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Form	J	J	U

** PUBLIC DISCLOSURE COPY **

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

Department of the Treas

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

OME No. 1545-0047 / Open to Public Inspection

	arnal Revenue S	Go to www.irs.gov/Form99	0 for instructions and the latest information.	Inspe
<u>^</u>	For the 20	21 calendar year, or tax year beginning	and ending	
B	Check If	C Name of organization	D Employer identifica	ation number

	plicable						
	Address	SIERRA CLUB FOUNDATION					
	change	Doing business as		94-60698	90		
	return	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite				
	Tenary 2101 WEBSTER STREET 1250		415-995-				
-	ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross recepts \$	140,384,808.		
	Amended	OAKLAND, CA 94612		H(a) is this a group n	etum		
	Applica- tion pending	F Name and address of principal officer: DAN CHU		for subordinates			
		SAME AS C ABOVE		H(b) Are all subordinates a	naluded? Yes No		
11	ax-exen	npt status: X 501(c)(3) 501(c) () ◄ (Insert no.) 4947(a)(1) o	r 🗌 527	If "No," attach a	list. See instructions		
		WWW.SIERRACLUBFOUNDATION.ORG		H(c) Group exemption			
	rt i s	rganization: X Corporation Trust Association Other ►	L Year	of formation: 1960	A State of legal domicile: CA		
		Summary					
8	1 B	riefly describe the organization's mission or most significant activities: BDUCA	TE AN	D EMPOWER PI	EOPLE TO		
S	2 0	ROTECT AND IMPROVE THE NATURAL AND HUMAN	ENVIR	ONMENT.			
Governance	3 N	heck this box if the organization discontinued its operations or disposed in the organization discontinued its operations of disposed in the organization din the organization disposed in the organization disposed in	ed of more		sets.		
9		umber of voting members of the governing body (Part VI, line 1a)			<u>15</u> 15		
	5 T	umber of independent voting members of the governing body (Part VI, line 1b)			18		
tie.	6 T	otal number of individuals employed in calendar year 2021 (Part V, line 2a)			26		
ctivities	7 a T	otal number of volunteers (estimate if necessary) otal unrelated business revenue from Part VIII, column (C), line 12		6 7a	155.		
<	b N	et unrelated business taxable income from Form 990-T, Part I, line 11					
				175			
			T		0.		
				Prior Year	Current Year		
enne	8 C	ontributions and grants (Part VIII, line 1h)					
evenue	8 C 9 P 10 In	ontributions and grants (Part VIII, line 1h) rogram service revenue (Part VIII, line 2g) ivestment income (Part VIII, column (A), lines 3, 4, and 7d)		Prior Year 92,385,175.	Current Year 100,459,492.		
Revenue	8 C 9 P 10 In 11 O	ontributions and grants (Part VIII, line 1h) rogram service revenue (Part VIII, line 2g) ivestment income (Part VIII, column (A), lines 3, 4, and 7d) ther revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		Prior Year 92,385,175. 0.	Current Year 100,459,492. 0.		
Revenue	8 C 9 P 10 In 11 O 12 T	Contributions and grants (Part VIII, line 1h) rogram service revenue (Part VIII, line 2g) ivestment income (Part VIII, column (A), lines 3, 4, and 7d) ither revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) otal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		Prior Year 92,385,175. 0. 1,782,844.	Current Year 100,459,492. 0. 6,916,780.		
Revenue	8 C 9 P 10 In 11 O 12 T 13 G	ontributions and grants (Part VIII, line 1h) rogram service revenue (Part VIII, line 2g) ivestment income (Part VIII, column (A), lines 3, 4, and 7d) ither revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) otal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) irants and similar amounts paid (Part IX, column (A), lines 1-3)		Prior Year 92,385,175. 0. 1,782,844. 1,433,184.	Current Year 100,459,492. 0. 6,916,780. 1,270,422.		
Revenue	8 C 9 P 10 In 11 O 12 T 13 G 14 B	ontributions and grants (Part VIII, line 1h) rogram service revenue (Part VIII, line 2g) ivestment income (Part VIII, column (A), lines 3, 4, and 7d) ither revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) <u>otal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)</u> irants and similar amounts paid (Part IX, column (A), lines 1-3) enefits paid to or for members (Part D, column (A), line 4)		Prior Year 92,385,175. 0. 1,782,844. 1,433,184. 95,601,203. 80,223,680. 0.	Current Year 100,459,492. 0. 6,916,780. 1,270,422. 108,646,694. 84,223,340. 0.		
Revenue	8 C 9 P 10 In 11 O 12 T 13 G 14 B 15 S	ontributions and grants (Part VIII, line 1h) rogram service revenue (Part VIII, line 2g) ivestment income (Part VIII, column (A), lines 3, 4, and 7d) ither revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) <u>otal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)</u> irants and similar amounts paid (Part IX, column (A), lines 1-3) enefits paid to or for members (Part IX, column (A), line 4) alaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		Prior Year 92,385,175. 0. 1,782,844. 1,433,184. 95,601,203. 80,223,680. 0. 1,585,664.	Current Year 100,459,492. 0. 6,916,780. 1,270,422. 108,646,694. 84,223,340. 0. 1,521,499.		
enses Revenue	8 C 9 P 10 In 11 O 12 T 13 G 14 B 15 S 16a P	Contributions and grants (Part VIII, line 1h) rogram service revenue (Part VIII, line 2g) investment income (Part VIII, column (A), lines 3, 4, and 7d) inther revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) otal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) inants and similar amounts paid (Part IX, column (A), lines 1-3) enefits paid to or for members (Part IX, column (A), line 4) alaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) rofessional fundraising fees (Part IX, column (A), line 11e)		Prior Year 92,385,175. 0. 1,782,844. 1,433,184. 95,601,203. 80,223,680. 0.	Current Year 100,459,492. 0. 6,916,780. 1,270,422. 108,646,694. 84,223,340. 0.		
Expenses Revenue	8 C 9 P 10 In 11 O 12 T 13 G 14 B 15 S 16a P b T	Contributions and grants (Part VIII, line 1h) rogram service revenue (Part VIII, line 2g) westment income (Part VIII, column (A), lines 3, 4, and 7d) ther revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) <u>otal revenue · add lines 8 through 11 (must equal Part VIII, column (A), line 12)</u> irants and similar amounts paid (Part IX, column (A), lines 1·3) enefits paid to or for members (Part IX, column (A), line 4) alaries, other compensation, employee benefits (Part IX, column (A), lines 5·10) rofessional fundraising fees (Part IX, column (A), line 11e) otal fundraising expenses (Part IX, column (D), line 25) <u>12,621,24</u>	15.	Prior Year 92,385,175. 0. 1,782,844. 1,433,184. 95,601,203. 80,223,680. 0. 1,585,664. 0.	Current Year 100,459,492. 0. 6,916,780. 1,270,422. 108,646,694. 84,223,340. 0. 1,521,499. 0.		
Expenses	8 C 9 P 10 In 11 O 12 T 13 G 14 B 15 S 16a P b T 17 O	Contributions and grants (Part VIII, line 1h) rogram service revenue (Part VIII, line 2g) investment income (Part VIII, column (A), lines 3, 4, and 7d) other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) otal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) irrants and similar amounts paid (Part IX, column (A), lines 1-3) enefits paid to or for members (Part IX, column (A), line 4) alaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) rofessional fundraising fees (Part IX, column (A), line 11e) otal fundraising expenses (Part IX, column (D), line 25) 12,621,24 ther expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	15.	Prior Year 92,385,175. 0. 1,782,844. 1,433,184. 95,601,203. 80,223,680. 0. 1,585,664. 0. 12,489,260.	Current Year 100,459,492. 0. 6,916,780. 1,270,422. 108,646,694. 84,223,340. 0. 1,521,499. 0. 13,314,363.		
Expenses	8 C 9 P 10 In 11 O 12 T 13 G 14 B 15 S 16a P b T 17 O 18 T	contributions and grants (Part VIII, line 1h) rogram service revenue (Part VIII, column (A), lines 2g) ivestment income (Part VIII, column (A), lines 3, 4, and 7d) ther revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) otal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) irants and similar amounts paid (Part IX, column (A), lines 1-3) enefits paid to or for members (Part DX, column (A), line 4) alaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) rofessional fundraising fees (Part IX, column (D), line 25) 12,621,24 ther expenses (Part IX, column (A), lines 11a-11d, 11f-24e) otal expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 	15.	Prior Year 92,385,175. 0. 1,782,844. 1,433,184. 95,601,203. 80,223,680. 0. 1,585,664. 0. 12,489,260. 94,298,604.	Current Year 100,459,492. 0. 6,916,780. 1,270,422. 108,646,694. 84,223,340. 0. 1,521,499. 0. 13,314,363. 99,059,202.		
Expenses Revenue	8 C 9 P 10 In 11 0 12 T 13 G 14 B 15 S 16a P b T 17 0 18 T 19 R	Contributions and grants (Part VIII, line 1h) rogram service revenue (Part VIII, line 2g) investment income (Part VIII, column (A), lines 3, 4, and 7d) other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) otal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) irrants and similar amounts paid (Part IX, column (A), lines 1-3) enefits paid to or for members (Part IX, column (A), line 4) alaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) rofessional fundraising fees (Part IX, column (A), line 11e) otal fundraising expenses (Part IX, column (D), line 25) 12,621,24 ther expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	15.	Prior Year 92,385,175. 0. 1,782,844. 1,433,184. 95,601,203. 80,223,680. 0. 1,585,664. 0. 12,489,260. 94,298,604. 1,302,599.	Current Year 100,459,492. 0. 6,916,780. 1,270,422. 108,646,694. 84,223,340. 0. 1,521,499. 0. 13,314,363. 99,059,202. 9,587,492.		
ats or Expenses Revenue	8 C 9 P 10 In 11 0 12 T 13 G 14 B 15 S 16a P b T 17 0 18 T 19 R	Contributions and grants (Part VIII, line 1h) rogram service revenue (Part VIII, line 2g) investment income (Part VIII, column (A), lines 3, 4, and 7d) other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) otal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) irants and similar amounts paid (Part IX, column (A), lines 1-3) enefits paid to or for members (Part IX, column (A), line 4) alaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) rofessional fundraising fees (Part IX, column (A), line 11e) otal fundraising expenses (Part IX, column (D), line 25) 12,621,24 ther expenses (Part IX, column (A), lines 11a-11d, 11f-24e) otal expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) evenue less expenses. Subtract line 18 from line 12	15. Be	Prior Year 92, 385, 175. 0. 1, 782, 844. 1, 433, 184. 95, 601, 203. 80, 223, 680. 0. 1, 585, 664. 0. 12, 489, 260. 94, 298, 604. 1, 302, 599. ginning of Current Year	Current Year 100,459,492. 0. 6,916,780. 1,270,422. 108,646,694. 84,223,340. 0. 1,521,499. 0. 13,314,363. 99,059,202. 9,587,492. End of Year		
Assets or Expenses Revenue	8 C 9 P 10 In 11 0 12 T 13 G 14 B 15 S 16a P b T 17 0 18 T 19 R	Contributions and grants (Part VIII, line 1h) rogram service revenue (Part VIII, line 2g) investment income (Part VIII, column (A), lines 3, 4, and 7d) otal revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) otal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) irrants and similar amounts paid (Part IX, column (A), lines 1-3) enefits paid to or for members (Part IX, column (A), line 4) alaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) rofessional fundraising fees (Part IX, column (D), line 25) 12,621,24 ther expenses (Part IX, column (A), lines 11a-11d, 11f-24e) otal expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) evenue less expenses. Subtract line 18 from line 12 otal assets (Part X, line 16)	15. Be	Prior Year 92,385,175. 0. 1,782,844. 1,433,184. 95,601,203. 80,223,680. 0. 1,585,664. 0. 12,489,260. 94,298,604. 1,302,599. anning of Current Year 44,757,583.	Current Year 100,459,492. 0. 6,916,780. 1,270,422. 108,646,694. 84,223,340. 0. 1,521,499. 0. 13,314,363. 99,059,202. 9,587,492. End of Year 273,113,077.		
Net Assets or Expenses Revenue	8 C 9 P 10 In 11 0 12 T 13 G 14 B 15 S 16a P b T 17 0 18 T 19 R	contributions and grants (Part VIII, line 1h) rogram service revenue (Part VIII, column (A), lines 3, 4, and 7d) itvestment income (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) otal revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) otal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) irants and similar amounts paid (Part IX, column (A), lines 1-3) enefits paid to or for members (Part IX, column (A), line 4) alaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) rofessional fundraising fees (Part IX, column (D), line 25) ▶ 12,621,24 ther expenses (Part IX, column (A), lines 11a-11d, 11f-24e) otal expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) evenue less expenses. Subtract line 18 from line 12 otal assets (Part X, line 16) otal liabilities (Part X, line 26)	15. Be	Prior Year 92,385,175. 0. 1,782,844. 1,433,184. 95,601,203. 80,223,680. 0. 1,585,664. 0. 12,489,260. 94,298,604. 1,302,599. ginning of Current Year 44,757,583. 30,191,067.	Current Year 100,459,492. 0. 6,916,780. 1,270,422. 108,646,694. 84,223,340. 0. 1,521,499. 0. 13,314,363. 99,059,202. 9,587,492. End of Year 273,113,077. 39,198,961.		
Met Assets or Expenses Revenue	8 C 9 P 10 In 11 0 12 T 13 G 14 B 15 S 16a P b T 17 0 18 T 19 R 20 T 12 T 22 N	Contributions and grants (Part VIII, line 1h) rogram service revenue (Part VIII, line 2g) investment income (Part VIII, column (A), lines 3, 4, and 7d) otal revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) otal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) irrants and similar amounts paid (Part IX, column (A), lines 1-3) enefits paid to or for members (Part IX, column (A), line 4) alaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) rofessional fundraising fees (Part IX, column (D), line 25) 12,621,24 ther expenses (Part IX, column (A), lines 11a-11d, 11f-24e) otal expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) evenue less expenses. Subtract line 18 from line 12 otal assets (Part X, line 16)	15. Be	Prior Year 92,385,175. 0. 1,782,844. 1,433,184. 95,601,203. 80,223,680. 0. 1,585,664. 0. 12,489,260. 94,298,604. 1,302,599. anning of Current Year 44,757,583.	Current Year 100,459,492. 0. 6,916,780. 1,270,422. 108,646,694. 84,223,340. 0. 1,521,499. 0. 13,314,363. 99,059,202. 9,587,492. End of Year 273,113,077. 39,198,961.		
Pa	8 C 9 P 10 In 11 0 12 T 13 G 14 B 15 S 16a P b T 17 0 18 T 17 0 18 T 19 R 20 T 22 N rt II	Contributions and grants (Part VIII, line 1h) rogram service revenue (Part VIII, line 2g) investment income (Part VIII, column (A), lines 3, 4, and 7d) other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) otal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) dirants and similar amounts paid (Part IX, column (A), lines 1-3) enefits paid to or for members (Part IX, column (A), line 4) alaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) rofessional fundraising fees (Part IX, column (D), line 11e) otal fundraising expenses (Part IX, column (D), line 25) <u>12,621,24</u> ther expenses (Part IX, column (A), lines 11a-11d, 11f-24e) otal expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) evenue less expenses. Subtract line 18 from line 12 otal liabilities (Part X, line 16) otal liabilities (Part X, line 26) et assets or fund balances. Subtract line 21 from line 20	15. Be 2	Prior Year 92, 385, 175. 0. 1,782,844. 1,433,184. 95,601,203. 80,223,680. 0. 1,585,664. 0. 12,489,260. 94,298,604. 1,302,599. ginning of Current Year 44,757,583. 30,191,067. 14,566,516.	Current Year 100,459,492. 0. 6,916,780. 1,270,422. 108,646,694. 84,223,340. 0. 1,521,499. 0. 13,314,363. 99,059,202. 9,587,492. End of Year 273,113,077. 39,198,961. 233,914,116.		

Sign Here	Signature of officer <u>KEVIN MCGAHAN, CFO</u> Type or print name and title	Date)/26/2022	
Paid	Print/Type preparer's name MAGA B. KISRIEV	Preparer's signature	Date Check 10/25/2022 self-er	PTIN npkryed P01008919
Preparer	Firm's name HOOD & STRONG LL		Firm's EIN	94-1254756
Use Only	Firm's address 60 SO. MARKET ST	, STE 200		
	SAN JOSE, CA 951	13	Phone no.	408.998.8400
May the I	RS discuss this return with the preparer shown abo	ve? See instructions		

LHA For Paperwork Reduction Act Notice, see the separate instructions. 132001 12-09-21

(Rev. January 2022)

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

Department of the Treasury Internal Revenue Service

File a separate application for each return.
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► Go to www.irs.gov/Form8868 for the latest information.

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

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Type or					Taxpayer identification number (TIN)			
print	SIERRA CLUB FOUNDATION				94-600	69890		
File by the due date fo filing your		see instruct	ions.					
return. See instructions. OAKLAND, CA 94612								
Enter the	e Return Code for the return that this application is for (fil	le a separa	te application for each return)			01		
Applicat	tion	Return	Application			Return		
ls For		Code	Is For			Code		
Form 99	0 or Form 990-EZ	01	Form 1041-A			08		
Form 47	20 (individual)	03	Form 4720 (other than individual)			09		
Form 99	0-PF	04	Form 5227			10		
Form 99	0-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11		
Form 99	0-T (trust other than above)	06	Form 8870			12		
Form 99	0-T (corporation) KEVIN MCGAHAN	07						
 If the If this box ▶ 1 Irr the 2 If the 	the tax year entered in line 1 is for less than 12 months, c	Group Exe and atta NOVEI janization's , an check rease	mption Number (GEN) I ach a list with the names and TINs of MBER 15, 2022 , to file return for: ad ending on: Initial return	f this is fo all memb	r the whole g ers the exten npt organizati	roup, check this		
	this application is for Forms 990-PF, 990-T, 4720, or 6069 y nonrefundable credits. See instructions.	9, enter the	tentative tax, less	3a	\$	0.		
	this application is for Forms 990-PF, 990-T, 4720, or 6068			3b	\$	0.		
	timated tax payments made. Include any prior year over			30	φ	0.		
	alance due. Subtract line 3b from line 3a. Include your pa	•		3c	¢	0.		
	ing EFTPS (Electronic Federal Tax Payment System). Se If you are going to make an electronic funds withdrawa				↓ ₽			
instruction			סיט אימו מווז רטוווו ססטס, גער רטוווו סי		a i-oini oo79-	i ci payment		
LHA I	For Privacy Act and Paperwork Reduction Act Notice,	, see instru	ictions.		Form 8	868 (Rev. 1-2022)		

123841 01-12-22

Par	t III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	X
1	Briefly describe the organization's mission:	
	SEE SCHEDULE O.	
2	Did the organization undertake any significant program services during the year which were not listed on the	
-	prior Form 990 or 990-EZ?	Yes X No
	If "Yes," describe these new services on Schedule O.	
。		Yes X No
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	
	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services, as	• •
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to othe	ers, the total expenses, and
	revenue, if any, for each program service reported.	
4a	(Code:) (Expenses \$ 30,385,562. including grants of \$ 30,385,562.) (Reve	
	BEYOND COAL - THE LONG-TERM GOAL OF THIS PROGRAM IS TO R	
	SOCIAL, ECONOMIC AND ENVIRONMENTAL DAMAGE CAUSED BY GLOE	
	CHANGE BY WORKING TO ENSURE OUR ELECTRICITY IS CARBON-FR	
	THAN 2030 AND TRANSITIONING TO 100 PERCENT CLEAN RENEWAE	
	LATER THAN 2050. THE PROGRAM'S SPECIFIC GOALS - WORKING	
	WITH ALLIED ORGANIZATIONS - ARE TO RETIRE EXISTING COAL	-
	CONSTRUCTION OF NEW COAL-FIRED POWER PLANTS, BLOCK EXPAN	ISION OF THE
	U.S. GAS FLEET, STOP INFRASTRUCTURE PROJECTS DESIGNED TO) FACILITATE AND
	INCREASE OVERSEAS EXPORTS OF COAL AND GAS, AND PROMOTE C	LEAN ENERGY
	ALTERNATIVES SUCH AS WIND AND SOLAR WHILE ADVANCING EQUI	TY AND JUSTICE,
	AND ENSURING A JUST ECONOMIC TRANSITION FOR WORKERS AND	IMPACTED
	COMMUNITIES.	
4b	(Code:) (Expenses \$ 9,452,593. including grants of \$ 9,452,593.) (Reve	nue \$ 0 .
10	CHAPTER AND GROUP EDUCATION PROJECT (CGEP) - THIS PROJEC	
	STATE AND LOCAL CHAPTERS AND GROUPS OF THE SIERRA CLUB I	
	EDUCATE THE PUBLIC ABOUT THE THREATS TO THE ENVIRONMENT	
	SOLUTIONS AVAILABLE TO THEM. THE OVERARCHING GOALS OF TH	
	PROTECT THE NATURAL AND HUMAN ENVIRONMENT FOR THE BENEFI	
	GENERAL PUBLIC, TO ENFORCE LOCAL AND FEDERAL LAWS IN THE	
	INTEREST, AND TO TRAIN AND PREPARE ACTIVISTS FOR PUBLIC	
	· · · · · ·	
	BEHALF OF ENVIRONMENTAL PROTECTION. IT IS A PROJECT THRC	
	SIERRA CLUB FOUNDATION WORKS TO ACHIEVE ITS MISSION TO E	
	EMPOWER PEOPLE TO PROTECT AND IMPROVE THE NATURAL AND HU	JMAN
	ENVIRONMENT.	
4c	(Code:) (Expenses \$ 7,419,753. including grants of \$ 7,419,753. (Reve	
	OUR WILD AMERICA - THE GOAL OF THIS PROGRAM IS TO PROTEC	
	AND RESTORE PUBLIC AND PRIVATE LANDS TO RETAIN NATURAL S	SYSTEMS AND
	BENEFIT PRESENT AND FUTURE GENERATIONS, ESPECIALLY IN A	
	CLIMATE-CHANGING WORLD. THE CAMPAIGN CONTINUES THE SIERR	RA CLUB'S LEGACY
	OF PROTECTING PUBLIC LANDS AND WILD PLACES; GETTING PEOF	LE ACROSS
	ECONOMIC LINES, CULTURES, AND COMMUNITIES - INCLUDING MI	LITARY AND
	YOUTH - OUT IN NATURE; GIVING GRASSROOTS VOLUNTEERS THE	KNOWLEDGE AND
	RESOURCES NEEDED TO PROTECT THE ENVIRONMENT NATIONALLY A	ND IN THEIR OWN
	COMMUNITIES; AND EXPANDING AND DIVERSIFYING THE ENVIRONM	
	THE OUR WILD AMERICA CAMPAIGN IS ADVANCING THREE STRATEG	
	(1) OPPOSING DIRTY FUELS EXTRACTION, PARTICULARLY ON PUE	
	PROTECTING LANDS, WATER, AND WILDLIFE, AND (3) GETTING F	•
4 4	Other program services (Describe on Schedule O.) (Expenses \$ 37,341,667. including grants of \$ 36,965,432.) (Revenue \$	0.)
4d	(Expenses $37,341,007$ including grants of $30,905,432$) (Revenue \$	
		0.)
	Total program service expenses ► 84,599,575.	
	Total program service expenses ► 84,599,575.	Form 990 (202
4e		Form 990 (202

Form	000	(2021
Form	990	(2021

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		_X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4	X	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		_X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6	X	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		_X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	X	
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		_X_
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	X	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			37
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000		.	
4-	or more? If "Yes," complete Schedule F, Parts I and IV	14b	<u>X</u>	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
40	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	X	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			v
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		<u> </u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			v
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		<u> </u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			v
40	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If</i> "Yes,"			v
~~	complete Schedule G, Part III	19		X X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		
	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 demostic approximation of the second secon		x	
1005-	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I. Parts I and II	21		(2021)
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			Yes	Na
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		res	No
22	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		x
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
с	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			v
00	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
		26		x
27	Controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>	_20		
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		x
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		X
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			37
~	contributions? If "Yes," complete Schedule M	30		X X
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	20		x
33	Schedule N, Part II	32		
33	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
01	Part V, line 1	34	х	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Х	
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
Par	Note: All Form 990 filers are required to complete Schedule O t V Statements Regarding Other IRS Filings and Tax Compliance	38	Х	
rai				
	Check if Schedule O contains a response or note to any line in this Part V		V	
4	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 10		Yes	No
	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable1aLUEnter the number of Forms W-2G included on line 1a. Enter -0- if not applicable1b0			
b	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
U	(gambling) winnings to prize winners?	1c	х	
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	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)					
					Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,					
	filed for the calendar year ending with or within the year covered by this return	2a	18			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return	าร?	2	<u> </u>	Х	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instruction	S				
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?		3	a	Х	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule	о	31	0	Х	
	At any time during the calendar year, did the organization have an interest in, or a signature or other a					
	financial account in a foreign country (such as a bank account, securities account, or other financial a	ccount)?	4a	a		X
b	If "Yes," enter the name of the foreign country					
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A	ccounts (FBAR).				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transact	tion?	51	D		X
с	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			C		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did th					
	any contributions that were not tax deductible as charitable contributions?	-	6	а		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributi					
	were not tax deductible?		6	b		
7	Organizations that may receive deductible contributions under section 170(c).					
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and ser	vices provided to the pa	ayor? 7:	a		X
b			· _			
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it wa		····· –			
-	to file Form 8282?	•	70	c	x	
Ь	If "Yes," indicate the number of Forms 8282 filed during the year	7d	5	-		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit or	· · · · · ·		-		x
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra					X
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo					
-	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization				х	
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained			÷		
0			8			
9	Sponsoring organizations maintaining donor advised funds.		····· 🗗	<u> </u>		
a						
a	but the sponsoring organization make any taxable distributions under section 4900?		0.			
h	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?					
b						
0	Section 501(c)(7) organizations. Enter:					
0 a	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12	10a				
0 a b	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities					
0 a b 1	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Section 501(c)(12) organizations. Enter:	10a 10b				
0 a b 1 a	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Section 501(c)(12) organizations. Enter: Gross income from members or shareholders	10a				
0 a b 1 a	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Section 501(c)(12) organizations. Enter: Gross income from members or shareholders Gross income from other sources. (Do not net amounts due or paid to other sources against	10a 10b 11a				
0 b 1 a b	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Section 501(c)(12) organizations. Enter: Gross income from members or shareholders Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	10a 10b 11a 11b	91	b		
0 b 1 b 2a	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Section 501(c)(12) organizations. Enter: Gross income from members or shareholders 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	10a 10b 11a 11a 11b 1041?		b		
0 b 1 2 2 b	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Section 501(c)(12) organizations. Enter: Gross income from members or shareholders 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 If "Yes," enter the amount of tax-exempt interest received or accrued during the year	10a 10b 11a 11b	91	b		
10 a b 11 a b 12a b 13	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Section 501(c)(12) organizations. Enter: Gross income from members or shareholders 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 If "Yes," enter the amount of tax-exempt interest received or accrued during the year Section 501(c)(29) qualified nonprofit health insurance issuers.	10a 10b 11a 11b 1041? 12b				
10 a b 11 a b 12a b 13	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Section 501(c)(12) organizations. Enter: Gross income from members or shareholders 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 If "Yes," enter the amount of tax-exempt interest received or accrued during the year Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state?	10a 10b 11a 11b 1041? 12b				
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0 b 1 b 2a b 3 a	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Section 501(c)(12) organizations. Enter: Gross income from members or shareholders 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 If "Yes," enter the amount of tax-exempt interest received or accrued during the year Section 501(c)(29) qualified nonprofit health insurance issuers. 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. Enter the amount of reserves the organization is required to maintain by the states in which the	10a 10b 11a 11b 1041? 12b				
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0 a b 1 a b 2a b 3 a b c 4a	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Section 501(c)(12) organizations. Enter: Gross income from members or shareholders 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 If "Yes," enter the amount of tax-exempt interest received or accrued during the year Section 501(c)(29) qualified nonprofit health insurance issuers. 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. 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 Enter the amount of reserves on hand Did the organization receive any payments for indoor tanning services during the tax year?	10a 10b 11a 11a 11b 1041? 12b 13b 13c				x
0 a b 1 a b 2a b 3 a b c 4a	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Section 501(c)(12) organizations. Enter: Gross income from members or shareholders 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 If "Yes," enter the amount of tax-exempt interest received or accrued during the year Section 501(c)(29) qualified nonprofit health insurance issuers. 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. 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 Enter the amount of reserves on hand Did the organization receive any payments for indoor tanning services during the tax year? If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedul</i>	10a 10b 11a 11b 1041? 12b 13b 13c e O				X
0 a b 1 a b 2 a b 3 a b c 4 a b	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Section 501(c)(12) organizations. Enter: Gross income from members or shareholders 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 If "Yes," enter the amount of tax-exempt interest received or accrued during the year Section 501(c)(29) qualified nonprofit health insurance issuers. 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. 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 Enter the amount of reserves on hand Did the organization receive any payments for indoor tanning services during the tax year? If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedul</i> Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remune	10a 10b 11a 11b 1041? 12b 13b 13c e O ation or	99 12 12 13 13 14 14 14	b 2a 3a 4a 4b		
0 a b 1 a b 2 a b 3 a b c 4 a b	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Section 501(c)(12) organizations. Enter: Gross income from members or shareholders 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 If "Yes," enter the amount of tax-exempt interest received or accrued during the year Section 501(c)(29) qualified nonprofit health insurance issuers. 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. 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 Enter the amount of reserves on hand Did the organization receive any payments for indoor tanning services during the tax year? If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedul Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuner excess parachute payment(s) during the year?	10a 10b 11a 11b 1041? 12b 13b 13c e O ation or	99 12 12 13 13 14 14 14	b 2a 3a 4a 4b		x
10 a b 11 a b 12a b 13 a b c 14a b	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Section 501(c)(12) organizations. Enter: Gross income from members or shareholders 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 If "Yes," enter the amount of tax-exempt interest received or accrued during the year Section 501(c)(29) qualified nonprofit health insurance issuers. 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. 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 Enter the amount of reserves on hand Did the organization receive any payments for indoor tanning services during the tax year? If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedul</i> Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remune excess parachute payment(s) during the year? If "Yes," see the instructions and file Form 4720, Schedule N.	10a 10b 11a 11b 1041? 12b 13b 13c e O ation or	99 12 12 13 13 14 14 14	b 2a 3a 4a 4b		x
10 a b 11 b 12a b 13 a b c 14a	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Section 501(c)(12) organizations. Enter: Gross income from members or shareholders 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 If "Yes," enter the amount of tax-exempt interest received or accrued during the year Section 501(c)(29) qualified nonprofit health insurance issuers. 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. 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 Enter the amount of reserves on hand Did the organization receive any payments for indoor tanning services during the tax year? If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedul</i> Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remune excess parachute payment(s) during the year? If "Yes," see the instructions and file Form 4720, Schedule N. Is the organization an educational institution subject to the section 4968 excise tax on net investment	10a 10b 11a 11b 1041? 12b 13b 13c e O ation or	99 12 12 13 13 14 14 14	b 2a 3a 4a 4b		
10 a b 11 a b 12a b 13 a b c 14a b 15	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Section 501(c)(12) organizations. Enter: Gross income from members or shareholders 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 If "Yes," enter the amount of tax-exempt interest received or accrued during the year Section 501(c)(29) qualified nonprofit health insurance issuers. 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. 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 Enter the amount of reserves on hand Did the organization receive any payments for indoor tanning services during the tax year? If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedul</i> Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remune excess parachute payment(s) during the year? If "Yes," see the instructions and file Form 4720, Schedule N.	10a 10b 11a 11b 1041? 12b 13b 13c e O ation or	99 12 12 13 13 14 14 14 14 14	b 2a 3a 4a 4b		x
10 a b 11 a b 22 a b 12 a b c 14 a b 15	 Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Section 501(c)(12) organizations. Enter: Gross income from members or shareholders 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 If "Yes," enter the amount of tax-exempt interest received or accrued during the year Section 501(c)(29) qualified nonprofit health insurance issuers. 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. 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 Enter the amount of reserves on hand Did the organization receive any payments for indoor tanning services during the tax year? If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedul</i> Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remune excess parachute payment(s) during the year? If "Yes," see the instructions and file Form 4720, Schedule N. Is the organization an educational institution subject to the section 4968 excise tax on net investment If "Yes," complete Form 4720, Schedule O. Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in 	10a 10b 10b 11a 11b 1041? 12b 13b 13c e O ation or income? any	99 91 12 13 14 14 14 11 11 11	b 2a 3a 4a 4b		x
0 a b 1 a b 2 a b c 4 a b 5 6	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Section 501(c)(12) organizations. Enter: Gross income from members or shareholders 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 If "Yes," enter the amount of tax-exempt interest received or accrued during the year Section 501(c)(29) qualified nonprofit health insurance issuers. 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. 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 Enter the amount of reserves on hand Did the organization receive any payments for indoor tanning services during the tax year? If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedul</i> Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remune excess parachute payment(s) during the year? If "Yes," see the instructions and file Form 4720, Schedule N. Is the organization an educational institution subject to the section 4968 excise tax on net investment If "Yes," complete Form 4720, Schedule O.	10a 10b 10b 11a 11b 1041? 12b 13b 13c e O ation or income? any	99 91 12 13 14 14 14 11 11 11	b 2a 3a 4a 4b 5 6		

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Form 990	(2021)
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Check if Schedule O contains a response or note to any line in this Part VI

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

,			15		Yes	N
1 a	Enter the number of voting members of the governing body at the end of the tax year	<u>1a</u>	10			
	If there are material differences in voting rights among members of the governing body, or if the governing					
	body delegated broad authority to an executive committee or similar committee, explain on Schedule 0.		1 -			
	Enter the number of voting members included on line 1a, above, who are independent	-	15			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship					
	officer, director, trustee, or key employee?			2		X
3	Did the organization delegate control over management duties customarily performed by or under the					
	of officers, directors, trustees, or key employees to a management company or other person?			3		X
4	Did the organization make any significant changes to its governing documents since the prior Form			4		X
5	Did the organization become aware during the year of a significant diversion of the organization's as	sets?		5		X
6	Did the organization have members or stockholders?			6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or a more members of the governing body?	• •		7a		x
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, s					
	persons other than the governing body?			7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the ye					
	The governing body?		•	8a	х	
	Each committee with authority to act on behalf of the governing body?			8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be rea					
-	organization's mailing address? If "Yes," provide the names and addresses on Schedule O			9		x
ec	tion B. Policies (This Section B requests information about policies not required by the Internal R			-		
		0101140 004	0.)		Yes	No
0a	Did the organization have local chapters, branches, or affiliates?			10a		X
	If "Yes," did the organization have written policies and procedures governing the activities of such c					
~	and branches to ensure their operations are consistent with the organization's exempt purposes?			10b		
19	Has the organization provided a complete copy of this Form 990 to all members of its governing body			11a	Х	
	Describe on Schedule O the process, if any, used by the organization to review this Form 990.		ig the lottin.	114		
	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a	x	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give ris			12a	X	
				120	- 23	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If	,		10-	х	
~	on Schedule O how this was done			12c	X	
	Did the organization have a written whistleblower policy?			13	X	
4 -	Did the organization have a written document retention and destruction policy?			14		
5	Did the process for determining compensation of the following persons include a review and approv		endent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?				37	
	The organization's CEO, Executive Director, or top management official			15a		
b	Other officers or key employees of the organization			15b	X	
_	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.					
6a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	ment with a				
_	taxable entity during the year?			16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate	-	ipation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the orga					
	exempt status with respect to such arrangements?			16b		
ec	tion C. Disclosure		~~	77.0		
17	List the states with which a copy of this Form 990 is required to be filed AL, AK, AR, CA, C					
8	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, a	and 990-T (s	ection 501(c)(3)s	only)	availa	ble
	for public inspection. Indicate how you made these available. Check all that apply. X Own website X Another's website X Upon request Other (explain the control of the con	in on Sched	ule (O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, c			finand	cial	
	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 bo	oks and rec	ords 🕨			
-	KEVIN MCGAHAN - (415) 995-1780					
	2101 WEBSTER STREET, 1250, OAKLAND, CA 94612					
					1 990	

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Form 990 (2021)	SIERRA CLUB FOUNDATION	94-6069890	Page 7									
Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated												
Employees, and Independent Contractors												
Check if Sc	hedule O contains a response or note to any line in this Part VII		X									
Section A. Officers, D	Directors, Trustees, Key Employees, and Highest Compensated Employees											
1a Complete this table	for all parsons required to be listed. Papart companyation for the calendar year	onding with or within the organization's t	tax yoar									

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 the 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, Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

 List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

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

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

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

(A)	(B)	(C)					(D)	(E)	(F)	
Name and title	Average	(do		Pos	ition		ne	Reportable	Reportable	Estimated
	hours per	box	(do not check more than one box, unless person is both an		compensation	compensation	amount of			
	week		officer and a director/trustee)		from	from related	other			
	(list any	Individual trustee or director						the	organizations (W-2/1099-MISC/	compensation
	hours for related	e or d	tee			sated		organization (W-2/1099-MISC/	(W-2/1099-MISC/ 1099-NEC)	from the organization
	organizations	ruste	ll trus		/ee	mpen		1099-NEC)	1033-1120)	and related
	below	dual t	Institutional trustee	L.	Key employee	est col	er			organizations
	line)	Indivi	In stit	Officer	Key e	Highest compensated employee	Former			0
(1) DAN CHU	40.00									
EXECUTIVE DIRECTOR				Х				296,220.	0.	58,324.
(2) KEVIN MCGAHAN	40.00									
CHIEF FINANCIAL OFFICER		1		Х				232,736.	Ο.	49,316.
(3) HENRY HOLMES	40.00									
SR DIRECTOR, PROGRAMS & COMPLIANCE		1		Х				148,371.	Ο.	34,148.
(4) AGANA MORENO	40.00									
DIRECTOR OF FINANCE				Х				124,576.	0.	39,611.
(5) JENNIE PALMER	40.00									
DIR. OF ADMIN & BOARD RELATIONS				Х				100,307.	0.	41,117.
(6) GAIL GREENWALD	3.00									
CHAIR		Х		Х				0.	0.	0.
(7) JOEL SANDERS	2.00									
VICE CHAIR		Х		Х				0.	0.	0.
(8) ROBIN MANN	2.00									
TREASURER		Х		Х				0.	0.	0.
(9) LOREN BLACKFORD	2.00									
SECRETARY		Х		Х				0.	0.	0.
(10) BILL WEIHL	2.00									
SECRETARY (THRU 5/20/21)		Х		Х				0.	0.	0.
(11) EVA KATHLEEN SCHULTE	2.00									
MEMBER-AT-LARGE		Х		Х				0.	0.	0.
(12) DARREN ARONOFSKY	1.00									
DIRECTOR		Х						0.	0.	0.
(13) DONNEL BAIRD	1.00									
DIRECTOR		Х						0.	0.	0.
(14) REBEKAH SAUL BUTLER	1.00									
DIRECTOR		Х						0.	0.	0.
(15) MYKE BYBEE	1.00									
DIRECTOR (THRU 9/9/21)		Х						0.	0.	0.
(16) RAMON CRUZ	1.00									
DIRECTOR		Х						0.	0.	0.
(17) CLAIRE BROIDO JOHNSON	1.00									
DIRECTOR		Х						0.	0.	0.
132007 12-09-21										Form 990 (2021)

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Form 990 (2021)

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2021.04030 SIERRA CLUB FOUNDATION

Form 990 (2021) SIERRA C	LUB FOUN	IDA	TI	ON					94-60	0698	390	Page 8
Part VII Section A. Officers, Directors, Trus	tees, Key Em	oloy	ees,	and	Hig	ghes	t C	ompensated Employee	s (continued)			
(A) Name and title	(B) Average hours per week (list any	r (do not check more than one box, unless person is both an officer and a director/trustee)					an	(D) Reportable compensation from the	(E) Reportable compensatio from related organization	on d	Estir amo ot	(F) mated ount of ther ensation
	hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	key em ployee	Highest compensated employee	Former	organization (W-2/1099-MISC/ 1099-NEC)	(W-2/1099-MIS 1099-NEC)	SC/	fror organ and r	n the nization related izations
(18) PAUL RISSMAN DIRECTOR	1.00	x			_			0.		0.		0.
(19) JESSICA SAROWITZ	1.00	Δ						0.		0.		
DIRECTOR	1	Х						0.		0.		0.
(20) JILL SOFFER DIRECTOR	1.00	x						0.		ο.		0.
(21) STEPH SPEIRS	1.00											
DIRECTOR	1 00	Х						0.		0.		0.
(22) MARK WALTERS DIRECTOR	1.00	x						0.		0.		0.
1b Subtotal								902,210.		0.	222	,516.
c Total from continuation sheets to Part V d Total (add lines 1b and 1c)	I, Section A					I I		0.902,210.		0.	222	<u>0.</u> ,516.
2 Total number of individuals (including but r							o re		000 of reportable			
compensation from the organization												5 /es No
3 Did the organization list any former officer	, director, trust	ee, ŀ	key e	emplo	oyee	e, or	hig	hest compensated emp	loyee on	[
line 1a? If "Yes," complete Schedule J for s											3	X
4 For any individual listed on line 1a, is the su and related organizations greater than \$15											4	x
5 Did any person listed on line 1a receive or a	accrue comper	nsati	on fr	rom a	any	unre	late	ed organization or individ	dual for services			
rendered to the organization? If "Yes," con Section B. Independent Contractors	nplete Schedule	e J f	or sı	ich p	perso	on .					5	X
1 Complete this table for your five highest co	mpensated inc	lepe	nder	nt co	ntra	actor	s tł	nat received more than \$	5100,000 of comp	oensat	ion from	 ו
the organization. Report compensation for	the calendar ye	ear e	endir	ng wi	th o	or wit	hin T		ear.		(0)	
(A) Name and business	address							(B) Description of s	ervices	С	(C) ompens	ation
FUND EVALUATION GROUP		າເ	2 2	017	76				R RC		110	021
PO BOX 639176, CINCINNATI	L, OH 45	20	3-	91.	/0			INVESTMENT F	662		119	<u>,831.</u>
							_					
2 Total number of independent contractors (i	ncluding but p	ot lir	niter	t o t	hos	e list	ed	above) who received me	ore than			
\$100,000 of compensation from the organi	•				1							
											Form 9 9	90 (2021)

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					5 FOUNDA	ATION			94-6069	890 Page 9
Pa	rt V	/111	Statement of Revenue							
			Check if Schedule O contains	a respo	onse or note to	o any line		(5)	(2)	
							(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
ss	1	а	Federated campaigns	1a	181	L,480.				
Contributions, Gifts, Grants and Other Similar Amounts	•		Membership dues			<u> </u>				
n Gr			Fundraising events							
ìifts ar A			Related organizations							
s, G mila			Government grants (contributions							
tion r Si		f	All other contributions, gifts, grants, a	nd						
ibut			similar amounts not included above \dots		100,278					
ontr od O		-	Noncash contributions included in lines 1a-1f),232.				
<u>a Ö</u>		h	Total. Add lines 1a-1f	<u></u>			100459492.			
		_			Busines	s Code				
vice	2	a b								
Serv		с С								
s mer		d								
Program Service Revenue		e								
Pro		f	All other program service revenue	,						
		g	Total. Add lines 2a-2f			🕨				
	3		Investment income (including divid	dends, i	nterest, and					
			other similar amounts)			🕨 📙	3,684,006.			3684006.
	4		Income from investment of tax-exe		-	►⊢				
	5		Royalties	(i) D						
				(i) Rea	ıl (ii) Per	sonal				
			Gross rents 6a			_				
			Less: rental expenses 6b Rental income or (loss) 6c			_				
) Securi	ties (ii) O	ther				
	-	-		4,970,						
		b	Less: cost or other basis							
ne			and sales expenses	1,738,	114.					
venue		с	Gain or (loss)	3,232,	774.					
Re		d	Net gain or (loss)			🕨	3,232,774.			3232774.
Other	8	а	Gross income from fundraising events	•						
õ			including \$							
			contributions reported on line 1c).							
		h	Part IV, line 18 Less: direct expenses			_				
			Net income or (loss) from fundrais							
			Gross income from gaming activit							
			Part IV, line 19							
		b	Less: direct expenses							
			Net income or (loss) from gaming			🕨				
	10	а	Gross sales of inventory, less retu							
			and allowances							
			Less: cost of goods sold			+				
		С	Net income or (loss) from sales of	invento	Busines					
sn	11	~	SOFTWARE COST REIMBURSEMEN	NT	90009		1,259,746.			1259746.
neo			MISCELLANEOUS INCOME		90009		10,521.			10,521.
ellar		-	PARTNERSHIP K-1 INCOME		90009		155.		155.	,•=+,•
Miscellaneous Revenue		-	All other revenue							
Σ			Total. Add lines 11a-11d			🕨	1,270,422.			
	12		Total revenue. See instructions			►	108646694.	0.	155.	8187047.
13200	9 12-	-09-	21			_	_			Form 990 (2021)

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Form 990 (2021) SIERRA CLUB FOUNDATION Part IX Statement of Functional Expenses

	Check if Schedule O contains a respon	ise or note to any line in (A)	this Part IX (B)	(C)	<u>X</u>
	not include amounts reported on lines 6b, Bb, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21	84,178,340.	84,178,340.		
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16	45,000.	45,000.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	1,058,292.	211,286.	845,527.	1,479
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	292,806.	58,459.	233,938.	409
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	32,397.	6,468.	25,884.	45
9	Other employee benefits	59,771.	11,933.	47,754.	45 84
0	Payroll taxes	78,233.	15,619.	62,505.	109
1	Fees for services (nonemployees):	-	-	-	
	Management	142,505.		142,505.	
b	Legal	29,627.	27,183.	2,444.	
	Accounting	124,498.		124,498.	
	Lobbying	,			
	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	123,310.		123,310.	
g	Other. (If line 11g amount exceeds 10% of line 25,	110,0100		110,0100	
9	column (A), amount, list line 11g expenses on Sch 0.)	13,509.		13,509.	
2	Advertising and promotion	20,0001		20,0001	
3	Office expenses	98,961.	12,732.	86,201.	28
	Information technology	1,259,746.	12,7321	00,2010	1,259,746
4		1,255,740.			1,235,140
5	Royalties	89,306.	19,281.	69,976.	49
6	Occupancy	8,738.	1,927.	6,806.	5
17	Travel	0,750.	1,527•	0,000.	J
8	Payments of travel or entertainment expenses				
~	for any federal, state, or local public officials				
9	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates	7 001	1 510	E E00	A
22	Depreciation, depletion, and amortization	7,031.	1,518.	5,509.	4
3	Insurance	35,068.	7,571.	27,478.	19
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount list line 24e expenses on Schould Q.)				
~	amount, list line 24e expenses on Schedule 0.) FUNDRAISING REIMBURSEME	10,444,436.			10,444,436
a h	OTHER/SOFTWARE LICENSE	926,062.	2,258.	8,972.	914,832
b	REGULATORY COMPLIANCE	11,566.	4,230.	11,566.	514,032
C	ABGOLIATORI COMPLIANCE	II,500.		TT,000.	
d					
	All other expenses	00 050 000		1 0 2 0 2 0 0	10 601 045
5	Total functional expenses. Add lines 1 through 24e	99,059,202.	84,599,575.	1,838,382.	12,621,245
6	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

132010 12-09-21

15221025 758661 81036

11 2021.04030 SIERRA CLUB FOUNDATION

SIERRA CLUB FOUNDATION

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

		·			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing				1	
	2	Savings and temporary cash investments			57,272,929.	2	39,489,120.
	3	Pledges and grants receivable, net	26,726,701.	3	39,117,839.		
	4	Accounts receivable, net	1,812,803.	4	1,967,532.		
	5	Loans and other receivables from any current or			1,011,0001	-	1,501,001
	ľ	trustee, key employee, creator or founder, substa					
		controlled entity or family member of any of thes		5			
	6	Loans and other receivables from other disqualifi				-	
	-	under section 4958(f)(1)), and persons described		6			
S	7	Notes and loans receivable, net			2,891,007.	7	2,891,007.
Assets	8	Inventories for sale or use				8	
As	9	–			1,224,972.	9	1,208,799.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	214,471.			
	b	Less: accumulated depreciation		123,406.	98,096.	10c	91,065.
	11	Investments - publicly traded securities			96,075,529.	11	124,930,340.
	12	Investments - other securities. See Part IV, line 1	1		40,822,828.	12	35,054,562.
	13	Investments - program-related. See Part IV, line 1		13			
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11			17,832,718.	15	28,362,813.
	16	Total assets. Add lines 1 through 15 (must equa			244,757,583.	16	273,113,077.
	17	Accounts payable and accrued expenses	1,707,941.	17	963,244.		
	18	Grants payable	11,880,772.	18	15,164,708.		
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete F				21	
ies	22	Loans and other payables to any current or form					
Liabilities		trustee, key employee, creator or founder, substa				00	
Lial	23	controlled entity or family member of any of thes Secured mortgages and notes payable to unrelate				22 23	
	23	Unsecured notes and loans payable to unrelated				23	
	25	Other liabilities (including federal income tax, pay					
		parties, and other liabilities not included on lines					
		of Schedule D			16,602,354.	25	23,071,009.
	26	Total liabilities. Add lines 17 through 25			30,191,067.	26	39,198,961.
		Organizations that follow FASB ASC 958, check	ck her	e 🕨 🔀			
ces		and complete lines 27, 28, 32, and 33.					
lan	27	Net assets without donor restrictions	97,739,633.	27	111,145,022.		
Ba	28	Net assets with donor restrictions	116,826,883.	28	122,769,094.		
pun		Organizations that do not follow FASB ASC 95	58, che	eck here 🕨 🔛			
Ĕ		and complete lines 29 through 33.					
Net Assets or Fund Balances	29	Capital stock or trust principal, or current funds				29	
sse	30	Paid-in or capital surplus, or land, building, or eq				30	
štА	31	Retained earnings, endowment, accumulated inc			214,566,516.	31	222 011 116
ž	32	Total net assets or fund balances			214,566,516.	32	233,914,116.
	33	Total liabilities and net assets/fund balances			444,/3/,303.	33	273,113,077.

Form **990** (2021)

Form	990 (2021) SIERRA CLUB FOUNDATION	94-	60698	90	Pag	_{ge} 12
Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	108,	646	, 69	94.
2	Total expenses (must equal Part IX, column (A), line 25)	2	99,	059	,20	02.
3	Revenue less expenses. Subtract line 2 from line 1	3	9,	587	, 49	92.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	214,	566	, 51	16.
5	Net unrealized gains (losses) on investments	5	10,	103	,72	23.
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain on Schedule O)	9	- 2	343	,62	15.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,					
	column (B))	10	233,	<u>914</u>	,11	16.
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII			<u></u>		
			_		′ es	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	О.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a				
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?			2b	Х	L
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,				
	consolidated basis, or both:					
	X Separate basis Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,				
	review, or compilation of its financial statements and selection of an independent accountant?			2c	X	<u> </u>
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche					
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	gle Auc	lit			
	Act and OMB Circular A-133?		····· ⊢	3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required					
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits			3b		

Form **990** (2021)

132012 12-09-21

Department of the Treasury Internal Revenue Service

(Form 990)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047
2021
Open to Public Inspection

Т

Name of the organization

Name	of the organization						Employer	identification number
		RA CLUB FO					9	4-6069890
Part	I Reason for Public (Charity Status.	(All organizations must c	omplete tł	nis part.) S	ee instruction	S.	
The org	ganization is not a private found	ation because it is: (F	For lines 1 through 12, c	heck only	one box.)			
1	A church, convention of ch	urches, or associatio	n of churches described	in sectio	n 170(b)(1)(A)(i).		
2	A school described in sect	ion 170(b)(1)(A)(ii). (Attach Schedule E (Forn	ו 990).)				
3	A hospital or a cooperative	hospital service orga	anization described in se	ection 170	(b)(1)(A)(ii	i).		
4	A medical research organiz	ation operated in cor	njunction with a hospital	described	in sectio	n 170(b)(1)(A))(iii). Enter	the hospital's name,
	city, and state:							
5	An organization operated for	or the benefit of a col	lege or university owned	l or operat	ed by a go	vernmental ur	nit describe	ed in
	section 170(b)(1)(A)(iv). (C	Complete Part II.)						
6	A federal, state, or local gov	vernment or governm	nental unit described in	section 17	′0(b)(1)(A)	(v).		
7 X	An organization that norma	lly receives a substa	ntial part of its support fr	om a gove	ernmental ı	unit or from th	ne general p	public described in
_	section 170(b)(1)(A)(vi). (C	omplete Part II.)						
8 _	A community trust describe	ed in section 170(b)(1)(A)(vi). (Complete Par	t II.)				
9	An agricultural research org	anization described	in section 170(b)(1)(A)(ix) operate	ed in conju	nction with a	land-grant	college
	or university or a non-land-g	grant college of agric	ulture (see instructions).	Enter the I	name, city	, and state of	the college	or
	university:							
10	An organization that norma							
	activities related to its exem							-
	income and unrelated busir		(less section 511 tax) fro	m busines	ses acquii	red by the org	anization a	itter June 30, 1975.
4 -	See section 509(a)(2). (Con	• •				O(-)(A)		
11 L 12 L	An organization organized a	-	•	•			rn, out tho	nurnance of one or
	An organization organized a more publicly supported or	-	-	-			•	
	lines 12a through 12d that	-						
a	Type I. A supporting orga	• •					-	aivina
	the supported organization		-	• • • •	-			
	organization. You must c							1-1
b	Type II. A supporting org	-		ion with it:	s supporte	d organizatio	n(s), by hav	ving
	control or management o	-				-		•
	organization(s). You mus	t complete Part IV,	Sections A and C.					
c [Type III functionally inte	grated. A supporting	g organization operated	in connect	ion with, a	nd functional	ly integrate	d with,
	its supported organization	n(s) (see instructions)). You must complete I	Part IV, Se	ctions A,	D, and E.		
d [Type III non-functionally	integrated. A supp	orting organization oper	ated in co	nnection w	ith its suppor	ted organiz	zation(s)
	that is not functionally int	egrated. The organiz	ation generally must sat	isfy a distr	ibution req	uirement and	an attentiv	/eness
,	requirement (see instructi	ions). You must con	nplete Part IV, Sections	A and D,	and Part	V.		
e	Check this box if the orga					Type I, Type I	II, Type III	
	functionally integrated, or		nally integrated supportion	ng organiz	ation.			
	Enter the number of supported o	•						
g P	Provide the following information (i) Name of supported	i about the supporte (ii) EIN	d organization(s). (iii) Type of organization		inization listed	(v) Amount of	monetary	(vi) Amount of other
	organization	() =	(described on lines 1-10	in your governi Yes	ng document? No	support (see in	3	support (see instructions)
	-		above (see instructions))	163				
Total								

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	68508314.	100689985	115812118	<u>92385175.</u>	100459492	477855084
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge	60500014	1000000	115010110	00005185	100450400	40000000
	9	68508314.	100683382	115812118	92385175.	100459492	477855084
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						75036552.
	Public support. Subtract line 5 from line 4.						402818532
	ction B. Total Support	()	(1) 00 (0	() 00/0	()) 00000	()	(0, -,
	ndar year (or fiscal year beginning in)	(a) 2017 68508314.	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
		00500514.	100003302	112012110	92305175.	100459492	4//00004
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,	1000000	1700010	1720560	1650010	2004000	10102120
	and income from similar sources	1236333.	1792310.	1739560.	1650919.	3084000.	10103128.
9	Net income from unrelated business						
	activities, whether or not the		73	10 600	150	1	
	business is regularly carried on	5,685.	-73.	-12,682.	-152.	-155.	-7,377.
10	Other income. Do not include gain						
	or loss from the sale of capital	1000005	1162701	1400040	1422226	1070577	6420050
	assets (Explain in Part VI.)	1090225.	1163781.	1482040.	1433336.	1270577.	
	Total support. Add lines 7 through 10						494390794
	Gross receipts from related activities,		,				
13	First 5 years. If the Form 990 is for th	0			·		
500	organization, check this box and stor ction C. Computation of Publi						
				aluma (f))		44	81.48 %
	Public support percentage for 2021 (I Public support percentage from 2020		•	.,,		14 15	81.48 % 83.61 %
	33 1/3% support test - 2021. If the c					· · · · · · · · · · · · · · · · · · ·	
104	stop here. The organization qualifies						
h	33 1/3% support test - 2020. If the c		-			or more check th	
~	and stop here. The organization qual						
17a	10% -facts-and-circumstances test						
	and if the organization meets the fact						
	meets the facts-and-circumstances te			-	rachization		
b	10% -facts-and-circumstances test	•	•	,	•		
~	more, and if the organization meets th	-					
	organization meets the facts-and-circu						
18	Private foundation. If the organization		•				s >
							(Form 990) 2021

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

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

Sec	tion A. Public Support		1	1	1		
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus- iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
с	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
Sec	tion B. Total Support					•	
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
	Amounts from line 6						
	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
с	Add lines 10a and 10b						
11	Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital						
13	assets (Explain in Part VI.) Total support. (Add lines 9, 10c, 11, and 12.)		1			1	
	First 5 years. If the Form 990 is for th	e organization's fi	irst, second, third.	fourth, or fifth tax	year as a section	501(c)(3) organiz	ation,
	check this box and stop here	•					
Sec	tion C. Computation of Publi	c Support Pe	rcentage				F L
	Public support percentage for 2021 (I			column (f))		15	%
	Public support percentage from 2020					16	%
Sec	tion D. Computation of Inves	tment Income					
17	Investment income percentage for 20)21 (line 10c, colu	mn (f), divided by I	ine 13, column (f))		17	%
18	Investment income percentage from 2					18	%
19a	33 1/3% support tests - 2021. If the					33 1/3%, and lin	e 17 is not
	more than 33 1/3%, check this box ar	-					
b	33 1/3% support tests - 2020. If the	-					%, and
	line 18 is not more than 33 1/3%, che	ck this box and s f	top here. The orga	anization qualifies	as a publicly supp	orted organizati	on ►
20	Private foundation. If the organizatio						
	3 01-04-22						le A (Form 990) 2021
			16	•			

1

Yes No

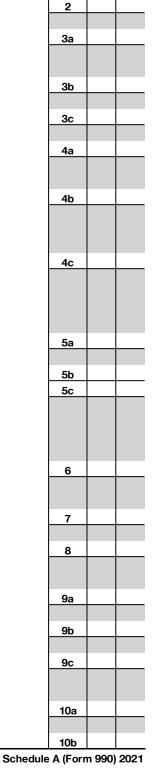
Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

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17

Schedule A (Form 990) 2021 SIERRA CLUB FOUNDATION

2

Part IV Supporting Organizations (continued)			
		Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?			
a A person who directly or indirectly controls, either alone or together with persons described on lir	nes 11b and		
11c below, the governing body of a supported organization?	11a		
b A family member of a person described on line 11a above?	11b		
c A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b	, or 11c, provide		
detail in Part VI.	11c		
Section B. Type I Supporting Organizations			
		×	No
		Yes	140
1 Did the governing body, members of the governing body, officers acting in their official capacity, more supported organizations have the power to regularly appoint or elect at least a majority of th directors, or trustees at all times during the tax year? <i>If</i> " <i>No</i> ," <i>describe in</i> Part VI <i>how the suppor effectively operated, supervised, or controlled the organization's activities. If the organization had r organization, describe how the powers to appoint and/or remove officers, directors, or trustees we</i>	ne organization's officers, ted organization(s) more than one supported	Yes	140
more supported organizations have the power to regularly appoint or elect at least a majority of the directors, or trustees at all times during the tax year? If "No," describe in Part VI how the support	ne organization's officers, ted organization(s) more than one supported ere allocated among the	Yes	140
more supported organizations have the power to regularly appoint or elect at least a majority of the directors, or trustees at all times during the tax year? If "No," describe in Part VI how the suppor effectively operated, supervised, or controlled the organization's activities. If the organization had r organization, describe how the powers to appoint and/or remove officers, directors, or trustees we	ne organization's officers, ted organization(s) more than one supported ere allocated among the the tax year.	Yes	

Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,

supervised, or controlled the supporting organization. Section C. Type II Supporting Organizations

 1
 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed

 1
 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or managed

 1
 1

Section D.	All Type	III Supporting	Organizations

			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		

Section E. Type III Functionally Integrated Supporting Organizations

1	Check the box next to the method	d that the organization used	d to satisfy the Integral Part	t Test during the vear	(see instructions)
•	Check the DOX heat to the method	<i>inal line organization use</i>		i col uunny inc year	1000 1100 000

- a The organization satisfied the Activities Test. Complete line 2 below.
- **b** The organization is the parent of each of its supported organizations. *Complete* **line 3** *below.*

С		The organization supported a governmental entity.	Describe in Part VI how	you supported a	governmental entity	(see instructions).
---	--	---	-------------------------	-----------------	---------------------	---------------------

- 2 Activities Test. Answer lines 2a and 2b below.
- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in **Part VI identify those supported organizations and explain** how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- 3 Parent of Supported Organizations. Answer lines 3a and 3b below.
- **a** Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *If* "Yes" or "*No*" *provide details in* **Part VI.**

b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? *If "Yes," describe in* **Part VI** *the role played by the organization in this regard.* 132025 01-04-22

3b | | Schedule A (Form 990) 2021

2a

2b

3a

15221025 758661 81036

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Yes No

1	Check here if the organization satisfied the Integral Part Test as a qualify All other Type III non-functionally integrated supporting organizations mu		•	Part VI). See instructions.
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
	Fair market value of other non-exempt-use assets	1c		
	Total (add lines 1a, 1b, and 1c)	1d		
	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-function	ally integrated	Type III supporting orga	nization (see

 Schedule A (Form 990) 2021
 SIERRA
 CLUB
 FOUNDATION

 Part V
 Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

132026 01-04-22

instructions).

Schedule A (Form 990) 2021

j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.

\$

4 Distributions for 2021 from Section D,

Part VI. See instructions.

a Applied to underdistributions of prior years b Applied to 2021 distributable amount

c Remainder. Subtract lines 4a and 4b from line 4. 5 Remaining underdistributions for years prior to 2021, if

than zero, explain in Part VI. See instructions. 6 Remaining underdistributions for 2021. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in

7 Excess distributions carryover to 2022. Add lines 3j

any. Subtract lines 3g and 4a from line 2. For result greater

line 7:

and 4c. 8 Breakdown of line 7: a Excess from 2017 b Excess from 2018 c Excess from 2019 d Excess from 2020 e Excess from 2021

Sche	dule A (Form 990) 2021 SIERRA CLUB F	OUNDATION		9	4-6069890 Page 7
	rt V Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	nizations (continu		
Sect	ion D - Distributions		·		Current Year
1	Amounts paid to supported organizations to accomplish exe	mpt purposes		1	
2	Amounts paid to perform activity that directly furthers exemp	ot purposes of supported			
	organizations, in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations	3	3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5	
6	Other distributions (<i>describe in Part VI</i>). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	ne organization is responsive			
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2021 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
		(i)	(ii)		(iii)
Sect	ion E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributior Pre-2021	ns	Distributable Amount for 2021
Sect	ion E - Distribution Allocations (see instructions) Distributable amount for 2021 from Section C, line 6		Underdistribution	ıs	Distributable
	· · · · · · · · · · · · · · · · · · ·		Underdistribution	ıs	Distributable
1	Distributable amount for 2021 from Section C, line 6		Underdistribution	IS	Distributable
1	Distributable amount for 2021 from Section C, line 6 Underdistributions, if any, for years prior to 2021 (reason-		Underdistribution	15	Distributable
1 2 3	Distributable amount for 2021 from Section C, line 6 Underdistributions, if any, for years prior to 2021 (reason- able cause required - <i>explain in</i> Part VI). See instructions.		Underdistribution		Distributable
1 2 3 a	Distributable amount for 2021 from Section C, line 6 Underdistributions, if any, for years prior to 2021 (reason- able cause required - <i>explain in</i> Part VI). See instructions. Excess distributions carryover, if any, to 2021		Underdistribution		Distributable
1 2 3 a b	Distributable amount for 2021 from Section C, line 6 Underdistributions, if any, for years prior to 2021 (reason- able cause required - <i>explain in</i> Part VI). See instructions. Excess distributions carryover, if any, to 2021 From 2016		Underdistribution		Distributable
1 2 3 a b c	Distributable amount for 2021 from Section C, line 6 Underdistributions, if any, for years prior to 2021 (reason- able cause required - <i>explain in</i> Part VI). See instructions. Excess distributions carryover, if any, to 2021 From 2016 From 2017		Underdistribution		Distributable
1 2 3 a b c d	Distributable amount for 2021 from Section C, line 6 Underdistributions, if any, for years prior to 2021 (reason- able cause required - <i>explain in</i> Part VI). See instructions. Excess distributions carryover, if any, to 2021 From 2016 From 2017 From 2018		Underdistribution		Distributable
1 2 3 a b c d e	Distributable amount for 2021 from Section C, line 6 Underdistributions, if any, for years prior to 2021 (reason- able cause required - <i>explain in</i> Part VI). See instructions. Excess distributions carryover, if any, to 2021 From 2016 From 2017 From 2018 From 2019		Underdistribution		Distributable
1 2 3 a b c d e f	Distributable amount for 2021 from Section C, line 6 Underdistributions, if any, for years prior to 2021 (reason- able cause required - <i>explain in</i> Part VI). See instructions. Excess distributions carryover, if any, to 2021 From 2016 From 2017 From 2018 From 2019 From 2020		Underdistribution		Distributable
1 2 3 6 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Distributable amount for 2021 from Section C, line 6 Underdistributions, if any, for years prior to 2021 (reason- able cause required - <i>explain in</i> Part VI). See instructions. Excess distributions carryover, if any, to 2021 From 2016 From 2017 From 2018 From 2019 From 2020 Total of lines 3a through 3e		Underdistribution		Distributable

Schedule A (Form 990) 2021

Schedule A (Form 990) 2021	SIERRA CLUB F				94-6069890) Page 8
Part VI Supplemental Part IV, Section A, line 1; Part IV, Sec	Information. Provide the explaining 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, tion D, lines 2 and 3; Part IV, Section 6, and 8; and Part V, Section E, line	9b, 9c, 11a, 11b, and 1 on E, lines 1c, 2a, 2b, 3a	1c; Part IV, Se , and 3b; Part V	ction B, lines 1 /, line 1; Part V	and 2; Part IV, Section , Section B, line 1e; F	on C,
SCHEDULE A, PART	II, LINE 10, EXPI	LANATION FOR	OTHER I	NCOME :		
COST SOFTWARE RE	IMBURSEMENT					
2017 AMOUNT: \$	1,029,948.					
2018 AMOUNT: \$	1,148,659.					
2019 AMOUNT: \$	1,320,313.					
2020 AMOUNT: \$	1,363,405.					
2021 AMOUNT: \$	1,259,746.					
MISCELLANEOUS IN	COME					
2017 AMOUNT: \$	10,942.					
2018 AMOUNT: \$	15,122.					
2019 AMOUNT: \$	161,727.					
2020 AMOUNT: \$	69,931.					
2021 AMOUNT: \$	10,831.					
REFUNDED GRANTS						
2017 AMOUNT: \$	49,335.					
2018 AMOUNT: \$	0.					
2019 AMOUNT: \$	0.					
2020 AMOUNT: \$	0.					
2021 AMOUNT: \$	0.					
132028 01-04-22					Schedule A (Form	n 990) 202 [.]
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Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Organization type (check one):

** PUBLIC DISCLOSURE COPY **

Schedule of Contributors

► Attach to Form 990 or Form 990-PF. Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

2021

Employer identification number

4-60698	390
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U U			
	SIERRA	CLUB	FOUNDATION

Filers of:	Section:
Form 990 or 990-EZ	\fbox 501(c)(3) (enter number) organization
	4947(a)(1) nonexempt charitable trust not treated as a private foundation
	527 political organization
Form 990-PF	501(c)(3) exempt private foundation
	4947(a)(1) nonexempt charitable trust treated as a private foundation
	501(c)(3) taxable private foundation

Check if your organization is covered by the General Rule or a Special Rule.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

X For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year \dots \blacktriangleright \$

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

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

Schedule B (Form 990) (2021)

Name of organization

SIERRA CLUB FOUNDATION

Employer identification number

94-6069890

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$ <u>13,000,000.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$ <u>5,000,000.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$ <u>10,000,000.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$ <u>2,700,000.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$ <u>5,350,000.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6		\$ 4,040,874.	Person X Payroll Noncash (Complete Part II for noncash contributions.) Schedule B (Form 990) (2021)

Schedule B (Form 990) (2021)

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15221025 758661 81036

2021.04030 SIERRA CLUB FOUNDATION 81036__1

Page **2**

Schedule B (Form 990) (2021)

Name of organization

Employer identification number

SIERRA CLUB FOUNDATION

- -

94-606989

Part I	Contributors (see instructions). Use duplicate copies of Part I if additiona	al space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$ <u>3,000,000.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Schedule B (Form 990) (2021)

15221025 758661 81036

24 2021.04030 SIERRA CLUB FOUNDATION 81036_1 Name of organization

Page 3 Employer identification number

94-6069890

SIERRA CLUB FOUNDATION

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

artii	Noncash Property (see instructions). Use duplicate copies of Par		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
_		\$	
a) Io. om art I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
453 11-11-	-21	\$	Schedule B (Form 990) (2

15221025 758661 81036

25 2021.04030 SIERRA CLUB FOUNDATION

Name of organization		Employer identification number
SIERRA CLUB FOUNDATION		94-6069890
	a) through (e) and the following line entry. charitable, etc., contributions of \$1,000 or less	on 501(c)(7), (8), or (10) that total more than \$1,000 for the yea
(a) No. from (b) Purpose of gift Part I	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gift	
Transferee's name, address, a		Relationship of transferor to transferee
(a) No. from (b) Purpose of gift		(d) Description of how gift is hold
from (b) Purpose of gift Part I	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gift	
Transferee's name, address, a	and ZIP + 4	Relationship of transferor to transferee
(a) No. from (b) Purpose of gift Part I	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gift	
Transferee's name, address, a	and ZIP + 4	Relationship of transferor to transferee
(a) No. from (b) Purpose of gift Part I	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gift	
Transferee's name, address, a	and ZIP + 4	Relationship of transferor to transferee
23454 11-11-21	26	Schedule B (Form 990) (20)

15221025 758661 81036

2021.04030 SIERRA CLUB FOUNDATION 81036_1

SCHEDULE C	Po	litical Campaign a	nd Lobbying	g Activities		OMB No. 1545-0047
(Form 990)	Form 990)					
	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.					
Department of the Treasury Internal Revenue Service	50-LZ.	Open to Public Inspection				
•		Form 990, Part IV, line 3, or Form		e 46 (Political Camp	aign Acti	vities), then
		plete Parts I-A and B. Do not comp				
.,		01(c)(3)) organizations: Complete Pa	arts I-A and C below. I	Do not complete Part	: I-B.	
Section 527 organiza		,				
		Form 990, Part IV, line 4, or For				
		nave filed Form 5768 (election unden nave NOT filed Form 5768 (electior		•		
		Form 990, Part IV, line 5 (Proxy		, ,		•
Tax) (See separate inst		Form 930, Fait IV, line 3 (Floxy	Tax) (See Separate III		990-LZ,	Fait V, line SSC (FLOXY
		ions: Complete Part III.				
Name of organization	, (, 3	·			Employe	r identification number
	SIERRA	CLUB FOUNDATION			<u> </u>	94-6069890
Part I-A Comple		anization is exempt under	section 501(c) o	r is a section 52		
1 Provide a description	on of the organiz	ation's direct and indirect political	campaign activities in	Part IV.		
2 Political campaign	activity expendit	ures			▶\$	
3 Volunteer hours for	political campai	gn activities				
Part I-B Comple	ete if the org	anization is exempt under	section 501(c)(3).		
	•	incurred by the organization under				
		incurred by organization managers				
		n 4955 tax, did it file Form 4720 fo	r this year?			Yes No
4a Was a correction m						Yes No
b If "Yes," describe in Part I-C Comple		anization is exempt under	section 501(c), e	except section 5	01(c)(3)	
-	-	by the filing organization for section	• • •	-	► \$	
		ization's funds contributed to othe	•		ΨΨ	
exempt function ac			•		▶\$	
•		. Add lines 1 and 2. Enter here and			• •	
	-				▶\$	
						Yes No
5 Enter the names, ad	ddresses and en	ployer identification number (EIN)				e filing organization
made payments. Fo	or each organiza	tion listed, enter the amount paid f	rom the filing organiza	ation's funds. Also en	ter the an	nount of political
		omptly and directly delivered to a s		,	eparate se	gregated fund or a
political action com	mittee (PAC). If	additional space is needed, provide	e information in Part IV	V		
(a) Name	•	(b) Address	(c) EIN	(d) Amount paid f filing organizatio funds. If none, ente	n's co er-0	(e) Amount of political ontributions received and promptly and directly delivered to a separate political organization. If none, enter -0

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

Schedule C (Form 990) 2021

132041 11-03-21

Schedule C (Form 990) 2021	SIERRA CLUB	FOUNDATION		94-6	069890 Page 2
Part II-A Complete if the org	anization is exen	npt under section	501(c)(3) and file	ed Form 5768 (ele	ction under
section 501(h)).	tion is also and to an effi	·			
	tion belongs to an affil	• • •	Part IV each affiliated	group member's name	e, address, EIN,
	re of excess lobbying e Ition checked box A ar	. ,	visions apply		
		•		(a) Filing	(b) Affiliated group
	ts on Lobbying Exper			organization's	totals
(The term "expend	ditures" means amou	nts paid or incurred.)		totals	
1a Total lobbying expenditures to influ	uence public opinion (g	grassroots lobbying)		172,101.	
b Total lobbying expenditures to influ	uence a legislative bod	y (direct lobbying)		212,362.	
c Total lobbying expenditures (add li	nes 1a and 1b)			384,463.	
d Other exempt purpose expenditure				98,721,333.	
e Total exempt purpose expenditure	s (add lines 1c and 1d))		99,105,796.	
f Lobbying nontaxable amount. Ente	er the amount from the	following table in both	n columns.	1,000,000.	
If the amount on line 1e, column (a) o		bying nontaxable amo	ount is:		
Not over \$500,000		the amount on line 1e.			
Over \$500,000 but not over \$1,000	· · · · · · · · · · · · · · · · · · ·	0 plus 15% of the exce	· _ /		
Over \$1,000,000 but not over \$1,5		0 plus 10% of the exce			
Over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000.					
Over \$17,000,000	\$1,000,0	JUU.			
g Grassroots nontaxable amount (en	ter 25% of line 1f)			250,000.	
h Subtract line 1g from line 1a. If zer	,			0.	
i Subtract line 1f from line 1c. If zero or less, enter -0-				0.	
j If there is an amount other than ze					
reporting section 4911 tax for this					Yes No
	4-Year Ave	eraging Period Under	Section 501(h)		
(Some organizations t		• •	•	of the five columns be	low.
	•	ate instructions for lin			
	Lobbying Exper	nditures During 4-Yea	r Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) Total
2a Lobbying nontaxable amount	1,000,000.	1,000,000.	1,000,000.	1,000,000.	4,000,000.
 b Lobbying ceiling amount (150% of line 2a, column(e)) 					6,000,000.
					-
c Total lobbying expenditures	337,291.	662,640.	265,161.	384,463.	1,649,555.
d Grassroots nontaxable amount	250,000.	250,000.	250,000.	250,000.	1,000,000.
e Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000.
f Grassroots lobbying expenditures	80,387.	233,840.	0.	172,101.	486,328.
				.	ile C (Form 990) 2021

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description		(a)		(b)	
of the	lobbying activity.	Yes	Νο	Amo	ount
1 a	During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: Volunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements?				
	Mailings to members, legislators, or the public?				
е	Publications, or published or broadcast statements?				
f	Grants to other organizations for lobbying purposes?				
g	Direct contact with legislators, their staffs, government officials, or a legislative body?				
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i	Other activities?				
	Total. Add lines 1c through 1i				
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
	If "Yes," enter the amount of any tax incurred under section 4912				
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section	n 501(c)(5)	, or sec	tion	
	501(c)(6).				
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?				
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?				
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from th		3	tion	
Far	t III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered ' answered "Yes."				3, is
1	Dues, assessments and similar amounts from members		1		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political				
	expenses for which the section 527(f) tax was paid).				
а	Current year		. 2a		
	Carryover from last year				
	Total				
3					
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exce	ess			
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and po	olitical			
	expenditure next year?		. 4		
5	Taxable amount of lobbying and political expenditures. See instructions		5		
Par	t IV Supplemental Information				
Provi	de 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 a	nd 2 (See	

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

Schedule C (Form 990) 2021

132043 11-03-21

SCHEDULE I	D
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Part I

Supplemental Financial Statements

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



Department of the Treasury Internal Revenue Service

Name of the organization

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

Employer identification number

SIERRA CLUB FOUNDAT	FION	94-6069890
Organizations Maintaining Donor Advised	d Funds or Other Similar Funds	or Accounts. Complete if the
organization answered "Yes" on Form 990, Part IV, line	e 6.	
	(a) Donor advised funds	(b) Funds and other accounts
umber at end of vear	4	

		(a) Donor advised funds	(b) Fun	ds and other account	s
1	Total number at end of year	4			
2	Aggregate value of contributions to (during year)	35,411.			
3	Aggregate value of grants from (during year)	135,778.			
4	Aggregate value at end of year	566,034.			
5	Did the organization inform all donors and donor advisors in v	writing that the assets held in donor advise	ed funds		
	are the organization's property, subject to the organization's	exclusive legal control?		X Yes	No
6	Did the organization inform all grantees, donors, and donor a				
	for charitable purposes and not for the benefit of the donor of	r donor advisor, or for any other purpose o	conferring		
	impermissible private benefit?			X Yes	No
Pa	t II Conservation Easements. Complete if the org	ganization answered "Yes" on Form 990, F	Part IV, line 7.		
1	Purpose(s) of conservation easements held by the organization	on (check all that apply).			
	Preservation of land for public use (for example, recreated	tion or education) Preservation of	a historically	important land area	
	Protection of natural habitat	Preservation of	a certified his	storic structure	
	Preservation of open space				
2	Complete lines 2a through 2d if the organization held a qualif	ied conservation contribution in the form o	of a conservat	ion easement on the	last
	day of the tax year.			Held at the End of the	Tax Year
а	Total number of conservation easements		2a		
b	Total acreage restricted by conservation easements		2b		
с	Number of conservation easements on a certified historic stru	ucture included in (a)	2c		
d	Number of conservation easements included in (c) acquired a	after 7/25/06, and not on a historic structu	re		
	listed in the National Register		2d		
3	Number of conservation easements modified, transferred, rele			during the tax	
	year ►				
4	Number of states where property subject to conservation eas	sement is located			
5	Does the organization have a written policy regarding the per	iodic monitoring, inspection, handling of			
	violations, and enforcement of the conservation easements it	holds?		Yes	No
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and enforcing cons	ervation ease	ments during the year	r
	▶				
7	Amount of expenses incurred in monitoring, inspecting, hand	lling of violations, and enforcing conservat	ion easement	s during the year	
	►\$				
8	Does each conservation easement reported on line 2(d) above	e satisfy the requirements of section 170(h	ו)(4)(B)(i)		
	and section 170(h)(4)(B)(ii)?				No
9	In Part XIII, describe how the organization reports conservation	on easements in its revenue and expense	statement and	b	
	balance sheet, and include, if applicable, the text of the footn	note to the organization's financial stateme	ents that desc	ribes the	
De	organization's accounting for conservation easements.	Aut Historical Traceruse or Oth	har Cimila	Acceto	
Par	t III Organizations Maintaining Collections of		ner Simila	Assets.	
	Complete if the organization answered "Yes" on Form				
1a	If the organization elected, as permitted under FASB ASC 95	· · ·			
	of art, historical treasures, or other similar assets held for pub		-	bublic	
	service, provide in Part XIII the text of the footnote to its finan				
b	If the organization elected, as permitted under FASB ASC 95	-			
	art, historical treasures, or other similar assets held for public	exhibition, education, or research in furth	erance of put	olic service,	
	provide the following amounts relating to these items:				
	(i) Revenue included on Form 990, Part VIII, line 1		•	۶ 	
				·	
2	If the organization received or held works of art, historical trea		gain, provide		
	the following amounts required to be reported under FASB A	-	L	•	
a	Revenue included on Form 990, Part VIII, line 1				
b	Assets included in Form 990, Part X		🕨 :	5	

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30			
2021.04030	SIERRA	CLUB	FOUNDATION

Sche		CLUB FOUNDA				6069890	
Par	t III Organizations Maintaining C	ollections of Art	, Historical Tre	asures, or Othe	er Similar Ass	sets _{(contin}	ued)
3	Using the organization's acquisition, accession	on, and other records	, check any of the f	ollowing that make	significant use of	its	
	collection items (check all that apply):	,	, ,	0	0		
а	Public exhibition	d	Loan or exc	hange program			
b	Scholarly research	e					
c	Preservation for future generations	-					
4	Provide a description of the organization's co	lections and explain	how they further th	e organization's exe	empt purpose in F	Part XIII	
5	During the year, did the organization solicit o					artyan	
Ŭ	to be sold to raise funds rather than to be ma					Yes	No
Par	t IV Escrow and Custodial Arrang						
	reported an amount on Form 990, Par		te il the organizatio	In answered Tes O	111 0111 990, 1 alt	iv, ine 9, 0	
10	Is the organization an agent, trustee, custodi		any for contributions	or other accets no	tincluded		
Id							No
	on Form 990, Part X?					Yes	
d	If "Yes," explain the arrangement in Part XIII	and complete the foll	owing table:		[]	Amount	
						Amount	
	Beginning balance						
	Additions during the year						
е	Distributions during the year						
f	Ending balance				1f		
	Did the organization include an amount on Fe				• • • • • • • • • • • • • • • • • • • •	Yes	No
	If "Yes," explain the arrangement in Part XIII.						
Par	t V Endowment Funds. Complete i	-					<u> </u>
		(a) Current year	(b) Prior year	(c) Two years back	(d) Three years b		years back
1a	Beginning of year balance	43,119,100.	38,335,250.	32,796,347.			470,633.
b	Contributions	78,793.	86,308.	21,460.	, ,	92.	333,502.
с	Net investment earnings, gains, and losses	4,464,751.	6,960,807.	7,298,126.	-1,594,7	72. 4,	693,197.
d	Grants or scholarships						
е	Other expenditures for facilities						
	and programs	2,030,808.	2,263,265.	1,780,683.	1,652,2	33. 1,	499,172.
f	Administrative expenses						
g	End of year balance	45,631,836.	43,119,100.	38,335,250.	32,796,3	47. 34,	998,160.
2	Provide the estimated percentage of the curr	ent vear end balance	(line 1g. column (a)) held as:	•		
a	Board designated or quasi-endowment	4.7378	%	,			
h	Permanent endowment ► 60.3043	%	_/*				
° c	24 0500	/°					
Ŭ	The percentages on lines 2a, 2b, and 2c show	, -					
20	Are there endowment funds not in the posse	-	tion that are hold an	d administored for t	the organization		
Ja				a administered for	ine organization	Г	Yes No
	by: (i) Unrelated organizations						X
							X
	(ii) Related organizations						^
	If "Yes" on line 3a(ii), are the related organiza					3b	
	Describe in Part XIII the intended uses of the t VI Land, Buildings, and Equipm		vment tunas.				
I ai	Complete if the organization answered		Dort IV line 110 S	on Form 000 Dart V	(line 10		
				,	,	() = .	
	Description of property	(a) Cost or of	• • •		Accumulated	(d) Book	value
		basis (investm	,	. ,	epreciation		7 401
	Land			7,421.	21 620		7,421.
	Buildings		5	2,039.	31,638.	20),401.
С	Leasehold improvements						
d	Equipment			6,093.	25,444.		649.
	Other			8,918.	66,324.		2,594.
Tota	. Add lines 1a through 1e. (Column (d) must e	qual Form 990, Part >	(<u>, column (B), line 1</u>	0c.)	►	91	L,065.
					Sche	dule D (Form	990) 2021

Schedule D) (Form 990) 2021	SIERRA	CLUB	FOUNDATION

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A) INTERNATIONAL EQUITY	13,701,152.	END-OF-YEAR MARKET VALUE
(B) LIMITED PARTNERSHIPS	21,353,410.	END-OF-YEAR MARKET VALUE
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶	35,054,562.	

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990. Part X. col. (B) line 13.)		

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1) SPLIT-INTEREST AGREEMENT	28,269,872.
(2) INTEREST RECEIVABLE	92,941.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	28,362,813.
Part X Other Liabilities.	

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) SPLIT-INTEREST AGREEMENT	23,071,009.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	23,071,009.

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

Schedule D (Form 990) 2021

132053 10-28-21

Sche	edule D (Form 990) 2021 SIERRA CLUB FOUNDATION			94-	6069890	Page 4
Pa	rt XI Reconciliation of Revenue per Audited Financial Sta	tements With	Revenue per Re			
	Complete if the organization answered "Yes" on Form 990, Part IV, lir	ne 12a.				
1	Total revenue, gains, and other support per audited financial statements			1	118,453	,396.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:					
а	Net unrealized gains (losses) on investments	2a [1	10,103,722.			
b						
с	Recoveries of prior year grants					
d			-297,021.			
е	Add lines 2a through 2d			2e	9,806	,701.
3	Subtract line 2e from line 1			3	108,646	<u>,695.</u>
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:					
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a				
b	Other (Describe in Part XIII.)	4b				
с	Add lines 4a and 4b			4c		0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I, line 12.	5	108,646	.695.		
		/				
Pa	rt XII Reconciliation of Expenses per Audited Financial Sta	atements With	Expenses per F	Retur	n.	
Pa	rt XII Reconciliation of Expenses per Audited Financial Sta Complete if the organization answered "Yes" on Form 990, Part IV, lir	atements With	Expenses per F	Retur	n.	
Pa 1	rt XII Reconciliation of Expenses per Audited Financial Sta	atements With ne 12a.	Expenses per F	Retur	n. 99,105	
	rt XII Reconciliation of Expenses per Audited Financial Sta Complete if the organization answered "Yes" on Form 990, Part IV, lir	atements With ne 12a.	Expenses per F	Retur	n.	
1	rt XII Reconciliation of Expenses per Audited Financial Sta Complete if the organization answered "Yes" on Form 990, Part IV, lir Total expenses and losses per audited financial statements	atements With	Expenses per F	Retur	n.	
1 2	rt XII Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, line Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities	atements With ne 12a. 	Expenses per F	Retur	n.	
1 2 a	rt XII Reconciliation of Expenses per Audited Financial Sta Complete if the organization answered "Yes" on Form 990, Part IV, line Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities	atements With ne 12a.	Expenses per F	Retur	n.	
1 2 a	rt XII Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, line Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments	atements With ne 12a. 2a 2b 2c	Expenses per F	Retur	n. 99,105	,796.
1 2 a	rt XII Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, line Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.)	2a 2b 2c 2d	46,594.	Retur	n. 99,105	<u>,796.</u>
1 2 b c d	rt XII Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, lin Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d	atements With ne 12a. 2a 2b 2c 2d	46,594.	Retur	n. 99,105	<u>,796.</u>
1 2 b c d e	rt XII Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, lin Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.)	atements With ne 12a. 2a 2b 2c 2d	46,594.	Retur	n. 99,105	<u>,796.</u>
1 2 b c d e 3	rt XII Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, line Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1	atements With 12a. 2a 2b 2c 2d	46,594.	Retur	n. 99,105	<u>,796.</u>
1 2 3 4	rt XII Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, lir Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b	2a 2b 2c 2d 2d	46,594.	Retur	n. 99,105	<u>,796.</u>
1 2 a b c d e 3 4 a	rt XII Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, lin Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b	2a 2b 2b 2c 2d	46,594.	Retur	n. 99,105 46 99,059	<u>,796.</u> , <u>594.</u> ,202. 0.
1 2 d e 3 4 b c 5	rt XII Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, lin Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.)	2a 2b 2b 2c 2d	46,594.	etur	n. 99,105	<u>,796.</u> , <u>594.</u> ,202. 0.

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 XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

PART V, LINE 4:

THE FOUNDATION'S ENDOWMENT CONSISTS OF APPROXIMATELY 58 INDIVIDUAL FUNDS

ESTABLISHED FOR A VARIETY OF PURPOSES. THE FOUNDATION HAS ADOPTED

INVESTMENT AND SPENDING POLICIES FOR ENDOWMENT ASSETS THAT ATTEMPT TO

PROVIDE A PREDICTABLE STREAM OF FUNDING TO PROGRAMS SUPPORTED BY ITS

ENDOWMENT WHILE SEEKING TO MAINTAIN THE PURCHASING POWER OF ENDOWMENT

ASSETS.

PART X, LINE 2:

THE FOUNDATION IS SUBJECT TO INCOME TAXES IN THE UNITED STATES AND

CALIFORNIA ON UNRELATED BUSINESS INCOME. THE FOUNDATION HAS IDENTIFIED AND

33

EVALUATED ITS SIGNIFICANT TAX POSITIONS FOR WHICH THE STATUTE OF

132054 10-28-21

Schedule D (Form 990) 2021

Schedule D (Form 990) 2021 SIERRA CLUB FOUNDATION 94-6069890 Page 5 Part XIII Supplemental Information (continued) FOUNDATION FOUNDATION
LIMITATIONS REMAINS OPEN AND DETERMINED THERE IS NO MATERIAL UNRECOGNIZED
BENEFIT OR LIABILITY TO BE RECORDED. THE FOUNDATION'S FEDERAL RETURNS ARE
CURRENTLY OPEN UNDER THE STATUTE OF LIMITATIONS FOR THE YEAR ENDED
DECEMBER 31, 2017 AND SUBSEQUENT YEARS AND CALIFORNIA RETURNS ARE OPEN FOR
THE YEAR ENDED DECEMBER 31, 2016 AND SUBSEQUENT YEARS. THE FOUNDATION DOES
NOT ANTICIPATE THAT THERE WILL BE ANY MATERIAL CHANGES IN THE UNRECOGNIZED
TAX POSITIONS OVER THE NEXT 12 MONTHS. THERE HAVE BEEN NO RELATED TAX
PENALTIES OR INTEREST CLASSIFIED AS A TAX EXPENSE IN THE STATEMENT OF
ACTIVITIES.
PART XI, LINE 2D - OTHER ADJUSTMENTS:
CHANGE IN VALUE OF SPLIT-INTEREST AGREEMENTS -297,021.
PART XII, LINE 2D - OTHER ADJUSTMENTS:
RETURNED GRANTS 46,594.

Schedule D (Form 990) 2021

132055 10-28-21

Name of the organization					Employer identi	fication number
SIERRA CLUB FOU	NDATION				94-60698	90
Part I General Infor	mation on A	ctivities Out	side the United States. Comple	ete if the organ	ization answered "	Yes" on
Form 990, Part I\				5		
1 For grantmakers. Does	the organizatior	n maintain recor	ds to substantiate the amount of its gra	nts and other		
the grantees' eligibility for	or the grants or a	assistance, and	the selection criteria used to award the	grants or assis	stance? X	Yes 🗌 No
	ribe in Part V the	e organization's	procedures for monitoring the use of its	grants and ot	her assistance out	side the
United States. 3 Activities per Region. (TI	he following Part	l line 3 table ca	an he dunlicated if additional snace is n	eeded)		
	(a) Begion (b) Number of (c) Number of (d) Activities conducted in the region (e) If a					
	offices	employees, agents, and independent	(by type) (such as, fundraising, pro-		gram service,	expenditures for and
	in the region	independent contractors	gram services, investments, grants to		e specific type	investments
		in the region	recipients located in the region)	of service	(s) in the region	in the region
EUROPE (INCLUDING						
ICELAND & GREENLAND)						
- ALBANIA, ANDORRA,		0				45.000
AUSTRIA, BELGIUM	0	0	GRANTMAKING			45,000.
						+
3 a Subtotal	0	0				45,000.
b Total from continuation						-
sheets to Part I	0	0				0.
c Totals (add lines 3a	0	0				45,000.
and 3b)	· · · ·	۲ ×				±5,000.

Statement of Activities Outside the United States
 Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.
 Attach to Form 990.

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

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

Schedule F (Form 990) 2021

OMB No. 1545-0047

Open to Public

Inspection

132071 12-20-21

SCHEDULE F (Form 990)

Department of the Treasury Internal Revenue Service Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EUROPE (INCLUDING						
		ICELAND &						
		GREENLAND) -	INDIA TIGER HABITAT					
		ALBANIA, ANDORRA,	PROTECTION	45,000.		0.		
		<u> </u>		<u> </u>	<u> </u>			
			recognized as charities by the f			•		1
			or counsel has provided a sect					<u>1</u> 0
	other organizations (JI GITUUES					Sched	ule F (Form 990) 2021

Schedule F (Form 990) 2021

SIERRA	CLUB	FOUNDATION
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94-6069890

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.

Part III can be duplicated if ac	dditional space is neede			Γ		Ι	1
(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 noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)

Schedule F (Form 990) 2021

			CLUB	FOUNDATION
Part IV	Foreign Form	s		

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? <i>If</i> "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	X 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	Yes	XNo
	U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)		
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	X 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	X 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	X 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; don't file with Form 990)	Yes	X No

Schedule F (Form 990) 2021

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

PART I, LINE 2:

THE SIERRA CLUB FOUNDATION EXERCISES EXPENDITURE RESPONSIBILITY IN

INTERNATIONAL GRANTMAKING. THE SIERRA CLUB FOUNDATION CONDUCTS PRE-GRANT

INQUIRY TO OBTAIN RELEVANT DOCUMENTATION FOR ORGANIZATIONAL DUE

DILIGENCE, INCLUDING COMPLIANCE WITH U.S. GOVERNMENT ANTI-TERRORISM

POLICIES EXECUTIVE ORDER 13224, THE USA PATRIOT ACT, TREASURY DEPARTMENT

ANTI-TERRORIST FINANCING GUIDELINES. ALL GRANTEES ENTER INTO A WRITTEN

GRANT AGREEMENT SPELLING OUT THE PURPOSE, TERMS, AND CONDITIONS OF THE

GRANT, INCLUDING PROHIBITION ON THE USE OF FUNDS FOR LOBBYING, POLITICAL

ACTIVITY, OR OTHER NON-CHARITABLE PURPOSES. THE SIERRA CLUB FOUNDATION

REQUIRES PERIODIC NARRATIVE AND FINANCIAL REPORTS FROM THE GRANTEE ON THE

USE OF FUNDS.

Schedule F (Form 990) 2021

132075 12-20-21

SCHEDULE I (Form 990)	Go	arants and Oth vernments, ar	nd Individual	s in the Ŭni	ted States		OMB No. 1545-0047		
	Compl	ete if the organizatio			t IV, line 21 or 22.		Open to Public		
Department of the Treasury Attach to Form 990. O Internal Revenue Service Go to www.irs.gov/Form990 for the latest information. O									
Name of the organization	UB FOUNDA	TION	-				Employer identification number $94 - 6069890$		
Part I General Information on Grants a	Ind Assistance								
 Does the organization maintain records criteria used to award the grants or assi Describe in Part IV the organization's pro- 	stance?						on 🔀 Yes 🗌 No		
Part II Grants and Other Assistance to recipient that received more than	Domestic Organiz	zations and Domestic	Governments. C	omplete if the orga	anization answered "Y	es" on Form 990, Part	IV, line 21, for any		
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance		
SIERRA CLUB									
2101 WEBSTER STREET STE 1300									
OAKLAND, CA 94612	94-1153307	501(C)(4)	83,812,244.	0.			ENVIRONMENTAL EDUCATION		
							COMMUNITY ORGANIZING,		
WASHINGTON INTERFAITH NETWORK							LEADERSHIP DEVELOPMENT,		
1226 VERMONT AVE NW							AND MOVEMENT BUILDING IN		
WASHINGTON, DC 20005-3615	52-1956696	501(C)(3)	25,000.	0.			WASHINGTON D.C., FOCUSED		
							TO RECORD THE ORAL		
UNIVERSITY OF CALIFORNIA, BERKELEY							HISTORY FROM SIERRA CLUB		
FOUNDATION - 1995 UNIVERSITY AVE,	94-6090626	E01(G)(2)	F0.000	0.			VOLUNTEERS, STAFF, AND		
<u>STE 401 - BERKELEY, CA 94704-1058</u>	94-0090020	501(C)(3)	50,000.	0.			MEMBERS FOR PRESERVATION TO CONDUCT RESEARCH,		
WINYAH RIVERS FOUNDATION							,		
PO BOX 554							MONITORING, AND ADMINISTRATIVE ADVOCACY		
CONWAY, SC 29528	57-1118288	501(C)(3)	50,000.	0.			TO DETERMINE THE IMPACT		
	57 1110200	501(0/(5/	50,000.	••			TO PURCHASE THE FORMER		
ALLEGHENY LAND TRUST							CHURCHILL VALLEY COUNTRY		
416 THORN STREET							CLUB TO MAINTAIN THE		
SEWICKLEY, PA 15143	25-1718611	501(C)(3)	47,228.	0.			PROPERTY AS A LARGE		
,,							TO ENSURE UNIVERSAL		
WAREHOUSE WORKERS JUSTICE CENTER							ACCESS TO MUNICIPAL		
37 S. ASHLAND AVENUE, 1ST FLOOR							WATER, ENACT CLEAN		
CHICAGO, IL 60607	80-0792786	501(C)(3)	40,000.	0.			CLOSURE OF EXISTING COAL		
2 Enter total number of section 501(c)(3) a			,	-			▶ 12.		
3 Enter total number of other organization		•					1.		
LHA For Paperwork Reduction Act Notice	, see the Instructi	ons for Form 990.					Schedule I (Form 990) 2021		

SEE PART IV FOR COLUMN (H) DESCRIPTIONS

Schedule I (Form 990) SIERRA CLUB FOUNDATION Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
							TO ANALYZE DATA AND
PHYSICIANS FOR SOCIAL							PUBLISH DOCUMENTATION,
RESPONSIBILITY - 1111 14TH STREET,							EDUCATE THE PUBLIC,
SUITE 700 - WASHINGTON, DC 20005	23-7059731	501(C)(3)	39,500.	0.			PUBLICIZE FINDINGS IN
							FOR GENERAL SUPPORT OF
ALLIANCE FOR A JUST SOCIETY							THE NATIVE ORGANIZERS
3518 SOUTH EDMUNDS STREET							ALLIANCE AND THE RED ROAI
SEATTLE, WA 98118	91-1635554	501(C)(3)	30,000.	٥.			TO DC: A TOTEM POLL
							FOR GENERAL SUPPORT OF
CONFLUENCE PHILANTHROPY							MISSION TO TRANSFORM THE
1 PENN PLAZA, BOX 6169							PRACTICE OF INVESTING BY
NEW YORK, NY 10119	27-3018135	501(C)(3)	15,000.	٥.			ALIGNING CAPITAL WITH OUF
							TO REPLANT A STRETCH OF
RIO GRANDE RETURN							THE SANTA FE RIVER WITH
17048 LLANO STREET #347							NATIVE COTTONWOOD AND
SANTA FE, NM 87505	20-8434340	501(C)(3)	10,000.	٥.			WILLOW THAT GOT WASHED
							FOR GENERAL SUPPORT OF
GREEN DIVERSITY INITIATIVE DBA							MISSION TO ENSURE THAT
GREEN 2.0 - 6218 GEORGIA AVE NW,							THE ENVIRONMENTAL
STE 1-629 - WASHINGTON, DC 20011	46-5220283	501(C)(3)	10,000.	0.			MOVEMENT IS COMMITTED TO
							GENERAL SUPPORT OF BIKE
BIKE PITTSBURGH							PITTSBURGH'S MISSION TO
188 43RD STREET, #1							TRANSFORM STREETS TO MAKE
PITTSBURGH, PA 15201	36-4491002	501(C)(3)	10,000.	٥.			BIKING AND WALKING
,							TO SUPPORT THE THEODORE
AUDUBON SOCIETY OF NEW YORK							ROOSEVELT SANCTUARY &
134 COVER RD, OYSTER BAY							AUDUBON CENTER'S FOR THE
NEW YORK, NY 11771-2418	14-1698061	501(C)(3)	9,000.	٥.			BIRDS! PROGRAM AT LANDING

Schedule I (Form 990)

Schedule I (Form 990) 2021

SIERRA CLUB FOUNDATION

Page 2

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
Doubly Complemental Information Dravide the information up	and the Dent Life		(1) I II	Left Marine and Marine and Arrive	

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

PART I, LINE 2:

ALL GRANTEES ARE REQUIRED TO SIGN AND RETURN A GRANT AGREEMENT WHICH STATES

FUNDS MAY BE SPENT ONLY IN ACCORDANCE WITH THE BUDGET AND PURPOSES AS

STATED IN THE APPROVED PROJECT PROPOSAL, THAT NO PORTION OF THE GRANT FUNDS

SHALL BE USED TO CARRY ON PROPAGANDA, OR OTHERWISE ATTEMPT TO INFLUENCE

LEGISLATION OR THE OUTCOME OF ANY PUBLIC ELECTION, OR FOR ANY

NON-CHARITABLE, NON-EDUCATIONAL PURPOSES; THAT THE ACTIVITIES SUPPORTED BY

THE GRANT ARE CARRIED OUT FOR PUBLIC BENEFIT AND ANY WORK PRODUCTS

ASSOCIATED WITH THE GRANT SHOULD BE MADE AVAILABLE TO THE GENERAL PUBLIC

Part IV Supplemental Information

UPON REQUESTS; AND THE FOUNDATION EXAMINES THE GRANTEE'S PROGRESS BY

REQUIRING FINANCIAL AND NARRATIVE REPORTS.

PART II, LINE 1, COLUMN (H):

NAME OF ORGANIZATION OR GOVERNMENT: WASHINGTON INTERFAITH NETWORK

(H) PURPOSE OF GRANT OR ASSISTANCE: COMMUNITY ORGANIZING, LEADERSHIP

DEVELOPMENT, AND MOVEMENT BUILDING IN WASHINGTON D.C., FOCUSED ON THE

INTERSECTION OF CLIMATE, UTILITIES, AFFORDABLE HOUSING, AND BUILDING

ELECTRIFICATION

NAME OF ORGANIZATION OR GOVERNMENT:

UNIVERSITY OF CALIFORNIA, BERKELEY FOUNDATION

(H) PURPOSE OF GRANT OR ASSISTANCE: TO RECORD THE ORAL HISTORY FROM

SIERRA CLUB VOLUNTEERS, STAFF, AND MEMBERS FOR PRESERVATION AT BANCROFT

LIBRARY TO SERVE AS INVALUABLE HISTORICAL RESOURCES, OFFERING WISDOM FOR

FUTURE LEADERS AND DOCUMENTING MISTAKES THAT SHOULD NOT BE REPEATED

NAME OF ORGANIZATION OR GOVERNMENT: WINYAH RIVERS FOUNDATION

(H) PURPOSE OF GRANT OR ASSISTANCE: TO CONDUCT RESEARCH, MONITORING, AND

ADMINISTRATIVE ADVOCACY TO DETERMINE THE IMPACT OF EXISTING LIQUEFIED

NATURAL GAS (LNG) INFRASTRUCTURE AND BLOCK FUTURE PROJECTS AND EXPANSIONS

ACROSS THE LUMBER RIVER WATERSHED AND REGION

NAME OF ORGANIZATION OR GOVERNMENT: ALLEGHENY LAND TRUST

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PURCHASE THE FORMER CHURCHILL

VALLEY COUNTRY CLUB TO MAINTAIN THE PROPERTY AS A LARGE GREENSPACE OF

43

WILDLIFE HABITAT IN AN OTHERWISE URBAN AREA

Schedule I (Form 990)

MUNICIPAL WATER, ENACT CLEAN CLOSURE OF EXISTING COAL ASH PITS, AND

SUPPORT REGION-WIDE JUST TRANSITION INITIATIVES IN NORTHWEST INDIANA

NAME OF ORGANIZATION OR GOVERNMENT: PHYSICIANS FOR SOCIAL RESPONSIBILITY (H) PURPOSE OF GRANT OR ASSISTANCE: TO ANALYZE DATA AND PUBLISH DOCUMENTATION, EDUCATE THE PUBLIC, PUBLICIZE FINDINGS IN MEDIA OUTLETS, AND MEET WITH REGULATORY AGENCIES ABOUT THE USE OF PER- AND POLYFLUOROALKYL SUBSTANCES (PFAS) AND OTHER TOXIC CHEMICALS ASSOCIATED WITH FRACKING IN COLORADO

NAME OF ORGANIZATION OR GOVERNMENT: ALLIANCE FOR A JUST SOCIETY (H) PURPOSE OF GRANT OR ASSISTANCE: FOR GENERAL SUPPORT OF THE NATIVE ORGANIZERS ALLIANCE AND THE RED ROAD TO DC: A TOTEM POLL JOURNEY FOR SACRED PLACES AND CULTURAL PROTECTION

NAME OF ORGANIZATION OR GOVERNMENT: CONFLUENCE PHILANTHROPY

(H) PURPOSE OF GRANT OR ASSISTANCE: FOR GENERAL SUPPORT OF MISSION TO

TRANSFORM THE PRACTICE OF INVESTING BY ALIGNING CAPITAL WITH OUR

COMMUNITY'S VALUES OF SUSTAINABILITY, EQUITY, AND JUSTICE

NAME OF ORGANIZATION OR GOVERNMENT: RIO GRANDE RETURN

(H) PURPOSE OF GRANT OR ASSISTANCE: TO REPLANT A STRETCH OF THE SANTA FE

RIVER WITH NATIVE COTTONWOOD AND WILLOW THAT GOT WASHED OUT IN THE

1000-YEAR FLOOD EVENT OF JULY 2018

NAME OF ORGANIZATION OR GOVERNMENT:

Schedule I (Form 990)

GREEN DIVERSITY INITIATIVE DBA GREEN 2.0

(H) PURPOSE OF GRANT OR ASSISTANCE: FOR GENERAL SUPPORT OF MISSION TO

ENSURE THAT THE ENVIRONMENTAL MOVEMENT IS COMMITTED TO JUSTICE, EQUITY,

INCLUSION, AND DIVERSITY AND RECOGNIZES THE LEADERSHIP OF PEOPLE OF COLOR

AT EVERY LEVEL OF THE MOVEMENT

NAME OF ORGANIZATION OR GOVERNMENT: BIKE PITTSBURGH

(H) PURPOSE OF GRANT OR ASSISTANCE: GENERAL SUPPORT OF BIKE PITTSBURGH'S

MISSION TO TRANSFORM STREETS TO MAKE BIKING AND WALKING COMMONPLACE FOR

ALL PITTSBURGHERS IN ORDER TO IMPROVE QUALITY OF LIFE AND REDUCE THE

HARMFUL EFFECTS OF CAR DEPENDENCE IN COMMUNITIES

NAME OF ORGANIZATION OR GOVERNMENT: AUDUBON SOCIETY OF NEW YORK (H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT THE THEODORE ROOSEVELT SANCTUARY & AUDUBON CENTER'S FOR THE BIRDS! PROGRAM AT LANDING ELEMENTARY SCHOOL IN GLEN COVE, NY

Schedule I (Form 990)

132291 04-01-21

SC	HEDULE J	I	OMB No. 1545-0047					
(Fo	rm 990)	Compensation Information For certain Officers, Directors, Trustees, Key Employees, and Highest		20	91			
		Compensated Employees		20		l		
Dono	Department of the Treasury Complete if the organization answered "Yes" on Form 990, Part IV, line 23.							
	Internal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information.							
Nam	e of the organization	1	Employer i			nber		
_		SIERRA CLUB FOUNDATION	94-6	06989	0			
Pa	rt I Question	s Regarding Compensation						
					Yes	No		
1a	Check the appropri	ate box(es) if the organization provided any of the following to or for a person listed on Form	990,					
	Part VII, Section A,	line 1a. Complete Part III to provide any relevant information regarding these items.						
	First-class or c		nal use					
	Travel for com							
		ation and gross-up payments Health or social club dues or initiation fees	S					
	Discretionary s	spending account Personal services (such as maid, chauffeu	ır, chef)					
b	•	on line 1a are checked, did the organization follow a written policy regarding payment or						
		rovision of all of the expenses described above? If "No," complete Part III to explain		1b				
2	-	n require substantiation prior to reimbursing or allowing expenses incurred by all directors,						
	trustees, and office	rs, including the CEO/Executive Director, regarding the items checked on line 1a?		2		_		
_								
3		ny, of the following the organization used to establish the compensation of the organization's						
		ector. Check all that apply. Do not check any boxes for methods used by a related organization	on to					
	·	ation of the CEO/Executive Director, but explain in Part III.						
	Compensation							
		ompensation consultant						
	X Form 990 of o	ther organizations X Approval by the board or compensation c	ommittee					
4	During the year dia	any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing						
4	organization or a re							
а	-			4a		x		
h		e payment or change-of-control payment? eive payment from a supplemental nonqualified retirement plan?				X		
c c	•	eive payment from an equity-based compensation arrangement?		4c		X		
Ŭ	-	les 4a-c, list the persons and provide the applicable amounts for each item in Part III.						
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.						
5		on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensatio	n					
	contingent on the r							
а	•			5a		X		
		ation?				X		
		or 5b, describe in Part III.						
6		on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensatio	n					
	contingent on the n							
а	-	-		6a		X		
		ation?				X		
		r 6b, describe in Part III.						
7	For persons listed of	on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments						
	not described on lir	nes 5 and 6? If "Yes," describe in Part III		7		X		
8		reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to th						
	initial contract exce	ption described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III		8		X		
9	If "Yes" on line 8, d	id the organization also follow the rebuttable presumption procedure described in						
	Regulations section	1 53.4958-6(c)?		9				
LHA		eduction Act Notice, see the Instructions for Form 990.		ule J (Forn	n 990)	2021		

132111 11-02-21

94-6069890

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation		(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	in column (B)	
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) DAN CHU	(i)	290,620.	5,000.	600.	28,905.	29,419.	354,544.	0.
EXECUTIVE DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) KEVIN MCGAHAN	(i)	227,136.	5,000.	600.	14,575.	34,741.	282,052.	0.
CHIEF FINANCIAL OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) HENRY HOLMES	(i)	142,771.	5,000.	600.	22,983.	11,165.	182,519.	0.
SR DIRECTOR, PROGRAMS & COMPLIANCE	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) AGANA MORENO	(i)	118,976.	5,000.	600.	11,402.	28,209.		0.
DIRECTOR OF FINANCE	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
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	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Schedule J (Form 990) 2021

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

1

Employer identification number

94-6069890

Department of the Treasury
Internal Revenue Service

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. Attach to Form 990. ►

2021 **Open to Public** . Inspection

•	Go to www.irs.g	aov/Form990 for	instructions	and the	latest informa
		304/1 01110000 101	111011 110110		integer innormie

Name of the organization			
	SIERRA	CLUB	FOUNDATION

tion.

Pa	rt I Types of Property				I.			
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1 <u>c</u>	(d) Method of d noncash contribu	etermini	•	s
1	Art - Works of art							
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles	X	723	724,447	FAIR MARKET	' VAI	JUE	
7	Boats and planes							
8	Intellectual property							
9	Securities - Publicly traded	Х	247	2,042,548	FAIR MARKET	' VAI	LUE	
10	Securities - Closely held stock							
11	Securities - Partnership, LLC, or							
	trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation contribution -							
	Historic structures							
14	Qualified conservation contribution - Other							
15	Real estate - Residential							
16	Real estate - Commercial							
17	Real estate - Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other (SOFTWARE LICE)	X	1	653,237	FAIR MARKET	' VAI	JUE	
26	Other ► ()							
27	Other ()							
28	Other ()							
29	Number of Forms 8283 received by the organiz	zation during	the tax vear for co	ontributions				
	for which the organization completed Form 82						5	
			encer lenneng				Yes	No
30a	During the year, did the organization receive by	contributio	n any property rep	orted in Part I, lines 1 throu	ah 28. that it			
	must hold for at least three years from the date		•••••		-			
	,	_	,			30a		Х
b		·				Cou		
		oolicv that re	auires the review o	of any nonstandard contribu	utions?	31	x	
OLU			•			322	x	
b						0_4		
		olumn (c) fo	a type of property	r for which column (a) is ch	ecked			
		2.3.1.1. (0) 101						
LHA		the Instruct	tions for Form 990).	Schedule I	/ (Form	1 990)	2021
31 32a	exempt purposes for the entire holding period? If "Yes," describe the arrangement in Part II. Does the organization have a gift acceptance p Does the organization hire or use third parties contributions? If "Yes," describe in Part II. If the organization didn't report an amount in c describe in Part II. For Paperwork Reduction Act Notice, see	oolicy that re or related or olumn (c) foi	equires the review of ganizations to solic	cit, process, or sell noncash	utions?	30a 31 32a M (Form	X X 1 990)	

132141 11-17-21

Part II Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

SCHEDULE M, PART I, COLUMN (B):

THE NUMBER OF CONTRIBUTIONS REPRESENTS THE NUMBER OF CONTRIBUTORS, NOT

THE NUMBER OF ITEMS CONTRIBUTED.

SCHEDULE M, LINE 32B:

THE ORGANIZATION USES A THIRD PARTY TO MANAGE THEIR VEHICLE DONATION

PROGRAM. CARS, SAN DIEGO, CA MANAGES ALL ASPECTS OF THE PROGRAM,

INCLUDING TAX REPORTING AND DEPOSITS NET PROCEEDS DIRECTLY TO THE

FOUNDATION'S BANK ACCOUNT.

Schedule M (Form 990) 2021

94-6069890

Page 2

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SCHEDULE O (Form 990)

Supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on

Department of the Treasury Internal Revenue Service Name of the organization Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. ▶ Attach to Form 990 or Form 990-EZ. ▶ Go to www.irs.gov/Form990 for the latest information.



Employer identification number 94-6069890

FORM 990, PART I, LINE 6:

VOLUNTEERS INCLUDE BOARD MEMBERS AND PROPERTY MANAGEMENT VOLUNTEERS IN

MT. SHASTA FOR HORSE CAMP. ESTIMATED BASED ON THE BOARD ROSTERS AND

SIERRA CLUB FOUNDATION

HORSE CAMP COMMITTEE MEMBERS.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

THE SIERRA CLUB FOUNDATION PROMOTES EFFORTS TO EDUCATE AND EMPOWER

PEOPLE TO PROTECT AND IMPROVE THE NATURAL AND HUMAN ENVIRONMENT.

GOALS:

- SOLVE THE CLIMATE CRISIS PRIMARILY THROUGH A SUCCESSFUL TRANSITION TO

A RESOURCE-EFFICIENT CLEAN ENERGY ECONOMY THAT BETTER SERVES PEOPLE AND

NATURE ;

- SECURE PROTECTIONS FOR PUBLIC LANDS AND WATERS, PROMOTE HEALTHY

ECOSYSTEMS AND COMMUNITIES, AND FIGHT FOR CLEAN AIR AND WATER;

- EXPAND OPPORTUNITIES FOR MORE PEOPLE TO EXPLORE, ENJOY, AND PROTECT

THE PLANET BY SUPPORTING PROGRAMS AND POLICIES THAT REACH ACROSS

ECONOMIC, CULTURAL, AND COMMUNITY LINES TO GET PEOPLE OUTDOORS; AND

- BUILD A DIVERSE, INCLUSIVE ENVIRONMENTAL MOVEMENT THAT REFLECTS AND

REPRESENTS TODAY'S AMERICAN PUBLIC, AND PRIORITIZES IMPORTANT

CONNECTIONS BETWEEN ENVIRONMENTAL HEALTH AND SOCIAL JUSTICE.

FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS:

TO EXPLORE, ENJOY, AND PROTECT THE NATURAL WORLD.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

THE SIERRA CLUB FOUNDATION PROVIDES A BROAD RANGE OF ADDITIONAL GRANTS

 LHA
 For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.
 Schedule O (Form 990) 2021

 132211
 11-11-21

Name of the organization SIERRA CLUB FOUNDATION	Employer identification number 94-6069890
TO SUPPORT CHARITABLE, EDUCATION, SCIENTIFIC, LITERARY ANI) LEGAL
ENDEAVORS THAT FURTHER ITS CHARITABLE MISSION.	
EXPENSES \$ 37,341,667. INCLUDING GRANTS OF \$ 36,965,432	. REVENUE \$ 0.

THE FINAL FORM 990 WAS REVIEWED BY SENIOR STAFF AND AUDIT COMMITTEE WITH THE PAID PREPARERS BY A CONFERENCE CALL AND ALL QUESTIONS WERE ADDRESSED PRIOR TO BEING TRANSMITTED TO THE FULL BOARD BEFORE FILING. ADDITIONALLY, THE 990 WAS REVIEWED BY THE FOUNDATION'S LEGAL COUNSEL BEFORE THE AUDIT COMMITTEE CONFERENCE CALL.

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

BOARD MEMBERS ARE FURNISHED ANNUALLY WITH A CONFLICT OF INTEREST

QUESTIONNAIRE FOR THE PURPOSE OF IDENTIFYING AND REVIEWING TRANSACTIONS OR

RELATIONSHIPS THAT HAVE THE POTENTIAL TO LEAD TO CONFLICT OF INTERESTS.

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

IN ACCORDANCE WITH ORGANIZATION POLICY, THE EXECUTIVE COMMITTEE OF THE BOARD OF DIRECTORS REVIEWS THE COMPENSATION OF THE EXECUTIVE DIRECTOR AND CHIEF FINANCIAL OFFICER BASED ON JOB DUTIES, PERFORMANCE AND SALARY SURVEY INFORMATION FROM OTHER COMPARABLE NONPROFIT ORGANIZATIONS AND RECOMMENDS APPROVAL BY THE BOARD OF DIRECTORS.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990: AL,AK,AR,CA,CO,FL,GA,HI,IL,KS,KY,ME,MD,MA,MI,MN,MS,NH,NJ,NM,NY,NC,ND,NV,OH OK,OR,PA,RI,SC,TN,UT,VA,WV,WA,WI

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

132212 11-11-21

Schedule O (Form 990) 2021

Schedule O (Form 990) 2021 Name of the organization	Page 2 Employer identification number
SIERRA CLUB FOUNDATION	94-6069890
	51 0005050
THE FOUNDATION'S FORM 990 AND FINANCIAL STATEMENTS ARE AVA	ILABLE TO THE
PUBLIC THROUGH THE ORGANIZATION'S WEBSITE AND UPON REQUEST	FOR THE SAME
PERIOD OF TIME AS SET FORTH IN SEC. 6104(D). THE FORM 990	IS ALSO AVAILABLE
ON GUIDESTAR.ORG. THE FOUNDATION MAKES AVAILABLE COPIES OF	ITS ORGANIZING
DOCUMENTS AND CONFLICT OF INTEREST POLICIES TO MEMBERS OF	THE PUBLIC WHO
REQUEST COPIES.	

FORM 990, PART VI, SECTION B, LINE 16:

THE SIERRA CLUB FOUNDATION HAS INVESTMENTS IN SEVERAL INVESTMENT PARTNERSHIPS THROUGH PRIVATE EQUITY FUNDS. THE PRIMARY PURPOSE OF THE ORGANIZATION'S INVESTMENT IN THE PARTNERSHIPS IS THE PRODUCTION OF INCOME OR APPRECIATION OF PROPERTY.

FORM 990, PART VII, SECTION A, LINE 1A:

THE SIERRA CLUB FOUNDATION ENTERED INTO A RESOURCE SHARING AGREEMENT WITH SIERRA CLUB, AN UNRELATED ORGANIZATION, EFFECTIVE AUGUST 13, 2021. ACCORDING TO THE AGREEMENT DAN CHU, EXECUTIVE DIRECTOR, AND JENNIE PALMER, DIRECTOR OF ADMINISTRATION AND BOARD RELATIONS, SHARED THEIR TIME BETWEEN THE FOUNDATION AND THE CLUB. SIERRA CLUB REIMBURSED THE FOUNDATION FOR ITS SHARE OF PERSONNEL COSTS AND OVERHEAD COSTS PAID BY THE FOUNDATION ON A QUARTERLY OR MORE FREQUENT BASIS. DURING CALENDAR YEAR 2021, \$58,335 OF DAN CHU'S COMPENSATION AND \$13,817 OF JENNIE PALMER'S COMPENSATION REPORTED ON PART VII AND SCHEDULE J OF THIS FORM 990 WERE FOR SERVICES PERFORMED FOR SIERRA CLUB.

FORM 990, PART IX, LINE 24A, FUNDRAISING REIMBURSEMENT:

IN ACCORDANCE WITH A COST SHARING AGREEMENT BETWEEN THE FOUNDATION AND

THE SIERRA CLUB, THE FOUNDATION AGREED TO REIMBURSE THE SIERRA CLUB FOR
132212 11-11-21
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Name of the organization SIERRA CLUB FOUNDATION	Employer identification number $94-6069890$
FUNDRAISING SALARIES AND OTHER FUNDRAISING EXPENSES INCURR	ED ON BEHALF
OF THE FOUNDATION; THE REIMBURSED AMOUNTS ARE REFLECTED AS	"FUNDRAISING
REIMBURSEMENT" ON THE STATEMENT OF FUNCTIONAL EXPENSES, FO	RM 990, PART
<u>IX.</u>	
FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:	
CHANGE IN VALUE OF SPLIT-INTEREST AGREEMENTS	-297,021.
RETURNED GRANTS	-46,594.
TOTAL TO FORM 990, PART XI, LINE 9	-343,615.
132212 11-11-21 54	Schedule O (Form 990) 2021

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

Attach to Form 990.
 Go to www.irs.gov/Form990 for instructions and the latest information.

Department of the Treasury Internal Revenue Service

Name of the organization

SIERRA CLUB FOUNDATION

Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

(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	(f) Direct controlling entity		g) 512(b)(13) rolled ity?
				501(c)(3))		Yes	No

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

Schedule R (Form 990) 2021

2021
Open to Public Inspection

Employer identification number 94-6069890

Schedule R (Form 990) 2021 SIERRA CLUB FOUNDATION

Part III Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(1	h)	(i)	(j)	(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Predominant income Share of total (related, unrelated, income coluded from tax under		Disproportionate allocations?			Genera manag partn	^{ll or} Percentage ^{jing} ownership
		country)		sections 512-514)		assets	Yes	No	K-1 (Form 1065)	Yes	10
											<u> </u>
	1										
	1	1	1			1		I	1		

Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	512(I contr	(i) ction (b)(13) rolled tity?
		country)		or trusty		233613		Yes	No
CHARITABLE REMAINDER TRUSTS (33)			THE SIERRA						
2101 WEBSTER STREET, SUITE 1250			CLUB						
OAKLAND, CA 94612	INVESTMENT	CA	FOUNDATION	TRUST				Х	
CHARITABLE LEAD TRUSTS (1)			THE SIERRA						
2101 WEBSTER STREET, SUITE 1250			CLUB						
OAKLAND, CA 94612	INVESTMENT	CA	FOUNDATION	TRUST				Х	
POOLED INCOME FUNDS (2)			THE SIERRA						
2101 WEBSTER STREET, SUITE 1250			CLUB						
OAKLAND, CA 94612	INVESTMENT	CA	FOUNDATION	TRUST				Х	
GIFT ANNUITY POOLS (1)			THE SIERRA						
2101 WEBSTER STREET, SUITE 1250			CLUB						
OAKLAND, CA 94612	INVESTMENT	CA	FOUNDATION	TRUST				Х	<u> </u>

Schedule R (Form 990) 2021 SIERRA CLUB FOUNDATION

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

uring the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV? eccipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity ift, grant, or capital contribution to related organization(s)	1a 1b		X
ift, grant, or capital contribution to related organization(s)			v
ift, grant, or capital contribution to related organization(s)	1b		Δ
			Х
ift, grant, or capital contribution from related organization(s)	1c		Х
pans or loan guarantees to or for related organization(s)	1d		Х
pans or loan guarantees by related organization(s)	1e		Х
ividends from related organization(s)	1f		Х
ale of assets to related organization(s)	1g		Х
urchase of assets from related organization(s)	1h		Х
	1i		Х
ease of facilities, equipment, or other assets to related organization(s)	1j		Х
ease of facilities, equipment, or other assets from related organization(s)	1k		Х
	11		Х
	1m		Х
	1n		Х
naring of paid employees with related organization(s)	10		Х
eimbursement paid to related organization(s) for expenses	1p		Х
eimbursement paid by related organization(s) for expenses	1q		Х
ther transfer of cash or property to related organization(s)	1r		Х
ther transfer of cash or property from related organization(s)	1s		Х
o ivauke eehh ee tt	ans or loan guarantees by related organization(s)	hans or loan guarantees by related organization(s) 1e vidends from related organization(s) 1f le of assets to related organization(s) 1g urchase of assets from related organization(s) 1g change of assets with related organization(s) 1i iase of facilities, equipment, or other assets to related organization(s) 1j asset of facilities, equipment, or other assets from related organization(s) 1k reformance of services or membership or fundraising solicitations for related organization(s) 1k reformance of services or membership or fundraising solicitations by related organization(s) 1m narring of facilities, equipment, mailing lists, or other assets with related organization(s) 1m narring of paid employees with related organization(s) 1m narring of paid employees with related organization(s) 1m eimbursement paid to related organization(s) for expenses 1p eimbursement paid by related organization(s) 1m her transfer of cash or property to related organization(s) 1m her transfer of cash or property from related organization(s) 1m her transfer of cash or property from related organization(s) 1m her transfer of cash or property from related organization(s) 1m </td <td>ans or loan guarantees by related organization(s) 1e vidends from related organization(s) 1f le of assets to related organization(s) 1g le of assets to related organization(s) 1h crhange of assets three related organization(s) 1h crhange of assets with related organization(s) 1i asset of facilities, equipment, or other assets to related organization(s) 1i asset of facilities, equipment, or other assets from related organization(s) 1i erformance of services or membership or fundraising solicitations for related organization(s) 1m aring of facilities, equipment, mailing lists, or other assets with related organization(s) 1m aring of paid employees with related organization(s) 1m aring of paid employees with related organization(s) 1m aring of paid employees with related organization(s) 1n bimbursement paid to related organization(s) for expenses 1p bimbursement paid by related organization(s) for expenses 1p her transfer of cash or property to related organization(s) 1r her transfer of cash or property from related organization(s) 1s</td>	ans or loan guarantees by related organization(s) 1e vidends from related organization(s) 1f le of assets to related organization(s) 1g le of assets to related organization(s) 1h crhange of assets three related organization(s) 1h crhange of assets with related organization(s) 1i asset of facilities, equipment, or other assets to related organization(s) 1i asset of facilities, equipment, or other assets from related organization(s) 1i erformance of services or membership or fundraising solicitations for related organization(s) 1m aring of facilities, equipment, mailing lists, or other assets with related organization(s) 1m aring of paid employees with related organization(s) 1m aring of paid employees with related organization(s) 1m aring of paid employees with related organization(s) 1n bimbursement paid to related organization(s) for expenses 1p bimbursement paid by related organization(s) for expenses 1p her transfer of cash or property to related organization(s) 1r her transfer of cash or property from related organization(s) 1s

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
<u>(1)</u>			
(2)			
<u>(3)</u>			
<u>(4)</u>			
<u>(5)</u>			
(6)			

Schedule R (Form 990) 2021 SIERRA CLUB FOUNDATION

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	(b) Primary activity	(c)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e Are partne 501(org Yes	e) all rs sec. c)(3) s.? No	(f) Share of total income	(g) Share of end-of-year assets	(ř Dispr tior allocat Yes	n) opor- late tions? No	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) Genera manag partne Yes	N or Pe ing or? ON	(k) ercentage ownership

Schedule R (Form 990) 2021