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For calendar year 2017, or tax year beginning 01-01-2017

As Filed Data -

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OMB No 1545-0052

2017

Form 990-PF

Department of the Treasury Internal Revenue Service

Return of Private Foundation or Section 4947(a)(1) Trust Treated as Private Foundation

▶ Do not enter social security numbers on this form as it may be made public.
 ▶ Information about Form 990-PF and its instructions is at www.irs.gov/form990pf.

, and ending 12-31-2017

Open to Public Inspection

Name of foundation The Burt's Bees Greater Good Foundation		A Employer identification number
% Foundation Source		26-0143643
Number and street (or P O box number if mail is not delivered to s Foundation Source 501 Silverside Rd	street address) Room/suite	B Telephone number (see instructions)
		(800) 839-1754
City or town, state or province, country, and ZIP or foreign postal c Wilmington, DE 198091377	code	C If exemption application is pending, check here
G Check all that apply 🔲 Initial return 🔲 Initial	l return of a former public charity	D 1. Foreign organizations, check here
□.Einal raturn □ Ama	inded return	7 Foreign organizations meeting the 95%
	in the second of	
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	_				
	2	Savings and temporary cash investments	120,837	36,448	36,448
	3	Accounts receivable ▶			
		Less allowance for doubtful accounts ▶			
	4	Pledges receivable ▶			
		Less allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule) ▶			
5		Less allowance for doubtful accounts ▶			
	8	Inventories for sale or use			
sets	9	Prepaid expenses and deferred charges			
Ass	10a	Investments—U S and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)			
	С	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment basis ▶			
		Less accumulated depreciation (attach schedule) ▶			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)			
	14	Land, buildings, and equipment basis ▶			
		Less accumulated depreciation (attach schedule) ▶			
	15	Other assets (describe >)			
	16	Total assets (to be completed by all filers—see the			
		instructions Also, see page 1, item I)	120,837	36,448	36,448
	17	Accounts payable and accrued expenses			_
	18	Grants payable			
les	19	Deferred revenue			
abilities	20	Loans from officers, directors, trustees, and other disqualified persons			
ıab	21	Mortgages and other notes payable (attach schedule)			
		00-1-1-1-1			

ı		3 3		
l	13	Investments—other (attach schedule)		
l	14	Land, buildings, and equipment basis ▶		
l		Less accumulated depreciation (attach schedule) ▶		
l	15	Other assets (describe >)		
l	16	Total assets (to be completed by all filers—see the		
l		ınstructions Also, see page 1, item I)	120,837	36
İ	17	Accounts payable and accrued expenses		
l	18	Grants payable		
l	19	Deferred revenue		
	20	Loans from officers, directors, trustees, and other disqualified persons		
l	21	Mortgages and other notes payable (attach schedule)		

Net Assets or Fund Balances

2

3

22 Other liabilities (describe Total liabilities(add lines 17 through 22) 23 Foundations that follow SFAS 117, check here ▶ and complete lines 24 through 26 and lines 30 and 31. 24 Unrestricted 25 Temporarily restricted 26 Permanently restricted . Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. Capital stock, trust principal, or current funds Paid-in or capital surplus, or land, bldg, and equipment fund

27 28 29 Retained earnings, accumulated income, endowment, or other funds 120,837 36,448 120,837 36,448 30 Total net assets or fund balances (see instructions) . 120,837 36,448 31 Total liabilities and net assets/fund balances (see instructions) . Part III Analysis of Changes in Net Assets or Fund Balances Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with endof-year figure reported on prior year's return) 120,837 Enter amount from Part I, line 27a 2 -84,389 Other increases not included in line 2 (itemize) 3 4 36,448 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ▶ Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 6 36,448

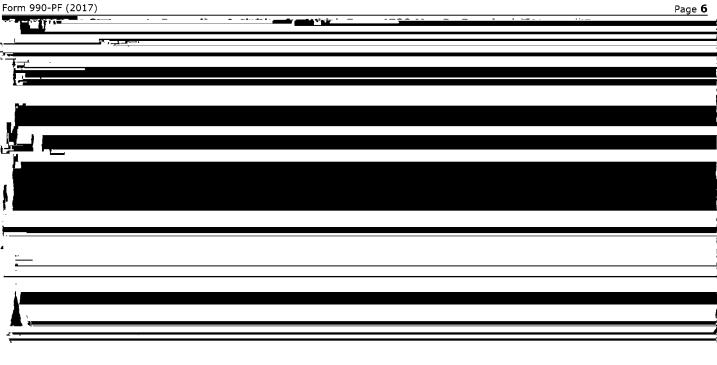
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Page **3**

List and describe	(b) How acquired	(c) Date acquired	(d) Date sold		
	the kınd(s) of property sold (e g , re ehouse, or common stock, 200 shs		P—Purchase D—Donation	(mo , day, yr)	(mo , day, yr)
1a			D-Donation		
					_
-					
-					
	(f)		(g)	+ ,	(h)
(e)	Depreciation allowed		other basis		or (loss)
Gross sales price	(or allowable)	plus expe	ense of sale		f) minuś (g)
а					
b					
c					
d					
e					
Complete only for asset	s showing gain in column (h) and ow	ned by the foundation	on 12/31/69		(1)
(i)	(j)	Ì	(k)	Gains (Col	(h) gain minus
(i) FMV as of 12/31/69	Adjusted basis		of col (ı)		: less than -0-) or
	as of 12/31/69	over col	(j), if any	Losses (fr	rom col (h))
a					
b					
<u>c</u>					
d					
<u>e</u>		If gain, also enter in P			
•	gain or (loss) sa defined in sections : art I, line 8, column (c) (see instructions)	ons) If (loss), enter -0	'	2	
	Under Section 4940(e) for Re	ndused Tay on Not	Investment I	ncomo	
	private foundations subject to the sec				
If section 4940(d)(2) applies,	·	ction 15 to(a) tax on he	e mvestment mes	ine)	
	·				
If "Yes," the foundation does n	ne section 4942 tax on the distributal ot qualify under section 4940(e) Do	not complete this part			es 🗹 No
	nount in each column for each year,	see instructions before	making any entri		
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitab	le-use assets	(d) Distribution rai (col (b) divided by	
2016	499,545		96,270		5 189
2015	353,527		79,407		4 452089
2014	299,182		52,264		5 724437
2013	343,848		86,763		3 963072
2012	283,097		89,774		3 153441
2 Total of line 1, column (d)		2		22 482039
number of years the fou	o for the 5-year base period—divide I ndation has been in existence if less oncharitable-use assets for 2017 fron	than 5 years 🔒 🗓	, or by the		4 496408 66,028
5 Multiply line 4 by line 3			5		296,889
6 Enter 1% of net investm	ent income (1% of Part I, line 27b)		6		3
7 Add lines 5 and 6			7		296,892
If line 8 is equal to or gr	cions from Part XII, line 4 , eater than line 7, check the box in Pa				590,580 ee the Part VI
instructions					orm 990-PF (2017)

Form 990-PF	(2017)		Page 4
Part VI	Excise Tax Based on Investment Income (S	ection 4940(a), 4940(b), 4940(e), o	r 4948—see instructions)
	E. 1 1021		<u> </u>
J			
1 [<u> </u>		
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Form	1 990-PF (2017)		Page 5
	rt VII-A Statements Regarding Activities (continued)		
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the		
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11	No
12	Did the foundation make a distribution to a depart adviced fund everywhich the foundation as a discussified nessen had-		
ı.			
,			
., .,			
	6 ·		
—т	otal		
	otal	Form 990	-PF (2017)
		101111 330	11 (2017)



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D		Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees,
Part VIII		and Contractors

1 List all officers, directors, truste	es, foundation managers a	nd their compensation	(see instructions).	
(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
Paula Alexander	Pres / Dır / Sec	0	Compensation	0
Foundation Source 501 Silverside Rd	10			ή
Wilmington, DE 198091377				
Matt Kopac	VP / Dir / Treas	0	(0
Foundation Source 501 Silverside Rd Wilmington, DE 198091377	1 0			
2 Compensation of five highest-pa	aid employees (other than t	hose included on line 1	see instructions) If no	ne enter "NONE "
2 compensation of five highest pe			Contributions to	ne, enter NONE.
(a) Name and address of each employee p more than \$50,000	Title, and average hours per week (b) devoted to position	(c) Compensation	employee benefit plans and deferred (d) compensation	Expense account, (e) other allowances
Total number of other employees paid ov	ver \$50,000			
3 Five highest-paid independent of				IE".
(a) Name and address of each perso	on paid more than \$50,000	(b) Typ	e of service	(c) Compensation
		=		
Total number of others receiving over \$5	0 000 for professional services			
	Charitable Activities	<u>, , , , , , , , , , , , , , , , , , , </u>		
List the foundation's four largest direct charitable		lude relevant statistical inform	nation such as the number of	
organizations and other beneficiaries served, coi			lation sach as the number of	Expenses
1				
2				
_				
3				
4				
Part IX-B Summary of Progra	m-Related Investments	(see instructions)		
Describe the two largest program-related inv		<u> </u>	and 2	Amount
1				7
<u>-</u>				
2				
-				
All other program-related investments	See instructions			
3	See mad dedons			
<u> </u>				
Total. Add lines 1 through 3 .				
			· · · · · · · · · · · · · · · ·	5 000 BE (2017)

2h

2c

3

4

5

6

1a

1b

2

3a 3b

4

5

3.298

3.298

3,298

590,580

590.580

590.577

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Income tax for 2017 (This does not include the tax from Part VI). . .

Distributable amount before adjustments Subtract line 2c from line 1.

Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1. . .

Expenses, contributions, gifts, etc —total from Part I, column (d), line 26.

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for

Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes

Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

Adjusted qualifying distributions. Subtract line 5 from line 4.

Qualifying Distributions (see instructions)

Amounts set aside for specific charitable projects that satisfy the

the section 4940(e) reduction of tax in those years

3

4 5

6

1

2

3

4

5

Part XII

Page 9

3,298

3,298

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b Total for prior years

a From 2012.

b From 2013. c From 2014. . .

d From 2015.

e From 2016.

1 Distributable amount for 2017 from Part XI, line 7

2 Undistributed income, if any, as of the end of 2017 a Enter amount for 2016 only.

Excess distributions carryover, if any, to 2017

f Total of lines 3a through e.

d Applied to 2017 distributable amount. . . . e Remaining amount distributed out of corpus

same amount must be shown in column (a))

5 Excess distributions carryover applied to 2017 (If an amount appears in column (d), the

a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income Subtract line 4b from line 2b c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. d Subtract line 6c from line 6b Taxable amount e Undistributed income for 2016 Subtract line 4a from line 2a Taxable amount—see instructions f Undistributed income for 2017 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2018 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) 8 Excess distributions carryover from 2012 not

applied on line 5 or line 7 (see instructions) . . .

Subtract lines 7 and 8 from line 6a

9 Excess distributions carryover to 2018.

10 Analysis of line 9

a Excess from 2013. . .

c Excess from 2015. . . .

d Excess from 2016. . .

e Excess from 2017. . .

b Excess from 2014. .

6 Enter the net total of each column as

indicated below:

4 Qualifying distributions for 2017 from Part XII, line 4 🕨 \$ a Applied to 2016, but not more than line 2a **b** Applied to undistributed income of prior years (Election required—see instructions). c Treated as distributions out of corpus (Election

2015 , 2014 , 2013

278.624 339,520

296.573

349.563 494,741

339.520 296,573

349.563

494.741

587.282

Form 990-PF (20	017)
Part XIII	Undi

stributed Income (see instructions) (a) (b) (c) (d)

1.759.021

587.282

2,346,303

278.624

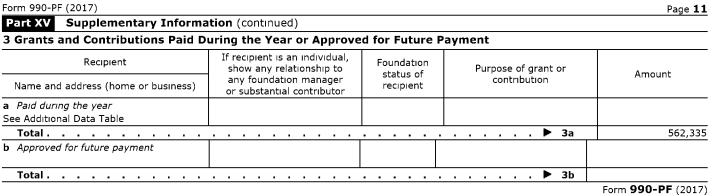
2,067,679

Corpus

Years prior to 2016

2016

orr	n 990-PF (2017)					Page 10
ŀ	art XIV Private Operating Found	ations (see ınstr	uctions and Part V	II-A, question 9)		
	If the foundation has received a ruling or defoundation, and the ruling is effective for 20	17, enter the date of	of the ruling	▶∟_	1 -	1
b Check box to indicate whether the organization is a private operating foundation described in section 4942(j)(3) or 494						
2a	Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years		(e) Total
	investment return from Part X for each year listed	(a) 2017	(b) 2016	(c) 2015	(d) 2014	. ,
b	85% of line 2a					
c	Qualifying distributions from Part XII, line 4 for each year listed					
d	Amounts included in line 2c not used directly for active conduct of exempt activities					
e	Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the alternative test relied upon					
а	"Assets" alternative test—enter					
	(1) Value of all assets(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
С	"Support" alternative test—enter					
	(1) Total support other than gross investment income (interest,					
	dividends, rents, payments					
	on securities loans (section 512(a)(5)), or royalties)					
	(2) Support from general public					
	and 5 or more exempt organizations as provided in					
	section $4942(j)(3)(B)(iii)$					
	(3) Largest amount of support from an exempt organization					
	(4) Gross investment income					
Pa	Supplementary Information	-		organization had	d \$5,000 or more	e in
L	assets at any time during th Information Regarding Foundation Man		ructions.)			
а	List any managers of the foundation who have before the close of any tax year (but only if NONE					n
b	List any managers of the foundation who own				arge portion of the	
	ownership of a partnership or other entity) of	or which the foundar	tion has a 10% or gr	eater interest		
2	Information Regarding Contribution, Gra	ant, Gift, Loan, Sc	holarship, etc., Pro	grams:		
	Check here ▶ ☑ If the foundation only mak unsolicited requests for funds If the founda other conditions, complete items 2a, b, c, ai	tion makes gifts, gr				der
a	The name, address, and telephone number of	or email address of t	the person to whom	applications should	be addressed	
	· · · · · · · · · · · · · · · · · · ·					
b	The form in which applications should be sul	omitted and informa	ition and materials th	ney should include		
С	Any submission deadlines					
_						
d	Any restrictions or limitations on awards, su factors	cn as by geographic	aı areas, charıtable f	rields, kinds of institi	utions, or other	



Enter gross amounts unless otherwise indicated		Unrelated business income		Excluded by section	(e) Related or exempt	
L Program	n service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions)
е						
_	and contracts from government agencies					
Intere	rship dues and assessments st on savings and temporary cash ments			14	323	
	ds and interest from securities					
	tal income or (loss) from real estate					
	financed property ebt-financed property					
	ntal income or (loss) from personal property					
	nvestment income.			+		
	r (loss) from sales of assets other than					
	ory					
	ome or (loss) from special events profit or (loss) from sales of inventory					
	evenue a					
b						
Subtot	al Add columns (b) (d) and (e)				323	
Total	Add line 12, columns (b), (d), and (e)			13	323	I
(See wo	orksheet in line 13 instructions to verify calcul	lations)				
art XVI			ment of Exem	nt Purposes		
	-B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	e Accomplish	ed in column (e) o	of Part XVI-A contribut		
ne No.	Relationship of Activities to th Explain below how each activity for which	e Accomplish	ed in column (e) o	of Part XVI-A contribut		
ne No.	-B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	e Accomplish	ed in column (e) o	of Part XVI-A contribut		
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ine No.	-B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	e Accomplish	ed in column (e) o	of Part XVI-A contribut		

Form 99	0-PF (2	2017)							Pa	ge 13
Part	XVII	Information Re Exempt Organi		ransfers To a	and Transaction	ons and Rela	tionships With Nonchari	table		
		anization directly or in Code (other than sectio					ation described in section 501 cal organizations?		Yes	No
a Tran	sfers f	rom the reporting foun	idation to a r	noncharitable ex	empt organization	n of				
(1)	Cash.							1a(1)		No
(2)	Other	assets						1a(2)		No
		sactions								
		of assets to a nonchar	•	-				1b(1)		No
		ases of assets from a r						1b(2)		No
		l of facilities, equipmer oursement arrangemen	•					1b(3) 1b(4)		No No
		or loan guarantees.						1b(4)		No
		nance of services or m						1b(6)		No
			•	_				1c		No
d If th of th	e answ ne good	er to any of the above ls, other assets, or ser	e is "Yes," cor vices given b	mplete the follow by the reporting	ving schedule Co foundation If the	lumn (b) should foundation rec	d always show the fair market eived less than fair market val assets, or services received		•	
(a) Line	No	(b) Amount involved	(c) Name of	noncharitable exe	mpt organization	(d) Descriptio	n of transfers, transactions, and sh	arıng arraı	ngemen	ts
					+					
		dation directly or indirent of the	,	•	•		•	☐Yes	✓	No
b If "Y	es," co	mplete the following so (a) Name of organization		l a) Type of organizat	ion I	(c) Description of relat	onship		
		(2) Hame or organization			, , , po o, o, gamea		(c) Bossipaidi di rolla			
	of my		, it is true, c				anying schedules and statemer her than taxpayer) is based or			
Sign Here		****			2018-04-04	****	* retur			
	,	ignature of officer or trustee		Date		Title	belov	the prepar / Instr)?	_	
		Print/Type preparer's	name	Preparer's Sigr	nature	Date	Check if self-			
Paid		Jeffrey D Haskell					employed ▶ □	P01345	770	
Prepared Use (Firm's name ▶ Four	ndation Sourc	ce			Firm's I	EIN ▶		

Firm's address ▶ One Hollow Ln Ste 212

Lake Success, NY 11042

Phone no (800) 839-1754

Form **990-PF** (2017)

orm 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
ALLIANCE MEDICAL MINISTRY INC 101 DONALD ROSS DR RALEIGH, NC 27610	N/A	PC	Community Garden & Wellness program	7,000
ANATHOTH COMMUNITY GARDEN INC PO BOX 138 CEDAR GROVE, NC 27231	N/A	PC	BEEts sweetening the connection between pollinators and the community they feed project	9,548
APIOPOLIS3324 TIMBERLAKE RD RALEIGH, NC 27604	N/A	PC	Pollinator Plant Propagation Program	10,000
APIOPOLIS3324 TIMBERLAKE RD RALEIGH, NC 27604	N/A	PC	Beekeeping equipment fund	1,000
ASHEVILLE GREENWORKSPO BOX 22	N/A	PC	Bee-coming Good Stewards	5.500

			project	
APIOPOLIS3324 TIMBERLAKE RD RALEIGH, NC 27604	N/A	PC	Pollinator Plant Propagation Program	10,00
APIOPOLIS3324 TIMBERLAKE RD RALEIGH, NC 27604	N/A	PC	Beekeeping equipment fund	1,00
ASHEVILLE GREENWORKSPO BOX 22	N/A	PC	Bee-coming Good Stewards	5,50

ASHEVILLE, NC 28802

Community Engagement in Creating Pollinator-Friendly Habitats in Asheville Project

Total . 562,335

За

Recipient	If recipient is an individual,	Foundation	Purpose of grant or	Amount
Recipient	show any relationship to	status of	contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	33.14.73.41.51	
a Paid during the year				
BEE DOWNTOWN FOUNDATION 624 W CLUB DR DURHAM, NC 27701	N/A	PC	The Buzz About Bees Project	5,000
BLACK FAMILY LAND TRUST INC PO BOX 2087 DURHAM, NC 27702	N/A	PC	Tierra Negra Farms Project	9,100
BOTANICAL GARDEN FOUNDATION INC CB 3375 CHAPEL HILL, NC 27599	N/A	PC	The Living Learning Landscape program (LLL)	7,000
CAROLINA FARM STEWARDSHIP ASSOCIATION PO BOX 448 PITTSBORO, NC 27312	N/A	PC	Bee Your Own Landscape Designer Project	5,000
CENTERPOINT MINISTRIES - NC INC 880 HARRIS JONES RD LOUISBURG, NC 27549	N/A	PC	General & Unrestricted	2,250

3a

orm 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
CHAPEL HILL-CARRBORO CHILDRENS MUSEUM - KIDZU CHIL 201 S ESTES DR STE A9 CHAPEL HILL, NC 27514	N/A	PC	Bee Accessible Ensuring Open- Access to Pollinator Education and Bee Mural Project	4,500
CHICAGO ACADEMY OF SCIENCES - THE PEGGY NOTEBAERT 2430 N CANON DR CHICAGO, IL 60614	N/A	PC	Rooftop Hive Health Project	916
CONETOE FAMILY LIFE CENTER INC PO BOX 203 CONETOE, NC 27819	N/A	PC	Beekeeping and Gardening Education and Technology program	20,000
CROATAN INSTITUTEPO BOX 2044 DURHAM, NC 27702	N/A	PC	Organic Agriculture Revitalization Strategy (OARS) in Northeastern North Carolina Project	10,000
DURHAM TECHNICAL COMMUNITY COLLEGE FOUNDATION INC 1637 E LAWSON ST DURHAM, NC 27703	N/A	SO III FI	Durham Tech's Campus Harvest Food Pantry Project	9,882

Total 3a Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year FARMER FOODSHARE INCPO BOX 2873 N/A PC Community Food Share Project 10,000 CHAPEL HILL, NC 27516 FOOD BANK OF CENTRAL & EASTERN N/A PC Building Pathways to Nutrition 10,000 NORTH CAROLINA INC Project 1924 CAPITAL BLVD RALEIGH, NC 27604

GREATER HOUSTON COMMUNITY FOUNDATION 5120 WOODWAY DR STE 6000 HOUSTON, TX 77056	N/A	PC	Hurricane Harvey Relief Fund	750
GROWING RURAL OPPORTUNITIES PO BOX 339 COLUMBUS, NC 28722	N/A	PC	Expanding GRO's ToolShare Cooperative to Support Local Beekeepers & Increase Pollinators	1,000
HABITAT FOR HUMANITY OF DURHAM INC 215 N CHURCH ST DURHAM, NC 27701	N/A	PC	DURHAM HABITAT'S SUSTAINABLE, POLLINATOR- FRIENDLY, AND DROUGHT RESISTANT LANDSCAPING	25,000

PROGRAM

Total.

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
HEALING WITH CAARE INC PO BOX 15567 DURHAM, NC 27704	N/A	PC	The Urban Sustainability Loop Waste Recycling, Aquaponic Food production, and Health and Wellness Education Program	8,205
INTER-FAITH FOOD SHUTTLE 1001 BLAIR DR NO 120 RALEIGH, NC 27603	N/A	PC	Urban Agriculture Education Project	13,500
INTERNATIONAL RESCUE COMMITTEE INC 122 E 42ND ST 12TH FL NEW YORK, NY 10168	N/A	PC	General & Unrestricted	500
LIVEGLOBALLY119 W MAIN ST STE 300 DURHAM, NC 27701	N/A	PC	General & Unrestricted	300
NATURESERVE 4600 N FAIRFAX DR 7TH FL ARLINGTON, VA 22203	N/A	PC	North Carolina PROJECTS	250

Total .

3a

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
NC FIELD INCPO BOX 121 KINSTON, NC 28502	N/A	PC	Planting Futures Project	9,000
NEWBORNS IN NEED - TRIANGLE NORTH CAROLINA 3812 CHIPPENHAM RD DURHAM, NC 27707	N/A	PC	General & Unrestricted	300
NORTH CAROLINA CENTER FOR PUBLIC POLICY RESEARCH I PO BOX 430 RALEIGH, NC 27602	N/A	PC	Reach NC Voices project Engaging Durham's Food Insecure in a Discussion About Their Future	7,500
NORTH CAROLINA CONSERVATION NETWORK 234 FAYETTEVILLE ST RALEIGH, NC 27601	N/A	PC	General & Unrestricted	10,500
NORTH CAROLINA EXTENSION MASTER GARDNER VOLUNTEER 130 AMMONS DR MORGANTON, NC 28655	N/A	PC	Bee Educated Project	1,500

Total . 3a 562,335

Form 990PF Part XV Line 3 - Grant	ts and Contributions Paid	During the '	Year or Approved for Future	Payment
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
NORTH CAROLINA MUSEUM OF ART FOUNDATION INC 4630 MAIL SERVICE CTR RALEIGH, NC 27699	N/A	PC	Bee Healthy Museum Landscape Project	8,000
NORTH CAROLINA MUSEUM OF LIFE & SCIENCE.	N/A	PC	Pollination Programming and Science of Eats Project	6,000
W. Control of the Con				
14				

Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
PARTNERSHIP FOR A SUSTAINABLE COMMUNITY 104 S ESTES DR CHAPEL HILL, NC 27514	N/A	PC	Fresh Bucks, SNAP/EBT and Administration Projects	4,600
DARTHERSHIR EAR A SHETAINARIE	I NI/A	ןשכ	Carrhore Farmers' Maximi Feed	. 7 205
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Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year RUNNING OVER CONNECTION INC N/A PC General & Unrestricted 600 122 PINEVIEW DR LOUISBURG, NC 27549 RURAL ADVANCEMENT FOUNDATION N/A PC Bring Back the Bees Year 2 -25,000 Program Administration INTERNATIONAL-USA PO BOY 640 campaign payment .000 ,000

PITTSBORO, NC 27312			campaign payment	
RURAL ADVANCEMENT FOUNDATION INTERNATIONAL-USA PO BOX 640 PITTSBORO, NC 27312	N/A	PC	Building NC Pollinator Habitat Collaboration and AAction Plan Project	20,0
RURAL ADVANCEMENT FOUNDATION INTERNATIONAL-USA PO BOX 640 PITTSBORO, NC 27312	N/A	PC	Burt's Bees-RAFI Bring Back the Bees Partnership Project	100,0

PC

BRING BACK THE BEES 2017

PROJECT

91,094

562,335

RURAL ADVANCEMENT FOUNDATION

INTERNATIONAL-USA

PITTSBORO, NC 27312

PO BOX 640

Total.

3a

N/A

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year RURAL ADVANCEMENT FOUNDATION N/A PC. Bring Back the Bees Year 2 -45,000 INTERNATIONAL-USA Program Administration PO BOX 640 PITTSBORO, NC 27312 SOUTHEASTERN EFFORTS DEVELOPING N/A PC 7.000 Seed-To-Feast Whole-Child

SUSTAINABLE SPACES 706 GILBERT ST DURHAM, NC 27701	N/A		Education - After school program	7,000
STEPUP NORTH CAROLINA 1701 OBERLIN RD RALEIGH, NC 27608	N/A	PC	StepUp Durham Green Jobs Initiative	7,500
THE CONSERVATION FUND 410 MARKET ST STE 360 CHAPEL HILL, NC 27514	N/A	PC	Resourceful Communities Division	250
TRIANGLE GAY MENS CHORUS	N/A	PC	General & Unrestricted	300

562,335

514 DANIELS ST 251 RALEIGH, NC 27605

> Total . 3a

Form 990PF Part XV Line 3 - Gran	orm 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount	
Name and address (home or business)	any foundation manager or substantial contributor	recipient			
a Paid during the year					
TRIANGLE LAND CONSERVANCY INC 514 S DUKE ST DURHAM, NC 27701	N/A	PC	Pollinator fields at Walnut Hill Project	10,000	
UNIVERSITY OF WISCONSIN FOUNDATION US BANK LOCKBOX 78807 MILWAUKEE, WI 53278	N/A	PC	General & Unrestricted	250	
VETERANS EMPLOYMENT BASE CAMP AND ORGANIC GARDEN 419 CONNER GRANT RD NEW BERN, NC 28562	N/A	PC	VEBCOG Beekeeping Program	1,000	
WOMEN THAT CARE INC 3341 WILLS GROVE LN APT 105 RALEIGH, NC 27615	N/A	PC	General & Unrestricted	300	

Total . .

За

efile GRAPHIC print - DO NOT PF	ROCESS #	As Filed Data -		DL	N: 93491107011008	
TY 2017 Accounting Fees Schedule						
Name: The Burt's Bees Greater Good Foundation						
EIN: 26-0143643						
Accounting Fees Schedule						
Category	Amou		Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	

AUDIT FEES

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -DLN: 93491107011008 Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing. TY 2017 Depreciation Schedule

Name: The Burt's Bees Greater Good Foundation EIN: 26-0143643

TY 2017 LiquidationExplanationStmt

Name: The Burt's Bees Greater Good Foundation

EIN: 26-0143643

Statement: As explained below, the Foundation has no plans for dissolution.

This statement is submitted to report the distribution of certain assets during the year. The distributions resulted in a substantial contraction of assets. The following information is submitted in accordance with Treasury Regulation Section 1.6043-3(a)(1) and the Form 990-PF instructions: During the taxable year ending December 31, 2017, the Foundation made distributions from assets from sources other than current income. Collectively, the distributions in excess of current income totaled \$562,335. This amount represents over 25% of the Foundation's net assets of \$120,837 (as measured by fair market value) at the beginning of the Foundation's taxable year ending December 31, 2017. Although the Foundation technically experienced a substantial contraction, it will continue in existence and has no plans for dissolution. The Foundation made distributions of cash to the grantees listed in the attachment to Part XV, Line 3a; each such grant was made solely for the charitable purpose specified therein.

efile GRAPHIC print - DO NOT PROCE	SS As Filed Data -		DLN	i: 93491107011008		
TY 2017 Other Expenses Schedule						
	me: The Burt's Bees	Greater Good Fo	oundation			
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		
Administrative Fees	20,400			20,400		
Foundation Dues & Memberships	945			945		

2,670

State or Local Filing Fees

efile GRAPHIC print - DO NOT PROCESS	As Filed Data	-	DL	N: 93491107011008		
TY 2017 Taxes Schedule						
	The Burt's B 26-0143643	ees Greater Good	Foundation			
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		
990-PF Excise Tax for 2016	5					

efile GRAPHIC print - D	O NOT PROCESS	As Filed Data -				DLN: 93491107011008	
Schedule B		Schedu	ule of Contributo	rs		OMB No 1545-0047	
(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service	► Information a	ibout Schedule B (F	ach to Form 990, 990-EZ, or 990-PF e B (Form 990, 990-EZ, or 990-PF) and its instructions is at <u>www.irs.gov/form990</u>			2017	
Name of the organization					Employer id	dentification number	
Organization type (chec	ck one)				26-0143643		
	•						
Filers of:	Section:						
Form 990 or 990-EZ	☐ 501(c)(501(c)() (enter number) organization					
	☐ 4947(a)(4947(a)(1) nonexempt charitable trust not treated as a private foundation					
	☐ 527 politi	☐ 527 political organization					
Form 990-PF	✓ 501(c)(3)	exempt private fo	undation				
	☐ 4947(a)(4947(a)(1) nonexempt charitable trust treated as a private foundation					
	☐ 501(c)(3)	501(c)(3) taxable private foundation					
			PF that received, during t omplete Parts I and II So				
Special Rules							
under sections 50 received from an	09(a)(1) and 170(b)	(1)(A)(vi), that che uring the year, tota	g Form 990 or 990-EZ that cked Schedule A (Form standard) al contributions of the gre plete Parts I and II	990 or 990-EZ), P	art II, line 13,	16a, or 16b, and that	
during the year, t	otal contributions o	f more than \$1,000	or (10) filing Form 990 of the control of the contr	, charitable, scien			
during the year, of If this box is check purpose Don't co	contributions <i>exclus</i> ked, enter here the omplete any of the p	eively for religious, total contributions parts unless the G o	or (10) filing Form 990 of charitable, etc., purposes that were received during eneral Rule applies to the or more during the year.	s, but no such con ng the year for an is organization be	itributions tota exclusively re cause it recei	aled more than \$1,000 eligious, charitable, etc, ived <i>nonexclusively</i>	
990-EZ, or 990-PF), but	it must answer "No	on Part IV, line 2	lle and/or the Special Rul , of its Form 990, or chec it it doesn't meet the filing	k the box on line	H of its		
For Paperwork Reduction A for Form 990, 990-EZ, or 990		ructions	Cat No 30613X	Schedu	ıle B (Form 990	o, 990-EZ, or 990-PF) (2017)	

Name of organ The Burt's Bees	ization Greater Good Foundation	Employer identification 26-0143643	Employer identification number 26-0143643			
Part I	Contributors (See instructions) Use duplicate copies of Part I if a	idditional space is needed				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
1	Burt's Bees c/o P Alexander 210 W Pettigrew st Durham, NC27701	\$ 505,873	Person Payroll Noncash			
(-)		(2)	(Complete Part II for noncash contributions)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
-			Person			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
			Person Payroll Noncash (Complete Part II for noncash contributions)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
		s	Person Payroll Noncash (Complete Part II for noncash contributions)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
		\$	Person			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
-		\$	Person			
		Schedule B (Fo	orm 990, 990-EZ, or 990-PF) (2017)			

Schedule B (Form 990, 990-EZ, or 990-PF) (2017)