PUBLIC DISCLOSURE COPY - STATE REGISTRATION NO. 0194312

Form **990**

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

▶ 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.

2020
Open to Public Inspection

Α	For the	2020 calendar year, or tax year beginning and e	ending	_	
В	Check if applicable	C Name of organization		D Employer identific	cation number
	Addres	BERKELEY EARTH, INC.			
	Name change	Doing business as		46-20321	96
	Initial return Final return/	Number and street (or P.O. box if mail is not delivered to street address) 2831 GARBER STREET	E Telephone number (510) 92		
	termin- ated			G Gross receipts \$	252,982.
	Ameno			H(a) Is this a group re	
	Applic			for subordinates	
	pendir	9 SAME AS C ABOVE		H(b) Are all subordinates in	
$\overline{\Gamma}$	Tax-exe	empt status: $X = 501(c)(3) = 501(c)(3)$ (insert no.) 4947(a)(1) or	r 527	1	list. See instructions
J	Websit	e: ► WWW.BERKELEYEARTH.ORG		H(c) Group exemption	n number 🕨
K	Form of	organization: X Corporation Trust Association Other	L Year	of formation: 2013 N	1 State of legal domicile: CA
P		Summary			
О О	1	Briefly describe the organization's mission or most significant activities: ${ m { t THE}} { t { t S}}$	PECIF	IC PURPOSE	OF THE
Governance		CORPORATION IS THE ADVANCEMENT OF SCIENCE	1.		
ř	2	Check this box $lacktriangle$ if the organization discontinued its operations or dispose	ed of more	than 25% of its net as	ssets.
ŏ	3	Number of voting members of the governing body (Part VI, line 1a)		3	7
<u>ه</u>	4	Number of independent voting members of the governing body (Part VI, line 1b) $$		4	6
es	5	Total number of individuals employed in calendar year 2020 (Part V, line 2a)		5	3
ĬĘ		Total number of volunteers (estimate if necessary)			6
Activities &	7 a	Total unrelated business revenue from Part VIII, column (C), line 12		7a	0.
_	b	Net unrelated business taxable income from Form 990-T, Part I, line 11		7b	0.
				Prior Year	Current Year
Р		Contributions and grants (Part VIII, line 1h)		355,018.	252,266.
Revenue		Program service revenue (Part VIII, line 2g)		0.	0.
Ŗ		Investment income (Part VIII, column (A), lines 3, 4, and 7d)		129.	78.
		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		14,892.	638.
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		370,039.	252,982.
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.
		Benefits paid to or for members (Part IX, column (A), line 4)		7 -	0.
Expenses	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		123,053.	224,934.
en	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
Ä	_b	Total fundraising expenses (Part IX, column (D), line 25) 56,35		105,710.	199,656.
		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		228,763.	424,590.
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		141,276.	-171,608.
<u> </u>	3	Revenue less expenses. Subtract line 18 from line 12	Re	ginning of Current Year	End of Year
Net Assets or	20	Total assets (Part X, line 16)	De	420,929.	273,052.
ASSE	21	Total liabilities (Part X, line 16)		0.	23,695.
Net.	22	Net assets or fund balances. Subtract line 21 from line 20		420,929.	249,357.
	art II	Signature Block		120 / 525 (213 / 33 / 4
		ties of perjury, I declare that I have examined this return, including accompanying schedules	and statem	ents, and to the best of m	v knowledge and belief, it is
	•	t, and complete. Declaration of preparer (other than officer) is based on all information of which			, ,
Sig	ın	Signature of officer		Date	
He		■ ELIZABETH MULLER, EXEC. DIRECTOR/PRESI	DENT		
		Type or print name and title			
		Print/Type preparer's name Preparer's signature		Date Check	PTIN
Pai	d	JOE HUIE		if self-employe	
Pre	parer	Firm's name LINDQUIST, VON HUSEN & JOYCE LLP)	Firm's EIN ▶	94-1250261
Use	Only	Firm's address 301 HOWARD STREET, SUITE 850			
		SAN FRANCISCO, CA 94105		Phone no.41	5-957-9999
Ма	y the IF	S discuss this return with the preparer shown above? See instructions			X Yes No

Га	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.
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
	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? Yes X 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 \$ 302,882. including grants of \$) (Revenue \$) (Revenue \$) (Revenue \$
	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;
	B) A STUDY ON GLOBAL AIR POLLUTION.
4b	(Code:) (Expenses \$
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$
4d	Other program services (Describe on Schedule O.)
40	(Expenses \$ including grants of \$) (Revenue \$) Total program service expenses ▶ 302,882.

Form 990 (2020) 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	_		7.7
	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		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			l
	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,			3,7
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			. v
_	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?			X
40	If "Yes," complete Schedule D, Part IV	9		Α.
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		x
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	10		1
••	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
_	Part VI	11a	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			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
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			٠,,
	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			, v
	Schedule D, Parts XI and XII	12a		X
D	Was the organization included in consolidated, independent audited financial statements for the tax year?	406		х
13	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	12b 13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	. a		
	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			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			,,
	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	۵.		_v
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X

Part IV	Checklist of Required Schedules (continued)
I GILIV	i Officering of ficadifica deficadics (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			۱
	Schedule J	23		Х
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	١		X
	Schedule K. If "No," go to line 25a	24a		
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		<u> </u>
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	24c		
Ч	any tax-exempt bonds? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	214		
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		Х
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		Х
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 current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
а	"Yes," complete Schedule L, Part IV	28a		х
h	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
	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		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
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		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	00		X
24	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	33		
34	Part V, line 1	34		x
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			l
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?		х	1
Pai	Note: All Form 990 filers are required to complete Schedule O **T V Statements Regarding Other IRS Filings and Tax Compliance	38	Λ	
Га	Check if Schedule O contains a response or note to any line in this Part V			
	Check is deficulted a companied of flote to any line in this rail v		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		.03	1.15
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	Х	

Form 990 (2020) BERKELEY EARTH, INC. Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

					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 return	าร?		2b	Х	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions))				
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?			3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule	Ο		3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a	utho	rity over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial a	ccou	nt)?	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 Ad	ccour	nts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		Х
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?			5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did th	e org	anization solicit			
	any contributions that were not tax deductible as charitable contributions?			6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributi	ons c	or gifts			
	were not tax deductible?			6b		
7	Organizations that may receive deductible contributions under section 170(c).					
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services and services are contribution and partly for goods and services are contributed as a service are	/ices	provided to the payor?	7a		X
b	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					
	to file Form 8282?		 I	7с		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit co	ontra	ct?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra			7f		X
	If the organization received a contribution of qualified intellectual property, did the organization file Fo			7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization			7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained	by th	e	_		
				8		
9	Sponsoring organizations maintaining donor advised funds.					
а				9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9b		
10	Section 501(c)(7) organizations. Enter:	40-	I			
		10a 10b				
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	IUD				
11	Section 501(c)(12) organizations. Enter: Gross income from members or shareholders	11a	I			
	Gross income from other sources (Do not net amounts due or paid to other sources against	па				
D		11b				
19a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		<u>1 </u>	12a		
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	12b	İ	-Lu		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	120				
	Is the organization licensed to issue qualified health plans in more than one state?			13a		
-	Note: See the instructions for additional information the organization must report on Schedule O.					
b	Enter the amount of reserves the organization is required to maintain by the states in which the					
	organization is licensed to issue qualified health plans	13b				
С	Enter the amount of reserves on hand	13c				
				14a		Х
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedul			14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuner					
	excess parachute payment(s) during the year?			15		X
	If "Yes," see instructions and file Form 4720, Schedule N.					
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment	t inco	me?	16		Х
	If "Yes," complete Form 4720, Schedule O.					
					200	(0000)

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			
	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			
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	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	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	X	
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		X
<u>Sec</u>	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
	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	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
	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		١	
	in Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13		Х
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?			
	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			77
	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)	B)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, and the conflict of interest policy is a conflict of interest policy.	nd 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			

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.

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

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

(A)	(B)	l		((C)		ilout	(D)	(E)	(F)
Name and title	Average	(do	Position not check mo			than	one	Reportable	Reportable	Estimated
	hours per	box	, unle	ss pe	erson is both an director/trustee)			compensation	compensation	amount of
	week (list any						Ĺ	from the	from related organizations	other compensation
	hours for	r direc				peq		organization	(W-2/1099-MISC)	from the
	related	stee o	rustee			oen sa 1		(W-2/1099-MISC)		organization
	organizations	nal tru	onal t		ployee	ee ee				and related
	below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) JUDITH SISSENER	40.00	_	_				_			
DEPUTY EXEC. DIRECTOR				Х				104,000.	0.	0.
(2) ELIZABETH MULLER	10.00									
EXEC. DIRECTOR/PRESIDENT		Х		Х				94,500.	0.	0.
(3) WILL GLASER	2.00									
TREASURER		Х		Х				0.	0.	0.
(4) BILL SHIREMAN	1.00							_	_	_
SECRETARY		Х		Х				0.	0.	0.
(5) RICHARD MULLER	5.00									
DIRECTOR	1 00	Х						0.	0.	0.
(6) ROBERT J BUDNITZ	1.00								•	•
DIRECTOR	1 00	Х						0.	0.	0.
(7) JIM BOETTCHER	1.00	,,							0	•
DIRECTOR	1 00	Х						0.	0.	0.
(8) ROBERT MURPHY	1.00	\ \							0	0
DIRECTOR		Х						0.	0.	0.
					<u> </u>					
										- 000

Form **990** (2020)

Part	VII Section A. Officers, Directors, Trus	tees, Key Em	ploy	ees	, an	d Hi	ighe	st C	Compensated Employe	es (continued)				
	(A)	(B)				C)			(D)	(E)			(F)	
Name and title Average			(do		Pos			one	Reportable	Reportable	€	E:	stimate	ed
		hours per	(do not check m box, unless pers officer and a dire				rson is both an		compensation	compensation	on	ar	nount	of
	week				na a a	irecto	or/trus	itee)	from	from related			other	
		(list any	rector						the	organization			npensa	
		hours for related	or di	98			ated		organization	(W-2/1099-MI	SC)		rom the	
		organizations	ustee	trust		9	nbens		(W-2/1099-MISC)			٠ -	ganizat d relat	
		below	ual tr	ional		ploye	t con	L					anizati	
		line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			ļ		ainzati	0113
			=	=	0	×	Τ 0	۳						
1b 5	Subtotal							▶	198,500.		0.			0.
сТ	otal from continuation sheets to Part VI	I, Section A						ightharpoonup	0.		0.			0.
d 1	otal (add lines 1b and 1c)								198,500.		0.			0.
2 7	otal number of individuals (including but n	ot limited to th	ose	liste	ed a	bov	e) wł	no r	eceived more than \$100	0,000 of reportab	ole			
	compensation from the organization													1
													Yes	No
	Did the organization list any former officer,			кеу е	emp	loye	e, o	r hig	ghest compensated emp	oloyee on	ļ			
	ne 1a? If "Yes," complete Schedule J for s											3		X
	or any individual listed on line 1a, is the su													
a	ınd related organizations greater than \$150	0,000? If "Yes,	" co	mple	ete S	Sche	edule	e J f	for such individual			4		X
5	Did any person listed on line 1a receive or a	accrue compe	nsat	ion f	from	any	/ unr	elat	ted organization or indiv	idual for services	3			
	endered to the organization? If "Yes," com	plete Schedul	e J f	or st	uch	pers	son .					5		X
	on B. Independent Contractors		_										_	
	Complete this table for your five highest co	-	-								npens	ation	from	
	he organization. Report compensation for	u ie caieridar y	ear	enal	ng v	VILI	Or W	runir T		year.			<u> </u>	
	(A) Name and business	address							(B) Description of s	services	c		C) ensatio	n
CLI	MATE DATA INSIGHTS LLO	3							SCIENTIFIC					
400	ייפיים ז ישו פס עסווט (G3 20/		,							1	10	0 0	^ ^

(A)
Name and business address

CLIMATE DATA INSIGHTS LLC
4039 SHADY DR NW, LIBURN, GA 30047

CONSULTING SERVICES

120,000.

Form **990** (2020)

\$100,000 of compensation from the organization

Form	990) (2	2020) BER	KE	LEY	EART	H, INC.			46-2032	196 Page 9
Pa				ver	nue						-
			Check if Schedule O	cont	ains a r	response	or note to any li	ne in this Part VIII			
						·	,	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated	(D) Revenue excluded
Program Service Contributions, Gifts, Grants Revenue and Other Similar Amounts	2	b c d e f g h a b c	Federated campaigns Membership dues Fundraising events Related organizations Government grants (contr All other contributions, gifts, similar amounts not included Noncash contributions included in Total. Add lines 1a-1f	ribut gran abo	ions) ts, and ve		252, 266. Business Code	252,266.			
Progra Re		d e f All other program service revenue g Total. Add lines 2a-2f									
	3		Investment income (include other similar amounts)	ding	divider	nds, intere	est, and	78.			78.
	4 5		Income from investment of Royalties	of tax	x-exem	pt bond p	proceeds				
		b	Gross rents Less: rental expenses Rental income or (loss)	6a 6b 6c	(7)	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(ii) i orderia.				
	7	а	Net rental income or (loss Gross amount from sales of assets other than inventory	7a		ecurities	(ii) Other				
evenue		С	Less: cost or other basis and sales expenses Gain or (loss) Net gain or (loss)	7b 7c	•						
Other R			Gross income from fundraisi including \$ contributions reported on Part IV, line 18	ng ev line	rents (no 1c). Se	ot of ee					
		С	Less: direct expenses Net income or (loss) from Gross income from gamin	func	draising	8b events					
		b	Part IV, line 19Less: direct expenses			9a					
	10	а	Net income or (loss) from Gross sales of inventory, and allowances	less	returns	10a	1				
			Less: cost of goods sold Net income or (loss) from								
neous	11	а	MISCELLANEOUS	R	EVE	NUES	Business Code 900099	638.	638.		
Miscellaneous Revenue		c p	All other revenue								
⋝ │		u	All other revenue					<u> </u>			

638. 252,982.

638.

0.

e Total. Add lines 11a-11d

Total revenue. See instructions

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).

Column C	Check if Schedule (·				X
Total expenses Program service Program servi		lines 6h	(A)	(B)	(C)	(D)
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, line 21 5 Compensation of current officers, directors, trustees, and key employees 6 Compensation of united above to disqualified persons (as defined under section 4958(c)(3)(B) 7 Other salaries and wages 8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 9 Other employee benefits 10 Payroll taxes 11 Fees for services (nonemployees): a Management b Legal c Accounting d Lobbying e Professional fundraising services. See Part IV, line 17 f Investment management fees 9 Other. (If line 11g amount exceeds 10% of line 25, column (k) amount, list line 11g expenses on Sch 0.) 12 Advertsing and promotion 13 Office expenses 147. 866. 29. 32 311. 147. 866. 29. 32 311. 147. 386. 29. 32 311. 397 377 378		To	otal expenses	Program service expenses		
2 Grants and other assistance to domestic individuals. See Part IV, line 22 3 Grants and other assistance to rerigin 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 6 Compensation of current officers, directors, trustees, and key employees 7 Compensation of current officers, directors, trustees, and key employees 8 Pension (as defined under section 4958(r)(11)) and persons (ascribed in section 4958(r)(11)) and persons described in section 4958(r)(11) and persons (as defined under section 4958(r)(11) and persons 4958(r)(11) and persons 4958(r)(11) and persons 4958(r)(11) and 4975. 11 Fees for services (nonemployees) 12 Advertising and promotion 13	1 Grants and other assistance to do	nestic organizations		5.Np.0110.00	general expenses	57,5511555
individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in Section 4958(c)(3)(B) 7 Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) Other employee benefits Payroll taxes 10 Payroll taxes 11 Fees for services (nonemployees): a Management b Legal c Accounting d Lobbying Professional fundraising services. See Part IV, line 17 f Investment management fees Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch 0.) 12 Advertising and promotion 13 Office expenses 16 Occupancy 17 Travel Payments of travel or entertainment expenses	and domestic governments. See F	art IV, line 21				
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 6 Compensation included above to disqualified persons (as defined under section 4958(r)(3)(8) 7 Other salaries and wages 8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 9 Other employee benefits 10 Payroll taxes 11 Fees for services (nonemployees): a Management b Legal c Accounting e Professional fundraising services. See Part IV, line 17 f Investment management fees 9 Other, (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch 0.) 12 Advertising and promotion 13 Office expenses 147. 86. 29. 32 14 Information technology 15 Royalties 16 Occupancy 17 Travel 18 Payments of travel or entertainment expenses	2 Grants and other assistance t	domestic				
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 6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(f)(1)) and persons described in section 4958(f)(3)(8) 7 Other salaries and wages 10,000. 10,000. 8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 9 Other employee benefits 10 Payroll taxes 11,6434. 9,647. 3,580. 3,207. 11 Fees for services (nonemployees): a Management b Legal c Accounting d Lobbying e 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 0.) 40 Advertising and promotion 10 Gfice expenses 11,7 86. 29. 32. 11 Information technology 311. 487573. 397. 15 Royalties 16 Occupancy 17 Travel 18 Payments of travel or entertainment expenses	individuals. See Part IV, line 2	<u> </u>				
individuals. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees Compensation not included above to disqualified persons (as defined under section 4958(c)(3)(B) Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) Other employee benefits Payroll taxes 16,434. 9,647. 3,580. 3,207 Fees for services (nonemployees): a Management b Legal c Accounting Professional fundraising services. See Part IV, line 17 I Investment management fees Gother. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch 0.) Advertising and promotion Occupancy Information technology Royalties Payments of travel or entertainment expenses	3 Grants and other assistance t	o foreign				
## Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees 198,500. 112,475. 40,650. 45,375 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Other salaries and wages 10,000. 10,000. Pension plan accruats and contributions (include section 401(k) and 403(b) employer contributions) Other employee benefits 16,434. 9,647. 3,580. 3,207 Fees for services (nonemployees): a Management b Legal 8,613. 8,613. C Accounting 8,613. 8,613. 8,613. d Lobbying e 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 0.) 155,385. 144,499. 5,144. 5,742 2 Advertising and promotion 13 Office expenses 147. 86. 29. 32 14 Information technology 311. 487. -573. 397 15 Royalties 17 Travel 18 Payments of travel or entertainment expenses 18 Payments of travel or entertainment e	organizations, foreign governr	nents, and foreign				
5 Compensation of current officers, directors, trustees, and key employees 6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 7 Other salaries and wages 8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 9 Other employee benefits 10 Payroll taxes 11 Fees for services (nonemployees): 11 Fees for services (nonemployees): 12 Adanagement 13 Lobbying 14 Provisional fundraising services. See Part IV, line 17 for linvestment management fees 15 Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.) 15 Advertising and promotion 16 Occupancy 17 Travel 18 Payments of travel or entertainment expenses	individuals. See Part IV, lines	5 and 16				
trustees, and key employees Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) Other employee benefits Payroll taxes In Payroll taxes Accounting Accounting Professional fundraising services. See Part IV, line 17 Investment management fees Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch 0.) Advertising and promotion Office expenses Information technology Information technology Payments of travel or entertainment expenses						
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persons described in section 4958(c)(3)(B) 7	· ·	· .				
7 Other salaries and wages 8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 9 Other employee benefits 10 Payroll taxes 11 Fees for services (nonemployees): a Management b Legal c Accounting d Lobbying e 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 0.) 12 Advertising and promotion 13 Office expenses 147. 86. 29. 32 14 Information technology 15 Royalties 16 Occupancy 17 Travel 18 Payments of travel or entertainment expenses	•	. , , , ,				
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 9 Other employee benefits 10 Payroll taxes 16,434. 9,647. 3,580. 3,207 11 Fees for services (nonemployees): a Management b Legal c Accounting d Lobbying e 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 0.) 12 Advertising and promotion 13 Office expenses 147. 86. 29. 32 15 Royalties 16 Occupancy 17 Travel 18 Payments of travel or entertainment expenses			10 000	10 000		
section 401(k) and 403(b) employer contributions) 9			TO,000.	ΙΟ, ΟΟΟ•		
9 Other employee benefits 10 Payroll taxes 11 Fees for services (nonemployees): a Management b Legal c Accounting d Lobbying e 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 0.) 12 Advertising and promotion 13 Office expenses 147. 86. 29. 32 14 Information technology 311. 487573. 397 15 Royalties 16 Occupancy 17 Travel 18 Payments of travel or entertainment expenses						
10 Payroll taxes						
11 Fees for services (nonemployees): a Management b Legal c Accounting			16 434	9 647	3 580	3 207
a Management b Legal c Accounting			10,434.	5,0474	3,300.	3,207
b Legal c Accounting 8,613. 8,613. d Lobbying e 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 0.) 12 Advertising and promotion 13 Office expenses 147. 86. 29. 32 14 Information technology 311. 487573. 397 15 Royalties 16 Occupancy 17 Travel 18 Payments of travel or entertainment expenses	, , ,	· ′ I				
c Accounting 8,613. d Lobbying 9 Professional fundraising services. See Part IV, line 17 f Investment management fees 9 Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch 0.) 155,385. 144,499. 5,144. 5,742 12 Advertising and promotion 147. 86. 29. 32 14 Information technology 311. 487. -573. 397 15 Royalties 16 Occupancy 17 Travel 18 Payments of travel or entertainment expenses 18 Payments of travel or entertainment expenses 18 Payments of travel or entertainment expenses						
d Lobbying e 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 0.) 12 Advertising and promotion 13 Office expenses 147. 86. 29. 32 14 Information technology 15 Royalties 16 Occupancy 17 Travel 18 Payments of travel or entertainment expenses			8.613.		8.613.	
e 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 0.) 12 Advertising and promotion 13 Office expenses 147. 86. 29. 32 14 Information technology 311. 487573. 397 15 Royalties 16 Occupancy 17 Travel 18 Payments of travel or entertainment expenses			0,020		0,0201	
f Investment management fees g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch 0.) 12 Advertising and promotion 13 Office expenses 14 Information technology 15 Royalties 16 Occupancy 17 Travel 18 Payments of travel or entertainment expenses						
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch 0.) 12 Advertising and promotion 13 Office expenses		· · · · · · · · · · · · · · · · · · ·				
column (A) amount, list line 11g expenses on Sch 0.) 155,385. 144,499. 5,144. 5,742 12 Advertising and promotion 147. 86. 29. 32 14 Information technology 311. 487. -573. 397 15 Royalties 0ccupancy 17 Travel 18 Payments of travel or entertainment expenses 18 Payments of travel or entertainment expenses 155,385. 144,499. 5,144. 5,742 12 Advertising and promotion 147. 86. 29. 32 147. 148. 148. 148. 148. 148. 148. 148. 148. 149. 148. 149.<						
13 Office expenses 147. 86. 29. 32 14 Information technology 311. 487. -573. 397 15 Royalties 0ccupancy 17 Travel 17 Payments of travel or entertainment expenses 18 Payments of travel or entertainment expenses 18 Payments of travel or entertainment expenses 19 Payments of travel or entertainment expenses			155,385.	144,499.	5,144.	5,742.
14 Information technology 311. 487. -573. 397 15 Royalties 0ccupancy 17 Travel 17 Payments of travel or entertainment expenses 18 Payments of travel or entertainment expenses	12 Advertising and promotion					
15 Royalties 16 Occupancy 17 Travel 18 Payments of travel or entertainment expenses	13 Office expenses				l l	32.
15 Royalties	14 Information technology		311.	487.	-573.	397.
17 Travel 18 Payments of travel or entertainment expenses						
18 Payments of travel or entertainment expenses	16 Occupancy					
· I I I I I I I I I I I I I I I I I I I	17 Travel					
for any federal, state, or local public officials	•	•				
	• • • • • • • • • • • • • • • • • • • •		0.0		0.0	
19 Conferences, conventions, and meetings 89 • 89 •		d meetings		07		20
	***************************************		149.	٥/.	30.	32.
21 Payments to affiliates 2,057. 1,750. 136. 171			2 057	1 750	126	171.
794 466 155 173	OO Ingresses					173.
			/ / 4 •	400.	133.	175.
above (List miscellaneous expenses on line 24e. If	above (List miscellaneous expens	es on line 24e. If				
line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)						
			22,307.	20,521.	844.	942.
b OFFICE ADMINISTRATOR 7,144. 2,146. 4,998.	-				l l	
c PAYROLL PROCESSING 1,063. 1,063.	c PAYROLL PROCESS	ING				
d WORKERS' COMPENSATION I 878. 562. 108. 208	d WORKERS' COMPEN	SATION I	878.		108.	208.
	e All other expenses				l l	73.
	· ———	nes 1 through 24e	424,590.	302,882.	65,356.	56,352.
26 Joint costs. Complete this line only if the organization	26 Joint costs. Complete this line on	y if the organization				
reported in column (B) joint costs from a combined	reported in column (B) joint costs	from a combined				
educational campaign and fundraising solicitation.	educational campaign and fundrai	sing solicitation.				
Check here if following SOP 98-2 (ASC 958-720)	Check here if following SOP	98-2 (ASC 958-720)				F 000 (0000)

Form 990 (2020)

Part X Balance Sheet

Pa	rt X	Balance Sheet					
		Check if Schedule O contains a response or r	note to any li	ne in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			349,684.	1	103,813.
	2	Savings and temporary cash investments	60,522.	2	160,573.		
	3	Pledges and grants receivable, net		3			
	4		Accounts receivable, net				
	5	Loans and other receivables from any current					
		trustee, key employee, creator or founder, sul	bstantial cor	tributor, or 35%			
		controlled entity or family member of any of the	nese persons	s		5	
	6	Loans and other receivables from other disqu					
		under section 4958(f)(1)), and persons describ	oed in sectio	n 4958(c)(3)(B)		6	
ß	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
ğ	9	Prepaid expenses and deferred charges				9	
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D		21,008.			
	b	Less: accumulated depreciation	·· — —	12,342.	10,723.	10c	8,666.
	11	Investments - publicly traded securities				11	
	12	Investments - other securities. See Part IV, lin				12	
	13	Investments - program-related. See Part IV, lir				13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11				15	
	16	Total assets. Add lines 1 through 15 (must ed			420,929.	16	273,052.
	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. Complet				21	
S	22	Loans and other payables to any current or for	ormer officer	director,			
≝		trustee, key employee, creator or founder, sul	bstantial cor	tributor, or 35%			
Liabilities		controlled entity or family member of any of the	nese persons	s		22	
Ξ	23	Secured mortgages and notes payable to unr	elated third	parties		23	
	24	Unsecured notes and loans payable to unrela	ted third par	ties		24	
	25	Other liabilities (including federal income tax,	payables to	related third			
		parties, and other liabilities not included on lin	nes 17-24). C	omplete Part X			
		of Schedule D			0.	25	23,695.
	26	Total liabilities. Add lines 17 through 25			0.	26	23,695.
"		Organizations that follow FASB ASC 958, c	heck here	X			
ĕ		and complete lines 27, 28, 32, and 33.					
lan	27	Net assets without donor restrictions			420,929.	27	249,357.
B	28	Net assets with donor restrictions				28	
ů		Organizations that do not follow FASB ASC	958, check	here 🕨 🗌			
Ē		and complete lines 29 through 33.					
ts o	29	Capital stock or trust principal, or current fund	ds			29	
set	30	Paid-in or capital surplus, or land, building, or				30	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated				31	
Ne.	32	Total net assets or fund balances			420,929.	32	249,357.
	33	Total liabilities and net assets/fund balances			420,929.	33	273,052.

Form **990** (2020)

Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
	Tabel access (south a coal Dark VIII as house (A) Via a 40)		25	2,9	82
1	Total revenue (must equal Part VIII, column (A), line 12)	1			
2	Total expenses (must equal Part IX, column (A), line 25)	2		4,5	
3	Revenue less expenses. Subtract line 2 from line 1	3	-17		
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	42	0,9	29.
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses				
8	Prior period adjustments	8			36.
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	24	9,3	57.
Pa	rt XII Financial Statements and Reporting				
	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		X
	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 separate	e basis,			
	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 audit,			
	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 Scl	nedule O.			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Audit			
	Act and OMB Circular A-133?		За		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired audit			
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		

Form **990** (2020)

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Total

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 Name of the organization 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	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	491,255.	410,036.	357,016.	355,018.	252,267.	1865592.
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	404 055	440 006	255 246	255 242	050 065	1065500
4	Total. Add lines 1 through 3	491,255.	410,036.	357,016.	355,018.	252,267.	1865592.
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,						1061005
	column (f)						1361835.
6	Public support. Subtract line 5 from line 4.						503,757.
	etion B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2016 491, 255.	(b) 2017 410,036.	(c) 2018 357, 016.	(d) 2019 355,018.	(e) 2020 252, 267.	(f) Total 1865592.
	Amounts from line 4	491,233.	410,030.	337,010.	333,010.	232,207.	1003392.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,	105.	76.	128.	129.	78.	516.
_	and income from similar sources	105.	70.	120.	149.	70.	210.
9	Net income from unrelated business						
	activities, whether or not the						
40	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital				14,892.	638.	15,530.
44	assets (Explain in Part VI.)				14,002.	030.	1881638.
11 12	Total support. Add lines 7 through 10 Gross receipts from related activities,	eta (eca inetrueti	one)			12	1001030.
13	First 5 years. If the Form 990 is for the			fourth or fifth tax			
.0	organization, check this box and stor				-		
Sec	etion C. Computation of Publ						
	Public support percentage for 2020 (column (f))		14	26.77 %
15	Public support percentage from 2019					15	27.56 %
16a	33 1/3% support test - 2020. If the					nore, check this bo	x and
	stop here. The organization qualifies	as a publicly supp	orted organization	·			>
b	33 1/3% support test - 2019. If the						
	and stop here. The organization qual	ifies as a publicly s	supported organiza	ation			>
17a	10% -facts-and-circumstances tes						
	and if the organization meets the fact	s-and-circumstand	es test, check this	box and stop he	re. Explain in Part	VI how the organiz	
	meets the facts-and-circumstances to	est. The organization	on qualifies as a pu	ublicly supported	organization		▶ X
b	10% -facts-and-circumstances tes	t - 2019. 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	ne facts-and-circur	nstances test, che	ck this box and st	op here. Explain i	n Part VI how the	
	organization meets the facts-and-circ	umstances test. Tl	ne organization qu	alifies as a publicly	y supported organ	ization	▶□
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	and see instruction	s 🕨 🔲

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.)

Galledar year (or fiscal year septiming in) Galledar year (or fiscal	Sec	tion A. Public Support	now, please com	piete Part II.)				
1 Giffs, grants, contributions, and membership feet received. (Do not include any "unusual grants.") 2 Gross eneights from admissions, merchandise acid or services per formed, or facilities turnished in any activity that is related to the organization's trave-empt purpose 3. Gross neceipts from activities that are not an unrelated trade or business under section 513. 4 Tax revenues levide 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's benefit and either paid to or expended on its behalf. 6 Total. Add lines 1 through 5. 7 A mounts included on lines 1, 2, and 3 received from disqualified persons. b invest tenders in lines 2 and 3 and 3 received from disqualified persons. b invest tenders in lines 2 and 3 and 3 received from disqualified persons. b invest tenders in lines 2 and 3 received from disqualified persons. b invest tenders in lines 2 and 3 received from disqualified persons. b invest tenders in lines 2 and 3 received from disqualified persons. b invest tenders in lines 2 and 3 received from disqualified persons that second to gratues of 18,000 or 1% of the annual received and annual received annu		· · · · · · · · · · · · · · · · · · ·	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
membership fees received. (Do not include any trustal grants?) 2 Gross receipts from admissions, membranding sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose 3 Gross receipts from admissions that are not an unrelated trade or business under section 513 4 Tax revenues levied for the organization is transpared to or expended on its behalf 5 The value of services or scalities furnished by a governmental unit to the organization's benefit and either paid to or expended on its behalf 6 Total. Add lines 1 through 5		· ` ` ` · · · · · · · · · · · · · · · ·	(-, -5.5	(-,,	(-, 25.5	(=, ==:=	\-,	(-)
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merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's traveweriph purpose 3. Gross receipts from activities that are not an unrelated trade or bus- iness 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 statities furnished by a governmental unit to the organization without charge 6. Total. Add lines 1 through 5. 7. A mounts included on lines 1, 2, and 3. received from disqualified persons b. Amounts included on lines 1, 2, and 3. received from disqualified persons b. Amounts included on lines 1, 2, and 3. received from disqualified persons b. Amounts included on lines 1, 2, and 3. received from disqualified persons b. Amounts include on lines 2 and 7 served from the first of the pay 6. Add lines 7 and 7 b. 8. Public support, secretal solution 9. Amounts fortion line 6. 10. Gross income from interest, dividendis, payments received on and income from similar sources b. Unrelated business tzable income (less section 5.1 laxes) from businesses acquired after June 30, 1975 9. Add lines 10a and 10b 10. Add lines 10a and 10b 11. Net income from unrelated business whether or not the business is regulatly carried on 12. The fortion of the business whether or not the business is regulatly carried on 17 the 17 th, at 12; 14. First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or lifth tax year as a section 501(c)(3) organization, critical 15. Public support percentage for 2020 (line 16, column (f), divided by line 13, column (f)) 15. 99. 98. 98. 98. 98. 99. 90. 90. 90. 90. 90. 90. 90		, , , , , , , , , , , , , , , , , , ,						
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Part IV | Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, 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 lines 3b and 3c 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 box 12a or 12b in Part I, answer lines 4b and 4c 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 lines 5b and 5c 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 line 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
_		
1		
2		
3a		
3b		
3c		
4a		
44		
4b		
4c		
5a		
5b		
5c		
6		
7		
8		
9a		
Ja		
9b		
9c		
10a		
10b		
m 990 or 99	JU-EZ)	2020

Par	t IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in lines 11b and			
	11c below, the governing body of a supported organization?	11a		
	A family member of a person described in line 11a above?	11b		
С	A 35% controlled entity of a person described in line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sect	ion B. Type I Supporting Organizations			
			Yes	No
	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Seci	ion C. Type II Supporting Organizations		I.,	
			Yes	No
	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
	ion D. All Type III Supporting Organizations			
	Divin Type in Supporting Significations		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		163	140
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sect	ion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see instruction	ıs).		
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 governmental entity (see	instructio	ns).	
	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
	Did the activities described in line 2a, above, constitute activities that, but for the organization's involvement,			
	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in	_		
	these activities but for the organization's involvement.	2b		
	Parent of Supported Organizations. Answer lines 3a and 3b below.			
	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			

of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

Pai	t V Type III Non-Functionally Integrated 509(a)(3) Supporti	ing Organ	iizations				
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.						
	All other Type III non-functionally integrated supporting organizations must complete Sections 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 0.015 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 0.035.	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 0.85 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-function	ally integrate	ed Type III supporting org	anization (see			
	instructions).						

Schedule A (Form 990 or 990-EZ) 2020

SCITE	dule A (Form 990 of 990-EZ) 2020 Direction in the	11, 11(0.			O ZOSZISO Page /
Pai	t V Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	anizations _{(continu}	ued)	
Sect	ion D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish exe	mpt purposes		1	
2	Amounts paid to perform activity that directly furthers exempt				
	organizations, in excess of income from activity		2		
3	Administrative expenses paid to accomplish exempt purpose	is	3		
4	Amounts paid to acquire exempt-use assets			4	
_5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	he organization is responsive	Э		
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2020 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Sect	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributio Pre-2020	ns	(iii) Distributable Amount for 2020
1	Distributable amount for 2020 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2020 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2020				
а	From 2015				
b	From 2016				
С	From 2017				
d	From 2018				
е	From 2019				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2020 distributable amount				
i	Carryover from 2015 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2020 from Section D,				
	line 7: \$				
а	Applied to underdistributions of prior years				
b	Applied to 2020 distributable amount				
С	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2020, if				
	any. Subtract lines 3g and 4a from line 2. For result greater				
	than zero, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2020. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				

Schedule A (Form 990 or 990-EZ) 2020

Part VI. See instructions.

and 4c.

8 Breakdown of line 7:

a Excess from 2016

b Excess from 2017

c Excess from 2018

d Excess from 2019

e Excess from 2020

7 Excess distributions carryover to 2021. Add lines 3j

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.)
SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:
PAYROLL TAX REFUND
2019 AMOUNT: \$ 14,892.
2020 AMOUNT: \$ 638.
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

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.)
EARTH'S RESEARCH.
6. PUBLIC NATURE OF BOARD.
7. THE TYPE OF RESEARCH LED 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
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.

Schedule B

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

Internal Revenue Service

Name of the organization

Schedule of Contributors

Attach to Form 990, Form 990-EZ, or Form 990-PF.

OMB No. 1545-0047

Employer identification number

Schedule B (Form 990, 990-EZ, or 990-PF) (2020)

or 990-PF)
Department of the Treasury
Internal Revenue Service

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

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

2020

	BE	RKELEY EARTH, INC.	40-2032190			
Organizati	ion type (check or	ie):				
Filers of:		Section:				
Form 990 or 990-EZ		X 501(c)(3) (enter number) organization				
		4947(a)(1) nonexempt charitable trust not treated as a private foundation				
		527 political organization				
Form 990-F	PF	501(c)(3) exempt private foundation				
		4947(a)(1) nonexempt charitable trust treated as a private foundation				
		501(c)(3) taxable private foundation				
,	a section 501(c)(covered by the General Rule or a Special Rule. 7), (8), or (10) organization can check boxes for both the General Rule and a Special Ru	le. See instructions.			
		filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling one contributor. Complete Parts I and II. See instructions for determining a contributor				
Special Ru	ules					
se ar	ections 509(a)(1) a ny one contributo	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support nd 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount ine 1. Complete Parts I and II.	or 16b, and that received from			
co lit	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 (entering "N/A" in column (b) instead of the contributor name and address), II, and III.					
y∈ is pı	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year \rightarrow \frac{1}{2} \frac{1}					
but it must	t answer "No" on	at isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (FP Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form filling requirements of Schedule B (Form 990, 990-EZ, or 990-PF).				

Name of organization Employer identification number

BERKELEY EARTH, INC.

46-2032196

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

Name of organization Employer identification number

BERKELEY EARTH, INC.

46-2032196

Part II	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

cor	m any one contributor. Complete columns (an appleting Part III, enter the total of exclusively religious, and duplicate copies of Part III if additional	charitable, etc., contributions of \$1,000 or	r less for the year. (Enter this info. once.)
o. n	e duplicate copies of Part III if additional	(c) Use of gift	(d) Description of how gift is held
-			
		(e) Transfer of git	ft
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
). I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of git	ft
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
·	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of git	
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
<u> </u>	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
.			
		(e) Transfer of git	ft
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee

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

Pai	t I Organizations Maintaining Donor Advise	ed Funds or Other S	Similar Funds o	r Accoun	ts. Complete if the
	organization answered "Yes" on Form 990, Part IV, lir	ne 6.			
		(a) Donor advise	d 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 he	eld in donor advised	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	advisors in writing that gra	ant funds can be us	ed only	
	for charitable purposes and not for the benefit of the donor	or donor advisor, or for ar	ny other purpose co	nferring	
	impermissible private benefit?				Yes No
Pai	t II Conservation Easements. Complete if the or	ganization answered "Yes	s" on Form 990, Par	t 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 l	nistorically in	nportant land area
	Protection of natural habitat		Preservation of a	certified histo	oric structure
	Preservation of open space				
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contrib	ution in the form of	a conservati	on easement on the last
	day of the tax year.			Н	leld at the End of the Tax Year
а	Total number of conservation easements			2a	
b	Total acreage restricted by conservation easements			2b	
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 structure)	
	listed in the National Register			2d	
3	Number of conservation easements modified, transferred, re			rganization o	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, inspec	tion, handling of		
	violations, and enforcement of the conservation easements	it holds?			Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,	, handling of violations, ar	nd enforcing conser	vation easer	ments during the year
	>				
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and en	forcing conservatio	n easements	s during the year
	▶ \$				
8	Does each conservation easement reported on line 2(d) about	ve satisfy the requiremen	ts 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 reve	nue and expense st	atement and	d
	balance sheet, and include, if applicable, the text of the foot	note to the organization's	financial statemen	ts that descr	ribes the
_	organization's accounting for conservation easements.				
Pai	t III Organizations Maintaining Collections o	· · · · · · · · · · · · · · · · · · ·	easures, or Oth	er Sımılaı	r Assets.
	Complete if the organization answered "Yes" on Form				
1a	If the organization elected, as permitted under FASB ASC 98	, ,			
	of art, historical treasures, or other similar assets held for pu	,	,	•	ublic
	service, provide in Part XIII the text of the footnote to its fina				
b	If the organization elected, as permitted under FASB ASC 98				
	art, historical treasures, or other similar assets held for public	c exhibition, education, o	r research in further	ance of pub	lic service,
	provide the following amounts relating to these items:			_	
	(i) Revenue included on Form 990, Part VIII, line 1				
2	If the organization received or held works of art, historical tre			ain, provide	
	the following amounts required to be reported under FASB A				
а	Revenue included on Form 990, Part VIII, line 1			🕨 💲	
b	Assets included in Form 990, Part X			> \$	

	t III Organizations Maintaining C	collections of A	rt, Hist	torical Tr	easures, o	or Oth	er S	imila	r Asse	ts (continu	ued)
3	Using the organization's acquisition, accessi	on, and other record	ls, checl	k any of the	following tha	t make	signif	icant ı	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 co	ollections and explain	n how th	ney further t	the organizati	on's exe	empt	purpo	se in Par	t XIII.	
5	During the year, did the organization solicit of	r receive donations	of art, hi	storical trea	asures, or oth	er simila	ar ass	ets			
	to be sold to raise funds rather than to be ma	aintained as part of t	he orga	nization's c	ollection?					Yes	☐ No
Par	t IV Escrow and Custodial Arran	gements. Comple	ete if the	organizatio	on answered	"Yes" or	n Fori	m 990	, Part IV,	line 9, or	
	reported an amount on Form 990, Pa										
1a	Is the organization an agent, trustee, custod	ian or other intermed	diary for	contribution	ns or other as	sets no	t incl	uded			
	on Form 990, Part X?									Yes	☐ No
b	If "Yes," explain the arrangement in Part XIII										
	-	·	_				Γ			Amount	
С	Beginning balance							1c			
	Additions during the year							1d			
	Distributions during the year							1e			
f	Ending balance							1f			
2a	Did the organization include an amount on F	orm 990. Part X. line	21. for 6	escrow or c	ustodial acco	unt liab	∟ ilit∨?			Yes	No
	If "Yes," explain the arrangement in Part XIII.						-				
Par											
	·	(a) Current year		rior year	(c) Two year			hree ye	ears back	(e) Four	years back
1a	Beginning of year balance	, ,	,				,				<u>, </u>
	Contributions										
	Net investment earnings, gains, and losses										_
d	Grants or scholarships										
	Other expenditures for facilities										
ŭ	and programs										
f	Administrative expenses										
g g	End of year balance										
2	Provide the estimated percentage of the cur	rent vear end haland	e (line 1	a column (a)) held as:		<u> </u>				
a	Board designated or quasi-endowment	rent year end balane	%	g, column (ajj ricia as.						
b	Permanent endowment	%	_′°								
·	The percentages on lines 2a, 2b, and 2c sho	, -									
За	Are there endowment funds not in the posse	•	ation tha	at are held a	and administe	ered for	the o	raaniz:	ation		
ou	by:	oolon or the organiza	ation the	it are riola t	and daminiote	700 101	11100	garnz	ation	Г	Yes No
	(i) Unrelated organizations									3a(i)	100 110
	(ii) Related organizations									3a(ii)	
h	If "Yes" on line 3a(ii), are the related organization	ations listed as requir	red on S	chedule R?)						
4	Describe in Part XIII the intended uses of the									00	
Par	t VI Land, Buildings, and Equipm		WITICITE	idilds.							
	Complete if the organization answere) Part I\	/ line 11a 9	See Form 990) Part X	line	10			
	Description of property	(a) Cost or o			t or other			nulate	4	(d) Book	value
	bescription of property	basis (investr			(other)	٠,	preci		"	(a) Book	value
1a	Land	,	,	24010	\		,5.00				
b	Land Buildings										
	Leasehold improvements								- -		
d				2	21,008.		1.2	2,34	12.	8	,666.
	Equipment Other				,,			-,			, , , , , , ,
	Add lines 1a through 1e (Column (d) must e		X colun	nn (R) line '	10c)					8	,666.

Schedule D (Form 990) 2020	BERKELEY EA	ARTH,	INC.		46-2032196	Page 3	
Part VII Investments -	Other Securities.						
Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.							
(a) Description of security or cated	10TV (including name of security)	(b)	Book value	(c) Method of valuation: Cost of	or end-of-vear market v	/alue	

complete if the organization answered Test of	111 01111 000, 1 411 17, 11110	118. GGG 1 GHH GGG, 1 GFX, IIIG 12.
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total . (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶		
D-1////		

| 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-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(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)	
Total (Column (b) must equal Form 990, Part X, col. (B) line 15.)	

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1.	(a) Description of liability	(b) Book value
(1)	Federal income taxes	
(2)	PPP LOAN PAYABLE	23,546.
(3)	INTEREST PAYABLE	149.
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total.	(Column (b) must equal Form 990, Part X, col. (B) line 25.)	23,695.

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

Pai	t XI Reconciliation of Revenue per Audited Financial Stat	ements With Rever	nue per Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line	e 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			
С	Recoveries of prior year grants			
d	Other (Describe in Part XIII.)			
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		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	
Pa	rt XII Reconciliation of Expenses per Audited Financial Sta	tements With Expe	nses per Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line	e 12a.		
1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
а	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
С	Other losses			
d	Other (Describe in Part XIII.)			
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
		4b		
b	Other (Describe in Part XIII.)	1 0		
b C	Other (Describe in Part XIII.) Add lines 4a and 4b	•	4c	
5	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18			
5	Add lines 4a and 4b			
5 Pa	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18	.)	5	
5 Pa Prov	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 rt XIII Supplemental Information.	; Part IV, lines 1b and 2b;	5	
5 Pa Prov	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 rt XIII Supplemental Information. ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4	; Part IV, lines 1b and 2b;	5	
5 Pa Prov	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 rt XIII Supplemental Information. ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4	; Part IV, lines 1b and 2b;	5	
5 Pa Prov	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 rt XIII Supplemental Information. ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4	; Part IV, lines 1b and 2b;	5	
5 Pa Prov	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 rt XIII Supplemental Information. ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4	; Part IV, lines 1b and 2b;	5	
5 Pa Prov	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 rt XIII Supplemental Information. ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4	; Part IV, lines 1b and 2b;	5	
5 Pa Prov	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 rt XIII Supplemental Information. ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4	; Part IV, lines 1b and 2b;	5	
5 Pa Prov	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 rt XIII Supplemental Information. ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4	; Part IV, lines 1b and 2b;	5	
5 Pa Prov	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 rt XIII Supplemental Information. ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4	; Part IV, lines 1b and 2b;	5	
5 Pa Prov	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 rt XIII Supplemental Information. ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4	; Part IV, lines 1b and 2b;	5	
5 Pa Prov	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 rt XIII Supplemental Information. ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4	; Part IV, lines 1b and 2b;	5	
5 Pa Prov	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 rt XIII Supplemental Information. ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4	; Part IV, lines 1b and 2b;	5	
5 Pa Prov	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 rt XIII Supplemental Information. ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4	; Part IV, lines 1b and 2b;	5	
5 Pa Prov	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 rt XIII Supplemental Information. ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4	; Part IV, lines 1b and 2b;	5	
5 Pa Prov	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 rt XIII Supplemental Information. ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4	; Part IV, lines 1b and 2b;	5	
5 Pa Prov	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 rt XIII Supplemental Information. ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4	; Part IV, lines 1b and 2b;	5	
5 Pa Prov	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 rt XIII Supplemental Information. ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4	; Part IV, lines 1b and 2b;	5	
5 Pa Prov	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 rt XIII Supplemental Information. ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4	; Part IV, lines 1b and 2b;	5	
5 Pa Prov	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 rt XIII Supplemental Information. ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4	; Part IV, lines 1b and 2b;	5	
5 Pa Prov	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 rt XIII Supplemental Information. ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4	; Part IV, lines 1b and 2b;	5	
5 Pa Prov	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 rt XIII Supplemental Information. ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4	; Part IV, lines 1b and 2b;	5	
5 Pa Prov	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 rt XIII Supplemental Information. ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4	; Part IV, lines 1b and 2b;	5	
5 Pa Prov	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 rt XIII Supplemental Information. ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4	; Part IV, lines 1b and 2b;	5	

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. Open to Public

OMB No. 1545-0047

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:

MANAGEMENT AND GENERAL EXPENSES 5, FUNDRAISING EXPENSES 5,	
MANAGEMENT AND GENERAL EXPENSES FUNDRAISING EXPENSES TOTAL EXPENSES 129, PROFESSIONAL/MARKETING & SOCIAL MEDIA: PROGRAM SERVICE EXPENSES 15, MANAGEMENT AND GENERAL EXPENSES 5, TOTAL EXPENSES 26,	000.
FUNDRAISING EXPENSES TOTAL EXPENSES 129, PROFESSIONAL/MARKETING & SOCIAL MEDIA: PROGRAM SERVICE EXPENSES 15, MANAGEMENT AND GENERAL EXPENSES 5, TOTAL EXPENSES 26,	
TOTAL EXPENSES 129, PROFESSIONAL/MARKETING & SOCIAL MEDIA: PROGRAM SERVICE EXPENSES 15, MANAGEMENT AND GENERAL EXPENSES 5, FUNDRAISING EXPENSES 5, TOTAL EXPENSES 26,	0.
PROFESSIONAL/MARKETING & SOCIAL MEDIA: PROGRAM SERVICE EXPENSES 15, MANAGEMENT AND GENERAL EXPENSES 5, FUNDRAISING EXPENSES 5, TOTAL EXPENSES 26,	0.
PROFESSIONAL/MARKETING & SOCIAL MEDIA: PROGRAM SERVICE EXPENSES 15, MANAGEMENT AND GENERAL EXPENSES 5, FUNDRAISING EXPENSES 5, TOTAL EXPENSES 26,	000.
PROGRAM SERVICE EXPENSES 15, MANAGEMENT AND GENERAL EXPENSES 5, FUNDRAISING EXPENSES 5, TOTAL EXPENSES 26,	
MANAGEMENT AND GENERAL EXPENSES 5, FUNDRAISING EXPENSES 5, TOTAL EXPENSES 26,	
FUNDRAISING EXPENSES 5, TOTAL EXPENSES 26,	499.
TOTAL EXPENSES 26,	144.
	742.
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A 155,	385.
	385.
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