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For. 990

Return of Organization Exempt From Income Tax

OMB No 1545-0047 2010

Department of the Treasury Internal Revenue Service

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

Open to Public

| | | The organization may have to use a copy of this return to satisfy state | | an ciricinta. | وبسنتنبسيق مسبب | | | | |
|--------------------------------|-------------------------|--|-------------------------------------|--------------------------|--------------------------------|--|--|--|--|
| <u>A</u> _ | For the | 2010 calendar year, or tax year beginning July 1 , 2010, and end | ling Ju | une 30 | , 20 11 | | | | |
| В | Check if | applicable C Name of organization U.S. Climate Action Network | | D Emplo | yer identification number | | | | |
| | Address | change Doing Business As USCAN | | | 20-4597308 | | | | |
| | Name ch | Number and street (or P.O box if mail is not delivered to street address) Room/ | suite | E Teleph | one number | | | | |
| | initial ret | um 1810 16th Street, NW | | 1 | 202-609-9846 | | | | |
| | Terminat | ed City or town, state or country, and ZIP + 4 | | | | | | | |
| $\overline{\sqcap}$ | Amende | d return Washington, DC 20009 | | G Gross | receipts \$ 2,415,306 | | | | |
| $\overline{\Box}$ | | on pending F Name and address of principal officer. David Hamilton | H(a) leth | 4 | for affiliates? Yes No | | | | |
| | принови | 408 C Street, NE, Washington, DC 20002 | | | ncluded? Yes No | | | | |
| _ | Tou over | npt status: ☐ 501(c)(3) | ── │ `` | | list. (see instructions) | | | | |
| 는 | | e: ► www.usclimatenetwork.org | | up exemption number | | | | | |
| _ | | | | | e of legal domicile: DC | | | | |
| _ | art I | rganization | mation 2000 |) IM State | or legar domicile. DC | | | | |
| - | 1 | Briefly describe the organization's mission or most significant activities: USC | A Nic mission | ic to our | and attemption | | | | |
| | ' | | | | | | | | |
| 9 | | civil society organizations to influence the design and development of an effective | | | | | | | |
| Jan | | to reduce greenhouse gas emissions and ensure its implementation at internation | ai, national a | na local lev | /eis. | | | | |
| P | | Object All the second of the s | | | | | | | |
| Governance | 2 | Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25 | | 1 - 1 | | | | | |
| ø | 3 | | | | | | | | |
| es | 4 | Number of independent voting members of the governing body (Part VI, line 1 | 0) | | 17 | | | | |
| Ζï | 5 | Total number of individuals employed in calendar year 2010 (Part V, line 2a) | | . 5 | 11 | | | | |
| Activities & | 6 | Total number of volunteers (estimate if necessary) | | . 6 | 2 | | | | |
| • | 7a | Total unrelated business revenue from Part VIII, column (C), line 12 | | . 7a | . 0 | | | | |
| | b | Net unrelated business taxable income from Form 990-T, line 34 | <u> </u> | . 7b | 0 | | | | |
| | l | | Prior \ | fear | Current Year | | | | |
| 0 | 8 | Contributions and grants (Part VIII, line 1h) | | 2,014,624 | 2,414,060 | | | | |
| Ĕ | 9 | Program service revenue (Part VIII, line 2g) | | 0 | 0 | | | | |
| Revenue | 10 | Investment income (Part VIII, column (A), lines 3, 4, and 7d) | | 1,389 | 421 | | | | |
| Œ | 11 | Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) | | 0 | 518 | | | | |
| | 12 | Total revenue—add lines 8 through 12 (must equal Part VIII) column (A), line 12) | 2,016,013 | 2,414,999 | | | | | |
| | 13 | Grants and similar amounts paid (Part X Column (A), lines 1-3) | | 890,000 | 1,039,800 | | | | |
| | 14 | Benefits paid to or for members (Part IX, column (A), line 4) | | 0 | 0 | | | | |
| w | 15 | Salaries, other compensation, employee benefits (Part IX Column (A), lines 5-10) | | 963,481 | 596,152 | | | | |
| Expenses | 16a | Professional fundraising fees (Part IX, column (A), line (7) b) | <u> </u> | 0 | 0 | | | | |
| per | b | Total fundraising expenses (Partt) column (D), line 25) | 10 10 Car | 77973 | 生活 二次的现在分词 | | | | |
| ă | 17 | Other expenses (Part IX, column A) lines (Va-110, 11f-24f) | 3. | 1,126,017 | 180,945 | | | | |
| | 18 | Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25) | | 2,979,498 | 1,816,897 | | | | |
| | 19 | Revenue less expenses. Subtract line 18 from line 12 | | -963,485 | 598,102 | | | | |
| - X | | Tiereniae 1000 expensees. Capitaet into 10 front into 12 | Beginning of C | | End of Year | | | | |
| ots o | 20 | Total assets (Part X, line 16) | | 526,514 | 1,085,106 | | | | |
| Sse | 21 | Total liabilities (Part X, line 26) | | 57,500 | 17,990 | | | | |
| Net Assets or Fund Balances | 22 | Net assets or fund balances. Subtract line 21 from line 20 | ļ | 469,014 | | | | | |
| | art II | Signature Block | L | 103,014 | 1,067,116 | | | | |
| _ | _ | | | 4h- h4 -4 - | | | | | |
| tru | ger pena: e, correct | ties of perjury, I declare that I have examined this return, including accompanying schedules and sta , and complete Declaration of preparer (other than officer) is based on all information of which prepa | tements, and to rer has anv knov | tne best of m vledae. | ny knowledge and belief, it is | | | | |
| | | | | <u></u> | -1.15 | | | | |
| Sig | ın | Signature of officer | | رے <u>ے</u> ate | 10 16,2- | | | | |
| He | - | | _ | | | | | | |
| пе | 16 | THE STEVE BAHOLDE EXECUTE | DLUC_ | <u> DIR</u> | ECDON | | | | |
| | | Type or print name and title Print/Type preparer's name Preparer's signature | Data | | ZIDTIN | | | | |
| Pa | id | | Date | Check [| | | | | |
| Pr | epare | | 5-8.17 | self-emp | loyed 21-4144411 | | | | |
| Us | e Onl | | Fir | m's EIN ▶ | | | | | |
| | | Firm's address ▶ | Ph | one no. 2 | 02.361-2814 | | | | |
| ма | v tne iH | S discuss this return with the preparer shown above? (see instructions) | | | Voc [] No | | | | |

Form **990** (2010)

| Form 99 | 90 (2010) , | Page 2 |
|---------|--|------------------|
| Part | Statement of Program Service Accomplishments Check if Schedule O contains a response to any question in this Part III | |
| 1 | Briefly describe the organization's mission: | . 🔽 |
| • | USCAN's mission is to support and strengthen civil society organizations to influence the design and development of an effective quitable and sustainable global strategy to reduce greenhouse gas emissions and ensure its implementation at international, national and local levels. | /e, |
| 2 | Did the organization undertake any significant program services during the year which were not listed on the | |
| | prior Form 990 or 990-EZ? | ☑ No |
| 3 | Did the organization cease conducting, or make significant changes in how it conducts, any program services? | ☑ No |
| 4 | If "Yes," describe these changes on Schedule O. Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Se 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocation others, the total expenses, and revenue, if any, for each program service reported. | ection ons to |
| 4a | (Code:) (Expenses \$ 919,358 including grants of \$ 850,000) (Revenue \$ 0) INTERNATIONAL | |
| | USCAN's International Program tracked, consolidated, analyzed and summarized international climate policies and developmentuse by U.S. environmental organizations. USCAN's International Program publishes a briefing book annually. | |
| | | |
| | | |
| | | |
| 4b | (Code:) (Expenses \$144,184 including grants of \$0) (Revenue \$0) | |
| | OUTREACH USCAN's Outreach Program tracked, monitored and disseminated information on domestic climate campaigns, policies, and developments for use by U.S. environmental organizations. The Outreach Program hosted meetings among members of the environmental community and informed members of significant outcomes from those meetings. | |
| | | |
| | | |
| | | |
| 4c | SOUTHEAST CLIMATE & ENERGY NETWORK | |
| | USCAN's Southeast Climate & Energy Network's mission is strategic coordination among organizations in the Southeast to | |
| | secure fair, just and science-based climate and energy policies. | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | Oll Control of October 1 Contr | |
| 4d | Other program services. (Describe in Schedule O.) (Expenses \$ 538,627 including grants of \$ 189,800) (Revenue \$ 0) Total program service expenses \$ 1,738,144 | |
| | Luizi di uni aci vica exactiaca 💌 👚 1 /3X 188 | |

Checklist of Required Schedules

Part IV

| | | | 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 | 1 | |
| 2 3 | Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions) Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to | 2 | 1 | |
| 4 | candidates for public office? If "Yes," complete Schedule C, Part I | 3 | | ✓ |
| _ | election in effect during the tax year? If "Yes," complete Schedule C, Part II | 4 | ✓ | <u> </u> |
| 5 | Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III | 5 | n | 1a_ |
| 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 | 7 | 1 |
| 7 | Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II | 7 | | 1 |
| 8 | Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III | 8 | | 1 |
| 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 | | 1 |
| 10 | Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V | 10 | | 1 |
| 11 | If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, IX, or X as applicable. | | | |
| а | Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI | 11a | ✓ | |
| b | Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII | 11b | | 1 |
| С | Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII | 11c | | 1 |
| d | Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX | 11d | 1 | |
| | 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 (ASC 740)? If "Yes," complete Schedule D, Part X. | 11e | | 1 |
| 12 a | Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII | 11f | ✓ | ✓ |
| 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, XII, and XIII is optional | 12b | | ✓ |
| 13 14 a | Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E | 13 14a | | 1 |
| b | | 14b | | √ |
| 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 United States? If "Yes," complete Schedule F, Parts II and IV. | 15 | / | |
| 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 United States? If "Yes," complete Schedule F, Parts III and IV | 16 | | ✓ |
| 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 (see instructions) | 17 | | <u> </u> |
| 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 | | <u>·</u> |
| 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 | | ✓ |
| 20 a | Did the organization operate one or more hospitals? If "Yes," complete Schedule H | 20a | | √ |
| b | If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions) | 20b | n | <u>a</u> |
| | | Form | 990 | (2010) |

| Part | Checklist of Required Schedules (continued) | | | |
|----------|---|------|----------|----------|
| | | | Yes | No |
| 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 | 1 | |
| 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 | | 1 |
| 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 | | | |
| 04- | employees? If "Yes," complete Schedule J | 23 | <u> </u> | 1 |
| 24a | Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25 | 24a | | 1 |
| | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? | 24b | | ✓ |
| 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 | | 1 |
| d | Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? | 24d | | 1 |
| 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 | | 1 |
| 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 | | 1 |
| 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 | | 1 |
| 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? If "Yes," complete Schedule L, Part III | 27 | | 1 |
| 28 | Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions): | | | |
| а | A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV | 28a | | ✓ |
| b | A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV | 28b | | √ |
| С | An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV | 28c | | √ |
| 29 30 | Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified | 29 | | √ |
| 31 | conservation contributions? <i>If "Yes," complete Schedule M</i> | 30 | | ✓ |
| | Part I | 31 | | 1 |
| 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 | | \ |
| 33 | Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I | 33 | | 1 |
| 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 | | ✓ |
| 35 | Is any related organization a controlled entity within the meaning of section 512(b)(13)? | 35 | | 1 |
| а | 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 | | | |
| 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 | | ✓ |
| 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, | | | |
| 38 | Part VI | 37 | | <u>✓</u> |
| | 19? Note. All Form 990 filers are required to complete Schedule O | 38 | ✓ | (001 =: |
| | | Form | っ シタリ | (2010) |

Form 990 (2010) , Page 5 Statements Regarding Other IRS Filings and Tax Compliance Part V

| | Check if Schedule O contains a response to any question in this Part V | | | . 🗆 |
|---------|--|-----------------|----------------|---|
| | | | Yes | No |
| 1a | Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 5 | 17 | *** | Carry And |
| b | Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable | 1 | 3 | 12.38 |
| С | Did the organization comply with backup withholding rules for reportable payments to vendors and | - X | PAY ! | |
| • | reportable gaming (gambling) winnings to prize winners? | 1c | | 12 |
| 2a | Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax | 事業 | 學主 | 15-0 |
| L | Statements, filed for the calendar year ending with or within the year covered by this return 2a 11 | | | 13.6 |
| b | If at least one is reported on line 2a, did the organization file all required federal employment tax returns? | 2b | ✓ | <u> १६८</u> -स |
| За | Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> . (see instructions) Did the organization have unrelated business gross income of \$1,000 or more during the year? | 3a | | 4 |
| b | If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O | 3b | n | a |
| 4a | At any time during the calendar year, did the organization have an interest in, or a signature or other authority | 30 | - '' <i>\</i> | a . |
| | over, a financial account in a foreign country (such as a bank account, securities account, or other financial | ١., | | |
| | account)? | 4a | | / |
| b | If "Yes," enter the name of the foreign country: ▶ | 11:5:191 | 1 | |
| | See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. | 3 | 清 | |
| 5a | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? | 5a | | 1 |
| b | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? | 5b | | 1 |
| C | If "Yes" to line 5a or 5b, did the organization file Form 8886-T? | 5c | | 1 |
| 6a | Does the organization have annual gross receipts that are normally greater than \$100,000, and did the | | | |
| | organization solicit any contributions that were not tax deductible? | 6a | | ✓ |
| þ | If "Yes," did the organization include with every solicitation an express statement that such contributions or | ۱ | | _ |
| 7 | gifts were not tax deductible? | 6b | n/ | EV NA |
| 7 a | Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods | Y1 * | | |
| | and services provided to the payor? | 7a | 11.00 | 1 |
| b | If "Yes," did the organization notify the donor of the value of the goods or services provided? | 7b | n | a |
| C | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was | | -"/ | |
| | required to file Form 8282? | 7c | | ✓ |
| d | If "Yes," indicate the number of Forms 8282 filed during the year | | はに | ALE: |
| е | Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? | 7e | | 1 |
| f | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . | 7f | | ✓ |
| g | If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? | 7g | N | 12 |
| h 8 | If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting | 7h | /\ \ \ | 7 |
| • | 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? | 8 | THE. | |
| 9 | Sponsoring organizations maintaining donor advised funds. | 356 | SLN: | rittin. |
| а | Did the organization make any taxable distributions under section 4966? | 9a | are early | ✓ ✓ |
| b | Did the organization make a distribution to a donor, donor advisor, or related person? | 9b | | 1 |
| 0 | Section 501(c)(7) organizations. Enter: | | | 1 |
| а | Initiation fees and capital contributions included on Part VIII, line 12 | 4.24 | 4 7 | |
| b | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b n/2 | | 强 | |
| 1 | Section 501(c)(12) organizations. Enter: | 定學 | 7 | |
| a | Gross income from members or shareholders | 18 | | |
| b | The state of the s | 33 | | 温温 |
| 2a | spainst amounts due or received from them.) | 12a | CASS Ch | |
| za b | If "Yes," enter the amount of tax-exempt interest received or accrued during the year | 120 | ¥ | 1.3.4 |
| 3 | Section 501(c)(29) qualified nonprofit health insurance issuers. | 1 | | 35.4 |
| а | Is the organization licensed to issue qualified health plans in more than one state? | 13a | N | المارية |
| | Note. See the instructions for additional information the organization must report on Schedule O. | 12.1. | 1 | 3.53 |
| b | Enter the amount of reserves the organization is required to maintain by the states in which | | 是到 | 温温槽 |
| | the organization is licensed to issue qualified health plans | 索引 | | /验 |
| С | Enter the amount of reserves on hand | 玩作 | 4. E | |
| 4a | Did the organization receive any payments for indoor tanning services during the tax year? | 14a | | ✓ |
| b | If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O . | 14b | n | <u>a</u> |
| | | Form | 990 | (2010) |

| -01111 99 | 0 (2010) | | | Page U |
|--------------|--|---------------|----------|----------------|
| Part | | | | |
| | "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or chang | es in | Sch | edule |
| | O. See instructions. Check if Schedule O contains a response to any question in this Part VI | | | . তে |
| Section | on A. Governing Body and Management | - | | · (<u>A</u>) |
| 30011 | Of A deverting Body and Management | | Yes | No |
| 1a | Enter the number of voting members of the governing body at the end of the tax year 1a 17 | 都被 | | BOI |
| b | Enter the number of voting members included in line 1a, above, who are independent . 1b 17 | | | |
| 2 | Did any officer, director, trustee, or key employee have a family relationship or a business relationship with | | 100 | |
| _ | any other officer, director, trustee, or key employee? | 2 | | ✓ |
| 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 | | 1 |
| 4 | Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? | 4 | | 1 |
| 5 | Did the organization become aware during the year of a significant diversion of the organization's assets? | 5 | | <u> </u> |
| 6 7a | Does the organization have members or stockholders? | 6 | <u> </u> | <u> </u> |
| <i>1</i> a | of the governing body? | 7a | | |
| b | Are any decisions of the governing body subject to approval by members, stockholders, or other persons? | 7b | | 7 |
| 8 | Did the organization contemporaneously document the meetings held or written actions undertaken during | | | 3 |
| | the year by the following: | | | |
| а | The governing body? | 8a | ✓ | |
| b | Each committee with authority to act on behalf of the governing body? | 8b | ✓ | |
| 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 | | | |
| Section | on B. Policies (This Section B requests information about policies not required by the Internal Reven | 9 | ode l | |
| 36011 | on b. I dices (mis decion b requests information about policies not required by the internal never | 40 00 | Yes | No |
| 10a | Does the organization have local chapters, branches, or affiliates? | 10a | | 1 |
| 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 | ^ | a |
| 11a | Has the organization provided a copy of this Form 990 to all members of its governing body before filing the | | , | |
| L | form? | 11a | √ | 1200-2120 |
| b 12a | Describe in Schedule O the process, if any, used by the organization to review this Form 990. Does the organization have a written conflict of interest policy? <i>If "No," go to line 13 </i> | 12a | 经过法 | |
| b | Are officers, directors or trustees, and key employees required to disclose annually interests that could give | 120 | | <u> </u> |
| _ | rise to conflicts? | 12b | ✓ | |
| 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 | 1 | |
| 13 | Does the organization have a written whistleblower policy? | 13 | 1 | |
| 14 | Does the organization have a written document retention and destruction policy? | 14 | ✓ | |
| 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 | _ | |
| b | Other officers or key employees of the organization | 15b | 1 | |
| | If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.) | | | |
| 16a | Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? | 16a | - 12 A | <u>✓</u> |
| b | If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its 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 | | 過え |
| Section | on C. Disclosure | | | |
| 17 18 | List the states with which a copy of this Form 990 is required to be filed ▶ none Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3) for public inspection. Indicate how you make these available. Check all that apply. | s only |) ava | ilable |
| 19 | Own website Another's website Upon request Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict or and financial statements available to the public | f inter | est p | olicy, |
| 20 | and financial statements available to the public. State the name, physical address, and telephone number of the person who possesses the books and records | of the | | |
| 20 | organization: ► Ryan Patterson, 1810 16th Street, NW Washington, DC 20009 (202)609-9846 | oi ine | | |

Form 990 (2010)

Page 7

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.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

| Check this box if neither the organization nor | (B) | l oig | <u> </u> | (0 | | omp.c | 1130 | (D) | (E) | (F) |
|--|--|------------------------------|----------|---------|--------------|------------------------------|--------|--|--|--|
| Name and Title | Average | Posit | ion (c | _ | - | hat ap | (vla | Reportable | Reportable | Estimated |
| | hours per week (describe hours for related organizations in Schedule O) | Individual tr or director | | Officer | Key employee | Highest compensated employee | Former | compensation from the organization (W-2/1099-MISC) | compensation from related organizations (W-2/1099-MISC) | amount of other compensation from the organization and related organizations |
| (1) Jonathan Banks Secretary | .58 | 1 | | 1 | | | | 0 | 0 | 0 |
| (2) Sally Bingham Board Member | .39 | 1 | | | | | | 0 | 0 | 0 |
| (3) KC Golden Board Member | .39 | 1 | | | | | | 0 | 0 | 0 |
| (4) Dan Sostand Board Member | .39 | 1 | | | | | | 0 | 0 | . 0 |
| (5) Tim Warman Board Member | .39 | 1 | | | | | | 0 | 0 | 0 |
| (6) Heather Coleman Board Member | .39 | 1 | | | | | | 0 | 0 | 0 |
| (7) Annie Strickler Board Member | .39 | 1 | | | | | | 0 | 0 | 0 |
| (8) Adrianna Quintero Board Member | .39 | 1 | | | | | | 0 | 0 | 0 |
| (9) Kevin S. Curtis Board Member | .39 | 1 | | | | | | 0 | 0 | 0 |
| (10) James Barrett Treasurer | .58 | 1 | 1 | | | | | 0 | 0 | 0 |
| (11) Emily Figdor Board Member | .39 | 1 | | | | | | 0 | 0 | 0 |
| (12) David Hamilton Chair | .58 | √ | 1 | | | | | 0 | 0 | 0 |
| (13) J. Drake Hamilton Board Member | .39 | ✓ | | | | | | 0 | 0 | 0 |
| (14) Alden Meyer Board Member | .39 | / | | | | | | 0 | 0 | 0 |
| (15) Stephen Smith Board Member | .39 | \ | | | | | | 0 | 0 | 0 |
| (16) Mike Tidwell Board Member | .39 | √ | | | | | | 0 | 0 | 0 |

Form 990 (2010) .

| ٥. | _ | _ | . 1 | ŀ |
|----|---|---|-----|---|
| -a | O | е | к | |

| Part | VII Section A. Officers, Directors, Trus | stees, Key | Emple | oye | es, a | and | High | est | Compensated | Employees (c | contir | nued) |
|----------|--|--|--------------------------------|--|---------|--------------|---------------------------------|-------------|--|--|----------|--|
| | (A) | (B) | | | | C) | | | (D) | (E) | | (F) |
| | Name and title | Average hours per week (describe | | r <u></u> | Officer | | , | Ply) Former | Reportable compensation from | Reportable compensation froi related organizations | ļ | Estimated amount of other |
| | | hours for related organizations in Schedule O) | Individual trustee or director | nstitutional trustee | er | Key employee | Highest compensated employee |) er | the organization (W-2/1099-MISC) | (W-2/1099-MIS | | compensation from the organization and related organizations |
| | ans Verolme I Member | .39 | 1 | | | | | h | 0 | | 0 | 0 |
| (18) A | ngela Anderson | 40 | | | | | | | 144,211 | - | 0 | 2,000 |
| Progr | am Director | 70 | <u> </u> | _ | | | ✓ | | 144,211 | | | 2,000 |
| (19) | | ĺ | | | | | | | } | | | |
| (20) | | | | | | | | | | | | |
| (21) | | | | | | | | | | | | · · · · · · · · · · · · · · · · · · · |
| (22) | | | | | | | | | | | | |
| (23) | | | | | | | | | | | | A.T |
| (24) | | | | | - | | | | | | + | |
| (25) | ••••• | | | | | | | | | | \top | |
| (26) | | | | | | | | | ۰ | | _ | |
| (27) | | | | | | | | | | | _ | , , <u>, ,</u> |
| (28) | | | | | | | | | | | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |
| 1b | Sub-total | | | <u>. </u> | | | | <u> </u> | 144,211 | | 0 | 2,000 |
| c | Total from continuation sheets to Part | VII, Sectio | n A | | | | . 1 | > | 0 | | 0 | 0 |
| <u>d</u> | Total (add lines 1b and 1c) | | | | | | | > | 144,211 | | 0 | 2,000 |
| | Total number of individuals (including but reportable compensation from the organic | | to th | ose — | IIST | ea a | above |) WI | no received mo | ore than \$100 | ,000 | |
| 3 | Did the organization list any former of employee on line 1a? If "Yes," complete S | | | | | | | mpl | loyee, or high | est compens | ated | Yes No |
| 4 | For any individual listed on line 1a, is the organization and related organizations individual | | | | | | | | | | | |
| 5 | Did any person listed on line 1a receive of for services rendered to the organization? | | | | | | | | | ation or indiv | idual | - - |
| Section | on B. Independent Contractors | | - | | | | | | <u> </u> | | | <u> </u> |
| 1 | Complete this table for your five highest compensation from the organization. | compensate | ed ind | epe | ende | ent (| contra | cto | ers that receive | d more than | \$100 | ,000 of |
| | (A) Name and business addr | ess | | | | | | | (B) Description of se | ervices | (| (C) Compensation |
| NONE | | | | | | | | | | | | |
| | | | | | | | | | · · | | | |
| 2 | Total number of independent contractor | rs (includin | g bu | t no | ot li | mite | ed to | the | ose listed abo | ve) who | The same | |
| | received more than \$100,000 in compens | ation from t | he or | gani | izati | on I | • | | nnne | [33 | A day | 1.12是第一个工程 |

| Form 9 | 90 (201 | 0) | | | | | _0 ,0), | Dana (1 |
|------------------------------|--|---|--|------------------|--|---|--|--|
| | VIII V | Statement of Rev | | | | ····· - · · | | Page 9 |
| rail | ************************************** | Statement of Rev | renue | E 1 2 m 1 34 | (A) | (n) | (0) | (2) |
| | | | 12 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | | (A) Total revenue | (B) Related or exempt function revenue | (C) Unrelated business revenue | (D) Revenue excluded from tax under sections 512, 513, or 514 |
| हे ह | 1a | Federated campaign | s 1a | <u> </u> | F. 2. 18 18 18 18 18 18 18 18 18 18 18 18 18 | 19311514 | 1 | · 图1.数据4. 图 7.0541 |
| ts, grants amounts | ь | Membership dues . | 1b | 147,905 | MAP 图 在主 | でする場合 | | |
| ıg. | c | Fundraising events . | | 147,500 | 1-11 - 1 - 1 - 1 - 1 - 1 | | | The state of the s |
| | ď | Related organizations | | - 0 | | | | 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 |
| | - | Government grants (cor | | 0 | | | | |
| Contributions, and other sim | e | All other contributions of | ntributions) 1e | | 据题:"A.S. A.Y. | | | 1. · · · · · · · · · · · · · · · · · · · |
| tributi other | ' ' | All other contributions, g | | | | - 4.1.4 | | |
| of th | ! | and similar amounts not in | | 2,266,155 | | | | |
| Cont | g | Noncash contributions inclu | • | 0 | 0.78.51 | | | |
| | h | Total. Add lines 1a-1 | <u>f</u> | <u> ▶</u> | 2,414,060 | 244.5 134.5 | 以其以為"··································· | 在库台点"重点" |
| ĭe | | | | Business Code | 31.10 | 19 计被从时间数 | 表现 19mm 1 19mm | · · · · · · · · · · · · · · · · · · · |
| Ver | 2a | | | | | | | |
| Program Service Revenue | b | | | | | | | |
| <u>i</u> | С | | | | | | 1 | |
| ē | d | | | | | | | |
| S E | A | | | | 1 | | | |
| gra | f | All other program ser | vice revenue | | | | | |
| Š | g | Total. Add lines 2a-2 | | • | | -57.3 Sec. 13. 12. 12. 12. 12. 12. 12. 12. 12. 12. 12 | I will at the last of | THE PERSON AND ASSESSED FOR THE |
| _ | 3 | Investment income | | · · · · · | <u></u> | THE PLAN TO THE PARTY OF | THE PROPERTY OF THE PARTY OF TH | ~ 11, 134 VE 4, 447 LE 61 |
| | | and other similar amo | | | 494 | | | 404 |
| | | | • | | 421 | | | 421 |
| | 4 | Income from investmen | t of tax-exempt bo | ona proceeas > | | | | |
| | 5 | Royalties | (3 De-1 | > | 777 TV 2 347 H. 17 17 147. | 7 5 65 75 | | Commence of the Commence of th |
| 1 | | | (i) Real | (ii) Personal | | 1 | 19.16日 1985年 | |
| | 6a | Gross Rents | | | Carl Francisco | " " "说话" | "我" 发射 | 1777年 |
| | b | Less: rental expenses | | | | | STATE OF THE STATE | |
| | С | Rental income or (loss) | | | | | ""一个一个一个 | |
| | d | Net rental income or | (loss) | <u> ▶</u> | | , | | |
| | 7a | Gross amount from sales of | (i) Secunties | (ii) Other | THE STATE OF THE S | | しかとう。またいは | 的第三人称形式和大型 |
| | | assets other than inventory | | 825 | 国际地位共享 | T to the state of | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | |
| | ь | Less: cost or other basis | | | N. ARANI | 32 (1831) (77) | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | |
| | | and sales expenses . | | -307 | | 40000000000000000000000000000000000000 | The state of the s | 。 中国的国际 |
| | С | Gain or (loss) | | 518 | | 的音樂學 | The state of the s | |
| | d | Net gain or (loss) | <u></u> | 318 | 540 | - 35 Par - 8 - 5 - 5 - 5 - 5 - 5 - 5 - 5 - 5 - 5 | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | |
| | u | ivel gain or (loss) . | | · · · · <u>~</u> | 518 | a Paragraphic | His contact Name of the State o | 518 |
| <u>o</u> | 0- | Ouese income from f | | | 17. 15 Sugar | 34.2 | | 建设是建筑的 |
| ž. | ba | Gross income from fu | indraising | | 德 1000 | 全界系统时代 | | |
| Ž | | events (not including \$ | | | 1 Sept 1 | | | |
| ř | | of contributions reporte | , i | | 13.136 | 1966年 · 自然 | | |
| Other Revenue | | See Part IV, line 18 . | $\cdot \cdot \cdot \cdot \cdot \cdot \mathbf{a}$ | | | | | The state of |
| 중 | b | Less: direct expenses | 3 b | | | of a fact of | 1 1 1 1 1 1 1 | 1.4 |
| | C | Net income or (loss) f | rom fundraising | events . > | | | | |
| | 9a | Gross income from ga | ıming activities. | | Significant Company | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | | The same of the same of |
| | | See Part IV, line 19 . | a | | | | 的是有效等 | |
| | b | Less: direct expenses | sb | | في أن المراجع | | | |
| } | С | Net income or (loss) f | | /ities ▶ | | | <u> </u> | A STATE OF THE STA |
| | _ | Gross sales of in | | | in the state of th | I | 4. | A STORY OF THE |
| | | returns and allowance | | | | 1 30 4 13 1 | 属其其不一 | 是"治疗"。 机多位置 |
| | h | Less: cost of goods s | ۳L | | , , , , , , , , , , , , , , , , , , , | | | |
| Į | b | Net income or (loss) fi | | nton/ | | | | النعشكالاسعكست |
| } | C | Miscellaneous R | | | | | | |
| } | 4. | MISCEIIANEOUS H | CAGUIG | Business Code | | 7 | | 10 |
| | 11a | | | | | | , | |
| | b | | | | | | | |
| | C | *************************************** | | | | | | |
| | d | All other revenue . | | | | | | |
| } | е | Total. Add lines 11a- | 11d | 🕨 | 0 | | And the state of the state of | 18 18 24 4 1 4 1 Est |
| | 12 | Total revenue. See in | structions | 🕨 | 2,414,999 | 0 | 0 | 939 |

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Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

(A) Total expenses (D) Fundraising Do not include amounts reported on lines 6b. Program service Management and 7b. 8b, 9b, and 10b of Part VIII. **expenses** general expenses expenses CARACTERS Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21 . . . 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 1,039,800 1,039,800 2. 新新的問題所以 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees 128,773 O 106,384 22,389 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . 0 Other salaries and wages 390,555 0 7 351,241 39,314 Pension plan contributions (include section 401(k) 8 and section 403(b) employer contributions) . . 0 9 Other employee benefits 39.773 39.773 0 Payroll taxes 37.051 26,422 9,157 1,472 10 Fees for services (non-employees): Management n n n 0 b Legal 0 0 0 Accounting 0 0 C 5,527 5,527 0 0 0 0 Professional fundraising services. See Part IV, line 17 的自然的是智慧的 0 е investment management fees 0 Other 29.066 28.994 72 0 g Advertising and promotion . . . 12 60 60 0 0 13 Office expenses 28,387 3,849 24,538 0 14 Information technology 6,160 1,010 5,150 0 15 Royalties 0 O Occupancy 16 34,734 0 34,734 0 17 24,931 17,523 7,358 50 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 0 Conferences, conventions, and meetings . 19 37.004 36.673 331 0 20 1,382 0 1.382 0 Payments to affiliates 21 0 0 22 Depreciation, depletion, and amortization . 0 11,371 11,371 n 23 2,323 1,982 Other expenses. Itemize expenses not covered 24 **5**, . · above (List miscellaneous expenses in line 24f. If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O.) Administrative Overhead 192,458 (203.090)10,632 All other expenses Total functional expenses. Add lines 1 through 24f 1,816,897 44,210 25 1,738,144 34,543 Joint costs. Check here ▶☐ if following SOP 98-2 (ASC 958-720). Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation

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Page **11**

| Р | art X | Balance Sheet | | | |
|-----------------------------|----------|---|--------------------------|-----------|------------------------|
| | | | (A) Beginning of year | | (B) End of year |
| | 1 | Cash—non-interest-bearing | | 1 | 535,428 |
| | 2 | Savings and temporary cash investments | 470,853 | 2 | 302,773 |
| | 3 | Pledges and grants receivable, net | 0 | 3 | 185,259 |
| | 4 | Accounts receivable, net | 16,471 | 4 | 33,838 |
| | 5 | Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L | 0 | 5 | 0 |
| 23 | 6 | Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) | 0 | 6 | 0 |
| Assets | 7 | Notes and loans receivable, net | 0 | 7 | 0 |
| As | 8 | Inventories for sale or use | 0 | 8 | 0 |
| | 9 | Prepaid expenses and deferred charges | 11,456 | 9 | 11,753 |
| | 10a | Land, buildings, and equipment: cost or | | | |
| | b | Less: accumulated depreciation 10b -16,661 | 19,999 | 10c | 8,320 |
| | 11 | Investments—publicly traded securities | 0 | 11 | 0 |
| | 12 | Investments—other securities. See Part IV, line 11 | 0 | 12 | 0 |
| | 13 | Investments—program-related. See Part IV, line 11 | 0 | 13 | 0 |
| | 14 | Intangible assets | 0 | 14 | 0 |
| | 15 | Other assets. See Part IV, line 11 | 7,735 | 15 | 7,735 |
| | 16 | Total assets. Add lines 1 through 15 (must equal line 34) | 526,514 | 16 | 1,085,106 |
| | 17 | Accounts payable and accrued expenses | 37,500 | 17 | 17,990 |
| | 18 | Grants payable | 0 | | 0 |
| | 19 | Deferred revenue | 20,000 | 19 | 0 |
| | 20 | Tax-exempt bond liabilities | 0 | 20 | 0 |
| S | 21 | Escrow or custodial account liability. Complete Part IV of Schedule D . | 0 | 21 | 0 |
| Liabilities | 22 | Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. | | | |
| 7 | | Complete Part II of Schedule L | 0 | 22 | 0 |
| | 23 | Secured mortgages and notes payable to unrelated third parties | 0 | | 0 |
| | 24 | Unsecured notes and loans payable to unrelated third parties | 0 | | 0 |
| | 25 | Other liabilities. Complete Part X of Schedule D | 0 | | |
| Se | 26 | Total liabilities. Add lines 17 through 25 | 57,500 | 26 | 17,990 |
| ğ | 27 | Unrestricted net assets | 94,024 | 報道 | 652.420 |
| ala | 27 28 | Temporarily restricted net assets | 374,990 | | 652,420 414,696 |
| 80 | 29 | Permanently restricted net assets | 374,990 | 29 | 414,030 |
| Net Assets or Fund Balances | 23 | Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34. | | | |
| S | 30 | Capital stock or trust principal, or current funds | | 30 | |
| Se | 31 | Paid-in or capital surplus, or land, building, or equipment fund | - | 31 | |
| As | 32 | Retained earnings, endowment, accumulated income, or other funds . | | 32 | |
| ét | 33 | Total net assets or fund balances | 469,014 | | 1,067,116 |
| ~ | 34 | Total liabilities and net assets/fund balances | 526,514 | | 1,085,106 |
| | | | | _ | Form 990 (2010) |

Form **990** (2010)

| 01111 3 | 90 (2010) | _ | | га | ige iz |
|---------|---|----------|-------------|--------------|--------|
| Par | IXI Reconciliation of Net Assets | | | | |
| | Check if Schedule O contains a response to any question in this Part XI | <u> </u> | <u></u> | | |
| _ | The Lawrence (mark and a Doub VIII) and army (A). Since 400 | 4 1 | | 2 44 | 4 000 |
| 1 | Total revenue (must equal Part VIII, column (A), line 12) | 1 | | _ <u>-</u> - | 4,999 |
| 2 | Total expenses (must equal Part IX, column (A), line 25) | 2 | | | 6,897 |
| 3 | Revenue less expenses. Subtract line 2 from line 1 | 3 | | _ | 8,102 |
| 4 | Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) | 4 | | 46 | 9,014 |
| 5 | Other changes in net assets or fund balances (explain in Schedule O) | 5 | | | 0 |
| 6 | Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B)) | 6 | | 1,06 | 7,116 |
| Part | Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XII | | | | |
| | | | | Yes | No |
| 1 | Accounting method used to prepare the Form 990: Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," expended on the control of | lain in | がは | | |
| 2a | Were the organization's financial statements compiled or reviewed by an independent accountant? . | | 2a | | 1 |
| b | Were the organization's financial statements audited by an independent accountant? | | 2b | 1 | |
| C | If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for over | ersight | | | |
| | of the audit, review, or compilation of its financial statements and selection of an independent accour | itant? | 2c | 1 | ĺ |
| | If the organization changed either its oversight process or selection process during the tax year, exp Schedule O. | olain in | | | |
| d | If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year issued on a separate basis, consolidated basis, or both: | r were | | | |
| | ✓ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis | | | | |
| 3a | As a result of a federal award, was the organization required to undergo an audit or audits as set f the Single Audit Act and OMB Circular A-133? | orth in | 3a | | 1 |
| b | If "Yes," did the organization undergo the required audit or audits? If the organization did not under | go the | | | |
| - | required audit or audits, explain why in Schedule O and describe any steps taken to undergo such au | | 3ь | n | a_ |
| | | | Form | 990 | (2010) |
| | | | | | |

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

2010

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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. ▶ See separate instructions.

Name of the organization **U.S. Climate Action Network** **Employer identification number** 20-4597308

| Pa | rt I Reason f | or Public Cha | rity Status (All orga | nization | s must c | omplete | this pa | rt.) See i | nstructio | ns. |
|----------|--|---|--|--|---|--------------------------------|--|-------------------------------------|--|---|
| The | organization is not | a private founda | tion because it is: (Fo | r lines 1 | through 1 | 1, check | only one | box.) | | - |
| 1 | A church, con | vention of churc | hes, or association of | churche | s describ | ed in sec | tion 170 | (b)(1)(A)(i |). | |
| 2 | ☐ A school desc | ribed in section | 170(b)(1)(A)(ii). (Attac | ch Sched | ule E.) | | | | | |
| 3 | ☐ A hospital or a | cooperative ho | spital service organiza | ation des | cribed in | section [•] | 170(b)(1)(| (A)(iii). | | |
| 4 | _ | earch organizatione, city, and state | on operated in conjunde: | ction with | n a hospit | al descri | bed in se | ction 17 | D(b)(1)(A)(| iii). Enter the |
| 5 | | on operated for ()(1)(A)(iv). (Com | the benefit of a colle- plete Part II.) | ge or uni | iversity o | wned or | operated | by a go | vernment | al unit described i |
| 6 7 | ☑ An organization | on that normally | nment or government receives a substantia (A)(vi). (Complete Par | al part of | | | | | nit or from | the general publi |
| 8 | ☐ A community | trust described i | n section 170(b)(1)(A |)(vi). (Cor | mplete Pa | art II.) | | | | |
| 9 | receipts from support from acquired by th | activities related gross investme ne organization a | receives: (1) more that to its exempt funct nt income and unre fter June 30, 1975. Se | ions-su lated bus ee sectio | bject to o siness ta on 509(a)(| certain exable inc 2). (Com | xceptions come (les plete Par | s, and (2) ss section t III.) | no more n 511 tax | than 331/3% of it |
| 10 11 | An organization | on organized ar one or more pub | operated exclusively d operated exclusive dicly supported organ describes the type of | ely for th nizations | ne benefi describe | t of, to d in sect | perform 1 ion 509(a | the funct a)(1) or se | ions of, dection 509 | (a)(2). See section |
| e | a ☐ Type By checking to their than found to the thing that found to the thing that found to the thing | I b [] his box, I certify indation manage | | ☐ Typi is not co | e III-Fun introlled o | ctionally lirectly or | integrate r indirectl | d y by one | d C |] Type III-Other lisqualified person |
| f | or section 509 If the organiz | | a written determination | on from | the IRS | that it is | а Туре | I, Type | ll, or Typ | e III supporting |
| g | | check this box . | | nted anv | | | on from a | | | |
| 8 | following pers | | io organization accep | piou uny | giit oi oi | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | , 0 | • | |
| | | | ndirectly controls, eit | | | | | | | d Yes No |
| | (iii) below, | the governing be | ody of the supported | organizat | ion? | | | | | 11g(i) |
| | (ii) A family m | ember of a person | on described in (i) abo | ove? | | | | | | 11g(ii) |
| | | | a person described ir | | | | | | | 11g(iii) |
| h | Provide the fo | llowing informati | on about the support | ed organ | ization(s). | | | | | |
| (1) | Name of supported organization | (ii) EIN | (iii) Type of organization (described on lines 1-9 above or IRC section (see instructions)) | in col. (i) la | organization sted in your document? | the organ | ou notify nization in of your port? | organizat (i) organi | s the tion in col. zed in the S.? | (vii) Amount of support |
| | | | (000 | Yes | No | Yes | No | Yes | No | |
| (A) | | | | | | | | | | · · · · · · · · · · · · · · · · · · · |
| (B) | | | | | | | | | | |
| (C) | | | | | | | | | | |
| (D) | | | | | | | | | | |
| (E) | | | • | | | | | - | | |
| Tota | | | | 企业 | · · · · · · · · · · · · · · · · · · · | | | | | |

Page 2

| Part | (Complete only if you checked to | he box on line | 5, 7, or 8 of | Part I or if th | e organizatio | n failed to qua | |
|-------------|---|------------------------------------|---------------------------------|---------------------------------|-----------------------------------|---|-----------------------------|
| <u> </u> | Part III. If the organization fails to | o qualify unde | er the tests lis | sted below, p | lease comple | te Part III.) | |
| | ion A. Public Support | (a) 2006 | (b) 2007 | (a) 2009 | (4) 2000 | (a) 2010 | /A Total |
| Caler | ndar year (or fiscal year beginning in) Figure Gifts, grants, contributions, and | (a) 2006 | (b) 2007 | (c) 2008 | (d) 2009 | (e) 2010 | (f) Total |
| • | Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") | 463,882 | 588,203 | 2,091,750 | 2,014,624 | 2,414,060 | 7,572,519 |
| 2 | Tax revenues levied for the organization's benefit and either paid to or expended on its behalf | 0 | 0 | 0 | 0 | 0 | 0 |
| 3 | The value of services or facilities furnished by a governmental unit to the organization without charge | 0 | 0 | 0 | 0 | 0 | 0 |
| 4 | Total. Add lines 1 through 3 | 463,882 | 588,203 | 2,091,750 | 2,014,624 | 2,414,060 | 7,572,519 |
| 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) | | | | | | 5,343,351 |
| 6 | Public support. Subtract line 5 from line 4. | | | | ECHELON STATE | | 2,229,168 |
| | ion B. Total Support | (a) 2006 | (b) 2007 | (a) 2009 | (d) 2000 | (a) 2010 | /O Total |
| Caler 7 | idar year (or fiscal year beginning in) Amounts from line 4 | 463,882 | 588,203 | (c) 2008 2,091,750 | (d) 2009 2,014,624 | (e) 2010 2,414,060 | (f) Total |
| 8 | Gross income from interest, dividends, | 403,062 | 300,203 | 2,091,750 | 2,014,624 | 2,414,060 | 7,572,519 |
| 0 | payments received on securities loans, rents, royalties and income from similar sources | o | 3,261 | 2,549 | 1,389 | 421 | 7,620 |
| 9 | Net income from unrelated business activities, whether or not the business is regularly carried on | 0 | 0 | 0 | 0 | o | 0 |
| 10 | Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) | 0 | 0 | 0 | 0 | 0 | 0 |
| 11 | | | | 2000年 | | ののではなか | 7,580,139 |
| 12 | Gross receipts from related activities, etc | • | • | | | 12 | 0 |
| 13 | First five years. If the Form 990 is for the | ne organization | 's first, secon | d, third, fourth | , or fifth tax ye | ear as a section | n 501(c)(3) |
| | organization, check this box and stop he | | | · · · · · · | • • • • | | ► ✓ |
| | on C. Computation of Public Suppor | | | 41 (0) | | 441 | |
| 14 15 | Public support percentage for 2010 (line of Public support percentage from 2009 Sci | | | | | 14 | <u>%</u> |
| 16a | 331/3% support test—2010. If the organi | | | | | | |
| | box and stop here. The organization qua | | | | | | |
| b | 331/3% support test—2009. If the organ check this box and stop here. The organ | nization did no | t check a box | on line 13 or | 16a, and line | | or more, |
| 17a | 10%-facts-and-circumstances test—20 10% or more, and if the organization me Part IV how the organization meets the "forganization | ets the "facts-a acts-and-circu | and-circumsta mstances" tes | nces" test, che | ck this box an ation qualifies | d stop here. E as a publicly su | xplain in |
| b | 10%-facts-and-circumstances test—20 15 is 10% or more, and if the organization members of the organization members of the organization. | tion meets the leets the "facts | facts-and-cir- and-circumst- | rcumstances" ances" test. Ti | test, check th ne organization | is box and sto n qualifies as a | and line p here. publicly |
| 18 | supported organization | | | | | | |

Schedule A (Form 990 or 990-EZ) 2010

Page **3**

| Part | III Support Schedule for Organiza | ations Desci | ribed in Sect | ion 509(a)(2) | No | t Apolical | ne |
|------------|--|-----------------|------------------|--|---|------------------|--------------|
| | (Complete only if you checked the | | | | ization failed | to qualify un | der Part II. |
| | If the organization fails to qualify | under the te | ests listed bel | ow, please c | omplete Part | H.) | |
| Secti | on A. Public Support | | | | | | |
| Calen | dar year (or fiscal year beginning in) | (a) 2006 | (b) 2007 | (c) 2008 | (d) 2009 | (e) 2010 | (f) Total |
| 1 | Gifts, grants, contributions, and membership fees | | ! | | | | |
| | received. (Do not include any "unusual grants.") | | <u> </u> | | | | |
| 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 | | | | | | |
| 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 | | | <u> </u> | | | |
| 5 | The value of services or facilities | | | | | | |
| | furnished by a governmental unit to the organization without charge | | | | | | |
| _ | _ | | <u> </u> | | | | |
| 6 70 | Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 | | | ļ | | | |
| <i>i</i> d | received from disqualified persons . | | | | | | 1 |
| L | Amounts included on lines 2 and 3 | | | | | | |
| b | received from other than disqualified | | | | | | |
| | persons that exceed the greater of \$5,000 | | | | | | |
| | or 1% of the amount on line 13 for the year | | | | | | |
| С | Add lines 7a and 7b | | | | | | |
| 8 | Public support (Subtract line 7c from | 2:13 Chain (| 第二個個的 工程 | THE REPORT OF | MANAGEM AND | 建 图 图 图 | |
| | line 6.) | | | | 13. 14. 15. 15. 15. 15. 15. 15. 15. 15. 15. 15 | | |
| Secti | on B. Total Support | | | | | | |
| Calen | dar year (or fiscal year beginning in) | (a) 2006 | (b) 2007 | (c) 2008 | (d) 2009 | (e) 2010 | (f) Total |
| 9 | Amounts from line 6 | | | | | | |
| 10a | Gross income from interest, dividends, | | 1 | | | | |
| | payments received on securities loans, rents, | | | 1 | | | |
| | royalties and income from similar sources . | | | | | | |
| b | Unrelated business taxable income (less | | | | | 1 | |
| | section 511 taxes) from businesses | | | | | | |
| | acquired after June 30, 1975 | , | <u> </u> | ļ | <u> </u> | | |
| | Add lines 10a and 10b | | | | | | |
| 11 | Net income from unrelated business | | | | | | |
| | activities not included in line 10b, whether or not the business is regularly carried on | | | | | | |
| 40 | | | } | <u> </u> | | <u> </u> | |
| 12 | Other income. Do not include gain or loss from the sale of capital assets | | | | 1 | | 1 |
| | (Explain in Part IV.) | | 1 | | 1 | | } |
| 13 | Total support. (Add lines 9, 10c, 11, | | | | | <u> </u> | |
| . • | and 12.) | | 1 |] | ĺ | | |
| 14 | First five years. If the Form 990 is for the | ne organization | n's first, secon | d, third, fourth | n, or fifth tax ve | ear as a section | n 501(c)(3) |
| | organization, check this box and stop he | _ | | | | | |
| Secti | on C. Computation of Public Suppor | | | | | | = |
| 15 | Public support percentage for 2010 (line 8 | | | 3, column (f)) | | 15 | % |
| 16 | Public support percentage from 2009 Sch | | | <u> </u> | <u> </u> | 16 | % |
| Secti | on D. Computation of Investment In | | | | | | |
| 17 | Investment income percentage for 2010 (| | | - | | | % |
| 18 | Investment income percentage from 2009 | | | | | | % |
| 19a | 331/3% support tests—2010. If the organ | | | | | | |
| - | 17 is not more than 331/3%, check this box | | - | | | - | _ |
| b | 331/3% support tests - 2009. If the organiz | | | | | | |
| | line 18 is not more than 331/2%, check this I | | - | • | | • • | |
| 20 | Private foundation. If the organization di | a not check a | DUX OH IINO 14 | , 13a, UT 190, (| JUBUR MIS DOX | anu see insilu | ctions ▶ 🔲 |

| Schedule A (F | om 990 or 990-E∠) 2010 | Page 4 |
|---------------|--|---------|
| Part IV | Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions). | |
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SCHEDULE C (Form 990 or 990-EZ)

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.

• Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

• Section 527 organizations: Complete Part I-A only.

• Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.

| If the organization answered "Yes | s," to Form 990, Part IV, line 4, or For | m 990-EZ, Part VI, | line 47 (Lobbying Activities | s), then |
|---|--|---------------------|--|--|
| | that have filed Form 5768 (election und | | • | |
| | that have NOT filed Form 5768 (election | | * ** | |
| - | s," to Form 990, Part IV, line 5 (Proxy | Tax) or Form 990-E | Z, Part V, line 35a (Proxy | Tax), then |
| Section 501(c)(4), (5), or (6) organization | anizations [.] Complete Part III. | | Employeride | entification number |
| U.S. Climate Action Network | | | Employer ide | 20-4597308 |
| | e organization is exempt und | or coation 501/ |) or is a section 507 | |
| | the organization's direct and indire | | | organization. |
| - | | • | • | \$ |
| 3 Volunteer hours | | • • • • • | | Ψ <u>υ</u> n/a |
| o volunteer modis | | | | |
| Part I-B Complete if th | e organization is exempt und | er section 501(| c)(3). | |
| | excise tax incurred by the organiza | | | \$ 0 |
| | excise tax incurred by organization | | | |
| 3 If the organization incurre | ed a section 4955 tax, did it file Fo | rm 4720 for this ye | ear? | Yes No |
| | | | | 🗌 Yes 🔲 No |
| b If "Yes," describe in Part | | | | |
| | e organization is exempt und | | | 1(c)(3). |
| _ | expended by the filing organization | | • | |
| | | | | 5 |
| 527 exempt function activi | filing organization's funds contrib | • | | • |
| • | spenditures. Add lines 1 and 2. | | | <u> </u> |
| | | | | r. |
| | file Form 1120-POL for this year? | | | Yes No |
| | es and employer identification num | | | |
| | nts. For each organization listed, e | | | |
| the amount of political cor | ntributions received that were pron | notly and directly | delivered to a separate of | political organization, such |
| | fund or a political action committee | | | |
| (a) Name | (b) Address | (c) EIN | (d) Amount paid from | (a) Amount of political |
| (a) Name | (b) Address | (C) E114 | (d) Amount paid from filing organization's | (e) Amount of political contributions received and |
| | | : | funds If none, enter -0 | promptly and directly delivered to a separate |
| | | | ł | political organization. If |
| | | | | none, enter -0 |
| (1) | | 1 | | |
| | | | | <u> </u> |
| (2) | } | | | |
| | | | | |
| (3) | | : | | |
| | | | | |
| (4) | | | | |
| | | | · | |
| (5) | } | | | |
| | | | | |
| (6) | } | ' | | |

2010 20-4597308 Schedule C (Form 990 or 990-EZ) 2010 Page 2 Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under Part II-A section 501(h)). Check ▶ ☐ if the filing organization belongs to an affiliated group. B Check ▶ ☐ if the filing organization checked box A and "limited control" provisions apply. **Limits on Lobbying Expenditures** (a) Filing (b) Affiliated organization's totals group totals (The term "expenditures" means amounts paid or incurred.) Total lobbying expenditures to influence public opinion (grass roots lobbying) 14,608 **b** Total lobbying expenditures to influence a legislative body (direct lobbying) . 12,735 Total lobbying expenditures (add lines 1a and 1b) 27,343 Other exempt purpose expenditures 1,789,554 d Total exempt purpose expenditures (add lines 1c and 1d) . . . 1,816,897 Lobbying nontaxable amount. Enter the amount from the following table in both 240,845 columns. if the amount on line 1'e, column (a) or (b) is: The lobbying nontaxable amount is: Not over \$500,000 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. \$1,000,000. Over \$17,000,000 Grassroots nontaxable amount (enter 25% of line 1f) 60,211 h Subtract line 1g from line 1a. If zero or less, enter -0-Subtract line 1f from line 1c. If zero or less, enter -0-0 If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 ☐ Yes ☐ No reporting section 4911 tax for this year? 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.)

| | Lobb | ying Expenditures | During 4-Year Av | veraging Period | | |
|----|---|-------------------|------------------|-----------------|-------------------|-----------|
| | Calendar year (or fiscal year beginning in) | (a) 2007 | (b) 2008 | (c) 2009 | (d) 2010 | (e) Total |
| 2a | Lobbying nontaxable amount | | 219,810 | 297,302 | 240,845 | 757,957 |
| b | Lobbying ceiling amount (150% of line 2a, column (e)) | | | | | 1,136,936 |
| C | Total lobbying expenditures | | 43,565 | 16,486 | 27,343 | 87,394 |
| d | Grassroots nontaxable amount | | 54,952 | 74,325 | 60,211 | 189,488 |
| е | Grassroots ceiling amount (150% of line 2d, column (e)) | | | | | 284,232 |
| f | Grassroots lobbying expenditures | | 5,173 | | 14,608 | 38,566 |

Schedule C (Form 990 or 990-EZ) 2010

Schedule C (Form 990 or 990-EZ) 2010 Page 3 Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)). Not Applicable (b) (a) Yes No **Amount** During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements? Mailings to members, legislators, or the public? . . . e Publications, or published or broadcast statements? Grants to other organizations for lobbying purposes? . . . f Direct contact with legislators, their staffs, government officials, or a legislative body? . Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?. Other activities? If "Yes." describe in Part IV Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? . If "Yes," enter the amount of any tax incurred under section 4912 If "Yes." enter the amount of any tax incurred by organization managers under section 4912. If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section Part III-A 501(c)(6). Yes No 1 Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? 2 Did the organization agree to carryover lobbying and political expenditures from the prior year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes." Dues, assessments and similar amounts from members 1 1 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). 2a 2b 2c C 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues . If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying 4 Taxable amount of lobbying and political expenditures (see instructions) Supplemental Information Part IV Complete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; and Part II-B, line 1i. Also, complete this part for any additional information.

| | mì 990 or 990-EZ) 2010 | Page 4 |
|---------|---|--------|
| Part IV | Supplemental Information (continued) | |
| _ | | |
| NONE | | |
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SCHEDULE D (Form 990)

Supplemental Financial Statements

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization ► Attach to Form 990. ► See separate instructions.

20-4597308 **U.S. Climate Action Network** Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts, Complete if the Part I organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds Total number at end of year 2 Aggregate contributions to (during year) . Addregate grants from (during year) . . 3 Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose ☐ Yes ☐ No 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 education) Protection of natural habitat Preservation of a certified historic structure ☐ Preservation of open space Complete lines 2a through 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 Tax Year Total number of conservation easements . . 2a Total acreage restricted by conservation easements 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, and not on a 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 3 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 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 6 7 Amount 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) ☐ Yes ☐ No 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 the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets, Part III Complete if the organization answered "Yes" to Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items. If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: Assets included in Form 990, Part X

Cat. No. 52283D

Schedule D (Form 990) 2010

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

. Schedule D (Form 990) 2010

Page 2

| Part | | | | | | | | | |
|----------|---|---------------------------------------|--|-------|--------------------------------|-----------|-----------------------|---------------|-------------|
| 3 | Using the organization's acquisition, a | accession, and o | ther recor | ds, | check any of t | he follov | ing that are a | significant u | se of its |
| | collection items (check all that apply): | | | | | | | N/A | |
| а | Public exhibition | | d l | | Loan or excha | | | , | |
| b | ☐ Scholarly research | | e l | | Other | | | | |
| C | ☐ Preservation for future generation | | | | | | | | |
| 4 | Provide a description of the organization | ion's collections | and expla | in h | ow they furthe | r the org | anization's exe | empt purpos | e in Part |
| | XIV. | | | | | | | | |
| 5 | During the year, did the organization | | | | | | | | |
| | assets to be sold to raise funds rather | | | | <u>~</u> | | | | □ No |
| Part | | | | | | answei | ed "Yes" to F | | art IV, |
| | line 9, or reported an amount | | | | | | : | N/A_ | |
| 1a | Is the organization an agent, trustee, | | | | | | | | |
| _ | included on Form 990, Part X? | | | | | | | · L Yes | ☐ No |
| þ | If "Yes," explain the arrangement in Pa | art XIV and comp | lete the fo | llow | ing table: | | | Amount | |
| | D | | | | | | | Arriourit | |
| C | Beginning balance | | | | | 1c | | | |
| d | Additions during the year | | | | | 1d | | - | |
| e | Distributions during the year | | | | | 1e | | | |
| f | Ending balance | | | | | | | | |
| 2a | Did the organization include an amoun If "Yes," explain the arrangement in Pa | | an A, IIII | 211 | | | | . Lites | ☐ No |
| | V Endowment Funds. Complete | | zation an | CVA/C | ered "Ves" to | Form 90 | O Part IV lin | no 10 N | J/A |
| гаг | Endownient Fands, Comple | (a) Current year | (b) Pric | | | | (d) Three years ba | | |
| 1a | Beginning of year balance | | \ | ,,,,, | (4,) | | E Contractor | | |
| b | Contributions | | | | | | | | |
| c | Net investment earnings, gains, and | | | | | | | | |
| _ | losses | | | | | ļ | | | |
| d | Grants or scholarships | | 1 | - | | | THE | A ANNUAL S | |
| 8 | Other expenditures for facilities and | · · · · · · · · · · · · · · · · · · · | | | | | STATE OF THE PARTY | in Care will | YON YOU |
| | programs | | | | | i i | | | |
| f | Administrative expenses | | 1 | | | | 444 | | |
| g | End of year balance | | <u> </u> | | | | | | |
| 2 | Provide the estimated percentage of the | ne year end balar | nce held a | s: | • | | | | |
| а | Board designated or quasi-endowmen | t 🕨 | % | | | | | | |
| b | Permanent endowment ▶ | % | | | | | | | |
| C | Term endowment ▶ % | | | | | | | | |
| 3a | Are there endowment funds not in the | possession of the | he organiz | atio | n that are held | and adr | ninistered for t | he | |
| | organization by: | | | | | | | Y | es No |
| | (i) unrelated organizations | | | | | | | 3a(i) | |
| | (ii) related organizations | | | | | | | 3a(ii) | |
| b | If "Yes" to 3a(ii), are the related organiz | | | | | | | 3b | |
| 4 | Describe in Part XIV the intended uses | | | | | | | | |
| Part | | | · · · · · · · · · · · · · · · · · · · | | | | | | |
| | Description of investment | (a) Cost or o | | (b) (| Cost or other basis (other) | | ccumulated preciation | (d) Book v | alue |
| 1a | Land | | | | | 12 101 | 量。可能是自由 | | |
| b | Buildings | | T | | | | | | |
| C | Leasehold improvements | | T | | | | | | |
| d | Equipment | <u> </u> | | | 24,981 | <u> </u> | -16,661 | - | 8,320 |
| <u>e</u> | Other | | | | | | | | |
| Total. | Add lines 1a through 1e. (Column (d) m | ust equal Form 9 | 190, Part X | , co | lumn (B), line 1 | 0(c).) . | ▶ | | 8,320 |

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶

Schedule D (Form 990) 2010 Page 3 Investments-Other Securities. See Form 990, Part X, line 12. Part VII (a) Description of security or category (b) Book value (c) Method of valuation. (including name of security) Cost or end-of-year market value (1) Financial derivatives (2) Closely-held equity interests . (3) Other (B) (Ĉ) (D) (E) (G) (I) Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) Investments-Program Related. See 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 (1) (2) (3) (4) (5) (6)(7) (8) (9) (10)Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.) Other Assets. See Form 990, Part X, line 15. (a) Description (b) Book value Security Deposit on rental lease for 1810 16th Street, NW Washington, DC 7,735 (1) (2) (3) (4) (5) (6) (7) (8) (9) (10)Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) . . . 7,735 Other Liabilities. See Form 990, Part X, line 25 (a) Description of liability (b) Amount (1) Federal income taxes (2)(3)(4) (5) (6) (7) (8) (9) (10)

2. FIN 48 (ASC 740) Footnote. In Part XIV, 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).

| Schedul | e D (Fom 990) 2010 | | | | _ | Page 4 |
|-------------------|---|-----------|------------|-------------|-------|-----------|
| Part | XI Reconciliation of Change in Net Assets from Form 990 to A | Audited | l Financia | I Statem | ents | |
| 1 | Total revenue (Form 990, Part VIII, column (A), line 12) | | | | 1 | 2,414,999 |
| 2 | Total expenses (Form 990, Part IX, column (A), line 25) | | | [| 2 | 1,816,897 |
| 3 | Excess or (deficit) for the year. Subtract line 2 from line 1 | | | [| 3 | 598,102 |
| 4 | Net unrealized gains (losses) on investments | | | [| 4 | 0 |
| 5 | Donated services and use of facilities | | | [| 5 | 0 |
| 6 | Investment expenses | | | 5 | 6 | 0 |
| 7 | Prior period adjustments | | | [| 7 | |
| 8 | Other (Describe in Part XIV.) | | | Г | 8 | 0 |
| 9 | Total adjustments (net). Add lines 4 through 8 | | | [| 9 | 0 |
| 10 | Excess or (deficit) for the year per audited financial statements. Combine | e lines 3 | and 9 . | [| 10 | 598,102 |
| Part | XII Reconciliation of Revenue per Audited Financial Statem | nents V | Vith Reve | enue per | Retu | rn |
| 1 | Total revenue, gains, and other support per audited financial statements | 3 | | | 1 | 2,414,060 |
| 2 | Amounts included on line 1 but not on Form 990, Part VIII, line 12: | | | | 144 | |
| а | Net unrealized gains on investments | 2a | | 0 | | |
| b | Donated services and use of facilities | 2b | | 0 | | |
| C | Recoveries of prior year grants | 2c | | 0 | | |
| d | Other (Describe in Part XIV.) | | | 0 | | |
| е | Add lines 2a through 2d | | | | 2e | 0 |
| 3 | Subtract line 2e from line 1 | | | | 3 | 2,414,060 |
| 4 | Amounts included on Form 990, Part VIII, line 12, but not on line 1: | 1 1 | | | 整盘 | |
| а | Investment expenses not included on Form 990, Part VIII, line 7b | 4a | | 421 | | i |
| b | Other (Describe in Part XIV.) | | | 518 | | • |
| С | Add lines 4a and 4b | | | | 4c | 939 |
| 5 | Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line | e 12.) | | | 5 | 2,414,999 |
| Part | Reconciliation of Expenses per Audited Financial States | ments | With Exp | enses po | er Re | turn |
| 1 | Total expenses and losses per audited financial statements | | | | 1 | 1,816,897 |
| 2 | Amounts included on line 1 but not on Form 990, Part IX, line 25: | | | | 4 | |
| а | Donated services and use of facilities | 2a | | 0 | | |
| ь | Prior year adjustments | | | 0 | | |
| С | Other losses | | | 0 | 1 | |
| d | Other (Describe in Part XIV.) | | | 0 | | |
| е | Add lines 2a through 2d | | | | 2e | 0 |
| 3 | Subtract line 2e from line 1 | | | | 3 | 1,816,897 |
| 4 | Amounts included on Form 990, Part IX, line 25, but not on line 1: | | | | 1.4 | |
| а | Investment expenses not included on Form 990, Part VIII, line 7b | 4a | | 0 | 130 | |
| b | Other (Describe in Part XIV.) | 4b | | 0 | | |
| С | Add lines 4a and 4b | | . , | | 4c | 0 |
| 5 | Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, lin | ne 18.) . | | | 5 | 1,816,897 |
| Part | (IV Supplemental Information | | | | | |
| Part V, any ad | ete this part to provide the descriptions required for Part II, lines 3, 5, and line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII ditional information. I, Line 4b - Computer equipment sold above book value: | | | | | |
| Pure | hased cost of equipment \$825 | | | | | |
| boo | c value -307 | | | | | |
| gair | on sale of asset 518 | | | | | |
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| Schedule D (For | | Page 5 |
|-----------------|---|---|
| Part XIV | Supplemental Information (continued) | |
| 25-215 | | |
| NONE | | |
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| | | Schedule D (Form 990) 2010 |

SCHEDULE.F (Form 990)

Statement of Activities Outside the United States

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

2010

OMB No. 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

► Attach to Form 990. ► See separate instructions.

Inspection

Employer identification number

| U.S. C | limate Action Network | | | | | 20-4597308 |
|--------|---|-------------------------------------|--|--|--|--|
| Part | Form 990, Part IV, line 14 | łb | | | Not Applicab | le |
| 1 | For grantmakers. Does the assistance, the grantees' eligi | bility for the gra | ints or assistance | to substantiate the e, and the selection of | amount of the grant | s or I the |
| | grants or assistance? | | | | | · Yes No |
| 2 | For grantmakers. Describe i United States. | n Part V the or | ganization's prod | cedures for monitorin | g the use of grant for | unds outside the |
| 3 | Activities per Region. (The follo | owing Part I, line | 3 table can be o | duplicated if additiona | l space is needed.) | |
| | (a) Region | (b) Number of offices in the region | (c) Number of employees, agents, and independent contractors in region | (d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region) | (e) If activity listed in (d) is a program service, describe specific type of service(s) in region | expenditures for |
| (1) | | | | | | |
| (2) | | | | | | |
| (3) | | | | | | |
| (4) | | | | | | |
| (5) | | | | | | |
| (6) | | | | | | |
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| (13) | | | | | | |
| (14) | | | | | | |
| (15) | | | | | | |
| (16) | | | | | | |
| (17) | <u> </u> | | | | | |
| 3a | Sub-total | | | Total Carlotte | ال الدروور المرابع المراجع الم | |
| | | | <u> </u> | ないといるないでする。なりに はないはないでは、10mm にはいれた。 | March of the market of the service | |
| b | Total from continuation sheets to Part I | | | | | |
| C | Totals (add lines 3a and 3b) | l | | 為然所得的問題 | には、かれば、情報を持 | |

Page 2

| Schedule F (F | Schedule F (Form 990) 2010 |
|---------------|--|
| Part II | Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, |
| | Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000 |
| | Part II can be duplicated if additional space is needed. |

| 1 (a) Name of organization | (b) IRS code section and EIN (if applicable) | organization (b) IRS code (c) Region (d) Purpose (grant grant (f applicable) | (d) Purpose of grant | (e) Amount of cash grant | (f) Manner of cash disbursement | (g) Amount of non-cash assistance | (h) Description of non-cash assistance | (i) Method of valuation (book, FMV, appraisal, |
|--|--|--|-------------------------|--------------------------|---------------------------------|-----------------------------------|---|--|
| | | EUROPE | Part IV | 1,039,800 WIRE | WIRE | 0 | 0 n/a | book |
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| U.S. | | | | | | | | |
| (A) | A Company of the Comp | | | | | | | |
| (a) (b) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c | | | | | | | | |
| (10) | The state of the s | | | | | | | |
| Carlotte Control of the Control of t | Catherine Catherine | | | | | | | |
| 4(12) The factor of the second | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | | | | | | | |
| (13) | 一 | | | | | | | |
| (44) Care Care Care Care Care Care Care Care | San | | | | , | | | |
| (6) | | | | | | | | |
| (10) | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | | | | | | | |

Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter N

Enter total number of other organizations or entities က

Schedule F (Form 990) 2010

| ran IV, line 10. | (h) Method of valuation (book, FMV, appraisal, other) | | | | | | | | | | | | | | | · | | | |
|---|---|-----|-----|-----|---|-----|-----|---|-----|-----|------|------|------|------|------|------|------|------|------|
| Grants and Outer Assistance to individuals Outside the Onited States. Complete it the organization answered tres to Form 390, Fart IV, line 10. Part III can be duplicated if additional space is needed. Νοτ Αρρίτου ΙΕ | (g) Description of non-cash assistance | | | | | | | | | | | | | | | | | | |
| Janization answered Le | (f) Amount of non-cash assistance | | | | | | | | | | | | | | | | | | |
| amplete il une organi. c. Applicable | (e) Manner of cash disbursement | | | | | | | | | | | | | | | | | | |
| United States. Com | (d) Amount of cash grant | | | | | | | | | | | | | | | | | | |
| ice is needed. | (c) Number of recipients | | | | | | | | | | | | | | | | | | |
| ated if additional spa | (b) Region | | | : | | | | | | | | | | | | | | | |
| ļ | (a) Type of grant or assistance | | | | | | | | | | | | | | | | | | |
| Lait | (a) T ₃ | (5) | (2) | (9) | 3 | (2) | (9) | 6 | (8) | (6) | (10) | (11) | (12) | (13) | (14) | (15) | (16) | (17) | (18) |

| cheau | ie F (Form, 990) 2010 | Page 4 |
|-------|--|----------|
| Part | V Foreign Forms | |
| 1 | Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926) | Yes ☑ No |
| 2 | Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A) | Yes ☑ No |
| 3 | Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with respect to Certain Foreign Corporations. (see Instructions for Form 5471) | Yes ☑ No |
| 4 | Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621) | Yes ☑ No |
| 5 | Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with respect to Certain Foreign Partnerships. (see Instructions for Form 8865) | Yes 📝 No |
| 6 | Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713) | Yes 🗹 No |

Schedule F (Form 990) 2010

| D | 5 |
|------|---|
| Page | Э |

| Complete this part to provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (accounting method); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estin number of recipients), as applicable. Also complete this part to provide any additional information (see instructions | (f) nated). ————— |
|--|-----------------------------|
| | |
| Part II - Grants and Other Assistance to Organizations outside the U.S. Purpose of Grant: | |
| | • |
| EUROPE - to support climate change coalition activities. | |
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SCHEDULE 0 (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047 2010

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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.

Employer identification number Name of the organization **U..** Climate Action Network 20-4597308

| Part VI, Section B, #12c: The organization monitors and enforces compliance with the conflict of interest policy by insuring that payments |
|--|
| are not being issued to covered parties in the policy. |
| PART VI, SECTION B, #15b: The process for determining compensation of the Executive Director requires a written and oral review of the |
| Executive Director by the Board followed by a board discussion and voting process. This process for determining the compensation of |
| Key employees requires a written and oral review of the candidate by the Executive Director. |
| PART VI, Section B: The organization has adopted a whistleblower, document retention/destruction, compensation and joint venture |
| policies, effective for the tax year ending June 30, 2011. |
| PART VI, Section C, #19: Governing documents, conflict of interest policy and financial statements are available to the public upon request. |
| FORM 990 Part VI, Line 10: Form 990 was circulated to Board of Directors prior to filing with the Internal Revenue Service. |
| FORM 990 Part III addıtional program services expenses: |
| Media Project: USCAN's Media Program consolidated messaging trends and media developments for use by U.S. environment groups. |
| Of special note was the effort to coordinate the collaborative work of dozens of NGOs to draw media attention to international climate |
| negotiations in Copenhagen, Denmark (Expenses \$41,222). |
| General Programs: USCAN's program work includes supporting and strengthening civil society organizations to influence the design and |
| development of an effective, equitable global strategy to reduce greenhouse gas emissions and ensure its implementation at international, |
| national and local levels. (Expenses \$497,405 including grants of \$189,800) (Revenue \$0.00) |
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