(Rev. January 2020) Department of the Treasury Internal Revenue Service

# Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

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

Open to Public Inspection

OMB No. 1545-0047

Α	For the	2019 calendar year, or tax year beginning	and	ending						
В	Check if applicable	C Name of organization			D Employer identific	cation number				
	Addres									
	Name change	Doing business as			46-2032196					
	Initial return Final return/	Number and street (or P.O. box if mail is not delive 2831 GARBER STREET	ered to street address)	Room/suite	E Telephone numbe					
	termin- ated		IP or foreign postal code		G Gross receipts \$	370,039.				
	Ameno		Э р		H(a) Is this a group re					
	Application	F Name and address of principal officer: "" 2	ABETH MULLER		for subordinates					
	pendin	SAME AS C ABOVE			H(b) Are all subordinates in	ncluded? Yes No				
			(insert no.) 4947(a)(1)	or 527	If "No," attach a	list. (see instructions)				
_		e: ▶ WWW.BERKELEYEARTH.ORG			H(c) Group exemptio	n number 🕨				
K	Form of	organization: X Corporation Trust Asso	ociation Other 🕨	<b>∟</b> Year	of formation: 2013 N	🛮 State of legal domicile: CA				
P		Summary								
•	1	Briefly describe the organization's mission or most s	ignificant activities: THE	SPECIF	IC PURPOSE	OF THE				
Governance		CORPORATION IS THE ADVANCE	MENT OF SCIENC	Ε.						
ern	2	Check this box 🕨 📖 if the organization discont	than 25% of its net as	_						
Š	3	Number of voting members of the governing body (F			3	5				
<u>ه</u>	~	Number of independent voting members of the gove				4				
ies	5	Total number of individuals employed in calendar ye	ar 2019 (Part V, line 2a)			3				
Activities &		Total number of volunteers (estimate if necessary) $_{\dots}$				5				
Act		Total unrelated business revenue from Part VIII, colu				14,892.				
	b	Net unrelated business taxable income from Form 9	90-T, line 39	<u></u>	7b	0.				
					Prior Year	Current Year				
ne	8	Contributions and grants (Part VIII, line 1h)			357,016.	355,018.				
Revenue	9				0. 128.	0. 129.				
Be	10	Investment income (Part VIII, column (A), lines 3, 4, a			0.	14,892.				
		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9			357,144.	370,039.				
		Total revenue - add lines 8 through 11 (must equal F			337,144.	370,039.				
		Grants and similar amounts paid (Part IX, column (A)			0.	0.				
	1	Benefits paid to or for members (Part IX, column (A),			265,535.	123,053.				
Expenses	15	Salaries, other compensation, employee benefits (Pa Professional fundraising fees (Part IX, column (A), lin			0.	0.				
ben	loa h	Total fundraising expenses (Part IX, column (A), line	25\ \ 19.5	98.		0.				
Ä	17	Other expenses (Part IX, column (A), lines 11a-11d,			28,872.	105,710.				
		Total expenses. Add lines 13-17 (must equal Part IX)			294,407.	228,763.				
		Revenue less expenses. Subtract line 18 from line 1			62,737.					
or	3	nevenue less expensess. Cabillast into the frent line		Be	ginning of Current Year	End of Year				
Net Assets or Fund Balances	20	Total assets (Part X, line 16)			279,653.	420,929.				
ASS	21	Total liabilities (Part X, line 26)			0.	0.				
E	22	Net assets or fund balances. Subtract line 21 from li	ne 20		279,653.	420,929.				
	art II	Signature Block								
Und	der pena	lties of perjury, I declare that I have examined this return, ir	cluding accompanying schedule	s and statem	ents, and to the best of m	y knowledge and belief, it is				
true	e, correc	t, and complete. Declaration of preparer (other than officer)	is based on all information of wh	hich preparer	has any knowledge.					
Sig	ın	Signature of officer			Date					
He	re	ELIZABETH MULLER, EXEC.	DIRECTOR/PRES	IDENT						
		Type or print name and title		1.5	Noto I I	I DTIN				
D - '			Preparer's signature		Date Check Check If	PTIN				
Pai		JOE HUIE	CENT C TOVOR II	<u>_</u>	self-employe					
	parer	Firm's name LINDQUIST, VON HU		r	Firm's EIN ▶	94-1250261				
USE	Only	Firm's address 301 HOWARD STREET SAN FRANCISCO, CA			Dhan // 1	5-957-9999				
<u> </u>	41 1-	-			Prione no.41					
IVIa	v tne II	RS discuss this return with the preparer shown abov	e ( isee instructions)			X Yes No				

Par	rt III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	
1	Briefly describe the organization's mission:  THE SPECIFIC PURPOSE OF THE CORPORATION IS THE ADVANCEMENT OF SCIENCE.	1
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
	If "Yes," describe these new services on Schedule O.	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	No
	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and	
	revenue, if any, for each program service reported.	
4a	(Code:) (Expenses \$166 , 296 •including grants of \$) (Revenue \$	)
	BERKELEY EARTH'S WORK IN 2019 CONSISTED OF THE FOLLOWING:	
	A) CONTINUED WORK ON THE SCIENCE OF GLOBAL WARMING WHICH INCLUDED	
	REGULAR UPDATES TO THE TEMPERATURE DATA SET AND THE INCLUSION OF DAILY	
	LAND DATA AND;	
	D. A. GETTDY ON GLODAL ATD DOLLYETON	
	B) A STUDY ON GLOBAL AIR POLLUTION.	
4b	(Code:) (Expenses \$	<u> </u>
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$	
70	(Code) (Expenses \$	— ′
4d	Other program services (Describe on Schedule O.)	
	(Expenses \$ including grants of \$ ) (Revenue \$ )	
4e	166.006	

# Form 990 (2019) BERKELEY EAR Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			, v
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			7.7
_	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		X
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Λ
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		x
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for	-		
•	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, 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,		37	
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total	446		X
_	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII  Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total	11b		1
·	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		х
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			, v
40	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E  Did the organization maintain an office, employees, or agents outside of the United States?	13		X
14a	Did the organization maintain an onice, employees, or agents outside of the office States?  Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	14a		22
b	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			,,
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	40		x
10	1c and 8a? If "Yes," complete Schedule G, Part II	18		
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	19		X
20a	complete Schedule G, Part III  Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
zua b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		<u> </u>
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
_	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Х

# Form 990 (2019) BERKELEY EARTH, IN Part IV Checklist of Required Schedules (continued)

Part IX, column (A), line 27 (If "Yes," complete Schedule I, Parts I and III.  22 X  23 Did the organization inserve "Yes" to Part IVI, Scioton A, line 3.4, or 65 abut compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J and 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 J ("No", or ool nine accrow account of the three schedule J with the organization may be a several proceeds of tax exempt bonds beyond a temporary period exception?  24b Did the organization marks an excrew account of the thran a refunding secrow at any time during the year?  24c Did the organization marks an "on behalf of" issuer for bonds outstanding at any time during the year?  24d J L L L L L L L L L L L L L L L L L L		<del></del>		Yes	No
23 Dit the organization surser: "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule I, W "No," by to line 25a.  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," arrayer lines 24b through 24d and complete Schedule IV, If "No," by to line 25a.  25b Did the organization invest are yproceeds of tax-exempt bonds beyond a temporary period exception?  25c Did the organization maritaria an escrew account other than a refunding secrew at any time during the year to defease any tax-exempt bonds?  25d Did the organization area as an "on behalf of" issuer for bonds outstanding at any time during the year?  25d Section 501(6)3, 501(6)4), and 501(6)29 organizations. Did the organization area are the tangaged in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule I, Part I  25d Section 501(6)3, 501(6)4), and 501(6)29 organizations. Did the organization area are the tangaged in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule I, Part I  25d Did the organization aware that the rapaged in an excess benefit transaction with a disqualified person of any of the organization shape the tangaged in an excess benefit transaction with a disqualified person of any of the organization provide any anound on Part X, line 5 or 22. for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or my payables on any current or former officer, director, trustee, key employee, creator or founder, substantial contributors and the payable Schedule I, Part II    26d A current or former, director, trustee, key employee, creator or founder, or as 35% controlled enti	22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J.  23 X  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 24th through 24d and complete Schedule J. Who." go to him 25s  24a Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?  24b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?  24c Did the organization may an accrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?  24d Old the organization acts as an "on behalf of" issuer for bonds outstanding at any time during the year?  24d Old the organization available person during the year? If "Yes," complete Schedule I, Part I  25a Section 501(5)(3), 501(6)(4), and 501(6)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person in a prior year, and that the transaction with a disqualified person in a prior year, and that the transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organizations prior Forms 990 or 990-E27 If "Yes," complete Schedule I, Part II  25d Did the organization prior agrant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, or agrinal selection committee member, or to a 35% controlled entity finchioging an employee thereof) or family member of any of three persons? If "Yes," complete Schedule I, Part II  27d Vas the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor? II "Yes, complete Schedule I, Part II  28d Vas the organization receive more than \$25,000 in no		Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
Schedule J  28    X  29    Alt 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." yo to line 25a	23				
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 I. Part IV 7Nc, "go to law 25a 9.  b Did the organization invest any proceeds of tax exempt bonds beyond a temporary pende exception?  24b Did the organization invest any proceeds of tax exempt bonds beyond a temporary pende exception?  24d Did the organization marks an acrow account other than a refinding escrow at yrite during they year?  24d Did the organization as an "on behalf of" issuer for bonds outstanding at any time during they year?  25a Section 591(5)(3), 501(4)(4), and 501(6)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule I., Part I  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 spore forms 990 or 990-0127 If "Yes," complete Schedule I., Part I  25b Did the organization aprovide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or forunder, substantial contributor, or 35% controlled entity or family member of any of these persona? If "Yes," complete Schedule I., Part II    26c X  27d Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor? If "Yes," complete Schedule I., Part II    28d Was the organization provide a grant or other assistance to any current or forunder officer, director, trustee, key employee, creation or forunder, or substantial contributor? If "Yes," complete Schedule I., Part II    28d A C A 35% controlled entity of one or more individuals and/or organization seceribed in lines 28a or 28b? II "Yes," complete Schedule I., Part					7,7
sast day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete \$25b. Did the organization invest any proceeds of tax exempt bonds beyond a temporary period exception?  24b   24	•	Schedule J	23		
Schedule K. If "No." go to line 256 b Did the organization miser any proceeds of tax-exempt bonds beyond a temporary period exception? c Did the organization maintain an escrew account other than a refunding secrow at any time during the year to defease any tax exempt bonds? d Did the organization are as an "on behalf of" issuer for bonds outstanding at any time during the year? 25a Section 501(c)(3), 501(c)(4), and 501(c)(20) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I yes, "complete Schedule L, Part I yes," complete Schedule L, Part I yes, "complete Schedule L, Part I yes," complete Schedule L, Part I yes, "complete Schedule L, Part I yes," complete Schedule L, Part I yes, "complete Schedule L, Part I yes," complete Schedule L, Part I yes, "complete Schedule L, Part I yes," complete Schedule L, Part I yes, "complete Schedule L, Part I yes," complete Schedule L, Part I yes, "complete Schedule L, Part I yes," complete Schedule L, Part I yes, "complete Schedule L, Part I yes," complete Schedule L, Part I yes, "complete Schedule L, Part I yes," complete Schedule L, Part I yes, "complete Schedule L, Part I yes, "complete Schedule L, Part I yes," complete Schedule L, Part I yes, "complete Schedule L, Part I yes," yes, "complete Schedule L, Part I yes," complete Schedule L, Part I yes, "complete Schedule L, Part I yes," yes, "complete Schedule L, Part I yes, "complete Schedule L, Part I yes," yes, yes, yes, yes, yes, yes, yes, yes,	24a	· · · · · · · · · · · · · · · · · · ·			
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?  b Did the organization maintain an escrew account other than a refunding escrew at any time during the year to defease any tax-exempt bonds?  d Did the organization act as an 'no behalf of' issuer for bonds outstanding at any time during the year?  24d			242		x
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax exempt bonds?  d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  25a Section 501(c)(3), 501(c)(4), and 501(c)(20) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Se," complete Schedule L, Part I   25a   X    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 with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization provide any of these persons? If "Yes," complete Schedule L, Part III   25b   X   27c   2	b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?			
any tax-exempt bonds?  d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  24d   24					
d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?  25a Section 501(c)(3), 501(c)(4), and 501(c)(2)) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I  25b 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 in prior Forms 990 or 990(E2)? If "Yes," complete Schedule L, Part I  25c Is Did the organization propriary amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity of the age grant or other assistance to any current or former officer, trustee, key employee, creator or founder, substantial contributor, or a 35% controlled entity (including an employee thereof) or farm yor three persons? If "Yes," complete Schedule L, Part III  26			24c		
transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
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-E27 if "Yes," complete Schedule L, Part I	25 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E27 // "Yes," complete Schedule L, Part I   26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? // "Yes," complete Schedule L, Part II   27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or almyl member of any of these persons? // "Yes," complete Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions):  a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? // "Yes," complete Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions):  b A family member of any individual described in line 28a? // "Yes," complete Schedule L, Part IV 28b A family member of any individual described in line 28a or 28b? // "Yes," complete Schedule L, Part IV 28c A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? // "Yes," complete Schedule L, Part IV 28c A 35b Did the organization receive more than \$25,000 in non-cash contributions? // "Yes," complete Schedule M 29 X 30 Did the organization receive more than \$25,000 in non-cash contributions? // "Yes," complete Schedule M 30 X 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets; // "Yes," complete Schedule N, Part II 31 X 32 Did the organization on 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-37 // "Yes," complete Schedule R, Part V, lin		transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
Schedule L, Part I  26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II 26 A X 27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III 27 X 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):  a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV 28a X 28b X C A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b7lf "Yes," complete Schedule L, Part IV 28b Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 X X 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 29 X X 29 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31 X X 29 Did the organization inquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I II X X 29 Did the organization with a controlled entity within the meaning of section 512(b)(13)? Yes," complete Schedule R, Part I II X X 29 Did the organization on though of an entity disregarded as separate from the organization with a controlled entity within the meaning of section	b				
Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity of family member of any of these persons? If "Yes," complete Schedule L, Part II 26 X  27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee) thereof or family member of any of these persons? If "Yes," complete Schedule L, Part III 27 X  28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part III 27 X  28 Was the organization aparty to a business transaction with one of the following parties (see Schedule L, Part III 27 X  28 Was the organization in circle, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV 28 X  28 A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If "Yes," complete Schedule L, Part IV 28 X  29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M, Part IV 28 X  30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M, Part II 31 X  31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II 31 X  32 Did the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II 32 X  33 Did the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part IV, III or IV, and Part V, III or III or III organization complete Schedule N organization complete Schedule R, Part V		Cohodula I. David	25h		x
or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II   27   28   27   28   27   28   27   28   27   28   27   28   27   28   27   28   27   28   28	26				
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"Yes," complete Schedule L, Part IV  b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV  c A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b?If  "Yes," complete Schedule L, Part IV  28c					
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c A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b?//  "Yes," complete Schedule L, Part IV  28c X  29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M  29 X  30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M  30 X  31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I  31 X  32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part I  31 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I  33 X  34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1  35 Did the organization have a controlled entity within the meaning of section 512(b)(13)?  35 Bif "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2  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  37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI  38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?  Note: All Form 990 filers are required to complete Schedule O  4 Statements Regarding Other IRS Filings and Tax Compliance  Check if Schedule O contains a response or note to any line in	h				
"Yes," complete Schedule L, Part IV  29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M  30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M  30 X  31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I  31 X  32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II  32 X  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  34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1  35 Did the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2  35 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 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 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  37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part V II  38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?  Note: All Form 990 filers are required to complete Schedule O  19 Statements Regarding Other IRS Filings and Tax Compliance  Che			200		
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Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M  Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I  Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II  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  Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, Iine 1  Saba Did the organization have a controlled entity within the meaning of section 512(b)(13)?  If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?  If "Yes," complete Schedule R, Part V, Iine 2  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, Iine 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, Iine 2  36 Subject to the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI  Statements Regarding Other IRS Filings and Tax Compliance  Check if Schedule O contains a response or note to any line in this Part V  Test the number reported in Box 3 of Form 1096. Enter 0- if not applicable  Definition that is preated, and the organization line to a publicable  Test the number of Forms W-2G include	29				
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Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II  32		contributions? If "Yes," complete Schedule M	30		
Schedule N, Part II  32	31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х
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Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V  Yes No  1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable  1b  0	38			<sub>v</sub>	
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b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	_			Yes	No
b Enter the framework of Fermi W 24 mondage in line fat. Enter 6 minet applicable					
		Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
(gambling) winnings to prize winners?	C		1c	Х	

# BERKELEY EARTH, INC. Statements Regarding Other IRS Filings and Tax Compliance (continued) Part V

				Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,				
	filed for the calendar year ending with or within the year covered by this return	2a 3			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns	ns?	2b	X	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions	s)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?		За		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule	0	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other	authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial	account)?	4a		X
b	If "Yes," enter the name of the foreign country ▶				
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A	ccounts (FBAR).			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	ction?	5b		X
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		5с		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the				
	any contributions that were not tax deductible as charitable contributions?		6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contribut	ions or gifts			
	were not tax deductible?		6b		
7	Organizations that may receive deductible contributions under section 170(c).				37
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and ser		7a		X
	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was the first seven access.		<b>-</b>		х
	to file Form 8282?		7с		Λ
	If "Yes," indicate the number of Forms 8282 filed during the year		7-		Х
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit or		7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contribution of qualified intellectual property, did the organization file.		7f		-22
g h	If the organization received a contribution of qualified intellectual property, did the organization file For the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization received a contribution of cars, boats, airplanes, airplanes		7g 7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained		/!!		
Ū	sponsoring organization have excess business holdings at any time during the year?		8		
9	Sponsoring organizations maintaining donor advised funds.				
а	Didd		9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		9b		
10	Section 501(c)(7) organizations. Enter:				
а	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	Section 501(c)(12) organizations. Enter:				
а	Gross income from members or shareholders	11a			
	Gross income from other sources (Do not net amounts due or paid to other sources against				
	amounts due or received from them.)	11b			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.				
а	Is the organization licensed to issue qualified health plans in more than one state?		13a		
	<b>Note:</b> See the instructions for additional information the organization must report on Schedule O.				
b	Enter the amount of reserves the organization is required to maintain by the states in which the	l I			
	organization is licensed to issue qualified health plans	13b			
	Enter the amount of reserves on hand	13c	44		v
			14a		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedu		14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remune		4-		х
	excess parachute payment(s) during the year?		15		Λ
16	If "Yes," see instructions and file Form 4720, Schedule N.	t incomo?	16		Х
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment of "You" complete Form 4720. School up O	LINCOME?	16		Λ
	If "Yes," complete Form 4720, Schedule O.				

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

	Check if Schedule O contains a response or note to any line in this Part VI			X							
Sec	tion A. Governing Body and Management										
			Yes	No							
1a	Enter the number of voting members of the governing body at the end of the tax year	1									
	If there are material differences in voting rights among members of the governing body, or if the governing										
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.										
b	Enter the number of voting members included on line 1a, above, who are independent 1b 4										
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other										
	officer, director, trustee, or key employee?	2	X								
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision										
	of officers, directors, trustees, or key employees to a management company or other person?	3		X							
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х							
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х							
6	Did the organization have members or stockholders?	6		Х							
7a											
	more members of the governing body?	7a		X							
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or										
	persons other than the governing body?	7b		X							
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:										
а	The governing body?	8a	Х								
b	Each committee with authority to act on behalf of the governing body?	8b	Х								
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the										
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		Х							
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)										
			Yes	No							
10a	Did the organization have local chapters, branches, or affiliates?	10a		Х							
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,										
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b									
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х								
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.										
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х								
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х								
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe										
	in Schedule O how this was done	12c	X								
13	Did the organization have a written whistleblower policy?	13		X							
14	Did the organization have a written document retention and destruction policy?	14		Х							
15	Did the process for determining compensation of the following persons include a review and approval by independent										
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?										
а	The organization's CEO, Executive Director, or top management official	15a	X								
b	Other officers or key employees of the organization	15b	Х								
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).										
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a										
	taxable entity during the year?	16a		X							
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation										
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's										
	exempt status with respect to such arrangements?	16b									
Sec	tion C. Disclosure										
17	List the states with which a copy of this Form 990 is required to be filed ►CA										
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)	s)s only	/) avail	able							
	for public inspection. Indicate how you made these available. Check all that apply.										
	Own website Another's website X Upon request Other (explain on Schedule O)										
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, are	ıd fina	ncial								
	statements available to the public during the tax year.										
20	State the name, address, and telephone number of the person who possesses the organization's books and records										
	THE ORGANIZATION - (510) 926-6446										
	2831 GARBER STREET, BERKELEY, CA 94705										

932007 01-20-20

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

Check if Schedule O contains a response or note to any line in this Part VII

#### Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

See instructions for the order in which to list the persons above.

(A)	(B)			_ ((	<b>C)</b>			(D)	(E)	(F)
Name and title	Average hours per week	offi	not c , unle	Pos heck ss pe nd a d	more rson	than is bot or/trus	one h an tee)	Reportable compensation from	Reportable compensation from related	Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) ELIZABETH MULLER EXEC. DIRECTOR/PRESIDENT	10.00	x		x				94,500.	0.	(
(2) WILL GLASER	2.00									
FREASURER (3) BILL SHIREMAN	1.00	Х		Х		_		0.	0.	(
SECRETARY		Х		х				0.	0.	(
(4) RICHARD MULLER DIRECTOR	5.00	X						0.	0.	(
(5) ROBERT J BUDNITZ DIRECTOR	1.00	х						0.	0.	
(6) JIM BOETTCHER DIRECTOR	1.00	х						0.	0.	
(7) JUDITH SISSENER DEPUTY EXEC. DIRECTOR	40.00	_		х				11,267.	0.	(
		_								

Form **990** (2019)

46-2032196

Par	t VII Section A. Officers, Directors, Trus	tees, Key Em	ploy	ees	, an	d Hi	ighe	st C	Compensated Employe	es (continued)				
	(A) Name and title	(B) Average hours per week	box offi	not c	Pos heck ss pe	more rson	than is bot or/trus	h an	( <b>D</b> )  Reportable  compensation  from	(E) Reportable compensation from related	on d	1	(F) stimate nount o other	
		(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizatior (W-2/1099-MI		fr org an	npensa rom the ganizati d relate anizatio	e ion ed
		,	드	드	Ö	3 <u>y</u>	王も	고						
												_		
	Subtotal								105,767.		0.			0 .
	Total from continuation sheets to Part VI  Total (add lines 1b and 1c)  Total number of individuals (including but n							<u> </u>	0. 105,767.	000 of reportab	0.			0.
_	compensation from the organization	iot iii iii ii		- 11310					econed more than proc	7,000 of Toportal			Yes	No
3	Did the organization list any <b>former</b> officer, line 1a? <i>If</i> "Yes," <i>complete Schedule J for</i> s	uch individual										3		Х
4 5	For any individual listed on line 1a, is the su and related organizations greater than \$150 Did any person listed on line 1a receive or a	0,000? <i>If</i> "Yes,	" co	mple	ete S	Sche	edul	e J i	for such individual			4		X
	rendered to the organization? If "Yes," comtion B. Independent Contractors					-						5		Х
1	Complete this table for your five highest co the organization. Report compensation for								n the organization's tax		npens			
	(A) Name and business	address	N	INC	3				( <b>B)</b> Description of s	services	C		C) ensatio	n
	<b>T</b>													
2	Total number of independent contractors (i \$100,000 of compensation from the organi		ot li	mite	a to		se li 0	stec	d above) who received n	nore than				

Form	990	) (2	$_{ m 2019)} \hspace{1.5cm} { m BER}$	KE	LEY	EART	H, INC.			46-2032	196 Page <b>9</b>
Pa	rt V	<u> </u>									
		_	Check if Schedule O	cont	ains a r	esponse	or note to any lin	e in this Part VIII			
								(A) Total revenue	Related or exempt	(C) Unrelated business revenue	( <b>D)</b> Revenue excluded from tax under sections 512 - 514
ıts ts	1	а	Federated campaigns			1a					
aran oun			Membership dues			1b					
Contributions, Gifts, Grants and Other Similar Amounts			Fundraising events			1c					
ar,						1d					
imi		е	Government grants (contr	ributi	ions)	1e					
tion 's		f	All other contributions, gifts,	grant	ts, and						
ig H			similar amounts not included	abov	/e	1f	355,018.				
g		g	Noncash contributions included in	lines	1a-1f	1g \$					
<u>8</u> 0		h	Total. Add lines 1a-1f					355,018.			
							Business Code				
<u>e</u>	2	а									
Program Service Revenue		b									
n S		С									
grar Rev		d									
jo_		е									
-			All other program service								
$\overline{}$	g Total. Add lines 2a-2f										
	3		Investment income (includ	_		-		129.			129.
			other similar amounts)					149.			129.
	4						-				
	5		Royalties			Real	(ii) Personal				
	6	2	Gross rents	6a	(1)	rioui	(ii) i oroona.				
			Gross rents Less: rental expenses	6b							
			Rental income or (loss)	6c							
			Net rental income or (loss)								
			Gross amount from sales of	Έ		curities	(ii) Other				
	•	_	assets other than inventory	7a	.,		( )				
		b	Less: cost or other basis								
ne			and sales expenses	7b							
Revenue		С	Gain or (loss)	7с							
			Net gain or (loss)								
Other			Gross income from fundraising								
ŏ			including \$			of					
			contributions reported on	line	1c). Se	ee					
			Part IV, line 18			8a					
			Less: direct expenses								
			Net income or (loss) from		-		<b></b>				
	9	а	Gross income from gamin	-							
		_	Part IV, line 19								
			Less: direct expenses								
			Net income or (loss) from	-	-						
	10	а	Gross sales of inventory,								
		<b>L</b>	and allowances								
			Less: cost of goods sold								
-		Ü	Net income or (loss) from	sale	o UI INV	entory	Business Code				
Snc	11	2	OTHER INCOME				900099	14,892.		14,892.	
une Tue		a b					70000	11,002.		11,002.	
Miscellaneous Revenue		C									
is R			All other revenue								
2			<b>Total.</b> Add lines 11a-11d					14,892.			
	12		Total revenue. See instruction					370,039.		14,892.	129.

# 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).

3601	Check if Schodulo O contains a reapor	·			X
Do	Check if Schedule O contains a respon	(A)	this Part IX	(C)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
_	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	105,767.	75,382.	12,830.	17,555.
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	0 264	2 020	4 071	1.61
7	Other salaries and wages	8,364.	3,232.	4,971.	161.
8	Pension plan accruals and contributions (include				
_	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	8,922.	6,835.	1,251.	836.
10	Payroll taxes	0,344.	0,033.	1,491.	030•
11	Fees for services (nonemployees):  Management				
	LegalAccounting	300.		300.	
	Lobbying				
	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch O.)	72,000.	72,000.		
12	Advertising and promotion				
13	Office expenses	55.		55.	
14	Information technology	4,305.	3,453.	426.	426.
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses				
40	for any federal, state, or local public officials	59.	48.	5.	6.
19	Conferences, conventions, and meetings	J J •	40.	J•	0.
20 21	Interest Payments to affiliates				
22	Depreciation, depletion, and amortization	2,057.	1,750.	136.	171.
23	Insurance	766.	614.	76.	76.
24	Other expenses. Itemize expenses not covered				
	above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A)				
	amount, list line 24e expenses on Schedule 0.)				
а	RECRUITING	20,800.		20,800.	
b	MISC. EXPENSES	2,650.	2,126.	262.	262.
С	PAYROLL PROCESSING	1,924.	297.	1,590.	37.
d	WORKERS' COMPENSATION I	470.	377.	47.	46.
	All other expenses	324.	182.	120.	22.
25	Total functional expenses. Add lines 1 through 24e	228,763.	166,296.	42,869.	19,598.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.  Check here if following SOP 98-2 (ASC 958-720)				
	0.01.00.00				Earm <b>990</b> (2010)

# Form 990 (2019) Part X Balance Sheet

Pa	LA	Balance Sheet					
		Check if Schedule O contains a response or	note to ar	ny line in this Part X			
					<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing			206,351.	1	349,684.
	2	Savings and temporary cash investments			60,522.	2	60,522.
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net				4	
	5	Loans and other receivables from any currer					
		trustee, key employee, creator or founder, su					
		controlled entity or family member of any of				5	
	6	Loans and other receivables from other disq					
		under section 4958(f)(1)), and persons descr	ribed in se	ction 4958(c)(3)(B)		6	
ţ	7	Notes and loans receivable, net		_		7	
Assets	8	Inventories for sale or use				8	
Ä	9	Prepaid expenses and deferred charges				9	
	10a	Land, buildings, and equipment: cost or other		ı			
		basis. Complete Part VI of Schedule D	10a	21,008.			
	b	Less: accumulated depreciation	10b	10,285.	12,780.	10c	10,723.
	11	Investments - publicly traded securities			11		
	12	Investments - other securities. See Part IV, li			12		
	13	Investments - program-related. See Part IV, I			13		
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11		15			
	16	Total assets. Add lines 1 through 15 (must e	equal line	33)	279,653.	16	420,929.
	17	Accounts payable and accrued expenses			17		
	18	Grants payable		18			
	19	Deferred revenue			19		
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Comple	ete Part IV	of Schedule D		21	
es	22	Loans and other payables to any current or					
Liabilities		trustee, key employee, creator or founder, su					
<u>ia</u>		controlled entity or family member of any of				22	
_	23	Secured mortgages and notes payable to ur				23	
	24	Unsecured notes and loans payable to unrel				24	
	25	Other liabilities (including federal income tax					
		parties, and other liabilities not included on li	ines 17-24	). Complete Part X			
		of Schedule D		·····	0.	25	0.
	26	Total liabilities. Add lines 17 through 25			0.	26	0.
es		Organizations that follow FASB ASC 958,	спеск пе	re 🕨 🔼			
Š	07	and complete lines 27, 28, 32, and 33.			279,653.	07	420,929.
3ale	27	Net assets with depart restrictions			277,033.	27	420,727.
βE	28	Net assets with donor restrictions				28	
Ē		Organizations that do not follow FASB AS	C 958, cn	eck nere			
Net Assets or Fund Balances	20	and complete lines 29 through 33.			20		
ets	29	Capital stock or trust principal, or current fur				29 30	
Ass	30 31	Paid-in or capital surplus, or land, building, o Retained earnings, endowment, accumulate				31	
et/	32				279,653.	32	420,929.
Z	33	Total liabilities and net assets/fund balances			279,653.	33	420,929.
	J	Total liabilities and net assets/fund balances		·····	217,033.	აა	Farm <b>990</b> (2010)

Pa	rt XI Reconciliation of Net Assets							
	Check if Schedule O contains a response or note to any line in this Part XI							
1	Total revenue (must equal Part VIII, column (A), line 12)	1				39.		
2	Total expenses (must equal Part IX, column (A), line 25)	2		22	8,7	63.		
3	Revenue less expenses. Subtract line 2 from line 1	3		141,27				
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4		27	9,6	53.		
5								
6	Donated services and use of facilities 6							
7	Investment expenses	7						
8	Prior period adjustments	8						
9	Other changes in net assets or fund balances (explain on Schedule O)	9				0.		
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,							
	column (B))	10		42	0,9	29.		
Pa	rt XII Financial Statements and Reporting	<u> </u>						
	Check if Schedule O contains a response or note to any line in this Part XII							
	•				Yes	No		
1	Accounting method used to prepare the Form 990: Cash X Accrual Other							
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule							
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		Х		
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a						
	separate basis, consolidated basis, or both:							
	Separate basis Consolidated basis Both consolidated and separate basis							
b	Were the organization's financial statements audited by an independent accountant?			2b		X		
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basi	3,					
	consolidated basis, or both:							
	Separate basis Consolidated basis Both consolidated and separate basis							
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audi	t,			1		
	review, or compilation of its financial statements and selection of an independent accountant?			2c				
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch	nedule	Ο.					
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sir	ngle Aı	udit			1		
	Act and OMB Circular A-133?			За		Х		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ired au	ıdit					
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits			3b				

Form **990** (2019)

#### **SCHEDULE A**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Total

Name of the organization

### **Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

BERKELEY EARTH, INC. 46-2032196 Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 7 X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: 10 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV. Sections A and C. its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations g Provide the following information about the supported organization(s). (iv) Is the organization listed (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other ì your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) Yes No above (see instructions))

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	Section A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and						_
	membership fees received. (Do not						
	include any "unusual grants.")	521,137.	491,255.	410,036.	357,016.	355,018.	2134462.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge	F01 12F	401 055	410 026	255 016	255 010	0124460
	Total. Add lines 1 through 3	521,137.	491,255.	410,036.	357,016.	355,018.	2134462.
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,						1541076
	column (f)						1541976.
	Public support. Subtract line 5 from line 4.						592,486.
	•••	(=) 001E	(h) 0010	(-) 0017	(4) 0010	(-) 0010	(6) T-4-1
	ndar year (or fiscal year beginning in)	(a) 2015 521,137.	(b) 2016 491, 255.	(c) 2017 410, 036.	(d) 2018 357,016.	(e) 2019 355, 018.	(f) Total 2134462.
	Amounts from line 4	321,137.	4J1, 2JJ.	410,030.	337,010.	333,010.	2134402.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties, and income from similar sources	390.	105.	76.	128.	129.	828.
۵	Net income from unrelated business	3301	2001	,,,,	1200	1274	0201
3	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)					14,892.	14,892.
11	Total support. Add lines 7 through 10					,	2150182.
	Gross receipts from related activities,	etc. (see instruction	ons)			12	
	First five years. If the Form 990 is for			d, fourth, or fifth ta	ax year as a sectio	n 501(c)(3)	
	organization, check this box and stop	here					
Sec	ction C. Computation of Publ	ic Support Pe	rcentage				
14	Public support percentage for 2019 (I	ine 6, column (f) di	vided by line 11, c	olumn (f))		14	27.56 %
15	Public support percentage from 2018	Schedule A, Part	II, line 14			15	21.73 %
16a	ia 33 1/3% support test - 2019. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and						
	stop here. The organization qualifies as a publicly supported organization						
b	b 33 1/3% support test - 2018. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box						
	and stop here. The organization qualifies as a publicly supported organization						
17a	10% -facts-and-circumstances tes	<b>t - 2019.</b> If the org	anization did not c	heck a box on line	e 13, 16a, or 16b, a	and line 14 is 10%	or more,
	and if the organization meets the "fac			•	•	•	
	meets the "facts-and-circumstances"	test. The organiza	tion qualifies as a	publicly supported	d organization		►X
b	10% -facts-and-circumstances tes	<b>t - 2018.</b> If the org	anization did not c	heck a box on line	e 13, 16a, 16b, or	17a, and line 15 is	10% or
	more, and if the organization meets the				-		•
	organization meets the "facts-and-circ		ŭ	•	,		▶∐
18	Private foundation. If the organization	n did not check a	box on line 13, 16a	a, 16b, 17a, or 17b	o, check this box a	nd see instruction	s ▶Ш

### Part III | Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Calendar year (or fiscal year beginning in)    1 Giffs, grants, contributions, and membership fees received. (Do not include any "unusual grants.") 2 Gross receipts from admissione, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization stax 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 5 The value of services or facilities furnished by a governmental unit to the organization without charge 6 Total. Add lines 1 through 5 5 The value of services or facilities furnished by a governmental unit to the organization without charge 6 Total. Add lines 1, 2, and 3 received from disqualified persons but acceed the grade of sines 2 and 3 received from disqualified persons that exceed the grade of sines 2 and 3 received from disqualified persons that exceed the grade of sines 2 and 5 received from the two disqualified persons that exceed the grade of sines 2 and 5 received from the two disqualified persons that exceed the grade of sines 2 and 5 received from the two disqualified persons that exceed the grade of sines 2 and 5 received from the two disqualified persons that exceed the grade of sines 2 and 5 received from the two disqualified persons that exceed the grade of sines 2 and 5 received from the two disqualified persons that exceed the grade of sines 2 and 5 received from the two disqualified persons that exceed the grade of sines 2 and 5 received from the two disqualified persons that exceed the grade of sines 2 and 5 received from the sines 3 received on the 2 and 5 received from the sines 3 received on the 2 and 5 received from the sines 3 received from the sines 3 received from the sines 4 received on the 2 and 5 received from the sines 4	Section A. Public Support	below, please com	nplete Part II.)				
1 Giffs, grants, contributions, and membership less received. (Dr not include any "funusual grants, ").  Gross receipts from admissions, morthandias sold or services per common, or facilities tumbshed in any activity that is related to the organization's tax evempt purpose.  3 Gross receipts from admissions, morthandias sold or services per common, or facilities tumbshed in any activity that is related to the organization's bewelft and either paid to or expended on this shall.  5 The value of services or facilities furnished by a governmental unit to the organization without charge.  5 The value of services or facilities furnished by a governmental unit to the organization without charge.  6 Total, Add lines it through 5.  7 a Amounts included on lines 1, 2, and 3 received from dequalised persons be even the services or facilities furnished by a governmental unit to the organization without charge.  6 Total Add lines it through 5.  7 a Amounts included on lines 1, 2, and 3 received from the paid of		(a) 2015	(b) 2016	(a) 2017	(4) 2019	(a) 2010	(f) Total
membership fees received. (Do not include any funcsular grants.)  2 Gross neelighs from admissions, membradities odd or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose 3 Gross neelighs from admissions and an unrelated trade or business under section 513  4 Tax revenues levied for the organization's breath and exemption of the organization's breath and either paid to or expended on its behalf 5  5 The value of services or facilities furnished by a governmental unit to the organization's breath and either paid to or expended on its behalf 5  5 The value of services or facilities furnished by a governmental unit to the organization's breath and either paid to organization without charge 6  6 Total. Add lines 1 through 5  7 A Amounts included on lines 1, 2, and 3 received from disqualified persons be a more and the services of the se		(a) 2015	(b) 2016	(6) 2017	(u) 2016	(e) 2019	(I) Total
include any 'unusual grants.")  Gross recipits from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's travewent 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  5 The value of services or facilities furnished by a governmental unit to the organization of his behalf  6 Total. Add lines 1 through 5  7 A Amounts included on lines 1, 2, and 3 received from disqualified persons business or secretary or the services of the programment of the organization without charge of the programment of the organization without charge or the organization of the organization without charge or the organization without charge or the organization organizatio							
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### Part IV Supporting Organizations

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

#### Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
  - b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

		Yes	No
		163	140
	1		
	2		
	3a		
	Sa		
	3b		
	3с		
	- 55		
	4a		
	4b		
	4c		
	5a		
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	Ja		
	9b		
	9c		
	90		
	10a		
	10b		
m 9	90 or 99	0-EZ	2019

Pa	rt IV	Supporting Organizations (continued)			
	_			Yes	No
11	Has th	ne organization accepted a gift or contribution from any of the following persons?			
а		son who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
		, the governing body of a supported organization?	11a		
b		ily member of a person described in (a) above?	11b		
		6 controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
		3. Type I Supporting Organizations			
		5. 1)po 1 oupporting 0. gameations		Yes	No
1	Did th	e directors, trustees, or membership of one or more supported organizations have the power to		103	140
•		arly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
		ear? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or			
		olled the organization's activities. If the organization had more than one supported organization,			
		ibe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
_		izations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2		e organization operate for the benefit of any supported organization other than the supported			
		ization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
		/I how providing such benefit carried out the purposes of the supported organization(s) that operated,			
		vised, or controlled the supporting organization.	2		
Sec	tion (	C. Type II Supporting Organizations			
		·		Yes	No
1		a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trus	stees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or mai	nagement of the supporting organization was vested in the same persons that controlled or managed			
		pported organization(s).	1		
Sec	tion [	D. All Type III Supporting Organizations			
		•		Yes	No
1	Did th	e organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organ	ization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (	(ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organ	ization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were	any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organ	ization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the or	ganization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By rea	ason of the relationship described in (2), did the organization's supported organizations have a			
	signifi	cant voice in the organization's investment policies and in directing the use of the organization's			
	incom	ne or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	suppo	orted organizations played in this regard.	3		
Sec	tion E	E. Type III Functionally Integrated Supporting Organizations			
1	Check	k the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see instructions).			
а		The organization satisfied the Activities Test. Complete line 2 below.			
b		The organization is the parent of each of its supported organizations. Complete line 3 below.			
С		The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see inst	ructions	s).	
2	Activit	ties Test. Answer (a) and (b) below.		Yes	No
а	Did su	ubstantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the su	upported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those	supported organizations and explain how these activities directly furthered their exempt purposes,			
	how ti	he organization was responsive to those supported organizations, and how the organization determined			
	that th	nese activities constituted substantially all of its activities.	2a		
b	Did th	e activities described in (a) constitute activities that, but for the organization's involvement, one or more			
		organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
		ns for the organization's position that its supported organization(s) would have engaged in these			
		ies but for the organization's involvement.	2b		
3		t of Supported Organizations. <b>Answer (a) and (b) below.</b>			
а		e organization have the power to regularly appoint or elect a majority of the officers, directors, or			
		es of each of the supported organizations? Provide details in Part VI.	За		
b		e organization exercise a substantial degree of direction over the policies, programs, and activities of each			
		supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

Pai	TV Type III Non-Functionally Integrated 509(a)(3) Supporting	ıg Orga	nizations		
1	Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions. A				
	other Type III non-functionally integrated supporting organizations must co	omplete S	ections A through E.		
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)	
1	Net short-term capital gain	1			
2	Recoveries of prior-year distributions	2			
3	Other gross income (see instructions)	3			
4	Add lines 1 through 3.	4			
5	Depreciation and depletion	5			
6	Portion of operating expenses paid or incurred for production or				
	collection of gross income or for management, conservation, or				
	maintenance of property held for production of income (see instructions)	6			
7	Other expenses (see instructions)	7			
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8			
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)	
1	Aggregate fair market value of all non-exempt-use assets (see				
	instructions for short tax year or assets held for part of year):				
а	Average monthly value of securities	1a			
b	Average monthly cash balances	1b			
С	Fair market value of other non-exempt-use assets	1c			
d	Total (add lines 1a, 1b, and 1c)	1d			
е	Discount claimed for blockage or other				
	factors (explain in detail in Part VI):				
2	Acquisition indebtedness applicable to non-exempt-use assets	2			
3	Subtract line 2 from line 1d.	3			
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,				
	see instructions).	4			
_5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5			
6	Multiply line 5 by .035.	6			
_7_	Recoveries of prior-year distributions	7			
8	Minimum Asset Amount (add line 7 to line 6)	8			
Sect	ion C - Distributable Amount			Current Year	
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1			
2	Enter 85% of line 1.	2			
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3			
4	Enter greater of line 2 or line 3.	4			
5	Income tax imposed in prior year	5			
6	Distributable Amount. Subtract line 5 from line 4, unless subject to				
	emergency temporary reduction (see instructions).	6			
7	Check here if the current year is the organization's first as a non-functional	lly integrat	ted Type III supporting org	anization (see	
	instructions).				

Schedule A (Form 990 or 990-EZ) 2019

Par	TV   Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	anizations <sub>(continued)</sub>	
Secti	ion D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exe	mpt purposes		
2	Amounts paid to perform activity that directly furthers exempt	ot purposes of supported		
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose	es of supported organization	ns	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in <b>Part VI</b> ). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which the	he organization is responsive	e	
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2019 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
Secti	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1	Distributable amount for 2019 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2019 (reason-			
	able cause required- explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2019			
а	From 2014			
b	From 2015			
С	From 2016			
d	From 2017			
е	From 2018			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2019 distributable amount			
i	Carryover from 2014 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2019 from Section D,			
	line 7: \$			
а	Applied to underdistributions of prior years			
b	Applied to 2019 distributable amount			
С	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2019, if			
	any. Subtract lines 3g and 4a from line 2. For result greater			
	than zero, explain in <b>Part VI.</b> See instructions.			
6	Remaining underdistributions for 2019. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2020. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
а	Excess from 2015			
b	Excess from 2016			
	Excess from 2017			
d	Excess from 2018			
	Excess from 2019			

Schedule A (Form 990 or 990-EZ) 2019

Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)
PART II, SECTION C, LINE 17A, FACTS AND CIRCUMSTANCES TEST:
TAXPAYER MEETS THE ALTERNATIVE FACTS AND CIRCUMSTANCES TEST IN
ACCORDANCE WITH REGULATION SEC.1.170A-9(E)(3) AS FOLLOWS:
1. NORMALLY RECEIVES SUBSTANTIAL SUPPORT (EXCEEDING 10%) FROM
GOVERNMENTAL UNITS OR CONTRIBUTIONS FROM THE GENERAL PUBLIC.
2. MAINTAINS A PROGRAM TO ATTRACT PUBLIC SUPPORT. ACTIVITIES INCLUDE
CONSISTENT APPLICATIONS FOR GRANTS AND MULTIPLE YEAR GRANTS. OUTREACH
INCLUDES HIGH PROFILE PUBLICATIONS OF RESEARCH IMPORTANT TO
GOVERNMENTAL AND PUBLIC ORGANIZATIONS DESCRIBED IN IRC SEC.
170(B)(1)(A)(I) THROUGH (VI).
3. THE PERCENTAGE OF PUBLIC SUPPORT IS IN EXCESS OF 10%.
4. SOURCES OF SUPPORT INCLUDE PRIMARILY UNRESTRICTED EDUCATIONAL
GRANTS.
5. THE LAWRENCE BERKELEY NATIONAL LABORATORY AND FUTURE 500 ARE TWO
PARTICIPATING INSTITUTIONS WHICH COLLABORATE WITH AND SUPPORT BERKELEY
EARTH'S RESEARCH.
6. PUBLIC NATURE OF BOARD.
7. THE TYPE OF RESEARCH LEAD AND PUBLISHED BY BERKELEY EARTH IS OF
PUBLIC INTEREST. IN ADDITION TO TECHNICAL PUBLICATIONS, RESEARCH

FINDINGS ARE WIDELY DISSEMINATED TO THE GENERAL PUBLIC THROUGH LAY

Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)
MEDIA AND THE INTERNET. ALL THE RAW DATA AND ANALYSIS CODE ARE POSTED
ONLINE IN ORDER TO LOWER THE BARRIERS TO ENTRY INTO CLIMATE SCIENCE,
AND TO PROVIDE AN OPEN PLATFORM FOR FURTHER ANALYSIS.
8. PROVIDES A NON-PARTISAN, SCIENTIFIC APPROACH TO GLOBAL WARMING AND
AIR POLLUTION. OFFERS A CUTTING EDGE, DATA-DRIVEN APPROACH TO
TEMPERATURE ANALYSIS AND NOW TAKING A DATA-DRIVEN APPROACH TO OTHER
AREAS OF ENERGY AND CLIMATE SCIENCE. THIS UNIQUE WAY OF LEADING
RESEARCH OFFERS FINDINGS THAT ARE IMPORTANT TO GOVERNMENTAL AND PUBLIC
ORGANIZATIONS.
9. EFFORTS TO HIRE A VP OF BUSINESS DEVELOPMENT IN ORDER TO INCREASE
THE PERCENTAGE OF SUPPORT FROM PUBLIC SOURCES.
PART II, SECTION B, LINE 10, OTHER INCOME:
PAYROLL TAX REFUND FROM THE IRS AND EDD DUE TO PAYROLL TAX OVERPAYMENT
IN 2018.

Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

**Schedule of Contributors** 

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

OMB No. 1545-0047

2019

Employer identification number

BERKELEY EARTH, INC. 46-2032196 Organization type (check one): Filers of: Section: X = 501(c)(3) (enter number) organization Form 990 or 990-EZ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. Special Rules For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively

religious, charitable, etc., contributions totaling \$5,000 or more during the year \_\_\_\_\_\_ 🕨 \$ \_

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2019)

### BERKELEY EARTH, INC.

46-2032196

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.				
(a)	(b)	(c)	(d)		
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution		
1		\$5,000.	Person X Payroll		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
2		\$	Person X Payroll		
(a)	(b)	(c)	(d)		
No. 3	Name, address, and ZIP + 4	\$ 250,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)		
(a)	(b)	(c)	(d)		
No.	Name, address, and ZIP + 4	Total contributions	Person Payroll Noncash (Complete Part II for noncash contributions.)		
(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)	(b)	(c) Total contributions	(d)		
No.	Name, address, and ZIP + 4	\$	Person Payroll Noncash (Complete Part II for noncash contributions.)		

Name of organization Employer identification number

### BERKELEY EARTH, INC.

46-2032196

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.				
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received		
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received		
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received		
		 \$			
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received		
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received		
		 \$			
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received		
		   \$			

Name of organization

Employer identification number

BERKELEY EARTH, INC.

46-2032196

Part III	Exclusively religious, charitable, etc., contribution from any one contributor. Complete columns (a)			1(c)(7), (8), or (10) that total more than \$1,000 for the ye	
	completing Part III, enter the total of exclusively religious, ch	aritable, etc., contributions of \$1,000	or less for the	year. (Enter this info. once.) \$	
a) No	Use duplicate copies of Part III if additional s	pace is needed.			
(a) No. from	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held	
Part I	( ) ( )			.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
			.		
			.		
			.		
L					
		(e) Transfer of g	jift		
L	Transferee's name, address, an	1 ZIP + 4	Rela	ationship of transferor to transferee	
(a) No. from	(h) Duyness of sift	(a) Has of sift		(d) Description of how wift is hold	
Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held	
	<u>.</u>	(e) Transfer of g	ift .		
		( )	•		
	Transferee's name, address, an	d ZIP + 4	Rela	ationship of transferor to transferee	
	-				
(a) No. from	Ţ				
from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held	
raiti					
			·		
			-		
			·		
-		(e) Transfer of g	.:41		
		JIIL			
	<del>-</del>	1710 4	Polationship of transferor to transferos		
-	Transferee's name, address, and	3 ZIP + 4	Kei	ationship of transferor to transferee	
(a) No					
a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held	
Part I	( ) ( )			., .	
			.		
			.		
			.		
1		(e) Transfer of g	jift		
1					
- 1	Transferee's name, address, an	d ZIP + 4	Rela	ationship of transferor to transferee	
	<del>-</del>				
1					

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

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

▶ Attach to Form 990.

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

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

BERKELEY EARTH, INC.

Employer identification number 46-2032196

Pa	t I Organizations Maintaining Donor Advise	ed Funds or Other Similar Funds	s or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, lir	ne 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advis	ed funds
	are the organization's property, subject to the organization's	exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor a		
	for charitable purposes and not for the benefit of the donor of	or donor advisor, or for any other purpose	conferring
	impermissible private benefit?		Yes No
Pa		ganization answered "Yes" on Form 990, F	Part IV, line 7.
1	Purpose(s) of conservation easements held by the organizat	ion (check all that apply).	
	Preservation of land for public use (for example, recrea	ation or education) Preservation of	a historically important land area
	Protection of natural habitat	Preservation of	a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quali	fied 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
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		
С	Number of conservation easements on a certified historic str	ructure included in (a)	2c
d	Number of conservation easements included in (c) acquired	after 7/25/06, and not on a historic struction	ure
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re		e organization during the tax
	year ▶		
4	Number of states where property subject to conservation ea	sement is located >	
5	Does the organization have a written policy regarding the pe	riodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements i	it holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,	, handling of violations, and enforcing cons	servation easements during the year
	<b>&gt;</b>		
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and enforcing conserva	tion easements during the year
	<b>▶</b> \$		
8	Does each conservation easement reported on line 2(d) above	ve satisfy the requirements of section 170	(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservat	ion easements in its revenue and expense	statement and
	balance sheet, and include, if applicable, the text of the foot	note to the organization's financial statem	ents that describes the
	organization's accounting for conservation easements.		
Pa	t III Organizations Maintaining Collections o		ther Similar Assets.
	Complete if the organization answered "Yes" on Form	n 990, Part IV, line 8.	
1a	If the organization elected, as permitted under FASB ASC 95	58, not to report in its revenue statement a	and balance sheet works
	of art, historical treasures, or other similar assets held for pul	blic exhibition, education, or research in fu	urtherance of public
	service, provide in Part XIII the text of the footnote to its fina	ncial statements that describes these iten	ns.
b	If the organization elected, as permitted under FASB ASC 95	58, to report in its revenue statement and	balance sheet works of
	art, historical treasures, or other similar assets held for public	c exhibition, education, or research in furth	nerance of public service,
	provide the following amounts relating to these items:		
	(i) Revenue included on Form 990, Part VIII, line 1		<b>&gt;</b> \$
2	If the organization received or held works of art, historical tre	easures, or other similar assets for financia	l gain, provide
	the following amounts required to be reported under FASB ${\it A}$	ASC 958 relating to these items:	
а	Revenue included on Form 990, Part VIII, line 1		<b>&gt;</b> \$
	Accete included in Form 000, Dort V		<b>•</b> •

Par	rt III Organizations Maintaining Co	ollections of Ar	t, Hist	orical Tr	easures, o	or Othe	r Simila	ar Asse	t <b>s</b> (continue	ed)
3	Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its									
	collection items (check all that apply):									
а	Public exhibition	d		Loan or exc	hange progra	am				
b	Scholarly research	е		Other						
С	Preservation for future generations									
4	Provide a description of the organization's col	lections and explair	n how th	ey further t	he organizati	on's exen	npt purpo	se in Par	t XIII.	
5	During the year, did the organization solicit or	receive donations	of art, hi	storical trea	sures, or oth	er similar	assets			
	to be sold to raise funds rather than to be mai	ntained as part of t	he orgai	nization's c	ollection?				Yes	No_
Par	rt IV Escrow and Custodial Arrang	ements. Comple	ete if the	organizatio	n answered	"Yes" on I	orm 990	, Part IV,	line 9, or	
	reported an amount on Form 990, Part	X, line 21.								
1a	Is the organization an agent, trustee, custodia	n or other intermed	liary for	contributior	ns or other as	sets not i	ncluded			
	on Form 990, Part X?							L	Yes	No
b	If "Yes," explain the arrangement in Part XIII a	nd complete the fo	llowing t	able:						
									Amount	
С	Beginning balance						1c			
d	Additions during the year						1d			
е	Distributions during the year						1e			
f	Ending balance						1f			
<b>2</b> a	Did the organization include an amount on Fo	rm 990, Part X, line	21, for 6	escrow or c	ustodial acco	ount liabilit	y?	L	_ Yes ☐	No
	If "Yes," explain the arrangement in Part XIII.								<u></u>	
Par	rt V Endowment Funds. Complete if	the organization an	swered	"Yes" on Fo						
	<del>_</del>	(a) Current year	<b>(b)</b> P	rior year	(c) Two yea	rs back (	<b>d)</b> Three ye	ears back	(e) Four ye	ars back
1a										
b	Contributions									
С	Net investment earnings, gains, and losses									
d	Grants or scholarships									
е	Other expenditures for facilities									
	and programs									
f	Administrative expenses									
g										
2	Provide the estimated percentage of the curre	ent year end balanc	e (line 1	g, column (a	a)) held as:					
а	j -		_%							
b		%								
С	· ———									
	The percentages on lines 2a, 2b, and 2c shou	•								
3a	Are there endowment funds not in the posses	sion of the organiza	ation tha	it are held a	and administe	ered for th	e organiz	ation	T	
	by:								Ye	s No
	(i) Unrelated organizations								3a(i)	
	(ii) Related organizations									
	If "Yes" on line 3a(ii), are the related organization								.   3b	
4 Do:	Describe in Part XIII the intended uses of the		wment 1	funds.						
Par	rt VI Land, Buildings, and Equipme			, ,, ,, ,						
	Complete if the organization answered								<u> </u>	
	Description of property	(a) Cost or of			or other	٠,	cumulate	d	(d) Book v	alue
		basis (investn	ierit)	Slebid	(other)	аер	reciation			
	Land									
b	9									
	1			2	1,008.		10,28	-	1 0	723.
					11,000		<b>±</b> 0,40	, , ,	то,	143.
	Other		V/	an (D) line i	10-)			$\overline{}$	1.0	723.

Schedule D (Form 990) 2019

Part VII Investments - Other Securities.			
Complete if the organization answered "Yes"  (a) Description of security or category (including name of security)	on Form 990, Part IV, line <b>(b)</b> Book value		d of year market value
	(b) Book value	(c) Method of valuation: Cost or end	1-of-year market value
(1) Financial derivatives			
(2) Closely held equity interests (3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
<b>Total.</b> (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11c. See Form 990, Part X, line 13.	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end	d-of-year market value
<u>(1)</u>			
(2)			
(3)			
(4)			
(5)			
<u>(6)</u>			
(7) (8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11d. See Form 990, Part X, line 15.	
(a)	Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)	- 45)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line Part X   Other Liabilities.	e 15.)		
Complete if the organization answered "Yes"	on Form 990 Part IV line	11e or 11f See Form 990 Part V line 25	
1. (a) Description of liability	offi offi 990, Fartiv, line	The of Thi. See Form 990, Fart X, line 20	(b) Book value
(1) Federal income taxes			(-,
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line	e 25.)	<b>&gt;</b>	
2. Liability for uncertain tax positions. In Part XIII, provide		-	

Pai	t XI Reconciliation of Revenue per Audited Financial St	atements With Rever	ue per Return.
	Complete if the organization answered "Yes" on Form 990, Part IV, I	ine 12a.	
1	Total revenue, gains, and other support per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains (losses) on investments	2a	
b	Donated services and use of facilities	2b	
С	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d		2e
3	Subtract line <b>2e</b> from line <b>1</b>		3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
С	Add lines 4a and 4b		4c
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12		5
Pai	rt XII Reconciliation of Expenses per Audited Financial S	-	nses per Return.
	Complete if the organization answered "Yes" on Form 990, Part IV, I		
1	Total expenses and losses per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 1	
а	Donated services and use of facilities		
b	Prior year adjustments		
С	Other losses		
d	Other (Describe in Part XIII.)	2d	
е	Add lines 2a through 2d		T 1
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1 - 1	
а	Investment expenses not included on Form 990, Part VIII, line 7b		
b	Other (Describe in Part XIII.)	4b	
	Add lines 4a and 4b		
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line	18.)	5
	rt XIII Supplemental Information.	14.5 10/1: 41 10/	D 177
	ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and		Part V, line 4; Part X, line 2; Part XI,
imes	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide	any additional information.	

### SCHEDULE O

Internal Revenue Service

(Form 990 or 990-EZ)

Department of the Treasury

### Supplemental Information to Form 990 or 990-EZ

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

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

2019 Open to Public

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

BERKELEY EARTH, INC.

Employer identification number 46-2032196

FORM 990, PART VI, SECTION A, LINE 2:

RICHARD MULLER AND ELIZABETH MULLER, A FATHER-DAUGHTER TEAM, CO-FOUNDED

BERKELEY EARTH. SINCE INCEPTION, ELIZABETH MULLER HAS BEEN THE EXECUTIVE

DIRECTOR, PRESIDENT AND CHAIR OF THE BOARD.

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

A DRAFT OF THE FORM 990 PROVIDED BY A PUBLIC ACCOUNTING FIRM IS REVIEWED BY THE BOARD PRIOR TO FILING OF THE FORM 990.

FORM 990, PART VI, SECTION B, LINE 12C:

EACH DIRECTOR, PRINCIPAL OFFICER, AND MEMBER OF A COMMITTEE WITH GOVERNING
BOARD DELEGATED POWERS SHALL SIGN A STATEMENT WHICH AFFIRMS SUCH PERSON: (A)
HAS RECEIVED A COPY OF THE CONFLICTS OF INTEREST POLICY, (B) HAS READ AND
UNDERSTANDS THE POLICY, (C) HAS AGREED TO COMPLY WITH THE POLICY, AND (D)
UNDERSTANDS THE CORPORATION IS CHARITABLE AND IN ORDER TO MAINTAIN ITS
FEDERAL TAX EXEMPTION IT MUST ENGAGE PRIMARILY IN ACTIVITIES WHICH
ACCOMPLISH ONE OR MORE OF ITS TAX-EXEMPT PURPOSES.

FORM 990, PART VI, SECTION B, LINE 15:

THE TREASURER PROPOSED THE SALARY AND COMPENSATION AND IT WAS THEN APPROVED BY THE FULL BOARD, EXCLUDING ELIZABETH AND RICHARD MULLER.

FORM 990, PART VI, SECTION C, LINE 19:

THE GOVERNING DOCUMENTS ARE AVAILABLE UPON REQUEST.

FORM 990, PART IX, LINE 11G, OTHER FEES:

Name of the organization  BERKELEY EARTH, INC.	Employer identification number 46-2032196		
PROFESSIONAL/SCIENTIFIC SERVICES:			
PROGRAM SERVICE EXPENSES	72,000.		
MANAGEMENT AND GENERAL EXPENSES	0.		
FUNDRAISING EXPENSES	0.		
TOTAL EXPENSES	72,000.		
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	72,000.		

#### Form **8868**

(Rev. January 2020)

Department of the Treasury Internal Revenue Service

# Application for Automatic Extension of Time To File an Exempt Organization Return

File a separate application for each return.

► Go to www.irs.gov/Form8868 for the latest information.

OMB No. 1545-0047

**Electronic filing (e-file).** You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit <a href="https://www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits">www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits</a>.

Automa	atic 6-Month Extension of Time. Only subm	nit origina	al (no copies needed).					
All corpor	rations required to file an income tax return other than Fe	orm 990-T	(including 1120-C filers) partnersh	nins RFMIC	s and trusts			
•	Form 7004 to request an extension of time to file incom		, , , , , , , , , , , , , , , , , , , ,	iipo, riziviic	o, and tradic			
nust use	1 of 11 7 004 to request an extension of time to the incom	ie tax retui	113.					
Гуре or	or Name of exempt organization or other filer, see instructions.				Taxpayer identification number (TIN)			
print				' '		,		
	BERKELEY EARTH, INC.				46-2032196			
file by the due date for	y the							
iling your	2831 GARBER STREET							
eturn. See nstructions.	City, town or post office, state, and ZIP code. For a fo	oreign add	ress, see instructions.					
	BERKELEY, CA 94705	J	,					
Enter the	Return Code for the return that this application is for (fil	e a separa	ate application for each return)			0 1		
Applicati	on	Return	Application			Return		
s For		Code	Is For		Code			
orm 990	or Form 990-EZ	01	Form 990-T (corporation)			07		
orm 990		02	Form 1041-A	08				
	0 (individual)	03	Form 4720 (other than individual)	)		09		
orm 990		04	Form 5227					
	-T (sec. 401(a) or 408(a) trust)	05	Form 6069					
	-T (trust other than above)	06	Form 8870					
	THE ORGANIZATION	NC				12		
• The bo	ooks are in the care of > 2831 GARBER STI	REET -	- BERKELEY, CA 94'	705				
	none No. ► (510) 9 <del>26-6446</del>		Fax No. ▶					
	organization does not have an office or place of business	s in the Ur				ightharpoons		
	is for a Group Return, enter the organization's four digit					up, check this		
oox <b>▶</b> [	. If it is for part of the group, check this box	7	ch a list with the names and TINs					
<b>1</b> I re	I request an automatic 6-month extension of time until NOVEMBER 16, 2020 , to file the exempt organization return for							
the	organization named above. The extension is for the org	anization's						
	X calendar year 2019 or							
▶[	tax year beginning	, an	d ending					
	-				<del></del>			
2 If th	If the tax year entered in line 1 is for less than 12 months, check reason:							
	Change in accounting period							
	o o.							
3a If th	nis application is for Forms 990-BL, 990-PF, 990-T, 4720	, or 6069,	enter the tentative tax, less					
any	nonrefundable credits. See instructions.			3a	\$	0.		
	If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and							
esti	mated tax payments made. Include any prior year overp	3b	\$	0.				
c Bal	ance due. Subtract line 3b from line 3a. Include your pa							
ueir	ng EFTPS (Electronic Federal Tax Payment System). See	instructio	one	3c	\$	0.		
usii	<u> </u>	5 II IOTI GOTIC	лю	<u> </u>	¥			

LHA For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form 8868 (Rev. 1-2020)