Department of the Treasury

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private

DLN: 93493318136618 OMB No 1545-0047

Open to Public

▶ Do not enter social security numbers on this form as it may be made public

▶ Information about Form 990 and its instructions is at www.irs.gov/form990

Interna	ıl Reve	nue Service	F Information about	t Form 990 and its mistractions is at w	**** INS 90V/1011	111220		Inspection			
A F	or the	e 2017 ca		ning 01-01-2017 , and ending 12	-31-2017	_					
		pplicable	C Name of organization NEXTGEN CLIMATE ACTION			D Employ	er identif	ication number			
	ldress one ch	change				46-195	7345				
	itial ret	-	Doing business as NEXTGEN AMERICA								
		n/terminated		E Telephon	e number						
		d return on pending	111 SUTTER STREET FLOOR 10	all is not delivered to street address) Room,	rsuite	(415) 7	57-6600				
		, ,	City or town, state or province, coun	try, and ZIP or foreign postal code		- (125)					
			SAN FRANCISCO, CA 94104			G Gross re	ceipts \$ 19	9,554,050			
			F Name and address of principal CHRIS FADEFF	officer	H(a) Is the	ıs a group re	turn for				
			111 SUTTER STREET FLOOR 10			rdinates?		□Yes ☑No			
	v ovon	npt status	SAN FRANCISCO, CA 94104		─ ` ´ ınclu	all subordinat ded?	es	☐ Yes ☐No			
		•		Insert no) \square 4947(a)(1) or \square 527			-	instructions)			
J W	ebsit	e:► WW	W NEXTGENCLIMATE ORG		in(c) Grou	p exemption	number	•			
K Fort	m of or	rganization	✓ Corporation ☐ Trust ☐ Associ	riation Other •	L Year of form	nation 2013	M State	of legal domicile CA			
IX TOIT	111 01 01	gamzadon	E Corporation E Trust E Assoc	Gallon D other P							
Pa		Sumr									
			cribe the organization's mission or CLIMATE DISASTER AND PROMOTE	most significant activities PROSPERITY FOR EVERY AMERICAN							
nce	-										
E	-										
Activities & Governance	2	Check this	s box 🕨 🗌 if the organization disc	continued its operations or disposed o	f more than 25%	% of its net a	ssets				
Ğ	3	Number o	of voting members of the governing	g body (Part VI, line 1a)			3	5			
× 5	1		· -	the governing body (Part VI, line 1b)		•	4	5			
¥¥	1		nber of individuals employed in cal	5	95						
(cf.	1		•	essary)		•	6 7a	0			
Q.	1		otal unrelated business revenue from Part VIII, column (C), line 12								
	+ -	Net unier	ated business taxable income from	7 FOITH 990-1, IIIIe 34	 Dr	ior Year	7b	Current Year			
_	8	Contributi	ions and grants (Part VIII, line 1h)			44,436,0	006	19,488,943			
Rəvenue	1		service revenue (Part VIII, line 2g)	· · ·	0	0					
ō∧ċ}	10	Investme	nt income (Part VIII, column (A), l		0	0					
ш.	11	Other rev	er revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 77,186								
	12	Total reve	enue—add lines 8 through 11 (mus	st equal Part VIII, column (A), line 12))	44,513,1	192	19,554,050			
	1		nd sımılar amounts paıd (Part IX, c	, ,,		8,535,0	_	4,261,703			
	1		paid to or for members (Part IX, co	,		0	0				
SS	1			nefits (Part IX, column (A), lines 5–10	'	6,170,5		6,248,102			
Expenses	Ι.		- '	nn (A), line 11e)			0	0			
Ä	1		aising expenses (Part IX, column (D), lir penses (Part IX, column (A), lines :	·		28,887,5	581	11,315,692			
	1	•	enses Add lines 13–17 (must equa	•		43,593,2	_	21,825,497			
	1	•	less expenses Subtract line 18 fro	• • • •		919,9		-2,271,447			
8 8					Beginning	of Current Y	ear	End of Year			
Net Assets or Fund Balances	30	Tab-1	ate (Daut V luce 46)			4 700 1	-71	2.020.000			
A B	1		ets (Part X, line 16)			4,769,6 1,534,1		2,920,006 1,955,913			
žš.	1		s or fund balances Subtract line 2			3,235,5		964,093			
Pai			ature Block			-,,-					
Unde	r pena	alties of pe	erjury, I declare that I have exami	ned this return, including accompanyi							
	nowle		r, it is true, correct, and complete	Declaration of preparer (other than o	micer) is based (on all informa	ation or v	vnich preparer nas			
		11				40.40.05					
Sign		Signatu	re of officer		Da	18-10-05 te					
Here		CHRIS	FADEFF CFO/VP, LEGAL								
			print name and title								
			rint/Type preparer's name DAN S MCMAHON	Preparer's signature JOAN S MCMAHON	Date Ch		PTIN P00966494	1			
Paid				JOAN S PICHALION	sel	f-employed					
	pare	*! <u> -</u> .	Firm's name ▶ DELOITTE TAX LLP Firm's EIN ▶ 86-1065772 Firm's address ▶ 555 MISSION STREET Phone no (415) 783-4000								
Use	On	ly ''	SAN FRANCISCO, CA 9	4105		one no (413)	, 55-4000				
M	he TP	C duantities						es 🗆 No			
			this return with the preparer show fuction Act Notice, see the sepa	•	Cat No	 11282Y	₹1 ¥	res □ No Form 990 (2017)			
					Cat IVU			(4U1/)			

Form	990 (2017)					Page 2							
Par	t IIII Statement o	of Program Servic	e Accomplis	hments									
	Check If Sched	ule O contains a respo	nse or note to	any line in this Part III		🗹							
1	Briefly describe the or	ganızatıon's mıssıon											
PRON		OR EVERY AMERICAN	THE ORGANIZA		I FOCUSED ON PREVENTING CLIMA TE PUBLIC SUPPORT ON ISSUES A								
2	Did the organization u	ındertake any sıgnıfıca	nt program ser	vices during the year whi	ich 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? If "Yes," describe thes	e changes on Schedul				☐ Yes 🗹 No							
4		501(c)(4) organizatio	ns are required	to report the amount of	argest program services, as measu grants and allocations to others, tl								
4a	(Code) (Expenses \$	5,814,146	including grants of \$	203,600) (Revenue \$)							
	See Additional Data	, (a.,p.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				<u> </u>							
4b	(Code) (Expenses \$	2,680,332	ıncludıng grants of \$) (Revenue \$)							
	See Additional Data												
4c	(Code See Additional Data) (Expenses \$	1,192,900	including grants of \$) (Revenue \$)							
	(Code) (Expenses \$	9,853,227	including grants of \$	4,058,103) (Revenue \$)							
	OF CALIFORNIA NEXTGE REGISTRATION DRIVES F THESE DEMOGRAPHIC GF WITH THESE ORGANIZAT CLIMATE ACTION CONTIN IN CALIFORNIA POLICY ISSU GERMANY, AND WORKED AND STATES SIGN ON TO BETWEEN INCOME INEQUALITY THE FAIR SICLIMATE CHANGE THE CFOR CALIFORNIANS THE CEXPLORATIONNEXTGEN CENVIRONMENTAL BALLOT ON AUTHORING AND SUPPONSIBLE FOR ALL OCREATIVE AND EFFECTIV	IN CLIMATE ACTION WITH COLUSED ON THE "RISING ROUPS SUPPORT POLICIES TONS, NEXTGEN CLIMATE VUED TO LEAD AN EFFORT OF THE PARTS OF THE P	AND GAVE UNRE AMERICAN ELEC TO ADDRESS PE ACTION REGISTI TO STRENGTHER INUED BUILDING COTION ALSO PAR FOR THE DELEGA ACCORD CALIFOR NGE BECAUSE O EETINGS UP AND RATED STATEWIE REPORT IN SPRII RE INEQUITY, ECC TED RESEARCH A RCH CONDUCTED RES IN SPECIFIC NICATION FOR THE	STRICTED GRANTS TO ORGA TORATE" CONSISTING OF MI COGRESSIVE ISSUES AT A MI CERED HUNDREDS OF THOUSAN CLIMATE AWARENESS AND RELATIONSHIPS WITH INFLUTICIPATED IN THE US SUBBILLIAM OF THE WORK OF THE STATE OF CALIFE THAT, NEXTGEN CLIMATE ADOWN THE STATE OF CALIFE OF PRESS COVERAGE ON THE NG OF 2017 OUTLINING IDEA ON THE STATE OF CALIFE OF DE PRESS COVERAGE ON THE NG OF 2017 OUTLINING IDEA ON THE STATES COMMUNICATIONS/HE ORGANIZATION FITTING ON'S MISSION TO THE GENEI	WORK FROM 2016 IN REGISTERING VOINIZATIONS THAT WERE CONDUCTING NILLENNIALS, LATINOS, AND UNMARRIED JCH HIGHER RATE THAN THE ELECTORA ANDS OF NEW VOTERS ENVIRONMENTAL OTHER PROGRESSIVE PUBLIC POLICY, JENTIAL LEADERS AND DEVELOPED A WATIONAL DELEGATION DURING THE COX LEADING UP TO COP23 HELPED RECRUNNEXTGEN CLIMATE ACTION RECOGNIZ COTON CREATED THE FAIR SHAKE COMINIA WITH THE GOAL OF FINDING SOLE ISSUE OF INCOME INEQUALITY AND IT AS TO CREATE A MORE EQUAL AND PROSERVICES, AND ENHANCING DEMOCRACY STATES TO DETERMINE THE FEASIBILITE NEXT FISCAL YEAR, WHERE NEXTGEN DIGITALTHE COMMUNICATIONS AND DISTANCE OF THE COMMUNICATIONS AND DISTANCE OF THE COMMUNICATIONS AND RALPUBLIC THE COMMUNICATIONS THE ATIMES, AND SAN FRANCISCO CHRONICATIONS AND SAN FRANCISCO CHRONIC	ION-PARTISAN VOTER I WOMEN VOTERS IN TE AS A WHOLE WORKING LEADERSHIPNEXTGEN BOTH NATION-WIDE AND ORKING KNOWLEDGE OF IP23 CONVENING IN BONN, IIT U S CITIES, COUNTIES, ZES THE DIRECT LINK MISSION, A GROUP OF JUTIONS TO INCOME IS DIRECT LINK TO SPEROUS OPPORTUNITIES BALLOT MEASURE Y OF POTENTIAL CLIMATE ACTION PLANS GITAL TEAMS ARE THE TEAM GENERATES AM HAS GENERATED							
4d	Other program service	es (Describe in Schedi	ıle O)										

or X as applicable

Section 501(c)(3) organizations.

Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates

Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right

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

Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments,

c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its

b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total

Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🕏

Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses

the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 🛸

If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 为

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII,

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"

Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year?

5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,

Did the organization receive or hold a conservation easement, including easements to preserve open space,

the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 💆 . . . Did the organization maintain collections of works of art, historical treasures, or other similar assets?

assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 🛸

b Was the organization included in consolidated, independent audited financial statements for the tax year?

b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, 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

Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

14a Did the organization maintain an office, employees, or agents outside of the United States? . . .

column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)

foreign organization? If "Yes," complete Schedule F, Parts II and IV

or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV . . .

for public office? If "Yes," complete Schedule C, Part I 📆

to provide advice on the distribution or investment of amounts in such funds or accounts?

a Did the organization report an amount for land, buildings, and equipment in Part X, line 10?

assessments, or similar amounts as defined in Revenue Procedure 98-19?

3 Yes

Page 3

Nο

Nο

Nο

Nο

Nο

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Form **990** (2017)

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Yes

Yes

Yes

Form 990 (2017)							
Par	t IV Checklist of Required Schedules (continued)						
			Yes	No			
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No			
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 domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes				
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		No			
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? <i>If "Yes," complete Schedule J</i>	23	Yes				
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If "No," go to line 25a	24a		No			
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24h					

24c

24d

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25b

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28b

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Yes

Yes

Form 990 (2017)

Yes

Nο

Nο

Νo

Nο

Νo

Nο

Nο

No

Nο

Nο

Nο

Νo

Nο

d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? .

that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?

Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons?

Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial

b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part

c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an

Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation

Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections

Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and

Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .

within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 . . .

b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity

Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related

Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note.

is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 🛸

contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member

Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes,"

b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and

25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.

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instructions for applicable filing thresholds, conditions, and exceptions)

orm	990 (2017)			Page !
Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 102			
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
L	this return	2b	Yes	
D	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		103	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
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 Accounts (FBAR)			140
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		No
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
		5 c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a	Yes	
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6 b	Yes	
	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?			
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9a	Did the sponsoring organization make any taxable distributions under section 4966?	9 a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9 b		
0	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
1	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
.3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
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			
С	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
.4a	bid the organization receive any payments for indoor tanning services during the tax year?	14a		

OHIII	330 (2017)			Page C
Par	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions	" respo	nse to li	nes
	Check if Schedule O contains a response or note to any line in this Part VI			✓
Se	ction A. Governing Body and Management			
1a	Enter the number of voting members of the governing body at the end of the tax year		Yes	No
	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			
	sımılar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 5			
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		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6		No
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	Yes	
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		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Revenue	e Code	e.)	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
Ь	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	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If "Yes," describe in Schedule O how this was done</i>	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
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		
<u>Se</u> 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 Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply			
	Own website Another's website Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial 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 111 SUTTER STREET FLOOR 10 SAN FRANCISCO, CA 94104 (415) 757-6600			

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, or highest compensated employees who received more than \$100,000
- of reportable compensation from the organization and any related organizations • List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the
- organization, more than \$10,000 of reportable compensation from the organization and any related organizations

ist persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest ompensated employees, and former such persons									
Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee									
(A)	(B)	(C)	(D)	(E)					

L Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee											
(A) Name and Title	(B) Average hours per week (list any hours for related	,	ne b	ox, ι n of or/t	t chounte unle: ficer rust	ss pers and a ee)	son	(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the organization and	
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	MISC)	MISC)	related organizations	
(1) TOM STEYER PRESIDENT/DIRECTOR	3 00	х		×				О	0	0	
(2) EDWARD D WHITE	3 00							0	0	0	
DIRECTOR	8 00										
(3) GREGORY SERRURIER DIRECTOR	0 30	х						0	0	0	
(4) FLEUR FAIRMAN	0 30	Х						0	0	0	
DIRECTOR	0 30										
(5) KATHRYN A HALL	0 30	×						o	0	0	
DIRECTOR	0 30										
(6) CHRIS FADEFF CFO/ VP, LEGAL	40 00 22 00			x				218,835	0	18,148	
(7) HEATHER HARGREAVES	25 00				х			267,148	0	16,686	
EXECUTIVE DIRECTOR	25 00										
(8) SKY GALLEGOS EXEC VP, POLITICAL STRATEGY	40 00					×		246,663	0	23,119	
(9) CHRISTOPHER LEHMAN SENIOR ADVISOR	40 00					×		319,947	0	32,163	
(10) JENNA NARAYANAN VP, DEVELOPMENT	40 00					х		245,045	0	20,247	
(11) JAMISON FOSER SENIOR ADVISOR	40 00					Х		237,622	0	14,857	
										Form 990 (2017)	

DENVER, CO 80202 SEILER LLP

220 MONTGOMERY STREET SUITE 300 SAN FRANCISCO, CA 94104

compensation from the organization ▶ 5

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

Page 8

Par	Section A. Officers, Direct	tors, mustees	s, key	Emp	ioye	es,	anu	<u>nıgı</u>	ilest Con	препза	teu Employ	rees (COI	itiriueu)		
	(A) Name and Title	(B) Average hours per week (list any hours	than o	one b	ox, u an off	t che unles fficer	neck mo ess pers r and a tee)	son	Repo compe fron	D) ortable ensation in the ation (W	Repor compen from re organizati	table isation elated	(F) Estimated amount of other compensation from the		
		for related organizations below dotted		1	Offi	X	, 	Former		9-MISC)	2/1099-		organizat relat organiz	on and ed	
		line)	Individual trustee or director	Institutional Trustee	-	employee	st com	₹							
			नस्टा	Trustee		Ď	Highest compensated emptovies								
				_				lacksquare							
				\vdash		\vdash	_	+			1				
		 	-	\vdash	<u> </u> -	\vdash	 	\vdash							
				igspace		lacksquare		lacksquare							
1b 5	Sub-Total		<u> </u>	<u>_</u>	<u>L</u>	<u></u>	<u> </u>								
c 1	Total from continuation sheets to P	•					•								
		<u> </u>					<u> </u>			535,260		0		125,220	
2	Total number of individuals (including of reportable compensation from the			e list	ed ai	bove	e) who	› rec	eived mor	re than \$	100,000			.	
3	Did the organization list any former			tee, k	ey e	:mpl	oyee,	or hı	ıghest con	npensate	d employee	on	Yes	No	
4	line 1a? If "Yes," complete Schedule. For any individual listed on line 1a, is			comr	· nens:	• atıor	· ·	othe	r compens	• • •	· · ·	3	3	No	
	organization and related organization											. 4	l Yes		
5	Did any person listed on line 1a recei services rendered to the organization									tion or in		5		No	
Se	ection B. Independent Contract	tors			_	_									
1	Complete this table for your five high from the organization Report compe												nsation		
	Name	(A) and business addre	ess							De	(B) scription of ser	vices	(C Compe		
BLUE'	WEST MEDIA LLC								- '	MEDIA BU	YS		-	,311,960	
	E 18TH STREET /ER, CO 80220														
	Y PULPIT INTERACTIVE LLC								1	MEDIA BU	YS AND CONSU	JLTING	1	,211,391	
WASH	CONNECTICUT AVE NW HINGTON, DC 20036														
	DGY INTERACTIVE									MEDIA BU	YS AND CONSU	JLTING		687,054	
MOUN	OX 4177 NTAIN VIEW, CA 94040														
	WHITE LLP									LEGAL SE	RVICES			344,047	
	16TH STREET 6TH FLOOR /FR. CO 80202														

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of

303,105

HUMAN RESOURCE SERVICES

	90 (2017)						Page 9
Part '				land on the Deat VIII			
	Check if Schedule O contains	a respoi	nse or note to any i	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
(6	1a Federated campaigns	1a	I		revenue		312-314
nts Ints	b Membership dues	1b	-				
Gra mo	c Fundraising events	1c					
ts	d Related organizations	1d					
ia Eia	e Government grants (contributions)	1e					
Contributions, Giffs, Grants and Other Similar Amounts	All other contributions, gifts, grants, and similar amounts not included above	1f	19,488,943				
를 를	g Noncash contributions included in lines 1a-1f \$						
Con	h Total.Add lines 1a-1f	. .	•	19,488,943			
			Business				
Ř	Σa						
Program Service Revenue	b —	_					
<u>د</u>	c —						
ž	d	_					
آ آ	e ————————————————————————————————————	_					
ogra	f All other program service revenue						
Ğ	gTotal. Add lines 2a-2f	. •	•				
	3 Investment income (including divid	ends, ır					
	similar amounts)		nd proceeds				
	5 Royalties	-					
	, (1) Rea		(II) Personal				
	6a Gross rents						
	b Less rental expenses						
	b coss remarexpenses						
	c Rental income or (loss)						
	d Net rental income or (loss)						
	(i) Securit		· · ▶				
	7a Gross amount	-	(,				
	from sales of assets other						
	than inventory						
	b Less cost or other basis and						
	sales expenses C Gain or (loss)	-					
	d Net gain or (loss)		>	1			
	8a Gross income from fundraising ev	_					
an	(not including \$ contributions reported on line 1c)	of					
Other Revenue	See Part IV, line 18						
Re	b Less direct expenses	ь					
e	c Net income or (loss) from fundrais	-	nts ▶	1			
₹	9a Gross income from gaming activit See Part IV, line 19	ies					
	·	a					
	b Less direct expenses	ь					
	c Net income or (loss) from gaming	activitie	es >				
	LOa Gross sales of inventory, less returns and allowances						
		a					
	b Less cost of goods sold	b					
	c Net income or (loss) from sales of	invento					
-	Miscellaneous Revenue		Business Code 900099	65,107	65,107		
	11aOTHER INCOME		900099	63,107	63,107		
	h						
	b						
	С						
	I all al						
	d All other revenue e Total. Add lines 11a-11d	L	S				
				65,107			
	12 Total revenue. See Instructions	• •	· · · •	19,554,050	65,107		0 0
							Form 990 (2017)

Form 990 (2017)				Page 10
Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all co	lumns All other orga	ınızatıons must comp	lete column (A)	
Check if Schedule O contains a response or note to any	line in this Part IX	<u></u>		<u> </u>
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraisingexpenses
Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	4,215,303	4,215,303		
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 15 and 16	46,400	46,400		_
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	485,983	421,225	43,774	20,984
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	4,744,349	4,112,157	427,338	204,854
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)				
9 Other employee benefits	623,468	507,510	81,992	33,966
10 Payroll taxes	394,302	345,200	34,669	14,433
11 Fees for services (non-employees)				
a Management				
b Legal	327,073	98,433	228,640	
c Accounting	146,266		146,266	
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 Schedule O)	80,888	52,628	28,260	
12 Advertising and promotion	5,133,949	5,133,949		
13 Office expenses	700,532	477,713	179,024	43,795
14 Information technology				
15 Royalties				
16 Occupancy	494,437	417,813	49,519	27,105
17 Travel	630,870	524,692	15,468	90,710
18 Payments of travel or entertainment expenses for any federal, state, or local public officials •				
19 Conferences, conventions, and meetings	368,912	117,669	28,588	222,655
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	1,150	993	104	53
23 Insurance	38,323	31,969	4,219	2,135
24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				<u> </u>
a CONTRACTORS	2,331,195	2,088,387	242,808	
b RESEARCH	935,558	935,558		
c RECRUITING	64,513	25	64,488	
d WORKERS COMP	27,950	328	27,617	5
e All other expenses	34,076	12,653	21,423	
25 Total functional expenses. Add lines 1 through 24e	21,825,497	19,540,605	1,624,197	660,695
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ▶ ☐ if following SOP 98-2 (ASC 958-720)				

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31

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33

34

Liabilities 22

Fund Balances

Assets or 30

Net

Page **11**

2.097.873

176,225

7,141

26,214

2,920,006

1,030,722 925,191

1,955,913

964.093

964,093

2.920.006

Form **990** (2017)

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

		Beginning of year		End of year
1	Cash-non-interest-bearing	3,723,321	1	2,
2	Savings and temporary cash investments		2	
,	Pladaes and grants receivable, not		2	

Pledges and grants receivable, net . 590 680 4 612 553 Accounts receivable, net Loans and other receivables from current and former officers, directors,

trustees, key employees, and highest compensated employees Complete Part Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete

Part II of Schedule L . Notes and loans receivable, net

Inventories for sale or use . Prepaid expenses and deferred charges

10a Land, buildings, and equipment cost or other 10a basis Complete Part VI of Schedule D

10b Less accumulated depreciation

11 Investments—publicly traded securities .

Investments—other securities See Part IV, line 11 .

Investments—program-related See Part IV, line 11

Intangible assets

Grants payable . .

Deferred revenue . . .

Complete Part X of Schedule D

Temporarily restricted net assets

Permanently restricted net assets

Total net assets or fund balances

Total liabilities and net assets/fund balances

Unrestricted net assets

Other assets See Part IV, line 11 .

Accounts payable and accrued expenses

Tax-exempt bond liabilities . . .

persons Complete Part II of Schedule L .

and other liabilities not included on lines 17-24)

Total liabilities. Add lines 17 through 25 .

Total assets.Add lines 1 through 15 (must equal line 34) .

Escrow or custodial account liability Complete Part IV of Schedule D

key employees, highest compensated employees, and disqualified

Secured mortgages and notes payable to unrelated third parties

Unsecured notes and loans payable to unrelated third parties

complete lines 27 through 29, and lines 33 and 34.

Organizations that do not follow SFAS 117 (ASC 958), check here

and complete lines 30 through 34.

Capital stock or trust principal, or current funds

Paid-in or capital surplus, or land, building or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds

Loans and other payables to current and former officers, directors, trustees,

Other liabilities (including federal income tax, payables to related third parties,

Organizations that follow SFAS 117 (ASC 958), check here ightleftarrows and

Assets

38,059

30,918

427,804

5

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33

34

1.652

26,214

4,769,671

1,534,131

1,534,131

3,235,540

3,235,540

4.769.671

(A)

Separate basis Consolidated basis ☐ Both consolidated and separate basis

b Were the organization's financial statements audited by an independent accountant? 2b Yes

If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis,

Yes

3b

Nο

Form 990 (2017)

consolidated basis, or both

✓ Separate basis Consolidated basis ☐ Both consolidated and separate basis

c If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight

of the audit, review, or compilation of its financial statements and selection of an independent accountant?

2c If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?

audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

3a b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required

Additional Data

Software ID:

Software Version:

EIN: 46-1957345

Name: NEXTGEN CLIMATE ACTION

Form 990 (2017)

Form 990, Part III, Line 4a: PROTECTING THE FUNDAMENTAL RIGHTS OF EVERY AMERICANFOLLOWING THE ELECTION OF DONALD TRUMP. NEXTGEN CLIMATE ACTION DOUBLED DOWN ON ITS WORK TO TAKE A STAND AGAINST THE NEW ADMINISTRATION. NEXTGEN CLIMATE ACTION PARTNERED WITH ORGANIZATIONS TO PROVIDE TRAINING AND RESOURCES FOR CONSTITUENTS TO LET THEIR VOICES BE HEARD BY ELECTED OFFICIALS NEXTGEN CLIMATE ACTION ALSO PROVIDED SPONSORSHIPS TO NONPROFITS ORGANIZING AND RALLYING TO STOP ATTACKS FROM THE ADMINISTRATION. FROM THE WOMEN'S MARCH TO THE IMMIGRATION MARCH

Form 990, Part III, Line 4b: IMMIGRATIONNEXTGEN CLIMATE ACTION PARTNERED WITH IMMIGRANT RIGHTS FOUNDATIONS, PROVIDING GRANTS TO TRAIN IMMIGRANTS AND DEFERRED ACTION FOR CHILDHOOD ARRIVALS ("DACA") RECIPIENTS TO RUN FOR LOCAL OFFICE NEXTGEN CLIMATE ACTION ALSO CONTRIBUTED GRANT FUNDING TO PROVIDE LEGAL SERVICES FOR IMMIGRANT COMMUNITIES NEXTGEN CLIMATE ACTION LED A CAMPAIGN TO CALL FOR A CLEAN "DREAM ACT" IN CONGRESS AND CONTINUE TO PROVIDE

DREAMERS WITH EDUCATIONAL AND JOB OPPORTUNITIES

Form 990, Part III, Line 4c: NATIONAL YOUTH ORGANIZING PROGRAMNEXTGEN CLIMATE ACTION HAD A PRESENCE ON HUNDREDS OF COLLEGE CAMPUSES THROUGHOUT 7 STATES, ORGANIZING MILLENNIALS TO ADVOCATE FOR CLIMATE CHANGE, IMMIGRANT RIGHTS, AND ECONOMIC PROSPERITY FOR ALL NEXTGEN CLIMATE ACTION ACTIVELY REGISTERED.

VOTERS AND TARGETED THE RISING AMERICAN ELECTORATE TO TURNOUT TO VOTE

SCHEDULE C

(Form 990 or 990-

Department of the Treasury

Internal Revenue Service

EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

▶Complete if the organization is described below. ▶Attach to Form 990 or Form 990-EZ. ▶Information about Schedule C (Form 990 or 990-EZ) and its instructions is at

www.irs.gov/form990.

OMB No 1545-0047

DLN: 93493318136618

Open to Public Inspection

If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then • Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C • Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B Section 527 organizations Complete Part I-A only If the organization answered "Yes" on Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then • Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)). Complete Part II-A Do not complete Part II-B Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)). Complete Part II-B. Do not complete Part II-A. If the organization answered "Yes" on Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then • Section 501(c)(4), (5), or (6) organizations Complete Part III Name of the organization **Employer identification number** NEXTGEN CLIMATE ACTION 46-1957345 Complete if the organization is exempt under section 501(c) or is a section 527 organization. Part I-A 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV (see instructions for definition of "political campaign activities") Political campaign activity expenditures (see instructions) 2 3 Volunteer hours for political campaign activities (see instructions) Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 1 2 Enter the amount of any excise tax incurred by organization managers under section 4955 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes ☐ No Was a correction made? 4a ☐ No ☐ Yes If "Yes," describe in Part IV Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function activities 1 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt 3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b Did the filing organization file Form 1120-POL for this year? ✓ No 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated

	ee (PAC) If additional space is needed, p			is a separate segregated
(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
1				
2				
3				
4				
5				
6				
For Paperwork Reduction Act Notice, see t	the instructions for Form 990 or 990-EZ.	Cat	No 50084S Schedule C (Form 990 or 990-EZ) 2017

h Subtract line 1g from line 1a If zero or less, enter -0i Subtract line 1f from line 1c If zero or less, enter -0j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?

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

Lobbying Expenditures During 4-Year Averaging Period

Calendar year (or fiscal year beginning in)

(a) 2014 (b) 2015 (c) 2016 (d) 2017 (e) Total

2a Lobbying ceiling amount (150% of line 2a, column(e))

c Total lobbying expenditures

d Grassroots ceiling amount (150% of line 2d, column (e))

Grassroots lobbying expenditures

Schedule C (Form 990 or 990-EZ) 2017

	Form 5768 (election under section 501(h)).	(a	<u>, </u>	(b)	
	n "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying	_			
activity		Yes	No	Amou	ınt
	uring the year, did the filing organization attempt to influence foreign, national, state or local legislation, cluding any attempt to influence public opinion on a legislative matter or referendum, through the use of				
a Vo	olunteers?				
b Pa	aid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
c M	edia advertisements?				
	ailings to members, legislators, or the public?				
e Pu	ublications, or published or broadcast statements?				
f G	rants to other organizations for lobbying purposes?				
g Di	rect contact with legislators, their staffs, government officials, or a legislative body?				
h Ra	allies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i 01	ther activities?				
j To	otal Add lines 1c through 1i				
	id the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
	"Yes," enter the amount of any tax incurred under section 4912				
c If	"Yes," enter the amount of any tax incurred by organization managers under section 4912				
d If	the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Part I	II-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(501(c)(6).	(5), o	r sectioi	1	
				Yes	No
1 W	ere substantially all (90% or more) dues received nondeductible by members?		1		1
2 Di	id the organization make only in-house lobbying expenditures of \$2,000 or less?		2		
3 Di	id the organization agree to carry over lobbying and political expenditures from the prior year?		3		
Part I	and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes."	III-A,)(6)
	ues, assessments and similar amounts from members	1			
2 Se	ection 162(e) nondeductible lobbying and political expenditures (do not include amounts of political xpenses for which the section 527(f) tax was paid).				
	urrent year	2a			
	arryover from last year	2b			
	otal	2 c			
	ggregate amount reported in section $6033(e)(1)(A)$ notices of nondeductible section $162(e)$ dues	3			
th	notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does be organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	_	_	
ı	•	5			
5 Ta	axable amount of lobbying and political expenditures (see instructions)				

Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lines 1 and 2 (see

Explanation

instructions), and Part II-B, line 1 Also, complete this part for any additional information

Return Reference

PART I-A, LINE 1

efile GRAPHIC print - DO NOT PROCESS As Filed Data -SCHEDULE D

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

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.

DLN: 93493318136618 OMB No 1545-0047

> Open to Public Inspection

(Form 990)

▶ Attach to Form 990.

Department of the Treasury Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990. Internal Revenue Service Name of the organization **Employer identification number** NEXTGEN CLIMATE ACTION 46-1957345 Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 2 Aggregate value of contributions to (during year) Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? 🗌 Yes 🗌 No Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year Total number of conservation easements Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year 🕨 Number of states where property subject to conservation easement is located ▶ 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(II)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items Revenue included on Form 990, Part VIII, line 1 Assets included in Form 990, Part X

Cat No 52283D

Schedule D (Form 990) 2017

Par	11111	Organizations Maintainii	ng Collections o	of Art, Histo	rical T	reası	ires, or	Other:	Similar As	sets (continued _.)
3		g the organization's acquisition, ac s (check all that apply)	ccession, and other	records, che	k any of	the fo	llowing th	nat are a	sıgnıfıcant u	se of it	s collection	า
а		Public exhibition		C		Loan	or excha	nge prog	rams			
b		Scholarly research		•	: 🗆	Othe	er					
c		Preservation for future generation	ons									
4	Provi Part	de a description of the organization	on's collections and	explain how	they furt	her th	e organiza	ation's ex	empt purpos	se in		
5		ng the year, did the organization s ts to be sold to raise funds rather							ılar	□ Ye	es 🗆	No
Pa	rt IV											
		Complete if the organizatio X, line 21.	n answered "Yes	" on Form 9	90, Part	: IV, I	ine 9, or	reporte	d an amou	nt on I	Form 990), Part
1a		e organization an agent, trustee, ded on Form 990, Part X?	custodian or other	intermediary	for contr	bution	s or othe	r assets i	not	☐ Y	es 🗆	No
b	If "Ye	es," explain the arrangement in P	art XIII and comple	ete the follow	ng table				Aı	mount		
С	Begir	nning balance						1c				
d	Addıt	cions during the year						1d				
е	Distr	ibutions during the year						1e				
f	Endır	ng balance						1f				
2a	Dıd t	he organization include an amour	t on Form 990, Pa	t X, line 21, f	or escrov	v or cu	ıstodıal ad	ccount lia	bility?	□ Y ₆	es 🗆	No
b	If "Ye	es," explain the arrangement in Pa	art XIII Check her	e if the explar	ation ha	s been	provided	In Part >	KIII		_]
Pa	ırt V	Endowment Funds. Comp	lete if the organ	ızatıon answ	ered "Y	es" o	n Form 9	990, Par	t IV, line 1	0.		
			(a)Currer	nt year (t	Prior yea	ar	(c)Two ye	ars back	(d)Three yea	rs back	(e)Four ye	ears back
1a	Beginn	ning of year balance	•									
b	Contril	butions										
C	Net in	vestment earnings, gains, and los	ses									
d	Grants	s or scholarships										
	and pr	expenditures for facilities rograms										
f	Admın	istrative expenses										
g	End of	year balance										
2	Provi	de the estimated percentage of the	ne current year end	l balance (line	1g, colu	mn (a)) held as	5				
а	Board	d designated or quasi-endowment	:▶									
b	Perm	anent endowment 🟲										
c	Temp	oorarily restricted endowment 🕨										
		percentages on lines 2a, 2b, and 2	•									
3а	organ	here endowment funds not in the nization by	possession of the	organization t	hat are h	ield ar	ıd admınıs	stered for	r the	_	Yes	No
	• •	nrelated organizations									a(i)	
b	. ,	elated organizations es" on 3a(ii), are the related orga	nizations listed as i	ogurad an Co	· · ·						a(ii) 3b	
4		ribe in Part XIII the intended uses				•				L	30	
	rt VI			THE CHART THE	10 141143							
		Complete if the organization		" on Form 9	90, Part	: IV, I	ne 11a.	See For	m 990, Pai	rt X, In	ne 10.	
	Descr	iption of property (a) Co	est or other basis nvestment)	(b) Cost or ot					epreciation		(d) Book va	lue
1a	Land											
	Buildin											
		nold improvements										
		ment	38,059						30,918			7,141
	Other		•						· ·	-		
		lines 1a through 1e (Column (d)	must equal Form 9	1 190, Part X, co	lumn (B.), line	10(c)).	. 1	>			7,141

Part VII	Saa Form GGII Darf Y lina 17				
	See Form 990, Part X, line 12. (a) Description of security or category (including name of security)		(b) Book value		Method of valuation end-of-year market value
	al derivatives				
	Tied equity interests				
A)					
(B)					
(C)					
(D)					
(E)					
F)					
(G)					
(H)					
	nn (b) must equal Form 990, Part X, col (B) line 12)	•			
Part VIII	Investments—Program Related. Complete if the organization answered 'Yes' on (a) Description of investment		art IV, line		990, Part X, line 13. Method of valuation
	(a) bescription of investment	(0) 50	ok value		end-of-year market value
(1)					
(2)					
(3)					
4)					
5)					
6)					
(7)					
(8)					
(9) 「otal. (Colum	on (b) must equal Form 990, Part X, col (B) line 13) Other Assets. Complete if the organization answere	ed 'Yes' on Forr	n 990, Part	IV, line 11d See	Form 990, Part X, line 15
9) Total. (Column Part IX			n 990, Part	IV, line 11d See	Form 990, Part X, line 15 (b) Book value
9) Fotal. (Column Part IX 1)	Other Assets. Complete if the organization answere		m 990, Part	IV, line 11d See	
Fotal. (Column Part IX 1)	Other Assets. Complete if the organization answere		m 990, Part	IV, line 11d See	
Part IX 1) 2)	Other Assets. Complete if the organization answere		m 990, Part	IV, line 11d See	
(9) Fotal. (Column Part IX 1) 2) 3)	Other Assets. Complete if the organization answere		m 990, Part	IV, line 11d See	
(9) Fotal. (Column Part IX 1) 2) 3) 4)	Other Assets. Complete if the organization answere		n 990, Part	IV, line 11d See	
9) Total. (Column Part IX 1) 2) 3) 4) 5)	Other Assets. Complete if the organization answere		m 990, Part	IV, line 11d See	
(9) Fotal. (Column Part IX 1) 2) 3) 4) 5) 6)	Other Assets. Complete if the organization answere		m 990, Part	IV, line 11d See	
9) Fotal. (Column Part IX 1) 2) 3) 4) 5) 6) 7)	Other Assets. Complete if the organization answere		m 990, Part	IV, line 11d See	
9) Part IX 1) 2) 3) 4) 5) 6) 7) 8)	Other Assets. Complete if the organization answere (a) Description		m 990, Part	IV, line 11d See	(b) Book value
9) Fotal. (Column Part IX 1) 2) 3) 4) 5) 6) 7) 8)	Other Assets. Complete if the organization answere (a) Description (a) Description (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. Complete if the organization	on .			(b) Book value
9) Total. (Column Part IX 1) 2) 3) 4) 5) 6) 7) 8) 9) Total. (Column Part X	Other Assets. Complete if the organization answere (a) Description (b) must equal Form 990, Part X, col (B) line 15	on .			(b) Book value
(9) Total. (Column Part IX 1) 2) 3) 4) 5) 6) 7) 8) 9) Total. (Column Part X	Other Assets. Complete if the organization answere (a) Description (a) Description (b) Must equal Form 990, Part X, col (B) line 15) Other Liabilities. Complete if the organization See Form 990, Part X, line 25.	on .	es' on Form		(b) Book value
9) Fotal. (Column Part IX 1) 2) 3) 4) 5) 6) 7) 8) 9) Fotal. (Column Part X 1) Federal (Other Assets. Complete if the organization answere (a) Description (a) Description (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. Complete if the organization See Form 990, Part X, line 25. (a) Description of liability	on .	es' on Form		(b) Book value
9) Total. (Column Part IX 1) 2) 3) 4) 5) 6) 7) 8) 9) Fotal. (Column Part X 1) Federal (1)	Other Assets. Complete if the organization answere (a) Description (a) Description (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. Complete if the organization See Form 990, Part X, line 25. (a) Description of liability	on .	es' on Form		(b) Book value
9) Fotal. (Column Part IX 1) 2) 3) 4) 5) 6) 7) 8) Fotal. (Column Part X 1) Federal (1) 2) 3)	Other Assets. Complete if the organization answere (a) Description (a) Description (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. Complete if the organization See Form 990, Part X, line 25. (a) Description of liability	on .	es' on Form		(b) Book value
9) Total. (Column Part IX 1) 2) 3) 4) 5) 6) 7) 8) 9) Total. (Column Part X 1) Federal (1) 2) 3)	Other Assets. Complete if the organization answere (a) Description (a) Description (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. Complete if the organization See Form 990, Part X, line 25. (a) Description of liability	on .	es' on Form		(b) Book value
9) Total. (Column Part IX 1) 2) 3) 4) 5) 6) 7) 8) 9) Total. (Column Part X 1) Federal (1) 2) 3) 4)	Other Assets. Complete if the organization answere (a) Description (a) Description (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. Complete if the organization See Form 990, Part X, line 25. (a) Description of liability	on .	es' on Form		(b) Book value
9) Total. (Column Part IX 1) 2) 3) 4) 5) 6) 7) 8) 9) Total. (Column Part X 1) Federal (2) 3) 4) 5)	Other Assets. Complete if the organization answere (a) Description (a) Description (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. Complete if the organization See Form 990, Part X, line 25. (a) Description of liability	on .	es' on Form		(b) Book value
Fotal. (Column Part IX 1) 1) 2) 3) 4) 5) 66) 7) 88) 9) Fotal. (Column Part X 1) Federal (1) Federal (2) 3) 4) 5) 6)	Other Assets. Complete if the organization answere (a) Description (a) Description (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. Complete if the organization See Form 990, Part X, line 25. (a) Description of liability	on .	es' on Form		(b) Book value
Fotal. (Column Part IX 1) 1) 2) 3) 4) 5) 6) 7) Part X 1. 1) Federal (1) 2) 3) 4) 5) 6) 7) 7) 7) 7) 7) 7) 7) 7) 7) 7) 7) 7) 7)	Other Assets. Complete if the organization answere (a) Description (a) Description (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. Complete if the organization See Form 990, Part X, line 25. (a) Description of liability	on .	es' on Form		(b) Book value
(9) Fotal. (Column Part IX (1) (2) (3) (4) (5) (6) (7) (8) Fotal. (Column Part X 1.	Other Assets. Complete if the organization answere (a) Description (a) Description (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. Complete if the organization See Form 990, Part X, line 25. (a) Description of liability	on .	es' on Form		(b) Book value

Add lines 4a and 4b .

Schedule D (Form 990) 2017

Part XI

3

4

5

1

2

3

4

b

5

Part XIII

Return Reference

а

Part XII

Page 4

h

Net unrealized gains (losses) on investments

Amounts included on line 1 but not on Form 990, Part IX, line 25

Amounts included on Form 990, Part IX, line 25, but not on line 1:

2h 2с 2d

2a

4a

4b

2a

2b

2c

19,554,050

21,825,497

Amounts included on Form 990, Part VIII, line 12, but not on line 1 Investment expenses not included on Form 990, Part VIII, line 7b.

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

3 4c 19,554,050

2e

1

Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

Explanation

Investment expenses not included on Form 990, Part VIII, line 7b . . .

2e 3 21,825,497 4c 5 21,825,497 Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part

Schedule D (Form 990) 2017

Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) **Supplemental Information** XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information

Schedule D (Form 990) 2017 Part XIII Supplemental Information (continued)								
Ret	turn Reference	Explanation						
			Schedule D (Form 990) 2017					

efile GRAPHIC print	t - DO NOT I	PROCESS	As Filed Data -	ta - DLN: 93493318136				
SCHEDULE F (Form 990)	State	ement of	Activities (Outside the Uni	ited S	tates	OMB No 1545-0047	
(, , , , , , , , , , , , , , , , , , ,	► Compl	lete if the organ		Yes" to Form 990, Part IV, I to Form 990.	ıne 14b, 1	.5, or 16.	2017	
Department of the Treasury Internal Revenue Service	▶ Informa	tion about Sche	edule F (Form 990) a	and its instructions is at wi	vw.irs.gov	v/form990.	Open to Public Inspection	
Name of the organization NEXTGEN CLIMATE ACTIO						Employer iden 46-1957345	tification number	
	Information Part IV, line		s Outside the U	Jnited States. Comple	te If the	organization a	nswered "Yes" to	
_	the grantees'	eligibility for t		substantiate the amount stance, and the selection	_		□ Yes 🗹 No	
2 For grantmakers outside the United		Part V the org	ganization's proce	dures for monitoring the	use of it	ts grants and ot	her assistance	
3 Activites per Region	n (The followir	ng Part I, line 3	table can be dupli	cated if additional space is	needed)		
(a) Region		(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	program sp	vity listed in (d) is an an arrived ascribe ecific type of ce(s) in region	(f) Total expenditures for and investments in region	
(1)				,				
(2)								
(3)								
(4)								
(5)								
3a Sub-total b Total from continual Part I	tion sheets to		0 0				C	
c Totals (add lines 3	a and 3b)		0 0				C	
For Paperwork Reduction	Act Notice see	a the Instructio	uns for Form 990	Cat	No 5008	.7W Schadu	le F (Form 990) 2017	

I (a) Name of	(D) IND code	(C) Region	(u) Ful pose of	(e) Amount of	(1) Mariller of	(g) Amount	(II) Description	(1) Method of
organization	section		grant	cash grant	cash	of non-cash	of non-cash	valuation
_	and EIN (ıf				disbursement	assistance	assistance	(book, FMV,
	applicable)							appraisal, other)
(1)		EUROPE (INCLUDING	SUSTAINABLE	46,400	CHECK			FMV

Page 2

Schedule F (Form 990) 2017

ICELAND & INVESTMENT FORUM GREENLAND) 2017 (2)

Schedule F (Form 990) 2017

(3)

(4)

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-

(10)

(11) (12) (13) (14) (15) (16)

(17) (18)

Schedule F (Form 990) 2017							Page 3
Part III Grants and Oth	ner Assistance to	Individuals	Outside the Unite	ed States. Complete if	the organization an	swered "Yes" to Form 9	90, Part IV, line 16.
Part III can be d	luplicated if addition	nal space is n	eeded.				
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							

(-)				
(6)				
(7)				
(8)				
(9)				

Sche	dule F (Form 990) 2017		Page 4
Par	t IV Foreign Forms		
1	Was the organization a U S transferor of property to a foreign corporation during the tax year? If "Yes,"the organization may be required to file Form 926, Return by a U S Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes	☑ No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A, do not file with Form 990)	□Yes	☑ No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations (see Instructions for Form 5471)	□Yes	☑ No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	☐Yes	☑ No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	Yes	☑ No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713, do not file with Form 990)	Yes	✓ No

Schedule F (chedule F (Form 990) 2017						
Part V	Provid amou metho	de the information de the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; ints of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting od); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide dditional information (see instructions).					
Return Reference		Explanation					
PART I, LINE 2		THE ORGANIZATION MONITORS THE USE OF GRANT FUNDS THROUGH ONGOING COMMUNICATION WITH EACH GRANTEE ORGANIZATION					

efile GRAPHIC print - D	O NOT PROCESS	As Filed Data -					DLN: 9349331	8136618
Schedule I (Form 990)			Other Assistan				OMB No 1545-	
(* 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5			and Individual ation answered "Yes,"		-		2017	<i>(</i>
Department of the Treasury Internal Revenue Service	► Infor		Open to Pub Inspection					
Name of the organization						Employe	er identification number	
NEXTGEN CLIMATE ACTION						46-1957	7345	
	rmation on Grants							
			the grants or assistance,		for the grants or assistant	ce, and	☑ Ye	s 🗆 No
2 Describe in Part IV the	organization's procedu	res for monitoring the u	se of grant funds in the U	nited States			<u> </u>	5 L 110
Part II Grants and Other		nestic Organizations a I can be duplicated if ad		ents. Complete if the o	rganızatıon answered "Yes	" on Form 990, Pa	rt IV, line 21, for any re	cipient
(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Descripti noncash assis		-
(1) See Additional Data								
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								
(8)								
(9)								
(10)								
(11)								
(12)								
		-	s listed in the line 1 table					26 13
For Paperwork Reduction Act N				Cat No 50055			Schedule I (Form 9	90) 2017

THE ORGANIZATION MONITORS THE USE OF GRANT FUNDS THROUGH ONGOING COMMUNICATION WITH EACH GRANTEE ORGANIZATION

Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

(7)

Part IV

PART I, LINE 2

Return Reference

Explanation

Schedule I (Form 990) 2017

Additional Data

1331 G STREET NW SUITE 200 WASHINGTON, DC 20005 ANTI-RECIDIVISM COALITION

448 S HILL STREET SUITE 908

LOS ANGELES, CA 90013

Software ID: Software Version: EIN: 46-1957345 Name: NEXTGEN CLIMATE ACTION

46-2140915

Form 990 Schedule T. Part TJ. Grants and Other Assistance to Domestic Organizations and Domestic Governments

501(C)(3)

Form 990,3 chedule 1, Part 11, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
AMERICAN IMMIGRATION COUNCIL	52-1549711	501(C)(3)	330,215		CASH VALUE		IMMIGRATION JUSTICE CAMPAIGN		

25,000

CASH VALUE

EVENT - CONCERT

IMAGINE JUSTICE

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance or government other) assistance 94-2176139 501(C)(3) 150.000 ICASH VALUE UNDERSERVED ASIAN AM ADV JUSTICE-ASIAN COMMUNITIES IN IMMIGRANT RIGHTS

LAW CAUCUS
55 COLUMBUS AVENUE
SAN FRANCISCO, CA 94111

ASIAN PACIFIC AMERICAN
13-4277572
501(C)(3)
92,400
CASH VALUE
COMMUNITIES IN
IMMIGRANT RIGHTS
PROTECTIONS
VOTER REGISTRATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

LEADERSHIP FOUNDATION 2275 HUNTINGTON DRIVE SAN MARINO, CA 91108

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance or government other) assistance BALLOT INITIATIVE STRATEGY 04-3411708 501(C)(4) 10 000 CASH VALUE IGENERAL SUPPORT

ICASH VALUE

GENERAL SUPPORT

225,000

CENTER INC			
1815 ADAMS MILL ROAD NW			
SUITE 300			
WASHINGTON, DC 20009			

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

CAIR FOUNDATION INC.

453 NEW JERSEY AVE SE WASHINGTON, DC 20003 77-0646756

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance or government other) assistance

CLIENTS IN CENTRAL

RURAL COMMUNITIES

VALLEY AND OTHER

CALIFORNIA CALLS	46-2301623	501(C)(3)	99,000	CASH VALUE	VOTER REGISTRATION -
EDUCATION FUND					AFRICAN AMERICAN
4801 EXPOSITION BOULEVARD					CIVIC ENGAGEMENT
LOS ANGELES, CA 90016					PROJECT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

ASSISTANCE FOUNDATION

2210 K STREET SUITE 201

SACRAMENTO, CA 95816

94-2800442 501(C)(3) 120.000 ICASH VALUE LEGAL SERVICES TO CALIFORNIA RURAL LEGAL

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 77-0566513 501(C)(3) 100.000 CALPIRG EDUCATION FUND ICASH VALUE VOTER REGISTRATION 483 9TH STREET SUITE 100 OAKLAND, CA 94607

27-0061100 501(C)(4) 544,000 CASH VALUE CENTER FOR COMMUNITY IGENERAL SUPPORT CHANGE ACTION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

1536 U STREET NORTH WEST WASHINGTON, DC 20009

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance CHIRLA 95-4421521 501(C)(3) 25.000 ICASH VALUE IGENERAL SUPPORT

PORTION OF THE

PROGRAM

2533 W THIRD STREET SUITE 101 LOS ANGELES, CA 90057

77-0053480 501(C)(4) 100.000 ICASH VALUE CIVIC EMPOWERMENT VOTER REGISTRATION -COALITION ONLY PAID PERSONNEL

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

3002 WHITTIER BOULEVARD

LOS ANGELES, CA 90023

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 80-0267674 501(C)(3) 92.500 COMMUNITY WATER CENTER ICASH VALUE LOBBYING AND 900 W OAK AVENUE ORGANIZING WORK VISALIA, CA 93291

CASH VALUE

GENERAL SUPPORT

14,500

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(4)

COURAGE CAMPAIGN

195

7119 W SUNSET BOULEVARD

LOS ANGELES, CA 90017

20-4841338

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 95-4708781 501(C)(4) 160.000 ICASH VALUE EVENT- AWARDS EOUALITY CALIFORNIA 202 WEST FIRST STREET

SUITE 3-0130 LOS ANGELES, CA 90012 94-3154078 501(C)(3) 25.000 ICASH VALUE GOOD SAMARITAN FAMILY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

SAN FRANCISCO, CA 94110

IGOOD SAMARITAN RES CENTER INC NIGHT AT PIXAR 1294 POTRERO AVENUE ANIMATION STUDIOS

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 45-2839868 501(C)(3) 114.750 HOUSING LONG BEACH ICASH VALUE VOTER REGISTRATION 525 E 7TH STREET SUITE 111 LONG BEACH, CA 90813 ICLEI-LOCAL GOV FOR 04-3116623 501(C)(3) 10,000 CASH VALUE IGENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

SUSTAINABILITYUSA 1536 WYNKOOP STREET 901 DENVER, CO 80202

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance LA VOICE 95-4781974 501(C)(3) 65.000 ICASH VALUE VOTER REGISTRATION

ICASH VALUE

VOTER REGISTRATION

A VOICE 95-4/81974 501(C)(3) 65,000 CASH VALUE VOTER REV. SUITE 336
LOS ANGELES, CA 90005 CASH VALUE VOTER REV. SUITE 336

83.225

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

MISSION FDGE SAN DIEGO

PO BOX 12319 SAN DIEGO, CA 92112 27-2938491

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 06-1553389 501(C)(4) 50.000 MOVEONORG CIVIC ACTION ICASH VALUE VIDEO PRODUCTION 1442 WALNUT STREET 358 BERKELEY, CA 94709 IGENERAL SUPPORT

27-1866733 501(C)(3) 137,000 CASH VALUE NATIVE AMERICAN VOTERS ALLIANCE EDUC PROJ PO BOX 35698

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

ALBUQUEROUE, NM 87176

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 20-8672843 501(C)(3) 25.000 ICASH VALUE EVENT NETROOTS NATION 4741 CENTRAL STREET 377 KANSAS CITY, MO 64112 OCA-GLA (ORGANIZATION OF 95-4365081 501(C)(4) 90.000 CASH VALUE VOTER ENGAGEMENT GRANT CHINESE-AMERICANS INC -GREATER LA)

1145 WILSHIRE BOULEVARD LOS ANGELES, CA 90017

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 501(C)(4) 150.000 ORANGE COUNTY VOTER 71-1035583 ICASH VALUE VOTER REGISTRATION INFORMATION PROJECT AND CIVIL 309 N RAMPART STREET SUITE ENGAGEMENT PROGRAM ORANGE, CA 92868 13-3065716 501(C)(3) 31,000 CASH VALUE GENERAL SUPPORT OF YOUNG ELECTED OFFICIALS NETWORK

FRANCISCO IN JULY

2017

PEOPLE FOR THE AMERICAN WAY FOUNDATION 1101 15TH STREET NW SUITE 600 CONVENING IN SAN

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

WASHINGTON, DC 20005

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 94-2206497 501(C)(3) 29.400 PICO NATIONAL NETWORK ICASH VALUE IGENERAL SUPPORT -2411 15TH STREET STE B ISTRATEGY TO WIN SACRAMENTO, CA 95818 SB10 POLICYLINK 94-3297479 501(C)(3) 300,000 CASH VALUE GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

1438 WEBSTER STREET SUITE

OAKLAND, CA 94612

303

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 47-3840696 501(C)(4) 125.000 ICASH VALUE IGENERAL SUPPORT RENEW OREGON ACTION FUND

PO BOX 5999 PORTLAND, OR 97228				
SACRAMENTO CENTRAL LABOR COUNCIL 2840 EL CENTRO ROAD SUITE 111	501(C)(5)	128,000	CASH VALUE	VOTER REGISTRATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

SACRAMENTO, CA 95833

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 80-0180809 501(C)(5) 7.500 SAN DIEGO AND IMPERIAL CASH VALUE **IEVENT - AWARDS**

ACTION 1/14/17

3737 CAMINO DEL RIOS S 403 SAN DIEGO, CA 92108					
SIREN	77-0487468	501(C)(3)	135,000	CASH VALUE	NATIONAL DAY OF

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

1415 KOLL CIRCLE SUITE 108

SAN JOSE, CA 95112

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 46-1323531 501(C)(3) 6.000 ICASH VALUE WOMEN'S MARCH SOCIAL GOOD FUND 12651 SAN PABLO AVENUE 1/21/17

5473 RICHMOND. CA 94805 27-3390797

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

SAN DIEGO, CA 92105

501(C)(3) 20.000 ICASH VALUE SOMALI BANTU ASSOC OF VOTER REGISTRATION AMERICA 4979 UNIVERSITY AVENUE

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 81-0606786 501(C)(4) 150.000 THE PARTNERSHIP PROJECT ICASH VALUE IGENERAL SUPPORT OF

ICASH VALUE

VOTER REGISTRATION

ACTION FUND
PO BOX 65826
WASHINGTON, DC 20035
ACTIVITIES IN RE
CLIMATE ACTION
CAMPAIGN FOR 2017

50,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

WASHINGTON, DC 20035

TIDES CENTER 94-3213100
1014 TORNEY AVENUE

SAN FRANCISCO, CA 94129

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

CASH VALUE

CENTER FOR GENDER &

IREFUGEE STUDIES

TOWN HALL PROJECT INC	81-5376030	501(C)(4)	40,000	CASH VALUE	GENERAL SUPPORT
PO BOX 73492					
WASHINGTON, DC 20056					

120,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

UC HASTINGS FOUNDATION

SAN FRANCISCO, CA 94102

200 MCALLISTER STREET

23-7135898

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 501(C)(3) 158.888 UFW FOUNDATION 95-2703575 ICASH VALUE GENERAL SUPPORT 3002 WHITTIER BOULEVARD

LOS ANGELES, CA 90023

efil	e GRAPHIC pr	rint - DO NOT PROCESS As File	d Dat	ta -	DLN: 934	19331	8136	618
Sch	nedule J	Comper	ารลเ	ion Information	40	1B No	1545-0	0047
(Fori	m 990)	Complete if the organization ▶ Complete if the organization	npens n ansv Attacl	Trustees, Key Employees, and Hig ated Employees wered "Yes" on Form 990, Part IV h to Form 990.	, line 23.		17	
•	tment of the Treasury al Revenue Service			J (Form 990) and its instructions agov/form990.	is at C		to Pul ectio	
Nar	ne of the organiza	ation —		-	Employer identificat			
NEX	TGEN CLIMATE ACT	ION			46-1957345			
Pa	rt I Questi	ons Regarding Compensation			10 1007010			
							Yes	No
1a		opiate box(es) if the organization provided ection A, line 1a Complete Part III to pro						
	_	s or charter travel		Housing allowance or residence for	•			
		companions	닏	Payments for business use of perso				
		nification and gross-up payments	H	Health or social club dues or initiation				
	☐ Discretion	nary spending account	ш	Personal services (e g , maid, chauf	feur, chef)			
b		xes in line 1a are checked, did the organiz all of the expenses described above? If "No			nent or reimbursement	1b		
2		ation require substantiation prior to reimb			. 1-3	2	Yes	
	directors, truste	ees, officers, including the CEO/Executive	Directo	or, regarding the items checked in line	e Ia/			
3		If any, of the following the filing organizat			ne			
		EO/Executive Director Check all that apped organization to establish compensation			n Part III			
		·		•				
	· ·	ation committee	✓	Written employment contract				
		ent compensation consultant of other organizations	▼	Compensation survey or study Approval by the board or compensa	tion committee			
		or other organizations		Approval by the board of compensa	tion committee			
4	During the year related organiza	, did any person listed on Form 990, Part ation	VII, Se	ection A, line 1a, with respect to the f	lling organization or a			
а	Receive a sever	rance payment or change-of-control payme	ent?			4a		No
b		r receive payment from, a supplemental r		lified retirement plan?		4b		No
c	•	r receive payment from, an equity-based	-	· ·		4c		No
	If "Yes" to any o	of lines 4a-c, list the persons and provide	the ap	plicable amounts for each item in Part	: III			
	Only E01(c)(2	;), 501(c)(4), and 501(c)(29) organiz	ations	must complete lines E-9				
5		ed on Form 990, Part VII, Section A, line 1		•				
		ontingent on the revenues of	,	,				
а	The organization	n?				5a		No
b	Any related orga					5b		No
	-	5a or 5b, describe in Part III						
6		ed on Form 990, Part VII, Section A, line i ontingent on the net earnings of	.a, dıd	the organization pay or accrue any				
а	The organization	n?				6 a		No
b	Any related orga					6b		No
	•	6a or 6b, describe in Part III						
7		ed on Form 990, Part VII, Section A, line 1 escribed in lines 5 and 6? If "Yes," describ			d	7		No
8		ints reported on Form 990, Part VII, paid on its contract exception described in Regu			escribe	8		No
9	If "Yes" on line : 53 4958-6(c)?	8, did the organization also follow the reb	uttable	e presumption procedure described in	Regulations section	9		113
Ear I	Danarwark Badı	uction Act Notice, see the Instructions	for E	orm 990 Cat No 5	0053T Schedule 1	/Eorn	990)	2017

(A) Name and Title	ns (B		dividual must equal the to of W-2 and/or 1099-MISO		(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in
(A) Name and The		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	column (B) reported as deferred on prior Form 990
L CHRIS FADEFF CFO/ VP, LEGAL	(i)	189,060	29,373	402	6,565	11,583	236,983	0
,	(ii)	0	0	0	0	0	0	0
PHEATHER HARGREAVES EXECUTIVE DIRECTOR	(i)	224,828	41,870	450	8,015	8,671	283,834	0
	(ii)	0	0	0	0	0	0	0
SKY GALLEGOS EXEC VP, POLITICAL	(i)	211,517	34,678	468	575	22,544	269,782	0
STRATEGY	(ii)	0	0	0	0	0	0	0
CHRISTOPHER LEHMAN SENIOR ADVISOR	(i)	286,993	32,472	482	9,598	22,565	352,110	0
ENION ADVISOR	(ii)	0	0	0	0	0	0	0
JENNA NARAYANAN /P, DEVELOPMENT	(i)	211,591	33,010	444	0	20,247	265,292	0
, , , , , , , , , , , , , , , , , , , ,	(ii)	0	0	0	0	0	0	0
JAMISON FOSER SENIOR ADVISOR	(i)	212,587	24,572	463	6,034	8,823	252,479	0
ZEMION AB VIOCIN	(ii)	0	0	0	0	0	0	0

Schedule J (Form 990) 2017 Part III Supplemental Information Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information Return Reference Explanation

Schedule 1 (Form 990) 2017

	C print - DO NO	T PROCES	S As Fi	led Data -					DL	.N: 93	4933	1813	36618
Schedule L (Form 990 or 990	Complet	e if the orga 27, 28a,	anization a 28b, or 28 ▶ Attac	1 S With It nswered "Yes c, or Form 99 h to Form 99	" on Form 9 0-EZ, Part V) or Form 99	90, Part IV, I , line 38a or • 0-EZ.	ines 2! 40b.				^{18 No}		
Department of the Trea Internal Revenue Servi	asurv	ormation abo	out Schedu	lle L (Form 99 <u>www.irs.gov</u>) and its inst	ructior	ıs is	at	C)pen		ıblic
Name of the org NEXTGEN CLIMATE										entifica	tion n	umb	er
Part I Exce	ss Benefit Tran	sactions (section 501(c)(3), section !	501(c)(4), and	1 501(c)(29) o			7345 : only1				
	lete if the organiza									ne 40b			
1 (a) Name of disqualit	fied person	(b)	Relationship be		lified person a	nd (tion of			rected?
					organization			tra	ansact	on	Y	es	No
	mount of tax, if any		ibove, reimb	oursed by the o	rganization .		· : '		. •	\$ <u> </u>			
Con repo (a) Name of	nplete if the organi orted an amount or (b) Relationship with organization	zation answe n Form 990, F (c) Purpose	red "Yes" or Part X, line 5 (d) Loan t	n Form 990-EZ, 5, 6, or 22	Part V, line 3 (e)Original principal amount	8a, or Form 9 (f)Balance due	90, Pari (g) defau	In	(Appro boa	b, or if the by rd or nittee?	(janiza i) Writ jreem	ten
Con repo (a) Name of	nplete if the organi orted an amount or (b) Relationship	zation answe n Form 990, F (c) Purpose	red "Yes" or Part X, line 5 (d) Loan t	n Form 990-EZ, 5, 6, or 22 to or from the	(e)Original principal	(f)Balance	(g) defau	In	(Appro boa	h) ved by rd or	(i) Writ jreem	ten
Con repo (a) Name of	nplete if the organi orted an amount or (b) Relationship	zation answe n Form 990, F (c) Purpose	red "Yes" or Part X, line 5 (d) Loan t orgai	n Form 990-EZ, 5, 6, or 22 to or from the nization?	(e)Original principal	(f)Balance	(g) defau	In ult?	(Appro boa comn	h) ved by rd or nittee?	(a <u>c</u>	i) Writ jreem	ten ent?
Con repo (a) Name of	nplete if the organi orted an amount or (b) Relationship	zation answe n Form 990, F (c) Purpose	red "Yes" or Part X, line 5 (d) Loan t orgai	n Form 990-EZ, 5, 6, or 22 to or from the nization?	(e)Original principal	(f)Balance	(g) defau	In ult?	(Appro boa comn	h) ved by rd or nittee?	(a <u>c</u>	i) Writ jreem	ten ent?
Con repo (a) Name of	nplete if the organi orted an amount or (b) Relationship	zation answe n Form 990, F (c) Purpose	red "Yes" or Part X, line 5 (d) Loan t orgai	n Form 990-EZ, 5, 6, or 22 to or from the nization?	(e)Original principal	(f)Balance	(g) defau	In ult?	(Appro boa comn	h) ved by rd or nittee?	(a <u>c</u>	i) Writ jreem	ten ent?
Con repo (a) Name of	nplete if the organi orted an amount or (b) Relationship	zation answe n Form 990, F (c) Purpose	red "Yes" or Part X, line 5 (d) Loan t orgai	n Form 990-EZ, 5, 6, or 22 to or from the nization?	(e)Original principal	(f)Balance	(g) defau	In ult?	(Appro boa comn	h) ved by rd or nittee?	(a <u>c</u>	i) Writ jreem	ten ent?
Con repo (a) Name of	nplete if the organi orted an amount or (b) Relationship	zation answe n Form 990, F (c) Purpose	red "Yes" or Part X, line 5 (d) Loan t orgai	n Form 990-EZ, 5, 6, or 22 to or from the nization?	(e)Original principal	(f)Balance	(g) defau	In ult?	(Appro boa comn	h) ved by rd or nittee?	(a <u>c</u>	i) Writ greem	ten ent?
Con represent the control of the con	nplete if the organi orted an amount of (b) Relationship with organization	zation answe n Form 990, f (c) Purpose of loan	red "Yes" or Part X, line 5 (d) Loan t orgal	From 990-EZ, 5, 6, or 22 co or from the nization?	(e)Original principal amount	(f)Balance	(g) defau	In ult?	(Appro boa comn	h) ved by rd or nittee?	(a <u>c</u>	i) Writ greem	ten ent?
(a) Name of interested person Total Part III Gra	nplete if the organi orted an amount of (b) Relationship with organization	zation answe n Form 990, F (c) Purpose of loan	red "Yes" or Part X, line 5 (d) Loan t orgal To	From 990-EZ, 5, 6, or 22 co or from the nization? From	(e)Original principal amount	(f)Balance due	(g) defau	In ult?	(Appro boa comn	h) ved by rd or nittee?	(a <u>c</u>	i) Writ greem	ten ent?
Con report (a) Name of interested person Total Part III Gra Com	nplete if the organiorted an amount of (b) Relationship with organization with organization with organization of the organizat	zation answe n Form 990, f (c) Purpose of loan	red "Yes" or Part X, line 5 (d) Loan to organ To To ing Interesswered "Yes" obetween in and the	From 990-EZ, 5, 6, or 22 co or from the nization? From	(e)Original principal amount **State of the content of the conten	(f)Balance due	Yes	In ult?	(Approba	h) ved by rd or nittee?	Yes	i)Writ	nten ent?
Con report (a) Name of Interested person Total Part III Gra Com	nplete if the organiorted an amount of (b) Relationship with organization with organization with organization of the organizat	zation answe n Form 990, F (c) Purpose of loan	red "Yes" or Part X, line 5 (d) Loan to organ To To ing Interesswered "Yes" obetween in and the	From 990-EZ, 5, 6, or 22 co or from the nization? From From From Pested Persons on Form 9	(e)Original principal amount **State of the content of the conten	(f)Balance due	Yes	In ult?	(Approba	h) ved by rd or nittee? No	Yes	i)Writ	nten ent?
Con report (a) Name of Interested person Total Part III Gra Com	nplete if the organiorted an amount of (b) Relationship with organization with organization with organization of the organizat	zation answe n Form 990, F (c) Purpose of loan	red "Yes" or Part X, line 5 (d) Loan to organ To To ing Interesswered "Yes" obetween in and the	From 990-EZ, 5, 6, or 22 co or from the nization? From From From Pested Persons on Form 9	(e)Original principal amount **State of the content of the conten	(f)Balance due	Yes	In ult?	(Approba	h) ved by rd or nittee? No	Yes	i)Writ	nten ent?
Con report (a) Name of Interested person Total Part III Gra Com	nplete if the organiorted an amount of (b) Relationship with organization with organization with organization of the organizat	zation answe n Form 990, F (c) Purpose of loan	red "Yes" or Part X, line 5 (d) Loan to organ To To ing Interesswered "Yes" obetween in and the	From 990-EZ, 5, 6, or 22 co or from the nization? From From From Pested Persons on Form 9	(e)Original principal amount **State of the content of the conten	(f)Balance due	Yes	In ult?	(Approba	h) ved by rd or nittee? No	Yes	i)Writ	nten ent?
Con report (a) Name of Interested person Total Part III Gra Com	nplete if the organiorted an amount of (b) Relationship with organization with organization with organization of the organizat	zation answe n Form 990, F (c) Purpose of loan	red "Yes" or Part X, line 5 (d) Loan to organ To To ing Interesswered "Yes" obetween in and the	From 990-EZ, 5, 6, or 22 co or from the nization? From From From Pested Persons on Form 9	(e)Original principal amount **State of the content of the conten	(f)Balance due	Yes	In ult?	(Approba	h) ved by rd or nittee? No	Yes	i)Writ	nten ent?

(a) Name of Interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?		
				Yes	No	
(1) FAHR LLC	SINGLE MEMBER LLC OWNED BY A DIRECTOR	<u>'</u>	REIMBURSEMENT FROM FAHR LLC FOR OVERHEAD & STAFF TIME PER COST SHARING AGMT		No	
(2) FAHR LLC	SINGLE MEMBER LLC OWNED BY A DIRECTOR	l '	REIMBURSEMENT TO FAHR LLC FOR RENT		No	
(3) MOYE WHITE LLP	BOARD MEMBER IS A	370,910	LEGAL SERVICES		No	

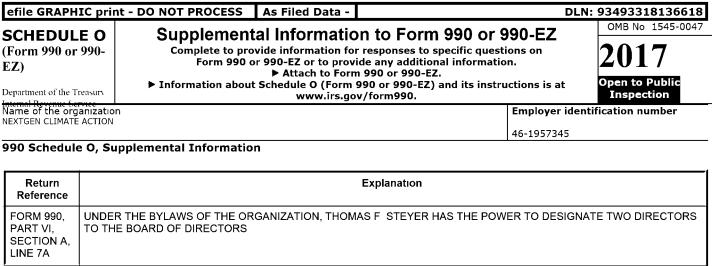
Return Reference

Schedule L (Form 990 or 990-EZ) 2017

Explanation

Schedule I. (Form 990 or 990-FZ) 2017.

Supplemental Information Part V Provide additional information for responses to questions on Schedule L (see instructions)



Return Explanation
Reference

LINE 11B

FORM 990, THE FORM 990 IS PROVIDED TO ALL MEMBERS OF THE BOARD OF DIRECTORS FOR REVIEW BEFORE FILING PART VI, SECTION B.

Return Explanation
Reference

FORM 990, PART VI, OTENTIAL CONFLICTS OF INTEREST ON AN ANNUAL BASIS
SECTION B, LINE 12C

Return Explanation
Reference

FORM 990, THE PROCESS FOR DETERMINING COMPENSATION OF THE ORGANIZATION'S OFFICERS OR KEY EMPLOYEES I NCLUDED INFORMAL EVALUATIONS OF THE MARKET AND VARIOUS COMPENSATION STUDIES LINE 15

Return Explanation
Reference

LINE 19

FORM 990, THE ORGANIZATION'S FINANCIAL STATEMENTS ARE MADE AVAILABLE TO THE PUBLIC UPON REQUEST PART VI, SECTION C.

990 Schedule O, Supplemental Information Return Explanation

Reference

TANGIBLE
PROPERTY
REGULATIONS
ELECTION
STATEMENT
TAXPAYER HEREBY MAKES THE DE MINIMIS SAFE HARBOR ELECTION UNDER TREASURY REGULATION 1 263(
A)-1(F) FOR ALL ELIGIBLE AMOUNTS PAID OR INCURRED DURING THE TAXABLE YEAR TAXPAYER HEREBY
ELECTS TO CAPITALIZE REPAIR AND MAINTENANCE COSTS UNDER TREASURY REGULATION 1 263(A)-3(N)
THE COSTS WERE INCURRED DURING THE TAXABLE YEAR IN THE ELECTING TAXPAYER'S TRADE OR BUSI
NESS AND THE ELECTING TAXPAYER TREATS SUCH COSTS AS CAPITAL EXPENDITURES ON ITS BOOKS AND
RECORDS

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493318136618 OMB No 1545-0047 **SCHEDULE R Related Organizations and Unrelated Partnerships** (Form 990) ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. ► Attach to Form 990. ▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990. Open to Public Department of the Treasury Inspection Internal Revenue Service Name of the organization **Employer identification number** NEXTGEN CLIMATE ACTION 46-1957345 Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33. Part I (a)
Name, address, and EIN (if applicable) of disregarded entity (b) (f) Direct controlling (e) Primary activity Legal domicile (state Total income End-of-year assets or foreign country) entity

Part II Identification of Related Tax-Exempt Organization related tax-exempt organizations during the tax year.	ons Complete if the organi	zation answered "Y	es" on Form 990,	Part IV, line 34 bec	ause it had one or	more	
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	Section	ntrolled
(1)NEXTGEN CLIMATE AMERICA INC 111 SUTTER STREET FLOOR 10 SAN FRANCISCO, CA 94104 46-2525580	EDUCATE THE PUBLIC ON ENVIRONMENTALLY SOUND CLIMATE POLICY	CA	501(C)(3)	LINE 7			No
(2)NEXTGEN CLIMATE ACTION COMMITTEE 111 SUTTER STREET FLOOR 10 SAN FRANCISCO, CA 94104 46-3201383	ELECTION ACTIVITY	CA	527				No
(3)NEXTGEN CA COMMITTEE 111 SUTTER STREET FLOOR 10 SAN FRANCISCO, CA 94104 81-2678871	ELECTION ACTIVITY	CA	527				No
For Paperwork Reduction Act Notice, see the Instructions for Form	990.	Cat No 50135Y	<u> </u>		Schedule R (Form	990) 20	<u></u>

(a) Name, address, and EIN of related organization		(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income		Disprop alloca	tions?	(1) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j Gener mana partr	ral or Figing ((k) Percent owners
								Yes	No		Yes	No	
												\perp	
												\top	
												+	
												\perp	
Identification of Related Organizates because it had one or more related o						ation answ	vered "Yes	" on Fo	orm 99	90, Part IV,	line .	34	
(a) Name, address, and EIN of related organization	(b) Primary activity	L	(c) egal micile or foreign	Direct	(d) controlling Type entity (C co	(e) e of entity rp, S corp, r trust)	(f) Share of total Income		(g) of end-o year assets	of- Percei owne	ntage	[(13	(ı) tion 5) cont entity
												l v	es
		со	untry)									<u>_</u>	
		Со	untry)										
		со	untry)									+	
		со	untry)									<u>+</u>	
		со	untry)										
		со	untry)									 - - -	
		со	untry)									 - - -	

Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36	6.		
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule		Y	Yes N
1 During the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or(iv) rent from a controlled entity		1a	N-
b Gift, grant, or capital contribution to related organization(s)		1b	N-
c Gift, grant, or capital contribution from related organization(s)		1c	N-
d Loans or loan guarantees to or for related organization(s)		1d	N-
e Loans or loan guarantees by related organization(s)		1e	N
f Dividends from related organization(s)		1f	N.
g Sale of assets to related organization(s)		1g	N-
h Purchase of assets from related organization(s)		1h	N-
i Exchange of assets with related organization(s)		1i	N-
		 	

Page 3

No

No

No

No

No

No

11

1m

1n Yes

1o | Yes

1q | Yes

1r

1s

Schedule R (Form 990) 2017

(d)

Method of determining amount involved

а	Loans or loan guarantees to or for related organization(s)	-4	140
е	Loans or loan guarantees by related organization(s)	1e	No
f	Dividends from related organization(s)	1f	No
g	Sale of assets to related organization(s)	1 g	No
h	Purchase of assets from related organization(s)	1h	No
i	Exchange of assets with related organization(s)	1i	No
j	Lease of facilities, equipment, or other assets to related organization(s)	1j	No

(b)

Transaction

type (a-s)

(c)

Amount involved

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

Performance of services or membership or fundraising solicitations for related organization(s) . . .

 ${f m}$ Performance of services or membership or fundraising solicitations by related organization(s) . . .

n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) . . .

(a)

Name of related organization

Reimbursement paid by related organization(s) for expenses . . .

r Other transfer of cash or property to related organization(s).

Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

(a) Name, address, and EIN of entity	domicile (state or (related, foreign unrelated, country) excluded from tax under sections 512-		(g) Share of end-of-year assets	(h) Disproprtiona allocations?	Disproprtionate allocations? Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)			or g	(k) Percentage ownership				
			514)	Yes	No			Yes	No		Yes	No	
													_
	•		•			•				Schedul	e R (Forn	າ 99	0) 2017

Schedule R (Form 990) 2017 Part VII Supplemental Information Provide additional information for responses to questions on Schedule R (see instructions) Schedule R (Form 990) 2017