <i>IV</i>	28c		Νο
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Νo
30	conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		Νo
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</i> "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		No
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35		Νο
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		Νο
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	38	Yes	

art V	Statements	Regarding	Other IRS	Filings a	and Tax	Compliance
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			Yes	No						
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable									
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0									
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c	Yes							
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									
Ь	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)	2b	Yes							
За	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		Νο						
ь	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		No						
l a										
b	If "Yes," enter the name of the foreign country ▶									
ā	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No						
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νo						
c	c If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?									
ia	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?	6a		Νo						
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		Νo						
7	Organizations that may receive deductible contributions under section 170(c).	_								
	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		N o						
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		Νο						
	file Form 8282?	7c		Νo						
	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal									
	benefit contract?	7e		Νo						
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Νo						
_	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		Νo						
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		Νo						
3	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?			No						
•	Sponsoring organizations maintaining donor advised funds.	8		No						
	Did the organization make any taxable distributions under section 4966?	9a		Νo						
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		No						
LO	Section 501(c)(7) organizations. Enter									
а	Initiation fees and capital contributions included on Part VIII, line 12 10a									
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities									
L1	Section 501(c)(12) organizations. Enter									
а	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)									
L2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		Νo						
	If "Yes," enter the amount of tax-exempt interest received or accrued during the									
	year 12b									

1402 Third Avenue Ste 1305

Seattle, WA 98101 (206) 443-9570

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

Se	ction A. Governing Body and Management			
			Yes	No
4	Enterative constructive for the constructive of the constructive o			
1a b	Enter the number of voting members of the governing body 1a 13 Enter the number of voting members that are independent 1b 13			
2 2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any			
2	other officer, director, trustee, or key employee?	2		Νo
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		Νo
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		Νο
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		Νo
6	Does the organization have members or stockholders?	6		Νo
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a		Νο
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		Νο
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
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		N o
Se	ction B. Policies (This Section B requests information about policies not required by the Internal	_		
	venue Code.)			
			Yes	No
	Does the organization have local chapters, branches, or affiliates?	10a	Yes	
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b	Yes	
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11	Yes	
11A	Describe in Schedule O the process, if any, used by the organization to review the Form 990			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		Νo
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13		Νο
14	Does the organization have a written document retention and destruction policy?	14	Yes	
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	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line a or b, 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		No
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its	104		110
	participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		Νo
Se	ction C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed▶			
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you make these available. Check all that apply Own website. Another's website. Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the	ne orda	ınızatıor	n)
	Dir of Fin and Admin	· gu		

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

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. Use Schedule J-2 if additional space is needed.

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's current key employees. 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, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- ◆ List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

Check this box if the organization did n	ot compens	ate any	curr	ent d	r fo	rmer o	ffice	r, dırector, trustee o	or key employee		
(A) Name and Title	(B) A verage hours	Posi t	(C tion (hat a	che		I		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other	
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations	
Steve Sundquist Director		х						0	0	0	
Philip Gerity Treasurer		х		х				0	0	0	
Mıchael Butler Dırector		Х						0	0	0	
Marc Daudon Director		Х						0	0	0	
Liz Thomas Director		х						0	0	0	
James Dailey Secretary		х		х				0	0	0	
Jabe Blumenthal President		х		х				0	0	0	
Heidi Wills Director		х						0	0	0	
Gregg Small Executive Direc	40 00				Х			82,970	0	6,833	
Dorthe Nielsen Director		х						0	0	0	
Ashley Henry Director		х						0	0	0	
Anne McGuire Director		х						0	0	0	
Alex Loeb President		х		х				0	0	0	
Aiko Schaefer Director		х						0	0	0	

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

	(A) Name and Title	(B) A verage hours per		((ition (that a				1	(D) Reportable compensation from the		(E) Reportable compensation from related		(F) Estimate amount of o compensat	
		week	Individual trustee or director				Highest compensated employee	Former	organiza		organizations (W- 2/1099- MISC)	o	from t rganızatı relatı organıza	:he on and ed
					_									
					-									
					-									
								<u> </u>		02.070				6.027
1b 2	Total number of individuals (incl \$100,000 in reportable compen		limited t	to the	se I	ıste			no receive	82,970 d more th				6,833
													Yes	No
3	Did the organization list any fori on line 1a? <i>If</i> "Yes," complete Sch					key •	emplo	yee, •	or highes	t compen:	sated employee	3		No
4	For any individual listed on line 3 organization and related organiza													
	ındıvıdual			•	•	•	• •	•				4		No
5	Did any person listed on line 1a rendered to the organization? <i>If</i>			•					elated org	anızatıon • •	for services	5		No
S	ection B. Independent Con	tractors												
1	Complete this table for your five \$100,000 of compensation from	highest comp		dınde	pen	dent	contra	ctor	rs that rec	eıved mo	re than			
		(A) ne and business								Desc	(B) cription of services		(C Comper	
												+		

2 Total number of independent contractors (including but not limited to those listed above) who received more than

\$100,000 in compensation from the organization $\blacktriangleright 0$

Form 9		,				Page 9
Part \	<u>/##1</u>	Statement of Revenue	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513, or 514
<u> </u>	1a	Federated campaigns 1a				314
Contributions, gifts, grants and other similar amounts	ь	Membership dues 1b				
g€	c	Fundraising events 1c 156,168				
£ €	d	Related organizations 1d				
હું ≣	e	Government grants (contributions) 1e				
tion F	f	All other contributions, gifts, grants, and similar amounts not included above				İ
ë E	g	Noncash contributions included in				
호		lines 1a-1f \$				
ပြွန်	h	Total. Add lines 1a-1f	1,521,219			
<u> </u>		Business Code				
Program Service Revenue	2a	Service fees	144,725	144,725		
æ	Ь					
92	c					
<u>.</u>	d					
Ē	e					
Z .	f	All other program service revenue				
Ě	g	Total. Add lines 2a-2f	144,725			
	3	Investment income (including dividends, interest				
		and other similar amounts)	5,378	5,378		
	4	Income from investment of tax-exempt bond proceeds	0			
	5	Royalties	0			
	6-	(i) Real (ii) Personal				
	6а ь	Gross Rents Less rental				
		expenses Rental income				
	C	or (loss)				
	d	Net rental income or (loss)	0			
	7a	(i) Securities (ii) Other Gross amount				
	"	from sales of assets other				
	Ь	than inventory Less cost or				
	•	other basis and sales expenses				
	c	Gain or (loss)				
	d	Net gain or (loss)	0			
	8a	Gross income from fundraising				
Other Revenue		events (not including \$ 94,379				
क }:		of contributions reported on line 1c)				
ď		See Part IV , line 18 a 156,168				
her	ь	Less direct expenses b 58,546				
ᅙ	c	Net income or (loss) from fundraising events	35,833	35,833		
	9a	Gross income from gaming activities				
		See Part IV, line 19				
	ь	Less direct expenses b				
	c	Net income or (loss) from gaming activities	0			
	10a	Gross sales of inventory, less				
		returns and allowances .				
	Ь	Less cost of goods sold b				
	c	Net income or (loss) from sales of inventory	o			
		Miscellaneous Revenue Business Code			<u> </u>	
	11a]			
	ь					
	c					
	d	All other revenue				
	e	Total. Add lines 11a-11d	0			
		·				
	12	Total revenue. See Instructions	l			i l

185,936

1,707,155

Part IX Statement of Functional Expenses

	Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).								
			(B)	(D).	(D)				
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	Fundraising expenses				
1	Grants and other assistance to governments and organizations in the U S $$ See Part IV $$ line 21 $$	0							
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	0							
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	0							
4	Benefits paid to or for members	0							
5	Compensation of current officers, directors, trustees, and key employees	89,803	73,073	8,365	8,365				
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							
7	Other salaries and wages	1,015,762	796,808	88,145	130,809				
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	6,354	4,525	775	1,054				
9	Other employee benefits	112,028	79,882	13,628	18,518				
10	Payroll taxes	87,332	69,860	4,710	12,762				
11	Fees for services (non-employees)								
а	Management	0							
ь	Legal	0							
c	Accounting	9,400		9,400					
d	Lobbying	36,000	36,000	,,,,,					
e	Professional fundraising See Part IV, line 17	0	,						
f	Investment management fees	0							
g g	Other	304,140	302,781	583	776				
12	Advertising and promotion	0	302,701	303					
13	Office expenses	49,480	40,072	4,723	4,685				
14	Information technology	0	10,072	1,723	1,003				
15	Royalties	0							
16	Occupancy	111,280	81,601	12,923	16,756				
17	Travel	51,841	46,645	2,568	2,628				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0	40,043	2,300	2,020				
19	Conferences, conventions, and meetings	43,787	42,662	400	725				
20	Interest	0	,						
21	Payments to affiliates	0			_				
22	Depreciation, depletion, and amortization	8,434		8,434					
23	Insurance	3,991	1,471	2,241	279				
24	Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)	3,551	1,171	2,2.11					
а	Printing and Publications	20,950	16,827	330	3,793				
b	Postage and Shipping	6,077	4,518	909	650				
С	MISCELLANEOUS	14,068	4,752	5,434	3,882				
d	Dues and subscriptions	15,215	14,582	267	366				
e									
f	All other expenses	0							
25	Total functional expenses. Add lines 1 through 24f	1,985,942	1,616,059	163,835	206,048				
26	Joint costs. Check here F if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation	_,	-,,						

Pa	rt X	Balance Sheet				
				(A)		(B)
	١,			Beginning of year	_	End of year
	1	Cash—non-interest-bearing		237,616	1	291,528
	2	Savings and temporary cash investments		751,816	2	505,067
	3	Pledges and grants receivable, net		100,000	3	0
	4	Accounts receivable, net		12,780	4	26,143
	5	Receivables from current and former officers, directors, trustees, ke highest compensated employees Complete Part II of	ey employees, and			
		Schedule L			5	0
	6	Receivables from other disqualified persons (as defined under section persons described in section $4958(c)(3)(B)$ Complete Part II of	on 4958(f)(1)) and			
		Schedule L			6	0
ssets	7	Notes and loans receivable, net		7	0	
8	8	Inventories for sale or use			8	0
⋖	9	Prepaid expenses and deferred charges		30,558	9	36,333
	10a	Land, buildings, and equipment cost or other basis <i>Complete Part VI of Schedule D</i>	42,723 10a			
	ь	Less accumulated depreciation	10ь 27,045	14,075	10c	15,678
	11	Investments—publicly traded securities			11	0
	12	Investments—other securities See Part IV, line 11			12	0
	13	Investments—program-related See Part IV, line 11			13	0
	14	Intangible assets			14	0
	15	Other assets See Part IV, line 11			15	0
	16	Total assets. Add lines 1 through 15 (must equal line 34)		1,146,845	16	874,749
	17	Accounts payable and accrued expenses .		7,338	17	6,463
	18	Grants payable			18	
	19	Deferred revenue	ed revenue			
_	20	Tax-exempt bond liabilities	ax-exempt bond liabilities			
- Š	21	Escrow or custodial account liability Complete Part IV of Schedule D			21	
Liabilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified				
- =		persons Complete Part II of Schedule L			22	
	23	Secured mortgages and notes payable to unrelated third parties .			23	
	24	Unsecured notes and loans payable to unrelated third parties .			24	
	25	Other liabilities Complete Part X of Schedule D		67,703	25	75,269
	26	Total liabilities. Add lines 17 through 25		75,041	26	81,732
- N		Organizations that follow SFAS 117, check here ▶ 🔽 and complete	e lines 27			
Ф		through 29, and lines 33 and 34.				
an	27	Unrestricted net assets		1,026,804	27	575,046
Fund Balance	28	Temporarily restricted net assets		45,000	28	217,971
Ξ	29	Permanently restricted net assets			29	
Ξ		Organizations that do not follow SFAS 117, check here ► ┌ and co	omplet e			
5		lines 30 through 34.				
	30	Capital stock or trust principal, or current funds			30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund			31	
	32	Retained earnings, endowment, accumulated income, or other funds			32	
Net	33	Total net assets or fund balances		1,071,804	33	793,017
l	34	Total liabilities and net assets/fund balances		1,146,845	34	874,749

Part XI Financial Statements and Reporting

			Yes	No
1	Accounting method used to prepare the Form 990			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		No
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both			
	Separate basis Consolidated basis Both consolidated and separated basis			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		No

Form **990** (2009)

OMB No 1545-0047

SCHEDULE A (Form 990 or 990EZ)

Complete if the organization is a section 501(c)(3) organization or a section Department of the Treasury 4947(a)(1) nonexempt charitable trust. Internal Revenue Service

Public Charity Status and Public Support

Inspection Attach to Form 990 or Form 990-EZ. See separate instructions.

Employer identification number

Name of the organization Climate Solutions

91-1123302

Pa	rt I	Reas	on for Pul	olic Charity State	us (All organizations	must complete this pa	rt.) See ınstruc	tions		
The	organı	zation is	not a private	e foundation because	ıt ıs (For lines 1 throug	h 11, check only one box)			
1	Γ	A churc	h, conventio	on of churches, or ass	sociation of churches se	ction 170(b)(1)(A)(i).				
2	Г	A schoo	ol described	ın section 170(b)(1)	(A)(ii). (Attach Schedul	e E)				
3	\sqcap	A hospi	tal or a coop	perative hospital serv	ıce organızatıon descrıb	ed in section 170(b)(1)(A)(iii).			
4	Γ			organization operate y, and state	ed in conjunction with a h	ospital described in secti	on 170(b)(1)(A)((iii). Ente	r the	
5	Г	An orga	ınızatıon ope	rated for the benefit	of a college or university	owned or operated by a g	jovernmental unit	describe	- d in	
		section	170(b)(1)(A	A)(iv). (Complete Pa	rt II)					
6	\sqcap					bed in section 170(b)(1) ((A)(v).			
7	Γ	describ	ed ın	t normally receives a A)(vi) (Complete Pa	·	upport from a government	al unit or from the	e general	public	
8	\sqcap				170(b)(1)(A)(vi) (Comp	olete Part II)				
9	~	Anorga	inization tha	t normally receives	(1) more than 331/3% of	its support from contribu	tions, membershi	p fees, ar	nd gros	SS
		receipts	from activi	ties related to its exe	empt functions—subject	to certain exceptions, and	d (2) no more than	n 331/3%	of	
		ıts supp	ort from gro	ss investment incom	ne and unrelated busines	s taxable income (less se	ction 511 tax) fro	om busine	esses	
		acquire	d by the org	anızatıon after June 3	30, 1975 See section 50	9(a)(2). (Complete Part	III)			
10	Г	Anorga	ınızatıon org	anized and operated	exclusively to test for pu	ıblıc safety See section 5	09(a)(4).			
11	Γ	one or r	more publicly	y supported organizat	tions described in sectio rting organization and co	it of, to perform the functi n 509(a)(1) or section 50 implete lines 11e through Functionally integrated)9(a)(2) See sec t 111h		a)(3).	Check
e	Γ	other th	-	•	•	lled directly or indirectly cly supported organizatio	•	•	•	
f			_	eceived a written det	termination from the IRS	that it is a Type I, Type I	II or Type III sup	porting o	rganız	atio <u>n,</u>
-		check t		006 bas the organiz	ation acconted any gift o	r contribution from any of	: +h.a			ı
g			g persons?	006, has the organiz	ation accepted any gift o	r contribution from any of	the			
				ectly or indirectly co	ntrols, either alone or to	gether with persons desci	ribed in (ii)		Yes	No
		and (III)	below, the g	overning body of the	the supported organizat	ion?		11g(i)		
		(ii) a fa	mıly membe	r of a person describe	ed ın (ı) above?			11g(ii)		
		(iii) a 3	5% controll	ed entity of a person	described in (i) or (ii) ab	ove?		11g(iii)		
h		Provide	the followin	g information about t	he supported organizatio	n(s)				
	(i) Namo suppo rganız	e of orted	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section	(iv) Is the organization in col (i) listed in your governing	(v) Did you notify the organization in col (i) of your support?	(vi) Is the organization is col (i) organize in the U S ?		A mo	vii) ount of

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see	(iv) Is the organization in col (i) listed in your governing document?		Did you no organizat col (i) of	(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the US?	
		instructions))	Yes	No	Yes	No	Yes	No	
Total									

ınstructions

P	Support Schedule (Complete only if yo					and 170(b)	(1)(A)(vi)
S	ection A. Public Support	a checked tile	DOX OII IIIC 3,	,, or o or rare.	÷·/		
	endar year (or fiscal year beginning	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
	ın)	(a) 2005	(b) 2006	(6) 2007	(d) 2008	(e) 2009	(I) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
	include any "unusual						
_	grants ") Tax revenues levied for the						
2	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) Dublic Support Subtract line F from						
6	Public Support. Subtract line 5 from line 4						
S	ection B. Total Support	1		-			
	endar year (or fiscal year beginning	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
	ın)	(a) 2005	(b) 2000	(6) 2007	(d) 2008	(e) 2009	(1) Total
7	A mounts from line 4						
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar						
9	sources Net income from unrelated						
9	business activities, whether or						
	not the business is regularly						
	carried on						
10	Other income (Explain in Part						
	IV) Do not include gain or loss						
	from the sale of capital assets						
11	Total support (Add lines 7						
4.5	through 10)	/5					
12	Gross receipts from related activities	,	•			12	
13	First Five Years If the Form 990 is f	or the organizati	on's first, second	, third, fourth, or	fifth tax year as a	501(c)(3) orga	inization, ▶□
	check this box and stop here						-1
S	ection C. Computation of Pub	lic Support P	ercentage				
14	Public Support Percentage for 2009			11 column (f))		14	
15	Public Support Percentage for 2008	Schedule A . Pa	rt II. line 14			15	
	33 1/3% support test—2009. If the	•	,	v on line 13 and	line 14 is 33 1/30		k this hox
	and stop here. The organization qua	-		·	IIIIC 14 13 33 1/3/	o or more, ence	▶ □
ь	33 1/3% support test—2008. If the				5a, and line 15 is	33 1/3% or moi	
	box and stop here. The organization				,		▶
17a	10%-facts-and-circumstances test-	-2009. If the org	anızatıon dıd not	check a box on lı	ne 13, 16a, or 16	b and line 14	
	ıs 10% or more, and ıf the organizat						
	in Part IV how the organization mee	ts the "facts and	l cırcumstances"	test The organiz	ation qualifies as	a publicly supp	
L	organization	_2009 Ifthe c==	onization did net	chack a bay as li	no 12 165 164	or 17a and line	▶□
D	10%-facts-and-circumstances test- 15 is 10% or more, and if the organ	_					
	Explain in Part IV how the organizat						clv
	supported organization						▶ ┌
10	Deiveta Farmdation Ifthe averages	on did not obselv	a hay an line 12	16- 16- 17-	17	hay and cas	•

▶□

Part III Support Schedule for Organizations Described in IRC 509(a)(2)

(Complete	only if you	checked the	box on line	. 9 of Part I

Se	ection A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	1,541,159	871,910	1,024,139	1,609,969	1,589,131	6,636,30
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	98,414	62,268	107,234	156,434	138,200	562,55
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization'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	1,639,573	934,178	1,131,373	1,766,403	1,727,331	7,198,85
7a	A mounts included on lines 1, 2, and 3 received from disqualified persons						ı
_	A mounts 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						ı
с 8	Add lines 7a and 7b Public Support (Subtract line 7c from line 6)						7,198,85
Se	ection B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9	A mounts from line 6	1,639,573	934,178	1,131,373	1,766,403	1,727,331	7,198,85
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	486	914	1,508	4,859	5,378	13,14
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c	Add lines 10a and 10b	486	914	1,508	4,859	5,378	13,14
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	5,228	2,401	67	177		7,87
13	Total support (Add lines 9, 10c, 11 and 12)						7,219,87
14	First Five Years If the Form 990 is for check this box and stop here	or the organizatio	n's first, second	, thırd, fourth, or f	ifth tax year as a	. 501(c)(3) organ	ization, ▶┌
	ection C. Computation of Publ					1 1	
15	Public Support Percentage for 2009			13 column (f))		15	99 710 %
16	Public support percentage from 200	8 Schedule A , Pa	irt III, line 15			16	99 680 %
Se	ection D. Computation of Inve	stment Inco	me Percenta	 ge			
17	-				(f))	17	0 180 %

Investment income percentage from 2008 Schedule A, Part III, line 17

19a 33 1/3% support tests—2009. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

33 1/3% support tests-2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

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

Part IV

Supplemental Information. Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. See instructions

Schedule A (Form 990 or 990-EZ) 2009

DLN: 93493222013480

OMB No 1545-0047

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ► Complete if the organization is described below.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Open to Public Inspection

If the organization answered "Yes," to Form 990, Part IV, Line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities),

- ◆ Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- ◆ Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- Section 527 organizations Complete Part I-A only

Se Se Se	e organization answered "Yes," to Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 ction 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II ction 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete e organization answered "Yes," to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, line ction 501(c)(4), (5), or (6) organizations Complete Part III	-A Do not Part II-B D	comple onotc	ete Part II-B omplete Par	t II-A	
		mploverio	lentific	atıon numb	er	-
	nate Solutions					
_		1-112330				_
Par	t I-A Complete if the organization is exempt under section 501(c) or is a so	ection 5	27 or	ganizatio	<u>m.</u>	_
1	Provide a description of the organization's direct and indirect political campaign activities in Part	IV				
2	Political expenditures	>	\$_			
3	Volunteer hours		_			_
Par	t I-B Complete if the organization is exempt under section 501(c)(3).					
1	Enter the amount of any excise tax incurred by the organization under section 4955	•	* \$ _			_
2	Enter the amount of any excise tax incurred by organization managers under section 4955	>	\$ <u>_</u>			
3	If the organization incurred a section 4955 tax, did it file Form 4720 for this year?			┌ Yes	V No	ı
4a	Was a correction made?			☐ Yes	▼ No	,
ь	If "Yes," describe in Part IV					
Pai	t I-C Complete if the organization is exempt under section 501(c) except s	ection 5	01(c))(3).		
1	Enter the amount directly expended by the filing organization for section 527 exempt function act	vities 🕨	\$_			
2	Enter the amount of the filing organization's funds contributed to other organizations for section 5	27				
	exempt funtion activities	•	\$_			_
3	Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 1	7 b 🕨	\$_			
4	Did the filing organization file Form 1120-POL for this year?			☐ Yes	┌ No	
5	State the names, addresses and employer identification number (EIN) of all section 527 political were made. For each organization listed, enter the amount paid from the filing organization's funds	-				

contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-

i Subtract line 1f from line 1c If zero or less, enter - 0-

section 4911 tax for this year?

┌ Yes ┌ No

Ρ	art II-A Complete if the organization under section 501(h)).	is exempt under section 501(c)(3) an	d filed Form 5768	(election
	Check If the filing organization belongs to a Check If the filing organization checked box	n affiliated group x A and "limited control" provisions apply		
	Limits on Lobbying E (The term "expenditures" means ar	•	(a) Filing Organization's Totals	(b) A ffiliated Group Totals
1a	Total lobbying expenditures to influence public o	pinion (grass roots lobbying)	44,362	
b	Total lobbying expenditures to influence a legisla	ative body (direct lobbying)		
c	Total lobbying expenditures (add lines 1a and 1b	o)	44,362	
d	Other exempt purpose expenditures		2,000,126	
e	Total exempt purpose expenditures (add lines 1	c and 1d)	2,044,488	
f	Lobbying nontaxable amount Enter the amount f	rom the following table in both	252,224	
	If the amount on line 1e, column (a) or (b) is: Not over \$500,000	The lobbying nontaxable amount is: 20% of the amount on line 1e		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
	Over \$17,000,000	\$1,000,000		
	Grassroots nontaxable amount (enter 25% of lin	ne 1f)	63,056	
h	Subtract line 1g from line 1a If zero or less, ente	er -0-		

4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting

	Lobbying Expendit	ures During 4	l-Year Avera	ging Period	_	
	Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total
_2a	Lobbying non-taxable amount	151,067	194,972	237,131	252,224	835,394
b	Lobbying ceiling amount (150% of line 2a, column(e))					1,253,091
_с	Total lobbying expenditures	20,663	2,976	3,643	44,362	71,644
d	Grassroots non-taxable amount	37,767	48,743	59,283	63,056	208,849
е 	Grassroots ceiling amount (150% of line 2d, column (e))					313,274
f	Grassroots lobbying expenditures	20,663	2,976	3,643	44,362	71,644

che	dule C (Form 990 or 990-EZ) 200						Page 3
Pa	rt II-B Complete if the or (election under se	rganization is exempt under ection 501(h)).	section 501(c)(3) and has I				
			-	(;	(a))
				Yes	No	A mo	unt
1		anization attempt to influence foreign t to influence public opinion on a legis					
а	Volunteers?						
b	Paid staff or management (includ	e compensation in expenses reported	l on lines 1c through 1i)?				
c	Media advertisements?						
d	Mailings to members, legislators	, or the public?					
е	Publications, or published or broa	adcast statements?					
f	Grants to other organizations for	lobbying purposes?					
g	Direct contact with legislators, th	egislative body?					
h	Rallies, demonstrations, seminar	rany sımılar means?					
i	Other activities? If "Yes," descri						
j	Total lines 1c through 1:						
2a	Did the activities in line 1 cause	the organization to be not described	n section 501(c)(3)?				
Ь	If "Yes," enter the amount of any	tax incurred under section 4912					
c	If "Yes," enter the amount of any	tax incurred by organization manage	rs under section 4912				
d	If the filing organization incurred	a section 4912 tax, did it file Form 4	720 for this year?				
Par	t III-A Complete if the or 501(c)(6).	ganization is exempt under	section 501(c)(4), section !	501(c)(5), o		
	W					Yes	s No
1		nore) dues received nondeductible by			-	2	
2	- · · · · · · · · · · · · · · · · · · ·	n-house lobbying expenditures of \$2,0			-	3	
3		ryover lobbying and political expendit		-01/-	\(\(\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		
26H	501(c)(6) if BOTH	rganization is exempt under Part III-A, lines 1 and 2 are					ion
	answered "Yes".						
1	Dues, assessments and similar a			1			
2	expenses for which the section 5	bbbying and political expenditures (do 27(f) tax was paid).	o not include amounts of political				
а	• Current year	. , . ,		2a			
b	Carryover from last year			2b			
c	Total	2c					
3	Aggregate amount reported in se	ction 6033(e)(1)(A) notices of nonde	ductible section 162(e) dues	3			
4	If notices were sent and the amo	unt on line 2c exceeds the amount or	line 3, what portion of the excess				
	does the organization agree to ca political expenditure next year?	arryover to the reasonable estimate o	f nondeductible lobbying and	4			
5	Taxable amount of lobbying and p	political expenditures (see instruction	ıs)	5			
Pä	rt IV Supplemental Info	ormation					
	mplete this part to provide the des o, complete this part for any addit	criptions required for Part I-A, line 1, ional information	Part I-B, line 4, Part I-C, line 5, an	d Part	II-B, lıne	11	
	Ident if ier	Return Reference	Explana	t ion			

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DLN: 93493222013480

OMB No 1545-0047

Open to Public Inspection

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

► Attach to Form 990. ► See separate instructions.

Employer identification number Name of the organization Climate Solutions 91-1123302 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate contributions to (during year) 3 Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised □ No funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically importantly land area Preservation of a certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during 3 the taxable year 🛌 Number of states where property subject to conservation easement is located **-**__ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year 🕨 A mount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ ___ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(ı) and 170(h)(4)(B)(ıı)?

the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes

- If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items
- If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items
 - (i) Revenues included in Form 990, Part VIII, line 1

(ii) Assets included in Form 990, Part X

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items

Revenues included in Form 990, Part VIII, line 1

Schedule D (Form 990) 2009

Assets included in Form 990, Part X

For Privacy Act and Paperwork Reduction Act Notice, see the Intructions for Form 990

Cat No 52283D

3	Using the organization's accession and othe						•				<u>continuea j</u>
а	items (check all that apply)		d	г	Loan	or exch:	ange prog	rams			
	Public exhibition		u	<u>'</u>			ange prog	aiiis			
ь	Scholarly research		е	ļ	Othe						
C	Preservation for future generations										
4	Provide a description of the organization's co Part XIV	ollections and expla	ain hov	w the	y furthe	er the or	ganızatıor	ı's ex	empt purpose	ın	
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t								ılar	┌ Yes	┌ No
Par	Escrow and Custodial Arrang Part IV, line 9, or reported an an	•			_		answere	d "Y	es" to Form	990,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	ian or other interm	edıary	for c	ontribu	itions or	otherass	ets r	iot	┌ Yes	☐ No
b	If "Yes," explain the arrangement in Part XIV	/ and complete the	follow	ıng t	able		Г	I	A	mount	
c	Beginning balance							1c			
d	Additions during the year							1d			
e	Distributions during the year						}	1e			
f	Ending balance						}	1f			
		orm 000 Dawl V I					L	-1		┌ Yes	 Г No
2a 	Did the organization include an amount on Fo		ie ∠I '							, res	j NO
	If "Yes," explain the arrangement in Part XIV rt V Endowment Funds. Complete		n ans	er	ad "Va	s" to F	orm gan	Dar	t IV line 10		
υĊ	Endowment i unus. Complete	(a)Current Year		Prior			Years Back		Three Years Back	(e)Four	Years Back
La	Beginning of year balance										
b	Contributions										
c	Investment earnings or losses										
d	Grants or scholarships										
e	Other expenditures for facilities and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the yea	r end balance held	as			•					
а	Board designated or quasi-endowment	%									
ь	Permanent endowment %										
c 3a	Term endowment % Are there endowment funds not in the posses	ssion of the organiz	ation	that a	are held	d and ad	ministere	d for i	the		
	organization by	oo on on one or game								Yes	S No
	(i) unrelated organizations								За	(i)	
	(ii) related organizations								3a	(ii)	<u> </u>
	If "Yes" to 3a(II), are the related organizatio							•	3	ь	
4	Describe in Part XIV the intended uses of th					00 0	1.37 1	10			
Par	t VI Investments—Land, Buildings	s, and Equipme	nt. S							. 1	
	Description of investment				a) Cost o sıs (ınve	or other stment)	(b)Cost or basis (ot		(c) Accumulate depreciation		Book value
1a	Land		•								
b	Buildings		•								
c	Leasehold improvements										
d	Equipment										
	Other	<u> </u>						2,723		045	15,678
ota	I. Add lines 1a-1e (Column (d) should equal Fo	orm 990 Part X colu	mn (B)	lung	10/-11				▶		15,678

Part VII Investments—Other Securities. See	Form 990, Part X, line 12	
(a) Description of security or category (including name of security)	(b)Book value	(c) Method of valuation Cost or end-of-year market value
Financial derivatives		,
Closely-held equity interests		
Other		
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)		
Part VIII Investments—Program Related. See	e Form 990, Part X, line :	13.
(a) Description of investment type	(b) Book value	(c) Method of valuation
	· · ·	Cost or end-of-year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)	•	
Part IX Other Assets. See Form 990, Part X, lir	ne 15.	
(a) Descrip	otion	(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1	.5.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X		
	(, line 25.	
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability		, , , , , , , ,
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	(, line 25. (b) A mount	
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes Accrued vacation	(, line 25. (b) A mount 50,410	
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	(, line 25. (b) A mount	
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes Accrued vacation	(, line 25. (b) A mount 50,410	.
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes Accrued vacation	(, line 25. (b) A mount 50,410	
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Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes Accrued vacation	(, line 25. (b) A mount 50,410	
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes Accrued vacation	(, line 25. (b) A mount 50,410	
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes Accrued vacation	(, line 25. (b) A mount 50,410	
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes Accrued vacation	(, line 25. (b) A mount 50,410	
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes Accrued vacation	(, line 25. (b) A mount 50,410	

Pai	rt XI Reconciliation of Change in Net Assets from Form 990 to Financial Statemen	nts	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	1,707,155
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	1,985,942
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-278,787
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 - 8	9	-
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	10	-278,787
Par	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue	er Retur	n
1	Total revenue, gains, and other support per audited financial statements	1	1,765,701
2	A mounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
ь	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV) 2d 58,546		
e	Add lines 2a through 2d	2e	58,546
3	Subtract line 2e from line 1	3	1,707,155
4	A mounts 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 XIV) 4b		
c	Add lines 4a and 4b	4c	
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	1,707,155
	Reconciliation of Expenses per Audited Financial Statements With Expenses	per Ret	
1	Total expenses and losses per audited financial statements	1	2,044,488
2	A mounts included on line 1 but not on Form 990, Part IX, line 25		
	Amounts merada on mile I bat not on Form 550, Fare 12, mile 25		
а	Donated services and use of facilities		
a	Donated services and use of facilities		
a	Donated services and use of facilities		
a b c	Donated services and use of facilities	2e	58,546
a b c d	Donated services and use of facilities	2e 3	•
a b c d	Donated services and use of facilities		•
a b c d e	Donated services and use of facilities		•
a b c d e 3	Donated services and use of facilities		•
a b c d e 3 4	Donated services and use of facilities		58,546 1,985,942 1,985,942

Complete this part to 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, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information

Ident if ier	Return Reference	Explanation
•	Part XIII, Line 2d Other expenses and losses per audited F/S	Special events expense \$58546
·	Part XII, Line 2d Other revenue amounts included in F/S but not included on form 990	Netting of special events expense \$58546

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2009

OMB No. 1545-0047

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

MT,OR,WA

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a. Attach to Form 990 or Form 990-EZ. See separate instructions.

Open to Public Inspection

	ne of the organization nate Solutions							Employer ider	ntification number
								91-1123302	
Pa		ctivities. Comple ers are not require					to Form	າ 990, Part IV	, line 17.
1	Indicate whether the orga	anızatıon raısed funds	through	any of the	follov	ıng actıvıtıes Ch	eck all tl	hat apply	
а	Mail solicitations			e	Γ	Solicitation of noi	n-govern	ment grants	
b	✓ Internet and e-mail s	olicitations		f	Γ	Solicitation of gov	vernmen	t grants	
c				g	<u> </u>	Special fundraisir	ng events	5	
d	☐ In-person solicitation	ns							
2a	Did the organization have or key employees listed i								Γ _{Yes} Γ _{No}
b	If "Yes," list the ten higher to be compensated at lea								
	(i) Name of Individual or entity (fundraiser)	(ii) Activity	fundrais custo	ody or rol of		Gross receipts rom activity	(or r	mount paid to etained by) siser listed in col (i)	(vi) A mount paid to (or retained by) organization
			Yes	No	1			coi (i)	
			+						
			1						
			+						
Tot	al								
3	List all states in which t licensing	the organization is re	gıstered o	rlicensed	d to so	licit funds or has	been not	ified it is exem	pt from registration or

Pa	rt I	Fundraising Events. Commore than \$15,000 on Form					eporte	d
		· · ·	(a) Event #1 Fundraising	(b) Event #2	(c) O ther Events	(Add col	al Event (a) thro (c)	
			(event type)	(event type)	(total number)			
Ę	1	Gross receipts	250,54	7			250,	547
Revenue	2	Less Charitable contributions	156,168	3			156,	168
	3	Gross income (line 1 minus line 2)	94,379	9			94,	379
	4	Cash prizes						
Expenses	5	Non-cash prizes						
	6	Rent/facility costs						
ă	7	Food and beverages						
Direct	8	Entertainment						
ឨ	9	Other direct expenses .	58,54	5			58,	546
	10	Direct expense summary Add lir	nes 4 through 9 ın columr	n(d)	🛌		58,	546
	11	Net income summary Combine I	ines 3, column d, and line	10		h-	35,	833
Par	t II	Gaming. Complete if the o \$15,000 on Form 990-EZ, li		"Yes" to Form 990, Pa	rt IV, line 19, or rep	orted more	e than	
<u>ф</u>			(a) Bingo	(b) Pull tabs/Instant	(c) O ther gaming	1	al gamır	-
Revenue				bingo/progressive bingo		(Add col	(a) thro (c))	ugh
	1	Gross revenue						
s မွ	2	Cash prizes						
Expenses	3	Non-cash prizes						
Direct B	4	Rent/facility costs						
툽	5	Other direct expenses						
	6	Volunteer labor		┌ Yes%	Г Yes			
	7	Direct expense summary Add line	s 2 through 5 in column ((d)				
	8	Net gaming income summary Con	nbine lines 1. column d. a	nd line 7				
							Yes	No
9 a		ter the state(s) in which the organiz the organization licensed to operate						
b		'No," Explain	gaming detivities in eac	n or these states		· 9a		
10a b		re any of the organization's gaming 'Yes," Explain	licenses revoked, suspei	nded or terminated during	the tax year?	10a		
11	Do	es the organization operate gaming	activities with nonmembe	ers?		11		
12		the organization a grantor, beneficia med to administer charitable gamin				.		
		3				12	<u> </u>	

		Υe	es	No
3	Indicate the percentage of gaming activity operated in			
а	The organization's facility			
b	An outside facility			
ŀ	Enter the name and address of the person who prepares the organization's gaming/special events books and records			
	Name 🕨			
	Address •			
_				
зa	Does the organization have a contract with a third party from whom the organization receives gaming revenue?			
b	If "Yes," enter the amount of gaming revenue received by the organization 🕨 \$ and the			
	amount of gaming revenue retained by the third party 🟲 \$			
С	If "Yes," enter name and address			
	Name ▶			
	Address ►			
5	Gaming manager information			
	Name 🟲			
	Gaming manager compensation 🕨 \$			
	Description of services provided 🕨			
	Director/officer Employee Independent contractor			
	Mandatory distributions			
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?	a		
b	Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year > \$			

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DLN: 93493222013480

Employer identification number

OMB No 1545-0047

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SCHEDULE 0 (Form 990)

Name of the organization

Department of the Treasury Internal Revenue Service

Climate Solutions

Supplemental Information to Form 990 Complete to provide information for responses to specific questions on

Form 990 or to provide any additional information.

► Attach to Form 990.

91-1123302 Identifier Return Reference **Explanation**

identifier	Tetalii reference	Explanation
Form 990, Part VI, Line 19	Form 990, Part VI, Line 19 Other Organization Documents Publicly Available	All documents are available by request
Form 990, Part VI, Line 15b	Form 990, Part VI, Line 15b Compensation Review and Approval Process for Officers and Key Employees	All salaries are reviewed annually using comparability data for similar nonprofits in size and work
Form 990, Part VI, Line 12c	Form 990, Part VI, Line 12c Explanation of Monitoring and Enforcement of Conflicts	The organization requires timely disclosure of potential conflicts of interest from involved persons
Form 990, Part VI, Line 11	Form 990, Part VI, Line 11 Form 990 Review Process	A draft copy is made available to the governing Board for review and approval prior to filing the tax return
	1	<u> </u>

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

Cat No 51056K

Schedule O (Form 990) 2009