| Form | <b>990</b> |
|------|------------|
|------|------------|

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



Department of the Treasury Internal Revenue Service

| <u>A</u> F                     | or the                                    | e 2022 calendar year, or tax year beginning and  | lending         |                              |  |
|--------------------------------|---|--|-----------------|------------------------------|--|
| <b>В</b> с<br>а                | heck if pplicable: C Name of organization |  |                 | D Employer identifie         | cation number                                |
|                                | Address SIERRA CLUB FOUNDATION            |  |                 |                              | 0.0  |
|                                | _chang<br>⊐Initia                         |  | 1               | 94-60698                     |  |
|                                | return                                    | Number and street (or P.O. box if mail is not delivered to street address)                     | Room/suite      |                              |  |
|                                | Final<br>return                           |  | 1250            | 415-995-                     |  |
|                                | termir<br>ated                            | City or town, state or province, country, and ZIP or foreign postal code                       |                 | <b>G</b> Gross receipts \$   | 123,320,152.                                 |
|                                | Amen<br>return                            | oAKLAND, CA 94612  |                 | H(a) Is this a group re      | eturn  |
|                                | Applic distance                           | <sup>a-</sup> F Name and address of principal officer: DAN CHU                                 |                 | for subordinates             |  |
|                                | pendi                                     | SAME AS C ABOVE  |                 | H(b) Are all subordinates in |  |
| I T                            | ax-ex                                     | empt status: X 501(c)(3) 501(c) ( ) (insert no.) 4947(a)(1)                                    | or 52           |                              | list. See instructions                       |
|                                | Vebsi                                     |  |                 | H(c) Group exemptio          |  |
|                                |   | organization: X Corporation Trust Association Other  | L Voo           |                              | A State of legal domicile: CA                |
|                                | nrt I                                     | Summary  |                 |                              | VI State of legal dominine. CA               |
|                                |   | Briefly describe the organization's mission or most significant activities: <u>EDUC</u>        | יא ידי די אי    |                              |  |
| ള                              |   | PROTECT AND IMPROVE THE NATURAL AND HUMAN  |                 |                              |  |
| Governance                     |   |  |                 |                              |  |
| EL                             |   | Check this box if the organization discontinued its operations or dispo                        |                 |                              |  |
| Š                              |   |  |                 | <u>3</u>                     | 15   |
| ن<br>ه                         |   | Number of independent voting members of the governing body (Part VI, line 1b)                  |                 |                              | 15   |
| es                             |   | Total number of individuals employed in calendar year 2022 (Part V, line 2a) $\ldots$          |                 |                              | 19   |
| Activities &                   | 6   | Total number of volunteers (estimate if necessary)   |                 | 6                            | 27   |
| lct.                           |   |  |                 | <u>7a</u>                    | 3,463.                                       |
| _                              | b   | Net unrelated business taxable income from Form 990-T, Part I, line 11                         | <u></u>         |                              | 0.   |
|                                |   |  |                 | Prior Year                   | Current Year                                 |
| പ                              | 8   | Contributions and grants (Part VIII, line 1h)  |                 | 100,459,492.                 | 83,355,015.                                  |
| ň                              | 9   | Program service revenue (Part VIII, line 2g)   |                 | 0.                           | 0.   |
| Revenue                        | 10  | Investment income (Part VIII, column (A), lines 3, 4, and 7d)                                  |                 | 6,916,780.                   | 3,116,739.                                   |
| ۳                              | 11  | Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)                       |                 | 1,270,422.                   | 1,275,105.                                   |
|                                |   | Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)             |                 | 108,646,694.                 | 87,746,859.                                  |
|                                |   | Grants and similar amounts paid (Part IX, column (A), lines 1-3)                               |                 | 84,223,340.                  | 96,749,331.                                  |
|                                |   | Benefits paid to or for members (Part IX, column (A), line 4)                                  |                 | 0.                           | 0.   |
| <i>"</i>                       |   | Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)              |                 | 1,521,499.                   | 1,880,859.                                   |
| še                             |   | Professional fundraising fees (Part IX, column (A), line 11e)                                  |                 | 0.                           | 0.   |
| Expenses                       |   | Total fundraising expenses (Part IX, column (D), line 25) 13,661,8                             | 30.             | -                            |  |
| ă                              |   | Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)                                   |                 | 13,314,363.                  | 14,818,216.                                  |
|                                |   | Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)                      |                 |                              | 113,448,406.                                 |
|                                |   | Revenue less expenses. Subtract line 18 from line 12   |                 | 9,587,492.                   | -25,701,547.                                 |
| - 9                            |   |  | B               | eginning of Current Year     | End of Year                                  |
| Net Assets or<br>-und Balances | 00  | Total assets (Part X, line 16)   |                 | 273,113,077.                 | 207,976,050.                                 |
| \sse<br>Bali                   | 20  | Total assets (Part X, line 16)<br>Total liabilities (Part X, line 26)                          | ······ <u> </u> | 39,198,961.                  | 31,031,726.                                  |
| et ∕                           | 21  |  |                 | 233,914,116.                 | 176,944,324.                                 |
|                                | 22<br>Irt II                              | Net assets or fund balances. Subtract line 21 from line 20                                     |                 | 233,914,110.                 | 1/0,944,324.                                 |
|                                |   | · ·  |                 |                              | . Increased and an and the state of the term |
|                                |   | Ities of perjury, I declare that I have examined this return, including accompanying schedule  |                 |                              | / knowledge and bellet, it is                |
| true,                          | correc                                    | t, and complete. Declaration of preparer (other than officer) is based on all information of w | nich prepare    |                              | )  |
| _                              |   | Signature of officer   |                 | <u>10/19/23</u><br>Date      | )  |
| Sigr                           |   |  |                 | Dale                         |  |
| Here                           | е   | KEVIN MCGAHAN, CFO   |                 |                              |  |
|                                |   | Type or print name and title   | <u> </u>        | Data La -                    |  |
| _                              |   | Print/Type preparer's name Preparer's structure  |                 | Date                         |  |
| Paid                           |   |  |                 | 10/18/23                     |  |
| Prep                           |   | Firm's name HOOD & STRONG LLP  |                 | Firm's EIN 9                 | 4-1254756                                    |
| Use                            | Only                                      | Firm's address 60 SO. MARKET ST, STE 200   |                 |                              |  |

SAN JOSE, CA 95113

Phone no. 408.998.8400

(Rev. January 2022)

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

Department of the Treasury Internal Revenue Service

| - | Eilo a | conarato | application | for one | h roturn  |
|---|--------|----------|-------------|---------|-----------|
| - | Flie a | Sevarate | application | IUI Eau | n return. |

► 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.

| Туре ог   |   |  |   | Taxpayer identification number (TIN) |  |                                    |
|---|---|--|---|--------------------------------------|--|------------------------------------|
| print   | SIERRA CLUB FOUNDATION  |  |   |                                      | 94-60  | 69890                              |
| File by the due date for filing your 2101 WEBSTER STREET 1250 |   |  |   |                                      |  |                                    |
| return. See   | · · · · · · · · · · · · · · · · · · ·   | oreign addi                                | ress, see instructions.   |                                      |  |                                    |
| Enter th  | e Return Code for the return that this application is for (fil  | le a separat                               | te application for each return)   |                                      |  |                                    |
| Applica   | tion  | Return                                     | Application   |                                      |  | Return                             |
| ls For  |   | Code                                       | Is For  |                                      |  | Code                               |
| Form 99   | 00 or Form 990-EZ   | 01   | Form 1041-A   |                                      |  | 08                                 |
| Form 47   | 720 (individual)  | 03   | Form 4720 (other than individual)   |                                      |  | 09                                 |
| Form 99   | 90-PF   | 04   | Form 5227   |                                      |  | 10                                 |
| Form 99   | 90-T (sec. 401(a) or 408(a) trust)  | 05   | Form 6069   |                                      |  | 11                                 |
| Form 99   | 90-T (trust other than above)   | 06   | Form 8870   |                                      |  | 12                                 |
| Form 99   | 00-T (corporation)<br>KEVIN MCGAHAN   | 07   |   |                                      |  |                                    |
| • If this<br>box ><br>1 In<br>the<br>b                        | e organization does not have an office or place of business<br>is is for a Group Return, enter the organization's four digit<br>. If it is for part of the group, check this box ▶<br>request an automatic 6-month extension of time until<br>the organization named above. The extension is for the org<br>. X calendar year 2022 or<br>. tax year beginning<br>the tax year entered in line 1 is for less than 12 months, of<br>Change in accounting period | Group Exe and atta NOVEN panization's , an | mption Number (GEN) I<br>uch a list with the names and TINs of<br>MBER 15, 2023 , to file<br>return for:<br>Id ending | f this is fo<br>all membe            | r the whole of<br>ers the exter<br>opt organizat | group, check this<br>nsion is for. |
|   | this application is for Forms 990-PF, 990-T, 4720, or 6069  | 9, enter the                               | tentative tax, less   |                                      | •  | 0                                  |
|   | ny nonrefundable credits. See instructions.   |  |   | 3a                                   | \$   | 0.                                 |
|   | this application is for Forms 990-PF, 990-T, 4720, or 6069  |  |   | 3b                                   | \$   | 0.                                 |
| _   | stimated tax payments made. Include any prior year overp<br>alance due. Subtract line 3b from line 3a. Include your pa  |  |   | 30                                   | Ψ  | 0.                                 |
|   | sing EFTPS (Electronic Federal Tax Payment System). Se  |  |   | 3c                                   | \$   | 0.                                 |
|   | If you are going to make an electronic funds withdrawal   | l (direct det                              | bit) with this Form 8868, see Form 84   |                                      | d Form 8879                                      |                                    |

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| Form       | 990 (2022) SIERRA CLUB FOUNDATION   | 94-6069890               | Page <b>2</b>    |
|------------|---|--------------------------|------------------|
| Pa         | t III Statement of Program Service Accomplishments  |                          |                  |
|            | Check if Schedule O contains a response or note to any line in this Part III  | <u></u>                  | 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?   |                          | XNo              |
|            | If "Yes," describe these new services on Schedule O.  |                          |                  |
| 3          | Did the organization cease conducting, or make significant changes in how it conducts, any program services?                            | Ves                      | XNo              |
| 0          | 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 i                        | massured by expenses     |                  |
| 4          |   |                          |                  |
|            | Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other                      | s, the total expenses, a | Ina              |
| 4 -        | revenue, if any, for each program service reported.<br>(Code: ) (Expenses \$ 32,282,148. including grants of \$ 32,282,148. ) (Reven    |                          | 0.               |
| 4a         | (Code:) (Expenses \$32,282,148. including grants of \$32,282,148. ) (Reven<br>BEYOND COAL – THE LONG-TERM GOAL OF THIS PROGRAM IS TO R. |                          | 0.               |
|            | SOCIAL, ECONOMIC AND ENVIRONMENTAL DAMAGE CAUSED BY GLOB.   |                          |                  |
|            | CHANGE BY WORKING TO ENSURE OUR ELECTRICITY IS CARBON-FR  |                          | משו              |
|            |   |                          |                  |
|            | THAN 2030 AND TRANSITIONING TO 100 PERCENT CLEAN RENEWAB  |                          |                  |
|            | LATER THAN 2050. THE PROGRAM'S SPECIFIC GOALS - WORKING   |                          |                  |
|            | WITH ALLIED ORGANIZATIONS - ARE TO RETIRE EXISTING COAL   |                          | ENT              |
|            | CONSTRUCTION OF NEW COAL-FIRED POWER PLANTS, BLOCK EXPAN  |                          | 110              |
|            | U.S. GAS FLEET, STOP INFRASTRUCTURE PROJECTS DESIGNED TO  |                          | AND              |
|            | INCREASE OVERSEAS EXPORTS OF COAL AND GAS, AND PROMOTE C  |                          | ~-               |
|            | ALTERNATIVES SUCH AS WIND AND SOLAR WHILE ADVANCING EQUI  |                          | CE,              |
|            | AND ENSURING A JUST ECONOMIC TRANSITION FOR WORKERS AND   | IMPACTED                 |                  |
|            | COMMUNITIES.  |                          |                  |
| 4b         | (Code:) (Expenses \$ 17,202,850. including grants of \$ 17,202,850. ) (Reven  |                          | 0.               |
|            | OUR WILD AMERICA - THE GOAL OF THIS PROGRAM IS TO PROTECT   |                          |                  |
|            | AND RESTORE PUBLIC AND PRIVATE LANDS TO RETAIN NATURAL S  | YSTEMS AND               |                  |
|            | BENEFIT PRESENT AND FUTURE GENERATIONS, ESPECIALLY IN A   |                          |                  |
|            | CLIMATE-CHANGING WORLD. THE CAMPAIGN CONTINUES THE SIERR  |                          | ACY              |
|            | OF PROTECTING PUBLIC LANDS AND WILD PLACES; GETTING PEOP:   |                          |                  |
|            | ECONOMIC LINES, CULTURES, AND COMMUNITIES - INCLUDING MI  |                          |                  |
|            | YOUTH - OUT IN NATURE; GIVING GRASSROOTS VOLUNTEERS THE   |                          |                  |
|            | RESOURCES NEEDED TO PROTECT THE ENVIRONMENT NATIONALLY A  |                          |                  |
|            | COMMUNITIES; AND EXPANDING AND DIVERSIFYING THE ENVIRONM  |                          |                  |
|            | THE OUR WILD AMERICA CAMPAIGN IS ADVANCING THREE STRATEG  |                          |                  |
|            | (1) OPPOSING DIRTY FUELS EXTRACTION, PARTICULARLY ON PUB  |                          | 2)               |
|            | PROTECTING LANDS, WATER, AND WILDLIFE, AND (3) GETTING P  |                          |                  |
| 4c         |   |                          | 0.               |
|            | CHAPTER AND GROUP EDUCATION PROJECT (CGEP) - THIS PROJECT   |                          |                  |
|            | STATE AND LOCAL CHAPTERS AND GROUPS OF THE SIERRA CLUB I  |                          |                  |
|            | EDUCATE THE PUBLIC ABOUT THE THREATS TO THE ENVIRONMENT A   |                          |                  |
|            | SOLUTIONS AVAILABLE TO THEM. THE OVERARCHING GOALS OF THE   | E CGEP ARE T             | 0                |
|            | PROTECT THE NATURAL AND HUMAN ENVIRONMENT FOR THE BENEFIC   | T OF THE                 |                  |
|            | GENERAL PUBLIC, TO ENFORCE LOCAL AND FEDERAL LAWS IN THE  | PUBLIC                   |                  |
|            | INTEREST, AND TO TRAIN AND PREPARE ACTIVISTS FOR PUBLIC J   | ADVOCACY ON              |                  |
|            | BEHALF OF ENVIRONMENTAL PROTECTION. IT IS A PROJECT THROW   | UGH WHICH TH             | Έ                |
|            | SIERRA CLUB FOUNDATION WORKS TO ACHIEVE ITS MISSION TO E  | DUCATE AND               |                  |
|            | EMPOWER PEOPLE TO PROTECT AND IMPROVE THE NATURAL AND HU  |                          |                  |
|            | ENVIRONMENT.  | -                        |                  |
|            |   |                          |                  |
| <b>4</b> d | Other program services (Describe on Schedule O.)  |                          |                  |
| τu         | (Expenses \$ 36,938,112. including grants of \$ 36,337,997.) (Revenue \$  | 0.)                      |                  |
| 40         | Total program service expenses       97,349,446.  | ••)                      |                  |
| 4e         | וטנמו אוטנימון אוואפראוטר פארטואפט אין אין איז אין איז  | <b>(</b>                 | <b>990</b> (2022 |
|            | SEE SCHEDULE O FOR CONTINUATION (S  |                          |                  |
| .32002     | 12-13-22 SEE SCREDULE O FOR CONTINUATION (S   | · ,                      |                  |

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|-----------------|-------------|-----------|
| <b>TOOOTOTO</b> | , 3 8 8 8 ± | 0 - 0 0 0 |

2022.04030 SIERRA CLUB FOUNDATION 81036\_1

| Form  | aan | (2022) |
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| FUIII | 390 | 12022  |

|        |   |      | 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  | _    |     | 37       |
| -      | similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III   | 5    |     | <u> </u> |
| 6      | Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to   |      | x   |          |
| _      | provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I  | 6    |     |          |
| 7      | Did the organization receive or hold a conservation easement, including easements to preserve open space,   | _    |     | х        |
| ~      | the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II  | 7    |     |          |
| 8      | Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete  |      |     | x        |
| 0      | Schedule D, Part III  | 8    |     | <u> </u> |
| 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? |      |     |          |
|        |   | 9    |     | х        |
| 10     | If "Yes," complete Schedule D, Part IV<br>Did the organization, directly or through a related organization, hold assets in donor-restricted endowments  | 9    |     |          |
| 10     |   | 10   | x   |          |
| 11     | or in quasi endowments? <i>If</i> "Yes," <i>complete Schedule D, Part V</i><br>If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VII, 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,   |      |     |          |
| ü      | 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  |     | Х        |
| d      | Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in   |      |     |          |
|        | Part X, line 16? If "Yes," complete Schedule D, Part IX   | 11d  | Х   |          |
| е      | Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X   | 11e  | Х   |          |
| f      | Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses   |      |     |          |
|        | the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X  | 11f  | Х   |          |
| 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?   |      |     |          |
|        | 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  |     | <u> </u> |
| 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  |      |     | v        |
| 45     | or more? If "Yes," complete Schedule F, Parts I and IV  | 14b  |     | _X_      |
| 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   |      |     | v        |
| 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  |      |     | х        |
| 47     | 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, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I.</i> See instructions                                     | 17   |     | х        |
| 18     | Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines  |      |     | ~ * *    |
| 10     | 1c and 8a? If "Yes," complete Schedule G, Part II   | 18   |     | х        |
| 19     | Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If</i> "Yes,"   |      |     |          |
|        | complete Schedule G, Part III   | 19   |     | х        |
| 20a    | Did the organization operate one or more hospital facilities? <i>If</i> "Yes," <i>complete Schedule H</i>   | 20a  |     | X        |
|        | If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?  | 200  |     |          |
| 21     | Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or   |      |     |          |
| -      | domestic government on Part IX, column (A), line 1? <i>If</i> "Yes," <i>complete Schedule I, Parts I and II</i>   | 21   | x   |          |
| 232003 | 12-13-22  | Form |     | (2022)   |

232003 12-13-22

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| Form | 990 | (2022) |
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| Par    | Checklist of Required Schedules (continued)   |      |       |          |
|--------|---|------|-------|----------|
|        |   |      | Yes   | No       |
| 22     | Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on               |      |       |          |
|        | Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III   | 22   |       | X        |
| 23     | Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current |      |       |          |
|        | and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete              |      |       |          |
|        | Schedule J  | 23   | X     | <u> </u> |
| 24 a   | 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        |
|        | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?                           | 24b  |       | <u> </u> |
| 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  |       | <u> </u> |
|        | Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?                     | 24d  |       | <u> </u> |
| 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      |      |       |          |
|        | 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%                     |      |       |          |
|        | controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II                          | 26   |       | X        |
| 27     | Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, |      |       |          |
|        | creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled |      |       |          |
|        | entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III    | 27   |       | X        |
| 28     | Was the organization a party to a business transaction with one of the following parties (see 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? /f            |      |       |          |
|        | "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  |       | Х        |
| 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 |      |       |          |
|        | contributions? If "Yes," complete Schedule M  | 30   |       | X        |
| 31     | Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I          | 31   |       | Х        |
| 32     | Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete            |      |       |          |
|        | Schedule N, Part II   | 32   |       | X        |
| 33     | Did the organization own 100% of an entity disregarded as separate from the organization under Regulations                  |      |       |          |
|        | sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I   | 33   |       | X        |
| 34     | Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and   |      |       |          |
|        | Part V, line 1  | 34   | Х     |          |
|        | Did the organization have a controlled entity within the meaning of section 512(b)(13)?                                     | 35a  | Х     |          |
| b      | 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?              |      |       |          |
|        | Note: All Form 990 filers are required to complete Schedule O   | 38   | Х     |          |
| Par    |   |      |       |          |
|        | Check if Schedule O contains a response or note to any line in this Part V  |      |       |          |
|        |   |      | Yes   | No       |
|        | Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a14   |      |       |          |
|        | Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0  |      |       |          |
| С      | Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming          |      |       |          |
|        | (gambling) winnings to prize winners?   | 1c   | X     |          |
| 232004 | 12-13-22  | Form | 990 ( | (2022)   |

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| Form   | 990 (2022) SIERRA CLUB FOUNDATION  |              | 94-6069           | 890  | P   | age <b>5</b> |
|--------|--|--------------|-------------------|------|-----|--------------|
| Par    | 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           | 19                |      |     |              |
| b      | If at least one is reported on line 2a, did the organization file all required federal employment tax return                       | ıs?          |                   | 2b   | X   | <u> </u>     |
|        |  |              |                   | 3a   | Х   | <u> </u>     |
| b      | If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule (                        | o            |                   | 3b   | Х   | <u> </u>     |
| 4a     | At any time during the calendar year, did the organization have an interest in, or a signature or other a                          | uthority o   | ver, a            |      |     |              |
|        | financial account in a foreign country (such as a bank account, securities account, or other financial ac                          | ccount)?     |                   | 4a   |     | X            |
| b      | If "Yes," enter the name of the foreign country  |              |                   |      |     |              |
|        | See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Ac                              | counts (F    | BAR).             |      |     |              |
|        |  |              |                   | 5a   |     | X            |
|        | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transac                        |              |                   | 5b   |     | X            |
|        | If "Yes" to line 5a or 5b, did the organization file Form 8886-T?  |              |                   | 5c   |     | <u> </u>     |
| 6a     | Does the organization have annual gross receipts that are normally greater than \$100,000, and did the                             | e organiza   | tion solicit      | _    |     | v            |
|        | any contributions that were not tax deductible as charitable contributions?  |              |                   | 6a   |     | <u> </u>     |
| b      | If "Yes," did the organization include with every solicitation an express statement that such contribution                         | ons or gift  | S                 |      |     |              |
|        | were not tax deductible?   |              |                   | 6b   |     |              |
| 7      | Organizations that may receive deductible contributions under section 170(c).  |              |                   | _    |     | v            |
|        | Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and serv               | lices provi  | ded to the payor? | 7a   |     | X            |
|        |  |              |                   | 7b   |     |              |
| с      | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it wa                            | •            |                   | _    | 77  |              |
| _      | to file Form 8282?   |              |                   | 7c   | X   |              |
|        | If "Yes," indicate the number of Forms 8282 filed during the year  | 7d           | /                 | _    |     | v            |
| е      | Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit co                           |              |                   | 7e   |     | X<br>X       |
| f      | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra                          |              |                   | 7f   |     | <u> </u>     |
|        | If the organization received a contribution of qualified intellectual property, did the organization file For                      |              |                   | 7g   | v   |              |
| _      | If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organizat                        |              | Form 1098-C?      | 7h   | X   |              |
| 8      | Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained                                      | by the       |                   | -    |     |              |
|        |  |              |                   | 8    |     |              |
|        | Sponsoring organizations maintaining donor advised funds.  |              |                   |      |     |              |
|        |  |              |                   | 9a   |     |              |
|        |  |              |                   | 9b   |     |              |
| 10     | Section 501(c)(7) organizations. Enter:  |              |                   |      |     |              |
|        | Initiation fees and capital contributions included on Part VIII, line 12   | 10a          |                   |      |     |              |
|        | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  | 10b          |                   |      |     |              |
|        | Section 501(c)(12) organizations. Enter:   | [            |                   |      |     |              |
|        | Gross income from members or shareholders  | <u>11a</u>   |                   |      |     |              |
| b      | Gross income from other sources. (Do not net amounts due or paid to other sources against  |              |                   |      |     |              |
| 40     | amounts due or received from them.)  | <u>11b  </u> |                   | 10   |     |              |
|        | Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form                               |              |                   | 12a  |     |              |
|        | If "Yes," enter the amount of tax-exempt interest received or accrued during the year  | 12b          |                   |      |     |              |
| 13     | Section 501(c)(29) qualified nonprofit health insurance issuers.   |              |                   | 10-  |     |              |
| а      | Is the organization licensed to issue qualified health plans in more than one state?   |              |                   | 13a  |     |              |
| h      | Enter the amount of reserves the organization is required to maintain by the states in which the                                   |              |                   |      |     |              |
| U      | organization is licensed to issue qualified health plans   | 13b          |                   |      |     |              |
| •      |  | 13c          |                   |      |     |              |
|        | Enter the amount of reserves on hand<br>Did the organization receive any payments for indoor tanning services during the tax year? |              |                   | 14a  |     | X            |
|        | If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule                            |              |                   | 14a  |     |              |
| 15     | Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuner                              |              |                   | UFI  |     |              |
| .0     | excess parachute payment(s) during the year?   |              |                   | 15   |     | х            |
|        | If "Yes," see the instructions and file Form 4720, Schedule N.   |              |                   | 15   |     |              |
| 16     | Is the organization an educational institution subject to the section 4968 excise tax on net investment                            | income?      |                   | 16   |     | х            |
| 10     | If "Yes," complete Form 4720, Schedule O.  | income (     |                   | 10   |     |              |
| 17     | Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any act                             | ivities      |                   |      |     |              |
| .,     | that would result in the imposition of an excise tax under section 4951, 4952 or 4953?   |              |                   | 17   |     |              |
|        | If "Yes," complete Form 6069.  |              |                   |      |     |              |
| 232005 | 12-13-22   |              |                   | Form | 990 | (2022)       |
|        |  |              |                   |      | -   | ,/           |

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| Form 990 ( |   | 94-6069890                   | Page <b>6</b> |
|------------|---|------------------------------|---------------|
| Part VI    | Governance, Management, and Disclosure. For each "Yes" response to lines 2 through                    | 7b below, and for a "No" res | ponse         |
|            | to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See in |                              |               |
|            | Check if Schedule O contains a response or note to any line in this Part VI                           |                              | Χ             |

| Check if Schedule O contains a response or note to any line in this Part VI |  |
|---|--|
| Section A. Governing Body and Management                                    |  |

| Sec     | tion A. Governing body and Management  |           |             |        |        |          |  |
|---------|--|-----------|-------------|--------|--------|----------|--|
|         |  |           | 1 -         |        | Yes    | No       |  |
| 1a      | Enter the number of voting members of the governing body at the end of the tax year  | <u>1a</u> | 15          |        |        |          |  |
|         | 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.  |           | 15          |        |        |          |  |
|         | Enter the number of voting members included on line 1a, above, who are independent   | 1b        |             |        |        |          |  |
| 2       | Did any officer, director, trustee, or key employee have a family relationship or a business relationship  |           |             | •      |        | х        |  |
| •       | officer, director, trustee, or key employee?<br>Did the organization delegate control over management duties customarily performed by or under the       |           |             | 2      |        | <u> </u> |  |
| 3       |  |           |             | 3      |        | х        |  |
| 4       | Did the organization make any significant changes to its governing documents since the prior Form 9  |           | filod2      | 3<br>4 |        | X        |  |
| 4<br>5  | Did the organization become aware during the year of a significant diversion of the organization's ass   |           |             | 4<br>5 |        | X        |  |
| 6       |  |           |             | 6      |        | X        |  |
| 0<br>7a | Did the organization have members or stockholders?<br>Did the organization have members, stockholders, or other persons who had the power to elect or ap |           |             | -      |        |          |  |
| 74      | more members of the governing body?  |           |             | 7a     |        | х        |  |
| h       | Are any governance decisions of the organization reserved to (or subject to approval by) members, st   | ockhol    | ders or     | 74     |        |          |  |
|         | persons other than the governing body?   |           |             | 7b     |        | х        |  |
| 8       | Did the organization contemporaneously document the meetings held or written actions undertaken during the year  |           |             | 10     |        |          |  |
| а       | The governing body?  |           | -           | 8a     | х      |          |  |
| b       | 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 read   |           |             |        |        |          |  |
| -       | organization's mailing address? <i>If "Yes," provide the names and addresses on Schedule O</i>   |           |             | 9      |        | Х        |  |
| Sec     | tion B. Policies (This Section B requests information about policies not required by the Internal Re   | venue     | Code.)      |        |        |          |  |
|         |  |           |             |        | Yes    | No       |  |
| 10a     | Did the organization have local chapters, branches, or affiliates?   |           |             | 10a    |        | Х        |  |
| b       | If "Yes," did the organization have written policies and procedures governing the activities of such ch  | apters    | affiliates, |        |        |          |  |
|         | and branches to ensure their operations are consistent with the organization's exempt purposes?  |           |             | 10b    | X      |          |  |
| 11a     | 1a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?                           |           |             |        |        |          |  |
| b       | Describe on Schedule O the process, if any, used by the organization to review this Form 990.  |           |             |        |        |          |  |
| 12a     | Did the organization have a written conflict of interest policy? If "No," go to line 13  |           |             | 12a    | X<br>X |          |  |
| b       | <b>b</b> Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?             |           |             |        |        |          |  |
| С       | c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe                                     |           |             |        |        |          |  |
|         | on Schedule O how this was done  |           |             | 12c    | X      |          |  |
| 13      | Did the organization have a written whistleblower policy?  |           |             | 13     | X      |          |  |
| 14      | Did the organization have a written document retention and destruction policy?   |           |             | 14     | X      |          |  |
| 15      | Did the process for determining compensation of the following persons include a review and approva   | l by inc  | lependent   |        |        |          |  |
|         | persons, comparability data, and contemporaneous substantiation of the deliberation and decision?  |           |             | 15a    | x      |          |  |
|         | a The organization's CEO, Executive Director, or top management official   |           |             |        |        |          |  |
| b       | Other officers or key employees of the organization  |           |             | 15b    | X      |          |  |
| 16-     | If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.   | nont      | tha         |        |        |          |  |
| ioa     | Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangen taxable optity during the year?              |           |             | 16-2   |        | x        |  |
| h       | taxable entity during the year?<br>If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluat             |           |             | 16a    |        |          |  |
| D       | in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ  |           | -           |        |        |          |  |
|         |  | Ization   | 3           | 16b    |        |          |  |
| Sec     | exempt status with respect to such arrangements?   |           |             | 100    |        |          |  |
| 17      | List the states with which a copy of this Form 990 is required to be filed AL, AK, AR, CA, C   | 0,F       | GA, HI, IL, | KS.    | KY,    | ME       |  |
| 18      | Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, ar  |           |             |        |        |          |  |
| -       | 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  | on Sc     | hedule ()   |        |        |          |  |
| 19      | Describe on Schedule O whether (and if so, how) the organization made its governing documents, co  |           |             | financ | ia     |          |  |
|         | 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 boo   | oks and   | records     |        |        |          |  |
|         | KEVIN MCGAHAN - (415) 995-1780   |           |             |        |        |          |  |
|         | 2101 WEBSTER STREET, 1250, OAKLAND, CA 94612   |           |             |        |        |          |  |
| 232006  | 12-13-22   SEE SCHEDULE O FOR FULL LIST OF STATES  |           |             | Form   | 990    | (2022)   |  |
|         | 6  |           |             |        |        |          |  |

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| Employees, and Independent Contractors   |         |
|--|---------|
| Check if Schedule O contains a response or note to any line in this Part VII   | X       |
| Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees   |         |
| 1a Complete this table for all persons required to be listed. Benort compensation for the calendar year ending with or within the organization's t | ay vear |

ed to be listed. Report compensation enaing witi • 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."

SIERRA CLUB FOUNDATION

• 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, box 6 of 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                            |                       |         | ition        | than c                          | ne     | Reportable          | Reportable                                | Estimated                |
|                                     | hours per              | box,                           | , unle                | ss pei  | rson is      | s both<br>r/trust               | an     | compensation        | compensation                              | amount of                |
|                                     | week                   |                                | Jerai                 |         | recto        | rrusi                           | .ee)   | from                | from related                              | other                    |
|                                     | (list any<br>hours for | irecto                         |                       |         |              |                                 |        | the<br>organization | organizations<br>(W-2/1099-M <b>I</b> SC/ | compensation<br>from the |
|                                     | related                | e or c                         | stee                  |         |              | Isated                          |        | (W-2/1099-MISC/     | 1099-NEC)                                 | organization             |
|                                     | organizations          | truste                         | altrus                |         | yee          | mper                            |        | 1099-NEC)           | 1000 (120)                                | and related              |
|                                     | below                  | Individual trustee or director | Institutional trustee | er      | Key employee | est co<br>oyee                  | ier    | ,                   |   | organizations            |
|                                     | line)                  | Indiv                          | Instit                | Officer | Key e        | Highest compensated<br>employee | Former |                     |   |                          |
| (1) DAN CHU                         | 40.00                  |                                |                       |         |              |                                 |        |                     |   |                          |
| EXECUTIVE DIRECTOR                  |                        |                                |                       | Х       |              |                                 |        | 368,033.            | 0.  | 70,754.                  |
| (2) KEVIN MCGAHAN                   | 40.00                  |                                |                       |         |              |                                 |        |                     |   |                          |
| CHIEF FINANCIAL OFFICER             |                        |                                |                       | Х       |              |                                 |        | 280,728.            | 0.  | 56,797.                  |
| (3) HENRY HOLMES                    | 40.00                  |                                |                       |         |              |                                 |        |                     |   |                          |
| SR. DIRECTOR, PROGRAMS & COMPLIANCE |                        |                                |                       | Х       |              |                                 |        | 207,580.            | 0.  | 40,760.                  |
| (4) AGANA MORENO                    | 40.00                  |                                |                       |         |              |                                 |        |                     |   |                          |
| DIRECTOR OF FINANCE                 |                        |                                |                       | Х       |              |                                 |        | 163,883.            | 0.  | 46,835.                  |
| (5) JENNIE PALMER                   | 40.00                  |                                |                       |         |              |                                 |        |                     |   |                          |
| DIR. OF ADMIN & BOARD RELATIONS     |                        |                                |                       | Х       |              |                                 |        | 114,584.            | 0.  | 42,230.                  |
| (6) TING LEE                        | 40.00                  |                                |                       |         |              |                                 |        |                     |   |                          |
| ASST. DIR., PROGRAMS & COMPLIANCE   |                        |                                |                       |         |              | Х                               |        | 100,901.            | 0.  | 23,750.                  |
| (7) ROBIN MANN                      | 3.00                   |                                |                       |         |              |                                 |        |                     |   |                          |
| CHAIR                               |                        | Х                              |                       | Х       |              |                                 |        | 0.                  | 0.  | 0.                       |
| (8) GAIL GREENWALD                  | 3.00                   |                                |                       |         |              |                                 |        |                     |   |                          |
| CHAIR (THRU 05/20/22)               |                        | Х                              |                       | Х       |              |                                 |        | 0.                  | 0.  | 0.                       |
| (9) JOEL SANDERS                    | 2.00                   |                                |                       |         |              |                                 |        |                     |   |                          |
| VICE CHAIR                          |                        | Х                              |                       | Х       |              |                                 |        | 0.                  | 0.  | 0.                       |
| (10) JESSICA SAROWITZ               | 2.00                   |                                |                       |         |              |                                 |        |                     | -   | _                        |
| TREASURER                           |                        | Х                              |                       | X       |              |                                 |        | 0.                  | 0.  | 0.                       |
| (11) REBEKAH SAUL BUTLER            | 2.00                   |                                |                       |         |              |                                 |        |                     |   | _                        |
| SECRETARY                           |                        | Х                              |                       | X       |              |                                 |        | 0.                  | 0.  | 0.                       |
| (12) EVA KATHLEEN SCHULTE           | 1.00                   |                                |                       |         |              |                                 |        |                     |   |                          |
| MEMBER-AT-LARGE                     | 1 0 0                  | Х                              |                       | X       |              |                                 |        | 0.                  | 0.  | 0.                       |
| (13) DARREN ARONOFSKY               | 1.00                   |                                |                       |         |              |                                 |        |                     | •   | •                        |
| DIRECTOR (THRU 03/05/22)            | 1 00                   | X                              |                       |         |              |                                 |        | 0.                  | 0.  | 0.                       |
| (14) DONNEL BAIRD                   | 1.00                   |                                |                       |         |              |                                 |        |                     | •   | •                        |
| DIRECTOR                            | 1 00                   | Х                              |                       |         |              |                                 |        | 0.                  | 0.  | 0.                       |
| (15) LOREN BLACKFORD                | 1.00                   |                                |                       |         |              |                                 |        |                     | •   | •                        |
| DIRECTOR (THRU 08/15/22)            | 1 00                   | X                              |                       |         |              |                                 |        | 0.                  | 0.  | 0.                       |
| (16) RAMON CRUZ                     | 1.00                   |                                |                       |         |              |                                 |        |                     | •   | •                        |
| DIRECTOR                            | 1 00                   | X                              |                       |         |              |                                 |        | 0.                  | 0.  | 0.                       |
| (17) PEDRO HENRIQUES DA SILVA       | 1.00                   |                                |                       |         |              |                                 |        |                     | ^   | <u>^</u>                 |
| DIRECTOR                            |                        | Х                              |                       |         |              |                                 |        | 0.                  | 0.  | 0.                       |
| 232007 12-13-22                     |                        |                                |                       | _       | -            |                                 |        |                     |   | Form <b>990</b> (2022)   |

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Form 990 (2022)

| Form | 000 | (2022 |
|------|-----|-------|
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| Part VII Section A. Officers, Directors, Trus     | tees, Key Emp          | oloy                                    | ees,                  | anc     | d Hig                          | ghes                            | st C                       | ompensated Employee             | s (continued)                |                          |
|---|------------------------|---|-----------------------|---------|--------------------------------|---------------------------------|----------------------------|---------------------------------|------------------------------|--------------------------|
| (A)   | (B) (C)                |   |                       |         | (D)                            | (E)                             | (F)                        |                                 |                              |                          |
| Name and title                                    | Average Position       |   |                       |         |                                |                                 | ana                        | Reportable                      | Reportable                   | Estimated                |
|   | hours per              | hours per box, unless person is both an |                       |         |                                |                                 |                            | compensation                    | compensation                 | amount of                |
|   | week                   |   | cer and               | aaa     | recto                          | n/trus                          | lee)                       | from                            | from related                 | other                    |
|   | (list any<br>hours for | irecto                                  |                       |         |                                |                                 |                            | the                             | organizations                | compensation             |
|   | related                | e or di                                 | tee                   |         |                                | sated                           |                            | organization<br>(W-2/1099-MISC/ | (W-2/1099-MISC/<br>1099-NEC) | from the<br>organization |
|   | organizations          | ruste(                                  | trus:                 |         | ee                             | npen                            |                            | 1099-NEC)                       | 1099-NEC)                    | and related              |
|   | below                  | dual tr                                 | itiona                | _       | nploy                          | st cor<br>yee                   | al and a second            | 1000 NEO)                       |                              | organizations            |
|   | line)                  | Individual trustee or director          | Institutional trustee | Officer | Key employee                   | Highest compensated<br>employee | Former                     |                                 |                              |                          |
| (18) CLAIRE BROIDO JOHNSON                        | 1.00                   |   |                       |         |                                |                                 |                            |                                 |                              |                          |
| DIRECTOR  |                        | х                                       |                       |         |                                |                                 |                            | 0.                              | Ο.                           | 0.                       |
| (19) CHRISTIAN OKOYE                              | 1.00                   |   |                       |         |                                |                                 |                            |                                 |                              |                          |
| DIRECTOR  |                        | Х                                       |                       |         |                                |                                 |                            | 0.                              | 0.                           | 0.                       |
| (20) PETER LIU                                    | 1.00                   |   |                       |         |                                |                                 |                            |                                 |                              |                          |
| DIRECTOR  |                        | Х                                       |                       |         |                                |                                 |                            | 0.                              | 0.                           | 0.                       |
| (21) PAUL RISSMAN                                 | 1.00                   |   |                       |         |                                |                                 |                            |                                 |                              |                          |
| DIRECTOR  |                        | Х                                       |                       |         |                                |                                 |                            | 0.                              | 0.                           | 0.                       |
| (22) JILL SOFFER                                  | 1.00                   |   |                       |         |                                |                                 |                            |                                 |                              |                          |
| DIRECTOR  | 1 00                   | Х                                       |                       |         |                                |                                 |                            | 0.                              | 0.                           | 0.                       |
| (23) STEPH SPEIRS                                 | 1.00                   | 37                                      |                       |         |                                |                                 |                            |                                 | 0                            |                          |
| DIRECTOR<br>(24) MARK WALTERS                     | 1.00                   | Х                                       |                       |         |                                |                                 |                            | 0.                              | 0.                           | 0.                       |
| DIRECTOR  | 1.00                   | x                                       |                       |         |                                |                                 |                            | 0.                              | 0.                           | o.                       |
| DIRECTOR  |                        | Δ                                       |                       |         |                                |                                 |                            | 0.                              | 0.                           | 0.                       |
|   |                        |   |                       |         |                                |                                 |                            |                                 |                              |                          |
|   |                        |   |                       |         |                                |                                 |                            |                                 |                              |                          |
|   |                        |   |                       |         |                                |                                 |                            |                                 |                              |                          |
| 1b Subtotal                                       |                        |   |                       |         |                                |                                 |                            | 1,235,709.                      | 0.                           | 281,126.                 |
| c Total from continuation sheets to Part VI       |                        |   |                       |         |                                |                                 |                            | 0.                              | 0.                           | 0.                       |
| d Total (add lines 1b and 1c)                     |                        |   |                       |         |                                |                                 |                            | 1,235,709.                      | 0.                           | 281,126.                 |
| 2 Total number of individuals (including but n    |                        |   |                       |         |                                |                                 |                            | eceived more than \$100.        | 000 of reportable            |                          |
| compensation from the organization                |                        |   |                       |         |                                | ,                               |                            |                                 |                              | 6                        |
|   |                        |   |                       |         |                                |                                 |                            |                                 |                              | Yes No                   |
| 3 Did the organization list any former officer,   | director, truste       | e, k                                    | ey e                  | mpl     | loye                           | e, or                           | hig                        | hest compensated empl           | oyee on                      |                          |
| line 1a? If "Yes," complete Schedule J for s      | uch individual         |   |                       |         |                                |                                 |                            |                                 |                              | 3 X                      |
| 4 For any individual listed on line 1a, is the su |                        |   |                       |         |                                |                                 |                            |                                 |                              |                          |
| and related organizations greater than \$150      | 0,000? If "Yes,        | " со                                    | mple                  | ete S   | Sche                           | edule                           | e J f                      | for such individual             |                              | 4 X                      |
| 5 Did any person listed on line 1a receive or a   |                        |   |                       |         | -                              |                                 |                            |                                 | lual for services            |                          |
| rendered to the organization? If "Yes," com       | plete Schedule         | e J fo                                  | or su                 | ch r    | oers                           | on .                            |                            |                                 |                              | 5 X                      |
| Section B. Independent Contractors                |                        |   |                       |         |                                |                                 |                            |                                 |                              |                          |
| 1 Complete this table for your five highest con   | •                      |   |                       |         |                                |                                 |                            |                                 | · ·                          | tion from                |
| the organization. Report compensation for t       | he calendar ye         | ear e                                   | ndin                  | g w     | rith c                         | or wi                           | thin<br>T                  |                                 | ear.                         |                          |
| (A)<br>Name and business address                  |                        |   |                       |         | <b>(B)</b><br>Description of s | ervices                         | <b>(C)</b><br>Compensation |                                 |                              |                          |
| KPMG, LLP, DEPT. 0922 P.O. BOX 120922,            |                        |   |                       |         |                                |                                 |                            |                                 |                              |                          |
| DALLAS, TX 75312-0922                             | • DOM I                | 20                                      | 221                   | Δ,      |                                |                                 |                            | AUDIT FEES                      |                              | 124,244.                 |
| FUND EVALUATION GROUP                             |                        |   |                       |         |                                |                                 |                            |                                 |                              |                          |
| PO BOX 639176, CINCINNATI, OH 45263-9176          |                        |   |                       |         | INVESTMENT F                   | EES                             | 117,621.                   |                                 |                              |                          |
|   |                        |   |                       |         |                                |                                 |                            |                                 | 1                            | ·                        |
|   |                        |   |                       |         |                                |                                 |                            |                                 |                              |                          |
|   |                        |   |                       |         |                                |                                 |                            |                                 |                              |                          |
|   |                        |   |                       |         |                                |                                 |                            |                                 |                              |                          |
|   |                        |   |                       |         |                                |                                 |                            |                                 |                              |                          |
|   |                        |   |                       |         |                                |                                 |                            |                                 |                              |                          |

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

Form **990** (2022)

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8 2022.04030 SIERRA CLUB FOUNDATION 81036\_1

|   |      |        | SIERRA CL  | UB F   | OUNDATION               |                             |  | 94-6069                                     | 890 Page 9   |
|---|------|--------|--|--------|-------------------------|-----------------------------|--|---|--|
| Pa  | rt \ | /111   | Statement of Revenue                                   |        |                         |                             |  |   |  |
|   |      |        | Check if Schedule O contains a res                     | sponse | or note to any line     |                             |  | ( <u>)</u>                                  |  |
|   |      |        |  |        |                         | <b>(A)</b><br>Total revenue | (B)<br>Related or exempt<br>function revenue | <b>(C)</b><br>Unrelated<br>business revenue | <b>(D)</b><br>Revenue excluded<br>from tax under<br>sections 512 - 514 |
| s<br>S<br>S   | 1    | а      | Federated campaigns1                                   | a      | 124,102.                |                             |  |   |  |
| Contributions, Gifts, Grants<br>and Other Similar Amounts | -    |        | Membership dues 1                                      |        |                         |                             |  |   |  |
| ,<br>Mo   |      |        |  | с      |                         |                             |  |   |  |
| ar A  |      |        | Related organizations1                                 | d      |                         |                             |  |   |  |
| s, o  |      | е      | Government grants (contributions)                      | e      |                         |                             |  |   |  |
| tior<br>sr S  |      | f      | All other contributions, gifts, grants, and            |        |                         |                             |  |   |  |
| ibu   |      |        | similar amounts not included above 1                   |        | 83,230,913.             |                             |  |   |  |
| onti<br>nd (  |      | -      |  | g  \$  | 1,456,642.              | 03 3EE 01E                  |  |   |  |
| <u>o</u> e  |      | h      | Total. Add lines 1a-1f                                 |        | Business Code           | 83,355,015.                 |  |   |  |
|   |      | _      |  |        | Business Code           |                             |  |   |  |
| Program Service<br>Revenue                                | 2    | a<br>b |  |        |                         |                             |  |   |  |
| Ser   |      | с<br>С |  |        |                         |                             |  |   |  |
| s me  |      | d      |  |        |                         |                             |  |   |  |
| Be  |      | e      |  |        |                         |                             |  |   |  |
| Pre   |      | f      | All other program service revenue                      |        |                         |                             |  |   |  |
|   |      | g      | Total. Add lines 2a-2f                                 |        |                         |                             |  |   |  |
|   | 3    |        | Investment income (including dividend                  |        |                         |                             |  |   |  |
|   |      |        |  |        |                         | 2,157,242.                  |  |   | 2157242.   |
|   | 4    |        | Income from investment of tax-exempt                   | -      |                         |                             |  |   |  |
|   | 5    |        | Royalties  |        |                         |                             |  |   |  |
|   |      |        |  | ieal   | (ii) Personal           |                             |  |   |  |
|   | 6    | a      | Gross rents 6a   |        |                         |                             |  |   |  |
|   |      | b      | Less: rental expenses 6b<br>Rental income or (loss) 6c |        | <u> </u>                |                             |  |   |  |
|   |      |        | Not rental income or (loss)                            |        | -                       |                             |  |   |  |
|   | 7    |        | Gross amount from sales of (i) Sec                     |        | (ii) Other              |                             |  |   |  |
|   | -    | •      | assets other than inventory <b>7a</b> 36,53            |        |                         |                             |  |   |  |
|   |      | b      | Less: cost or other basis                              |        |                         |                             |  |   |  |
| en  |      |        | and sales expenses                                     | 3,293. |                         |                             |  |   |  |
| venue   |      | с      | Gain or (loss)   | 9,497. |                         |                             |  |   |  |
| Re  |      | d      | Net gain or (loss)                                     | ·····  |                         | 959,497.                    |  |   | 959,497.   |
| Other   | 8    | а      | Gross income from fundraising events (not              |        |                         |                             |  |   |  |
| ō   |      |        | including \$ c   |        |                         |                             |  |   |  |
|   |      |        | contributions reported on line 1c). See                |        |                         |                             |  |   |  |
|   |      | L      | Part IV, line 18<br>Less: direct expenses              |        |                         |                             |  |   |  |
|   |      |        | Net income or (loss) from fundraising e                |        | -                       |                             |  |   |  |
|   | 9    |        | Gross income from gaming activities.                   |        |                         |                             |  |   |  |
|   | ĺ    | -      | Part IV, line 19                                       |        |                         |                             |  |   |  |
|   |      | b      | Less: direct expenses                                  |        |                         |                             |  |   |  |
|   |      |        | Net income or (loss) from gaming activ                 |        |                         |                             |  |   |  |
|   | 10   | а      | Gross sales of inventory, less returns                 |        |                         |                             |  |   |  |
|   |      |        | and allowances   |        |                         |                             |  |   |  |
|   |      |        | Less: cost of goods sold                               |        |                         |                             |  |   |  |
|   |      | С      | Net income or (loss) from sales of inver               | ntory  |                         |                             |  |   |  |
| sn  |      | _      |  |        | Business Code<br>900099 | 1 250 072                   |  |   | 1250072.   |
| Miscellaneous<br>Revenue                                  | 11   |        | SOFTWARE COST REIMBURSEMENT<br>MISCELLANEOUS INCOME    |        | 900099                  | 1,250,072.<br>21,570.       |  |   | 21,570.  |
| scellaneo<br><u>Revenue</u>                               |      | ~      | PARTNERSHIP K-1 INCOME                                 |        | 900099                  | 3,463.                      |  | 3,463.                                      | ZI, 570.   |
| Be  |      | -      | All other revenue                                      |        |                         | 5,105.                      |  | ,,,,  |  |
| Σ   |      |        | Total. Add lines 11a-11d                               |        | ·+                      | 1,275,105.                  |  |   |  |
|   | 12   |        | Total revenue. See instructions                        |        |                         | 87,746,859.                 | 0.   | 3,463.                                      | 4388381.   |
| 23200   | 9 12 | -13-   |  |        |                         |                             |  |   | Form <b>990</b> (2022)   |

# Form 990 (2022) SIERRA CLUB FOUNDATION Part IX Statement of Functional Expenses

|          | Check if Schedule O contains a respon  |                              | this Part IX                              | (C)                                | <u>X</u>                              |
|----------|--|------------------------------|---|------------------------------------|---------------------------------------|
|          | not include amounts reported on lines 6b,<br>8b, 9b, and 10b of Part VIII.   | <b>(A)</b><br>Total expenses | <b>(B)</b><br>Program service<br>expenses | Management and<br>general expenses | <b>(D)</b><br>Fundraising<br>expenses |
| 1        | Grants and other assistance to domestic organizations  |                              |   |                                    |                                       |
|          | and domestic governments. See Part IV, line 21   | 96,748,906.                  | 96,748,906.                               |                                    |                                       |
| 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  | 105                          | 105                                       |                                    |                                       |
|          | individuals. See Part IV, lines 15 and 16  | 425.                         | 425.                                      |                                    |                                       |
| 4        | Benefits paid to or for members  |                              |   |                                    |                                       |
| 5        | Compensation of current officers, directors,   | 1 262 007                    |   | 1 0 0 4 6 2                        | 1 505                                 |
|          | trustees, and key employees  | 1,363,927.                   | 297,959.                                  | 1,064,463.                         | 1,505                                 |
| 6        | Compensation not included above to disqualified  |                              |   |                                    |                                       |
|          | persons (as defined under section $4958(f)(1)$ ) and   |                              |   |                                    |                                       |
| _        | persons described in section 4958(c)(3)(B)   | 260,735.                     | 56,959.                                   | 203,488.                           | 200                                   |
| 7        | Other salaries and wages   | 200,755.                     | 50,959.                                   | 203,400.                           | 288                                   |
| 8        | Pension plan accruals and contributions (include   | 27 400                       | 0 100                                     | 20 266                             | 41                                    |
| ~        | section 401(k) and 403(b) employer contributions)  | <u> </u>                     | 8,192.<br>29,817.                         | <u>29,266.</u><br>106,521.         | 41<br>151                             |
| 9        | Other employee benefits  | 82,209.                      | 17,959.                                   | 64,159.                            | 91                                    |
| 10       | Payroll taxes  | 02,209.                      | 17,959.                                   | 04,109.                            | 91                                    |
| 11       | Fees for services (nonemployees):  | 158,094.                     |   | 158,094.                           |                                       |
|          | Management   | 66,036.                      | 27,183.                                   | 38,853.                            |                                       |
|          |  | 135,194.                     | 27,103.                                   | 135,194.                           |                                       |
|          | Accounting   | 155,194.                     |   | 155,194.                           |                                       |
|          | Lobbying   |                              |   |                                    |                                       |
| -        | Professional fundraising services. See Part IV, line 17  | 323,650.                     | 69,000.                                   | 254,650.                           |                                       |
| f        | Investment management fees   | 525,050.                     | 09,000.                                   | 254,050.                           |                                       |
| g        |  | 11,670.                      |   | 11,670.                            |                                       |
| 40       | column (A), amount, list line 11g expenses on Sch O.)  | 11,070.                      |   | 11,070.                            |                                       |
| 12       | Advertising and promotion  | 254,997.                     | 50,921.                                   | 203,978.                           | 98                                    |
| 13       | Office expenses  | 1,258,996.                   | 50,521.                                   | 205,570.                           | 1,258,996                             |
| 14<br>15 | Information technology   | 1,230,330.                   |   |                                    | 1,230,330                             |
| 15<br>16 | Royalties  | 106,107.                     | 22,997.                                   | 83,058.                            | 52                                    |
| 16<br>17 | Occupancy<br>Travel  | 27,347.                      | 6,518.                                    | 20,816.                            | 13                                    |
| 17<br>18 | Payments of travel or entertainment expenses   | 27,517.                      | 0,510.                                    | 20,010.                            |                                       |
| 10       | for any federal, state, or local public officials  |                              |   |                                    |                                       |
| 19       | Conferences, conventions, and meetings   | 1,421.                       | 14.                                       | 1,407.                             |                                       |
| 20       | · · · · · · · · · · · · · · · · · · ·  | _,                           |   |                                    |                                       |
| 20       | Interest<br>Payments to affiliates   |                              |   |                                    |                                       |
| 22       | Depreciation, depletion, and amortization  | 3,891.                       | 843.                                      | 3,046.                             | 2                                     |
| 23       | Insurance  | 11,905.                      | 2,580.                                    | 9,319.                             | 6                                     |
| 24       | Other expenses. Itemize expenses not covered   |                              | _/  |                                    |                                       |
|          | above. (List miscellaneous expenses on line 24e. If<br>line 24e amount exceeds 10% of line 25, column (A),<br>amount, list line 24e expenses on Schedule 0.) |                              |   |                                    |                                       |
| а        | FUNDRAISING REIMB.   | 11,538,126.                  |   |                                    | 11,538,126                            |
| b        | OTHER/SOFTWARE LICENSE   | 900,872.                     | 9,173.                                    | 29,238.                            | 862,461                               |
| c        | REGULATORY COMPLIANCE  | 19,910.                      |   | 19,910.                            | , <u> </u>                            |
| d        |  |                              |   |                                    |                                       |
|          | All other expenses   |                              |   |                                    |                                       |
| 25       |  | 113,448,406.                 | 97,349,446.                               | 2,437,130.                         | 13,661,830                            |
| 26       | Joint costs. Complete this line only if the organization   |                              |   |                                    |                                       |
|          | reported in column (B) joint costs from a combined   |                              |   |                                    |                                       |
|          | educational campaign and fundraising solicitation.   |                              |   |                                    |                                       |
|          | Check here if following SOP 98-2 (ASC 958-720)   |                              |   |                                    |                                       |

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Form **990** (2022)

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Net Assets or Fund Balances

#### SIERRA CLUB FOUNDATION

Unsecured notes and loans payable to unrelated third parties

of Schedule D

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

Total liabilities and net assets/fund balances

parties, and other liabilities not included on lines 17-24). Complete Part X

| Form        | 990 ( |  | UNDATION                     |                                 | 94-     | 6069890 Page 11           |
|-------------|-------|--|------------------------------|---------------------------------|---------|---------------------------|
| Pa          | rt X  | Balance Sheet  |                              |                                 |         |                           |
|             |       | Check if Schedule O contains a response or not   | e to any line in this Part X |                                 | <u></u> |                           |
|             |       |  |                              | <b>(A)</b><br>Beginning of year |         | <b>(B)</b><br>End of year |
|             | 1     | Cash - non-interest-bearing  |                              |                                 | 1       |                           |
|             | 2     | Savings and temporary cash investments   |                              | 39,489,120.                     | 2       | 16,098,456.               |
|             | 3     | Pledges and grants receivable, net   |                              | 39,117,839.                     | 3       | 31,135,394.               |
|             | 4     | Accounts receivable, net   |                              | 1,967,532.                      | 4       | 2,813,697.                |
|             | 5     | Loans and other receivables from any current or  |                              |                                 |         |                           |
|             |       | trustee, key employee, creator or founder, subst   | antial contributor, or 35%   |                                 |         |                           |
|             |       | controlled entity or family member of any of thes  | e persons                    |                                 | 5       |                           |
|             | 6     | Loans and other receivables from other disqualif   | ïed persons (as defined      |                                 |         |                           |
|             |       | under section 4958(f)(1)), and persons described   | l in section 4958(c)(3)(B)   |                                 | 6       |                           |
| ន           | 7     | Notes and loans receivable, net  |                              | 2,891,007.                      | 7       | 4,600,956.                |
| Assets      | 8     | Inventories for sale or use  |                              |                                 | 8       |                           |
| Ř           | 9     |  |                              | 1,208,799.                      | 9       | 1,034,857.                |
|             | 10a   | Land, buildings, and equipment: cost or other  |                              |                                 |         |                           |
|             |       | basis. Complete Part VI of Schedule D  | 10a 214,471.                 |                                 |         |                           |
|             | b     | Less: accumulated depreciation   | 10b 127,298.                 | 91,065.                         | 10c     | 87,173.                   |
|             | 11    | Investments - publicly traded securities   |                              | 124,930,340.                    | 11      | 97,364,858.               |
|             | 12    | Investments - other securities. See Part IV, line 1  | 1                            | 35,054,562.                     | 12      | 32,210,048.               |
|             | 13    | Investments - program-related. See Part IV, line   | 11                           |                                 | 13      |                           |
|             | 14    | Intangible assets  |                              |                                 | 14      |                           |
|             | 15    | Other assets. See Part IV, line 11   |                              | 28,362,813.                     | 15      | 22,630,611.               |
|             | 16    | Total assets. Add lines 1 through 15 (must equa  |                              | 273,113,077.                    | 16      | 207,976,050.              |
|             | 17    | Accounts payable and accrued expenses  |                              | 963,244.                        | 17      | 1,317,283.                |
|             | 18    | Grants payable   |                              | 15,164,708.                     | 18      | 14,726,210.               |
|             | 19    | Deferred revenue   |                              |                                 | 19      |                           |
|             | 20    | Tax-exempt bond liabilities  |                              | 20                              |         |                           |
|             | 21    | Escrow or custodial account liability. Complete F  |                              |                                 | 21      |                           |
| Se          | 22    | Loans and other payables to any current or form  |                              |                                 |         |                           |
| iliti       |       | trustee, key employee, creator or founder, subst   |                              |                                 |         |                           |
| Liabilities |       | controlled entity or family member of any of thes  |                              |                                 | 22      |                           |
|             | 23    | Secured mortgages and notes payable to unrela  | ted third parties            |                                 | 23      |                           |
|             |       | I have a sum of a state of an effective as a supplet to the sum of the state of the | Labeland as easily a         |                                 |         |                           |

39,198,961. 31,031,726. 26 Total liabilities. Add lines 17 through 25 X Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33. 111,145,022. 81,497,990. Net assets without donor restrictions 27 Net assets with donor restrictions 122,769,094. 95,446,334. 28 Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. Capital stock or trust principal, or current funds 29 Paid-in or capital surplus, or land, building, or equipment fund 30 Retained earnings, endowment, accumulated income, or other funds 31 176,944,324. Total net assets or fund balances 233,914,116. 32 273,113,077. 207,976,050.

11

Form 990 (2022)

81036\_\_1

14,988,233.

24

25

33

23,071,009.

2022.04030 SIERRA CLUB FOUNDATION

| Form | 990 (2022) SIERRA CLUB FOUNDATION   | 94-     | -6069890   | Pa         | ge <b>12</b> |
|------|---|---------|------------|------------|--------------|
| Pa   | rt XI Reconciliation of Net Assets  |         |            |            |              |
|      | Check if Schedule O contains a response or note to any line in this Part XI   | <u></u> |            |            | Χ            |
|      |   |         |            |            |              |
| 1    | Total revenue (must equal Part VIII, column (A), line 12)   | 1       | 87,74      | 6,8        | 59.          |
| 2    | Total expenses (must equal Part IX, column (A), line 25)  | 2       | 113,44     | 8,4        | 06.          |
| 3    | Revenue less expenses. Subtract line 2 from line 1  | 3       | -25,70     | 1,5        | <u>47.</u>   |
| 4    | Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))                             | 4       | 233,91     | 4,1        | 16.          |
| 5    | Net unrealized gains (losses) on investments  | 5       | -31,61     | 4,4        | 36.          |
| 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       | 34         | 6,1        | 91.          |
| 10   | Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,                    |         |            |            |              |
|      | column (B))   | 10      | 176,94     | <u>4,3</u> | <u>24.</u>   |
| 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> |            |            |              |
|      |   |         |            | Yes        | No           |
| 1    | Accounting method used to prepare the Form 990: Cash X Accrual Other  |         |            |            |              |
|      | If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule        | Ο.      |            |            |              |
| 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          |              |
|      | 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?                        |         | <u>2</u> c | Х          |              |
|      | If the organization changed either its oversight process or selection process during the tax year, explain on Sch     | edule C |            |            |              |
| 3a   | As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the       |         |            |            |              |
|      | Uniform Guidance, 2 C.F.R. Part 200, Subpart F?   |         | <u>3a</u>  |            | X            |
| b    | If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required | ed aud  | it         |            |              |
|      | or audits, explain why on Schedule O and describe any steps taken to undergo such audits                              | <u></u> | 3b         |            |              |

Form **990** (2022)

| SCHE | DUL | E A |
|------|-----|-----|
|------|-----|-----|

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.

| l | OMB No. 1545-0047            |
|---|------------------------------|
| ſ | 2022                         |
|   | Open to Public<br>Inspection |

| Name of the | organization |
|-------------|--------------|
|-------------|--------------|

| Nar  | ne of t  | the organization                 |                         |                              |                          |                  |                   |              | dentification number       |
|------|--|----------------------------------|-------------------------|------------------------------|--------------------------|------------------|-------------------|--------------|----------------------------|
|      | _  |                                  | RA CLUB FOU             |                              |                          |                  |                   |              | 4-6069890                  |
| Pa   | rt I   | Reason for Public (              | Charity Status.         | (All organizations must c    | omp <b>l</b> ete th      | nis part.) S     | ee instruction    | s.           |                            |
| The  | organ  | ization is not a private found   | ation because it is: (F | or lines 1 through 12, c     | heck only (              | one box.)        |                   |              |                            |
| 1    | 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). |                                  |                         |                              |                          |                  |                   |              |                            |
| 2    | 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).)                    |                                  |                         |                              |                          |                  |                   |              |                            |
| 3    |  | A hospital or a cooperative      |                         |                              |                          | (h)(1)(A)(ii     | a                 |              |                            |
| 4    | H  | A medical research organization  |                         |                              |                          |                  | •                 | Viii) Enter  | the hospital's name        |
| 4    |  | city, and state:                 | alloh operated in cor   | junction with a hospital     | accombed                 | 11 SCC40         |                   |              | the hospital s hame,       |
| -    |  |                                  |                         |                              | or operat                |                  | vornmontal        | nit dooorib  | ad in                      |
| 5    |  | An organization operated for     |                         | lege of university owned     | or operation             | eu by a go       | ivernmental u     | nit describe |                            |
| _    |  | section 170(b)(1)(A)(iv). (C     |                         |                              |                          |                  |                   |              |                            |
| 6    |  | A federal, state, or local gov   | •                       |                              |                          |                  |                   | _            |                            |
| 7    | X  | An organization that norma       |                         | ntial part of its support fr | rom a gove               | ernmental        | unit or from th   | ne general ( | public described in        |
|      |  | section 170(b)(1)(A)(vi). (C     |                         |                              |                          |                  |                   |              |                            |
| 8    |  | A community trust describe       |                         |                              |                          |                  |                   |              |                            |
| 9    |  | An agricultural research org     | anization described     | in section 170(b)(1)(A)(     | ix) operate              | ed in conju      | inction 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  | e or                       |
|      |  | university:                      |                         |                              |                          |                  |                   |              |                            |
| 10   |  | An organization that norma       | Ily receives (1) more   | than 33 1/3% of its supp     | ort from c               | ontributior      | ns, membersh      | ip fees, and | d gross receipts from      |
|      |  | activities related to its exem   | npt functions, subjec   | t to certain exceptions; a   | and (2) no I             | more than        | 33 1/3% of its    | s support f  | rom gross investment       |
|      |  | income and unrelated busir       | ness taxable income     | (less section 511 tax) fro   | m busines                | ses acqui        | red by the org    | anization a  | after June 30, 1975.       |
|      |  | See section 509(a)(2). (Cor      | mplete Part III.)       |                              |                          |                  |                   |              |                            |
| 11   |  | An organization organized a      | and operated exclusi    | vely to test for public sat  | fety.See                 | section 50       | )9(a)(4) <b>.</b> |              |                            |
| 12   |  | An organization organized a      | and operated exclusi    | vely for the benefit of, to  | perform tl               | he functio       | ns of, or to ca   | rry out the  | purposes of one or         |
|      |  | more publicly supported or       | ganizations describe    | d in section 509(a)(1) o     | r section                | 509(a)(2).       | See section &     | 509(a)(3). 🤇 | Check the box on           |
|      |  | lines 12a through 12d that       | describes the type of   | f supporting organizatior    | n and com                | plete lines      | 12e, 12f, and     | 12g.         |                            |
| а    |  | <b>Type I.</b> A supporting orga | anization operated, si  | upervised, or controlled     | by its supp              | ported org       | anization(s), ty  | /pically by  | giving                     |
|      |  | the supported organization       | on(s) the power to reg  | gularly appoint or elect a   | majority o               | of the direc     | tors or trustee   | es of the su | upporting                  |
|      |  | organization. You must o         | omplete Part IV, Se     | ections A and B.             |                          |                  |                   |              |                            |
| b    |  | <b>Type II.</b> A supporting org |                         |                              | ion with its             | s supporte       | d organizatio     | n(s), by hav | /ing                       |
|      |  | control or management o          | f the supporting orga   | anization vested in the sa   | ame perso                | ns that co       | ntrol or manag    | ge the supp  | oorted                     |
|      |  | organization(s). You mus         |                         |                              | ·                        |                  |                   |              |                            |
| c    |  | Type III functionally inte       | -                       |                              | in connect               | tion with, a     | and functional    | lv integrate | ed with.                   |
|      | -  | its supported organization       |                         | ·                            |                          |                  |                   | , ,          | ,                          |
| c    |  | Type III non-functionally        |                         | -                            |                          |                  |                   | ted organiz  | zation(s)                  |
| -    |  | that is not functionally int     | •                       |                              |                          |                  |                   | •            |                            |
|      |  | requirement (see instructi       | •                       | • •                          |                          |                  | •                 | anation      |                            |
| _    |  | Check this box if the orga       |                         |                              |                          |                  |                   | II. Type III |                            |
|      |  | functionally integrated, or      |                         |                              |                          |                  | Type I, Type      | n, rype m    |                            |
| f    | Ente   | er the number of supported c     |                         |                              | • •                      |                  |                   |              |                            |
| c    |  | vide the following information   | •                       | d organization(s)            |                          |                  |                   |              |                            |
|      |  | i) Name of supported             | (ii) EIN                | (iii) Type of organization   | (iv) <b>I</b> s the orga | anization listed | (v) Amount of     | monetary     | (vi) Amount of other       |
|      | -  | organization                     |                         | (described on lines 1-10     | in your governi<br>Yes   | No               | support (see ir   | structions)  | support (see instructions) |
|      |  |                                  |                         | above (see instructions))    |                          |                  |                   |              |                            |
|      |  |                                  |                         |                              |                          |                  |                   |              |                            |
|      |  |                                  |                         |                              |                          |                  |                   |              |                            |
|      |  |                                  |                         |                              |                          |                  |                   |              |                            |
|      |  |                                  |                         |                              |                          |                  |                   |              |                            |
|      |  |                                  |                         |                              |                          |                  |                   |              |                            |
|      |  |                                  |                         |                              |                          |                  |                   |              |                            |
|      |  |                                  |                         |                              |                          |                  |                   |              |                            |
|      |  |                                  |                         |                              |                          |                  |                   |              |                            |
|      |  |                                  |                         |                              |                          |                  |                   |              |                            |
|      |  |                                  |                         |                              |                          |                  |                   |              |                            |
| Tota | al   |                                  |                         |                              |                          |                  |                   |              | 1                          |

|         | A (Form 990) 2022 |
|---------|-------------------|
| Part II | Support Sc        |

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) 2018                       | <b>(b)</b> 2019      | (c) 2020                              | (d) 2021            | (e) 2022           | (f) Total       |
| 1    | Gifts, grants, contributions, and            |                                |                      |                                       |                     |                    |                 |
|      | membership fees received. (Do not            |                                |                      |                                       |                     |                    |                 |
|      | include any "unusual grants.")               | 100689985                      | 115812118            | 92385175.                             | 100459492           | 83355015.          | 492701785       |
| 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              |                                |                      |                                       |                     |                    |                 |
| 4    | Total. Add lines 1 through 3                 | 100689985                      | 115812118            | 92385175.                             | 100459492           | 83355015.          | 492701785       |
| 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)                                   |                                |                      |                                       |                     |                    | 84954744.       |
| 6    | Public support. Subtract line 5 from line 4. |                                |                      |                                       |                     |                    | 407747041       |
|      | ction B. Total Support                       |                                |                      | •                                     | •                   | •                  | •               |
| Cale | ndar year (or fiscal year beginning in)      | (a) 2018                       | <b>(b)</b> 2019      | (c) 2020                              | (d) 2021            | (e) 2022           | (f) Total       |
| 7    | Amounts from line 4                          | 100689985                      | 115812118            | 92385175.                             | 100459492           | 83355015.          | 492701785       |
| 8    | Gross income from interest,                  |                                |                      |                                       |                     |                    |                 |
|      | dividends, payments received on              |                                |                      |                                       |                     |                    |                 |
|      | securities loans, rents, royalties,          |                                |                      |                                       |                     |                    |                 |
|      | and income from similar sources              | 1792310.                       | 1739560.             | 1650919.                              | 3684006.            | 2157242.           | 11024037.       |
| 9    | Net income from unrelated business           |                                |                      |                                       |                     |                    |                 |
|      | activities, whether or not the               |                                |                      |                                       |                     |                    |                 |
|      | business is regularly carried on             | -73.                           | -12,682.             | -152.                                 | 155.                | 3,463.             | -9,289.         |
| 10   | Other income. Do not include gain            |                                | -                    |                                       |                     |                    |                 |
|      | or loss from the sale of capital             |                                |                      |                                       |                     |                    |                 |
|      | assets (Explain in Part VI.)                 | 1163781.                       | 1482040.             | 1433336.                              | 1270267.            | 1271642.           | 6621066.        |
| 11   | Total support. Add lines 7 through 10        |                                |                      |                                       |                     |                    | 510337599       |
| 12   |  | etc. (see instructio           | ons)                 | •                                     | •                   | 12                 |                 |
| 13   | First 5 years. If the Form 990 is for th     |                                | -                    |                                       |                     | 01(c)(3)           |                 |
|      | organization, check this box and stop        | o here                         |                      | · · · · · · · · · · · · · · · · · · · |                     |                    |                 |
| Sec  | ction C. Computation of Publi                |                                |                      |                                       |                     |                    |                 |
| 14   | Public support percentage for 2022 (         | line 6, co <b>l</b> umn (f), d | ivided by line 11, o | column (f))                           |                     | 14                 | 79.90 %         |
|      | Public support percentage from 2021          |                                |                      |                                       |                     | 15                 | 81.48 %         |
|      | 33 1/3% support test - 2022. If the          |                                |                      |                                       |                     | ore, check this bo | x and           |
|      | stop here. The organization qualifies        |                                |                      |                                       |                     |                    | 77              |
| b    | 33 1/3% support test - 2021. If the o        | organization did no            | t check a box on I   |                                       |                     |                    |                 |
|      | and stop here. The organization qual         | lifies as a publicly s         | supported organiza   | ation                                 |                     |                    |                 |
| 17a  | 10% -facts-and-circumstances test            |                                |                      |                                       |                     |                    |                 |
|      | and if the organization meets the fact       | s-and-circumstance             | es test, check this  | box and stop he                       | re. Explain in Part | VI how the organiz | zation          |
|      | meets the facts-and-circumstances te         |                                |                      | -                                     |                     |                    |                 |
| b    | 10% -facts-and-circumstances test            | •                              | •                    |                                       | •                   |                    |                 |
|      | more, and if the organization meets th       | •                              |                      |                                       |                     |                    |                 |
|      | organization meets the facts-and-circ        |                                |                      |                                       |                     |                    |                 |
| 18   | Private foundation. If the organization      |                                | •                    |                                       |                     |                    | s               |
|      |  |                                |                      |                                       |                     |                    | (Form 990) 2022 |

232022 12-09-22

| Schedule A | (Form | 990 | 202 |
|------------|-------|-----|-----|
|            |       |     |     |

#### 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.)

| See  | ction A. Public Support  |                          |                      |                               |                     |                 |                        |
|------|--|--------------------------|----------------------|-------------------------------|---------------------|-----------------|------------------------|
| Cale | ndar year (or fiscal year beginning in)  | (a) 2018                 | <b>(b)</b> 2019      | (c) 2020                      | (d) 2021            | (e) 2022        | 2 (f) Total            |
| 1    | Gifts, grants, contributions, and  |                          |                      |                               |                     |                 |                        |
|      | membership fees received. (Do not  |                          |                      |                               |                     |                 |                        |
|      | include any "unusual grants.")   |                          |                      |                               |                     |                 |                        |
| 2    | Gross receipts from admissions,<br>merchandise sold or services per-<br>formed, or facilities furnished in<br>any activity that is related to the<br>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   |                          |                      |                               |                     |                 |                        |
|      | Amounts included on lines 1, 2, and  |                          |                      |                               |                     |                 |                        |
|      | 3 received from disqualified persons   |                          |                      |                               |                     |                 |                        |
| t    | Amounts included on lines 2 and 3 received<br>from other than disqualified persons that<br>exceed the greater of \$5,000 or 1% of the<br>amount on line 13 for the year                |                          |                      |                               |                     |                 |                        |
| c    | Add lines 7a and 7b  |                          |                      |                               |                     |                 |                        |
|      | Public support. (Subtract line 7c from line 6.)  |                          |                      |                               |                     |                 |                        |
| Se   | ction B. Total Support   |                          |                      | -                             |                     | -               |                        |
|      | ndar year (or fiscal year beginning in)  | (a) 2018                 | <b>(b)</b> 2019      | (c) 2020                      | (d) 2021            | (e) 2022        | 2 (f) Total            |
| 9    | Amounts from line 6  |                          |                      |                               |                     |                 |                        |
| 10a  | Gross income from interest,<br>dividends, payments received on<br>securities loans, rents, royalties,<br>and income from similar sources   |                          |                      |                               |                     |                 |                        |
| k    | Unrelated business taxable income  |                          |                      |                               |                     |                 |                        |
|      | (less section 511 taxes) from businesses   |                          |                      |                               |                     |                 |                        |
|      | acquired after June 30, 1975   |                          |                      |                               |                     |                 |                        |
| c    | Add lines 10a and 10b  |                          |                      |                               |                     |                 |                        |
|      | Net income from unrelated business<br>activities not included on line 10b,<br>whether or not the business is<br>regularly carried on   |                          |                      |                               |                     |                 |                        |
| 12   | Other income. Do not include gain<br>or loss from the sale of capital<br>assets (Explain in Part VI.)  |                          |                      |                               |                     |                 |                        |
| 13   | <b>Total support.</b> (Add lines 9, 10c, 11, and 12.)  |                          |                      |                               |                     |                 |                        |
|      | First 5 years. If the Form 990 is for th   | ne organization's f      | irst, second, third, | fourth, or fifth tax          | year as a section   | 501(c)(3) orgar | nization,              |
|      | check this box and <b>stop here</b>  |                          |                      | ·                             | ·····               |                 |                        |
| Se   | ction C. Computation of Publi  |                          |                      |                               |                     |                 |                        |
| 15   | Public support percentage for 2022 (I  | ine 8, column (f), c     | divided by line 13,  | column (f))                   |                     | 15              | %                      |
| 16   | Public support percentage from 2021  | Schedule A, Part         | III, line 15         |                               |                     | 16              | %                      |
| See  | ction D. Computation of Inves  | stment Incom             | e Percentage         |                               |                     |                 |                        |
| 17   | Investment income percentage for 20  |                          | mn (f), divided by l | line 13, co <b>l</b> umn (f)) |                     | 17              | %                      |
| 18   | Investment income percentage from  | 2021 Schedule A,         | Part III, line 17    |                               |                     | 18              | %                      |
| 19a  | <b>33 1/3% support tests - 2022.</b> If the  | organization did ı       |                      |                               |                     | 33 1/3%, and I  | ine 17 is not          |
|      | more than 33 1/3%, check this box a  | nd stop here. The        | e organization qual  | lifies as a publicly :        | supported organiz   | ation           |                        |
| k    | <b>33 1/3% support tests - 2021.</b> If the  | organization did ı       | not check a box or   | n line 14 or line 19          | a, and line 16 is m | ore than 33 1/  | 3%, and                |
|      | line 18 is not more than 33 1/3%, che  | ck this box and <b>s</b> | top here. The orga   | anization qua <b>l</b> ifies  | as a publicly supp  | orted organiza  | tion                   |
| 20   | Private foundation. If the organization  | n did not check a        | box on line 14, 19   | a, or 19b, check t            | his box and see in  | structions      |                        |
| 2320 | 23 12-09-22  |                          |                      |                               |                     | Sched           | lule A (Form 990) 2022 |
|      |  |                          | 1 5                  | 5                             |                     |                 |                        |

No

Yes

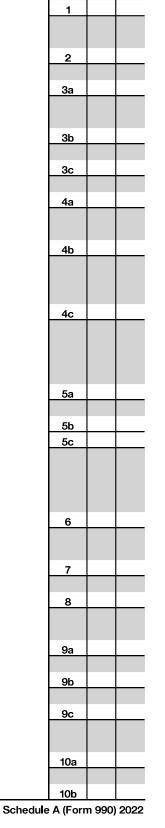
#### Part IV | Supporting Organizations

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

#### Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? *If* "Yes," *explain in* **Part VI** *how the organization determined that the supported organization was described in section 509(a)(1) or (2).*
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? *If* "Yes," *describe in* **Part VI** *when and how the organization made the determination.*
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," *and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.*
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? *If* "Yes," *describe in* **Part VI** *how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.*
- **c** Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *If* "Yes," *explain in* **Part VI** *what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.*
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? *If* "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in **Part VI**, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If "Yes," provide detail in* Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? *If* "Yes," *complete Part I of Schedule L (Form 990).*
- 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 disqualified 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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| nedule A (Form 990 | ) 2022 | SIERRA | CLUB | FOUNDATION |
|--------------------|--------|--------|------|------------|
|                    |        |        |      |            |

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| Pa  | Supporting Organizations (continued)  |            |            |    |
|-----|---|------------|------------|----|
|     |   |            | Yes        | No |
| 11  | Has the organization accepted a gift or contribution from any of the following persons?   |            |            |    |
| а   | A person who directly or indirectly controls, either alone or together with persons described on lines 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        |            |    |
| с   | 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        |            |    |
| Sec | tion B. Type I Supporting Organizations   |            |            |    |
|     |   |            | Yes        | No |
| 1   | Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or  |            |            |    |
|     | more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,   |            |            |    |
|     | directors, or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s)  |            |            |    |
|     | effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the |            |            |    |
|     | supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.  | 1          |            |    |
| 2   | Did the organization operate for the benefit of any supported organization other than the supported   |            |            |    |
|     | organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in  |            |            |    |
|     | Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,   |            |            |    |
|     | supervised, or controlled the supporting organization.  | 2          |            |    |
| Sec | tion C. Type II Supporting Organizations  |            |            |    |
|     |   |            | Yes        | No |
| 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  |            |            |    |
|     | the supported organization(s).  | 1          |            |    |
| Sec | tion 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          |            |    |
| Sec | tion E. Type III Functionally Integrated Supporting Organizations   |            |            |    |
| 1   | Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)  | <b> </b> = |            |    |
| а   | The organization satisfied the Activities Test. Complete line 2 below.  |            |            |    |
| b   | The organization is the parent of each of its supported organizations. Complete line 3 below.   |            |            |    |
| с   | The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see in   | struction  | <u>s).</u> |    |
| 2   | Activities Test. Answer lines 2a and 2b below.  |            | Yes        | No |
| а   | Did substantially all of the organization's activities during the tax year directly further the exempt purposes of  |            |            |    |
|     | the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify  |            |            |    |
|     | those supported organizations and explain how these activities directly furthered their exempt purposes,  |            |            |    |
|     | how the organization was responsive to those supported organizations, and how the organization determined   |            |            |    |
|     | that these activities constituted substantially all of its activities.  | 2a         |            |    |
| 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.  | 2b         |            |    |

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.* 232025 12-09-22

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|      | All other Type III non-functionally integrated supporting organizations mus | t comp <b>l</b> ete S | Sections A through E. |   |
|------|---|-----------------------|-----------------------|---|
| Sect | ion A - Adjusted Net Income   |                       | (A) Prior Year        | (B) Current Year<br>(optiona <b>l</b> ) |
| 1    | Net short-term capital gain   | 1                     |                       |   |
| 2    | Recoveries of prior-year distributions                                      | 2                     |                       |   |
| 3    | Other gross income (see instructions)                                       | 3                     |                       |   |
| 4    | Add lines 1 through 3.  | 4                     |                       |   |
| 5    | Depreciation and depletion  | 5                     |                       |   |
| 6    | Portion of operating expenses paid or incurred for production or            |                       |                       |   |
|      | collection of gross income or for management, conservation, or              |                       |                       |   |
|      | maintenance of property held for production of income (see instructions)    | 6                     |                       |   |
| 7    | Other expenses (see instructions)   | 7                     |                       |   |
| 8    | Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)                | 8                     |                       |   |
| Sect | ion B - Minimum Asset Amount  |                       | (A) Prior Year        | (B) Current Year<br>(optiona <b>l</b> ) |
| 1    | Aggregate fair market value of all non-exempt-use assets (see               |                       |                       |   |
|      | instructions for short tax year or assets held for part of year):           |                       |                       |   |
| a    | Average monthly value of securities   | 1a                    |                       |   |
| b    | Average monthly cash balances   | 1b                    |                       |   |
| C    | Fair market value of other non-exempt-use assets                            | 1c                    |                       |   |
| d    | Total (add lines 1a, 1b, and 1c)  | 1d                    |                       |   |
| е    | Discount claimed for blockage or other factors                              |                       |                       |   |
|      | (explain in detail in Part VI):   |                       |                       |   |
| 2    | Acquisition indebtedness applicable to non-exempt use assets                | 2                     |                       |   |
| 3    | Subtract line 2 from line 1d.   | 3                     |                       |   |
| 4    | Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, |                       |                       |   |
|      | see instructions).  | 4                     |                       |   |
| 5    | Net value of non-exempt-use assets (subtract line 4 from line 3)            | 5                     |                       |   |
| 6    | Multiply line 5 by 0.035.   | 6                     |                       |   |
| 7    | Recoveries of prior-year distributions                                      | 7                     |                       |   |
| 8    | Minimum Asset Amount (add line 7 to line 6)                                 | 8                     |                       |   |
| Sect | ion C - Distributable Amount  |                       |                       | Current Year                            |
| 1    | Adjusted net income for prior year (from Section A, line 8, column A)       | 1                     |                       |   |
| 2    | Enter 0.85 of line 1.   | 2                     |                       |   |
| 3    | Minimum asset amount for prior year (from Section B, line 8, column A)      | 3                     |                       |   |
| 4    | Enter greater of line 2 or line 3.  | 4                     |                       |   |
| 5    | Income tax imposed in prior year  | 5                     |                       |   |
| 6    | Distributable Amount. Subtract line 5 from line 4, unless subject to        |                       |                       |   |
|      | emergency temporary reduction (see instructions).                           | 6                     |                       |   |
|      |   |                       |                       |   |

#### Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see 7 instructions).

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Schedule A (Form 990) 2022

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SIERRA CLUB FOUNDATION

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

Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 ( explain in Part VI). See instructions.

Schedule A (Form 990) 2022

#### SIERRA CLUB FOUNDATION nally Integrated 509(a)(3) Supporting Organiz

| Par   | t V   Type III Non-Functionally Integrated 509(                 | a)(3) Supporting Orga             | inizations (continu                   | ıed) |   |
|-------|---|-----------------------------------|---------------------------------------|------|---|
| Secti | on D - Distributions  |                                   |                                       | _    | Current Year                              |
| 1     | Amounts paid to supported organizations to accomplish exer      | mpt purposes                      |                                       | 1    |   |
| 2     | Amounts paid to perform activity that directly furthers exemp   | t purposes of supported           |                                       |      |   |
|       | organizations, in excess of income from activity                |                                   | 2                                     |      |   |
| 3     | Administrative expenses paid to accomplish exempt purpose       | es of supported organization      | S                                     | 3    |   |
| 4     | Amounts paid to acquire exempt-use assets                       |                                   |                                       | 4    |   |
| 5     | Qualified set-aside amounts (prior IRS approval required - pro  | ovide details in <b>Part VI</b> ) |                                       | 5    |   |
| 6     | Other distributions (describe in Part VI). See instructions.    |                                   |                                       | 6    |   |
| 7     | Total annual distributions. Add lines 1 through 6.              |                                   |                                       | 7    |   |
| 8     | Distributions to attentive supported organizations to which the | ne organization is responsive     |                                       |      |   |
|       | (provide details in Part VI). See instructions.                 |                                   |                                       | 8    |   |
| 9     | Distributable amount for 2022 from Section C, line 6            |                                   |                                       | 9    |   |
| 10    | Line 8 amount divided by line 9 amount                          |                                   |                                       | 10   |   |
| Secti | on E - Distribution Allocations (see instructions)              | (i)<br>Excess Distributions       | (ii)<br>Underdistributior<br>Pre-2022 | าร   | (iii)<br>Distributable<br>Amount for 2022 |
| 1     | Distributable amount for 2022 from Section C, line 6            |                                   |                                       |      |   |
| 2     | Underdistributions, if any, for years prior to 2022 (reason-    |                                   |                                       |      |   |
|       | able cause required - explain in Part VI). See instructions.    |                                   |                                       |      |   |
| 3     | Excess distributions carryover, if any, to 2022                 |                                   |                                       |      |   |
| а     | From 2017   |                                   |                                       |      |   |
| b     | From 2018   |                                   |                                       |      |   |
| с     | From 2019   |                                   |                                       |      |   |
| d     | From 2020   |                                   |                                       |      |   |
| e     | From 2021   |                                   |                                       |      |   |
| f     | Total of lines 3a through 3e                                    |                                   |                                       |      |   |
| g     | Applied to underdistributions of prior years                    |                                   |                                       |      |   |
| h     | Applied to 2022 distributable amount                            |                                   |                                       |      |   |
| i     | Carryover from 2017 not applied (see instructions)              |                                   |                                       |      |   |
| i     | Remainder. Subtract lines 3g, 3h, and 3i from line 3f.          |                                   |                                       |      |   |
| 4     | Distributions for 2022 from Section D,                          |                                   |                                       |      |   |
|       | line 7: \$  |                                   |                                       |      |   |
| а     | Applied to underdistributions of prior years                    |                                   |                                       |      |   |
| b     | Applied to 2022 distributable amount                            |                                   |                                       |      |   |
| c     | Remainder. Subtract lines 4a and 4b from line 4.                |                                   |                                       |      |   |
| 5     | Remaining underdistributions for years prior to 2022, if        |                                   |                                       |      |   |
|       | any. Subtract lines 3g and 4a from line 2. For result greater   |                                   |                                       |      |   |
|       | than zero, explain in Part VI. See instructions.                |                                   |                                       |      |   |
| 6     | Remaining underdistributions for 2022. Subtract lines 3h        |                                   |                                       |      |   |
| •     | and 4b from line 1. For result greater than zero, explain in    |                                   |                                       |      |   |
|       | Part VI. See instructions.                                      |                                   |                                       |      |   |
| 7     | Excess distributions carryover to 2023. Add lines 3j            |                                   |                                       |      |   |
| •     | and 4c.   |                                   |                                       |      |   |
| 8     | Breakdown of line 7:  |                                   |                                       |      |   |
|       | Excess from 2018  |                                   |                                       |      |   |
| -     | Excess from 2019  |                                   |                                       |      |   |
| -     | Excess from 2020  |                                   |                                       |      |   |
| -     | Excess from 2021  |                                   |                                       |      |   |
| -     | Excess from 2022  |                                   |                                       |      |   |

Schedule A (Form 990) 2022

Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

#### SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:

| Compose A, TAKI II, BINE IV, EXTERNATION FOR OTHER INCOME. |  |  |  |  |  |
|--|--|--|--|--|--|
| COST SOFTWARE REIMBURSEMENT                                |  |  |  |  |  |
| 2018 AMOUNT: \$ 1,148,659.                                 |  |  |  |  |  |
| 2019 AMOUNT: \$ 1,320,313.                                 |  |  |  |  |  |
| 2020 AMOUNT: \$ 1,363,405.                                 |  |  |  |  |  |
| 2021 AMOUNT: \$ 1,259,746.                                 |  |  |  |  |  |
| 2022 AMOUNT: \$ 1,250,072.                                 |  |  |  |  |  |
|  |  |  |  |  |  |
| MISCELLANEOUS INCOME                                       |  |  |  |  |  |
| 2018 AMOUNT: \$ 15,122.                                    |  |  |  |  |  |
| 2019 AMOUNT: \$ 161,727.                                   |  |  |  |  |  |
| 2020 AMOUNT: \$ 69,931.                                    |  |  |  |  |  |
| 2021 AMOUNT: \$ 10,521.                                    |  |  |  |  |  |
| 2022 AMOUNT: \$ 21,570.                                    |  |  |  |  |  |
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#### 223451 11-15-22

#### 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

2022

Employer identification number

94-6069890

| Filers of:         | Section:   |
|--------------------|--|
| Form 990 or 990-EZ | X 501(c)( 3 ) (enter number) organization  |
|                    | 4947(a)(1) nonexempt charitable trust <b>not</b> 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   |
| Form 990-PF        | <ul> <li>527 political organization</li> <li>501(c)(3) exempt private foundation</li> <li>4947(a)(1) nonexempt charitable trust treated as a private foundation</li> </ul> |

SIERRA CLUB 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 for an *exclusively* set of the parts unless totaling \$5,000 or more during the year for an *exclusively* set of the parts unless totaling \$5,000 or more during the year for an *exclusively* set of the parts unless totaling \$5,000 or more during the year for an *exclusively* set of the parts unless totaling \$5,000 or more during the year for an *exclusively* set of the parts unless totaling \$5,000 or more during the year for an *exclusively* set of the parts unless totaling \$5,000 or more during the year for an *exclusively* set of the parts unless totaling \$5,000 or more during the year for an *exclusively* set of the parts unless totaling \$5,000 or more during the year for an *exclusively* set of the parts unless totaling \$5,000 or more during the year for an *exclusively* set of the parts unless totaling \$5,000 or more during the year for an *exclusively* set of the parts unless totaling \$5,000 or more during the year for an *exclusively* set of the parts unless total set of th

**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) (2022)

SIERRA CLUB FOUNDATION

Name of organization

Employer identification number

94-6069890

#### Part I **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed. (a) (b) (c) (d) Name, address, and ZIP + 4 No. **Total contributions** Type of contribution 1 X Person Payroll 10,875,000. Noncash \$ (Complete Part II for noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 2 Χ Person Payroll 6,114,933. Noncash \$ (Complete Part II for noncash contributions.) (a) (b) (c) (d) Name, address, and ZIP + 4 **Total contributions** Type of contribution No. 3 Х Person Payroll 13,312,000. Noncash \$ (Complete Part II for noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 4 X Person Payroll Noncash 2,000,000. \$ (Complete Part II for noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions.) (c) (d) (a) (b) **Total contributions** Type of contribution No. Name, address, and ZIP + 4 Person Payroll Noncash \$ (Complete Part II for noncash contributions.) 223452 11-15-22 Schedule B (Form 990) (2022)

15361018 758661 81036

22 2022.04030 SIERRA CLUB FOUNDATION

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| Schedule B | (Form | 990) | (2022 |
|------------|-------|------|-------|
|------------|-------|------|-------|

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.

| (a)<br>No.<br>from<br>Part I | (b)<br>Description of noncash property given | (c)<br>FMV (or estimate)<br>(See instructions.) | (d)<br>Date received |
|------------------------------|--|---|----------------------|
|                              |  | \$  |                      |
| (a)<br>No.<br>from<br>Part I | (b)<br>Description of noncash property given | (c)<br>FMV (or estimate)<br>(See instructions.) | (d)<br>Date received |
| _                            |  | \$  |                      |
| (a)<br>No.<br>from<br>Part I | (b)<br>Description of noncash property given | (c)<br>FMV (or estimate)<br>(See instructions.) | (d)<br>Date received |
|                              |  | \$  |                      |
| (a)<br>No.<br>from<br>Part I | (b)<br>Description of noncash property given | (c)<br>FMV (or estimate)<br>(See instructions.) | (d)<br>Date received |
| _                            |  | \$  |                      |
| (a)<br>No.<br>from<br>Part I | (b)<br>Description of noncash property given | (c)<br>FMV (or estimate)<br>(See instructions.) | (d)<br>Date received |
|                              |  | \$  |                      |
| (a)<br>No.<br>from<br>Part I | (b)<br>Description of noncash property given | (c)<br>FMV (or estimate)<br>(See instructions.) | (d)<br>Date received |
|                              |  | <br> <br>\$                                     |                      |

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2022.04030 SIERRA CLUB FOUNDATION

| Name of o       | organization   |  | Employer identification number  |  |  |  |  |
|-----------------|--|--|---|--|--|--|--|
| GLEBB           | A CLUB FOUNDATION  |  | 94-6069890  |  |  |  |  |
| Part III        | Exclusively religious, charitable, etc., contribution  | ons to organizations described in se   | ction 501(c)(7), (8), or (10) that total more than \$1,000 for the year |  |  |  |  |
|                 | from any one contributor. Complete columns (a) completing Part III, enter the total of exclusively religious, completing Part III. | through <b>(e) and</b> the following line entr<br>sharitable, etc., contributions of <b>\$1,000 or l</b> | ry. For organizations less for the year. (Enter this info. once.)       |  |  |  |  |
| ( ) N           | Use duplicate copies of Part III if additional   | space is needed.   |   |  |  |  |  |
| (a) No.<br>from | (b) Purpose of gift  | (c) Use of gift  | (d) Description of how gift is held                                     |  |  |  |  |
| Part I          |  |  |   |  |  |  |  |
|                 |  |  |   |  |  |  |  |
|                 |  |  |   |  |  |  |  |
|                 |  |  |   |  |  |  |  |
|                 |  | (e) Transfer of gif  | t   |  |  |  |  |
|                 | Transferee's name, address, a  | nd <b>7IP</b> $\pm 4$  | Relationship of transferor to transferee                                |  |  |  |  |
|                 |  |  |   |  |  |  |  |
|                 |  |  |   |  |  |  |  |
|                 |  |  |   |  |  |  |  |
| (a) No.         |  |  |   |  |  |  |  |
| from<br>Part I  | (b) Purpose of gift  | (c) Use of gift  | (d) Description of how gift is held                                     |  |  |  |  |
| <u> </u>        |  |  |   |  |  |  |  |
|                 |  |  |   |  |  |  |  |
|                 |  |  | [   |  |  |  |  |
|                 |  | (a) Transfor of sif  |   |  |  |  |  |
|                 |  | (e) Transfer of gif  | ι   |  |  |  |  |
|                 | Transferee's name, address, a  | nd <b>ZI</b> P + 4   | Relationship of transferor to transferee                                |  |  |  |  |
|                 |  |  |   |  |  |  |  |
|                 |  |  |   |  |  |  |  |
|                 |  |  |   |  |  |  |  |
| (a) No.         |  |  |   |  |  |  |  |
| from<br>Part I  | (b) Purpose of gift  | (c) Use of gift  | (d) Description of how gift is held                                     |  |  |  |  |
|                 |  |  | [   |  |  |  |  |
|                 |  |  |   |  |  |  |  |
|                 |  |  | <u> </u>  |  |  |  |  |
|                 | (e) Transfer of gift   |  |   |  |  |  |  |
|                 |  |  |   |  |  |  |  |
|                 | Transferee's name, address, a  | nd <b>ZI</b> P + 4   | Relationship of transferor to transferee                                |  |  |  |  |
|                 |  |  |   |  |  |  |  |
|                 |  |  |   |  |  |  |  |
|                 |  |  |   |  |  |  |  |
| (a) No.<br>from | (b) Purpose of gift  | (c) Use of gift  | (d) Description of how gift is held                                     |  |  |  |  |
| Part I          | (*) 9  | (0) 000 00 300   |   |  |  |  |  |
|                 |  |  | <u> </u>  |  |  |  |  |
|                 |  |  |   |  |  |  |  |
|                 |  |  |   |  |  |  |  |
|                 |  | (e) Transfer of gif  | t   |  |  |  |  |
|                 | Turnafana 2 yawa addu  | ad <b>7</b> 1D + 4   | Deletionship of transferrer to transferrer                              |  |  |  |  |
|                 | Transferee's name, address, a  | na <b>ziř + 4</b>  | Relationship of transferor to transferee                                |  |  |  |  |
|                 |  |  |   |  |  |  |  |
|                 |  |  |   |  |  |  |  |
|                 |  |  |   |  |  |  |  |
| 223454 11-15    | 5-22   |  | Schedule B (Form 990) (2022   |  |  |  |  |

24 2022.04030 SIERRA CLUB FOUNDATION 81036\_1

| SCHEDULE C   | SCHEDULE C Political Campaign and Lobbying Activities                         |   |                         |                       |               | OMB No. 1545-0047                                |  |
|--|---|---|-------------------------|-----------------------|---------------|--|--|
| (Form 990)   | 990)  |   |                         |                       |               |  |  |
|  | For Organizations Exempt From Income Tax Under section 501(c) and section 527 |   |                         |                       |               | Open to Public                                   |  |
| Department of the Treasury<br>Internal Revenue Service |   |   |                         |                       |               |  |  |
| If the organization answ                               | wered "Yes," on   | Form 990, Part IV, line 3, or For   | m 990-EZ, Part V, lin   | ne 46 (Political Camp | baign Act     | ivities), then                                   |  |
|  |   | plete Parts I-A and B. Do not com   | •                       |                       |               |  |  |
| .,   |   | )1(c)(3)) organizations: Complete F                                       | Parts I-A and C below.  | Do not complete Par   | t I-B.        |  |  |
| <ul> <li>Section 527 organiz</li> </ul>                | •   | •   |                         |                       |               |  |  |
|  |   | Form 990, Part IV, line 4, or For   |                         |                       |               |  |  |
|  | •   | nave filed Form 5768 (election unc<br>nave NOT filed Form 5768 (electio   |                         | •                     | •             |  |  |
|  |   | Form 990, Part IV, line 5 (Proxy  |                         |                       |               |  |  |
| Tax) (See separate inst                                |   |   | , (                     | ,                     | ,             |  |  |
| • Section 501(c)(4), (5)                               | , or (6) organizat  | ions: Complete Part III.  |                         |                       |               |  |  |
| Name of organization                                   |   |   |                         |                       |               | er identification number                         |  |
|  |   | CLUB FOUNDATION   |                         |                       |               | <u>94-6069890</u>                                |  |
| Part I-A Comp  | ete if the org  | anization is exempt unde  | r section 501(c) o      | or is a section 52    | 27 orga       | nization.  |  |
|  |   |   |                         |                       |               |  |  |
| •  | •   | ation's direct and indirect po <b>l</b> itical                            | campaign activities in  | n Part IV.            |               |  |  |
| 2 Political campaign                                   |   |   |                         |                       | \$_           |  |  |
| 3 Volunteer hours for                                  | political campai  | gn activities   |                         |                       | ···· <u> </u> |  |  |
| Part I-B Compl   | ete if the org  | anization is exempt unde  | r section 501(c)(3      | 3).                   |               |  |  |
| · · · · · ·  |   | incurred by the organization unde   |                         | - /-                  | \$            |  |  |
|  | -   | incurred by organization manager  |                         |                       |               |  |  |
|  |   | n 4955 tax, did it fi <b>l</b> e Form 4720 fo                             |                         |                       |               |  |  |
| 4a Was a correction m                                  |   | ·   |                         |                       |               | Yes No   |  |
| <b>b</b> If "Yes," describe ir                         | n Part IV.  |   |                         |                       |               |  |  |
| Part I-C Compl   | ete if the org  | anization is exempt unde  | r section 501(c),       | except section \$     | 501(c)(3      | <i>ג</i> ).                                      |  |
| 1 Enter the amount d                                   | irectly expended  | l by the fi <b>l</b> ing organization for sect                            | ion 527 exempt funct    | ion activities        | \$            |  |  |
| 2 Enter the amount o                                   | f the filing organ  | ization's funds contributed to othe                                       | er organizations for se | ection 527            |               |  |  |
| exempt function ac                                     |   |   |                         |                       | \$            |  |  |
|  |   | . Add lines 1 and 2. Enter here an  |                         |                       |               |  |  |
|  |   |   |                         |                       |               |  |  |
|  |   | -   | -f -llti 507 1          |                       |               |  |  |
|  |   | nployer identification number (EIN)<br>tion listed, enter the amount paid |                         |                       |               |  |  |
|  | -   | omptly and directly delivered to a  |                         |                       |               |  |  |
|  |   | additional space is needed, provid  |                         |                       |               | - 3 3  |  |
| (a) Name   | 9   | (b) Address   | (c) EIN                 | (d) Amount paid       | from          | (e) Amount of political                          |  |
|  |   | (-)   |                         | filing organization   | on's C        | ontributions received and                        |  |
|  |   |   |                         | funds. If none, ent   | :er -0        | promptly and directly<br>delivered to a separate |  |
|  |   |   |                         |                       |               | political organization.                          |  |
|  |   |   |                         |                       |               | If none, enter -0                                |  |
|  |   |   |                         |                       |               |  |  |
|  |   |   |                         |                       |               |  |  |
|  |   |   |                         |                       |               |  |  |
|  |   |   |                         |                       |               |  |  |
|  |   |   |                         |                       |               |  |  |
|  |   |   |                         |                       | <del> </del>  |  |  |
|  |   |   |                         |                       |               |  |  |
|  |   |   |                         |                       |               |  |  |
|  |   |   |                         |                       |               |  |  |
|  |   |   |                         |                       |               |  |  |
|  |   |   |                         |                       |               |  |  |
| Far Dan amuarly Daduat                                 | ion Act Notice  | and the Instructions for Form 00  | 0 ar 000 E <b>7</b>     | •                     | <br>          |  |  |

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

Schedule C (Form 990) 2022

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|   | SIERRA CLUB             |                                  |                         |                              | 069890 Page 2                  |
|---|-------------------------|----------------------------------|-------------------------|------------------------------|--------------------------------|
| Part II-A Complete if the org   | anization is exen       | npt under section                | 501(c)(3) and file      | d Form 5768 (ele             | ction under                    |
| section 501(h)).  |                         |                                  |                         |                              |                                |
| A Check if the filing organiza  | tion belongs to an affi | iated group (and <b>l</b> ist in | Part IV each affiliated | group member's name          | e, address, E <b>I</b> N,      |
|   | re of excess lobbying e |                                  |                         |                              |                                |
| <b>B</b> Check if the filing organiza   | tion checked box A ar   | nd "limited control" pro         | visions apply.          |                              |                                |
| Limi  | ts on Lobbying Exper    | nditures                         |                         | (a) Filing<br>organization's | (b) Affiliated group<br>totals |
| (The term "expend   | ditures" means amou     | nts paid or incurred.)           |                         | totals                       | 101010                         |
| 1a Total lobbying expenditures to influ   |                         | araseroote Jobbying)             |                         | 75,819.                      |                                |
| b Total lobbying expenditures to influ  |                         |                                  |                         | 184,936.                     |                                |
| c Total lobbying expenditures (add li   |                         |                                  |                         | 260,755.                     |                                |
| d Other exempt purpose expenditure  |                         |                                  |                         | 113187651.                   |                                |
| e Total exempt purpose expenditure  |                         |                                  |                         | 113448406.                   |                                |
| 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  | r (b) is: The lob       | bying nontaxable amo             | ount is:                |                              |                                |
| Not over \$500,000  | 20% of t                | he amount on line 1e.            |                         |                              |                                |
| Over \$500,000 but not over \$1,000   | 0,000 \$100,00          | 0 plus 15% of the exce           | ess over \$500,000.     |                              |                                |
| Over \$1,000,000 but not over \$1,5   | 00,000 \$175,00         | 0 plus 10% of the exce           | ess over \$1,000,000.   |                              |                                |
| Over \$1,500,000 but not over \$17,   |                         | 0 plus 5% of the exces           | ss over \$1,500,000.    |                              |                                |
| Over \$17,000,000   | \$1,000,0               | .000                             |                         |                              |                                |
|   |                         |                                  |                         | 250 000                      |                                |
| g Grassroots nontaxable amount (en  | ,                       |                                  |                         | 250,000.<br>0.               |                                |
| <ul> <li>h Subtract line 1g from line 1a. If zer</li> <li>i Subtract line 1f from line 1c. If zero</li> </ul> | aulass sutau O          |                                  |                         | 0.                           |                                |
| j If there is an amount other than ze   |                         | ine 1i, did the organiza         |                         | 0.                           |                                |
| reporting section 4911 tax for this   | 0                       | -                                |                         | Г                            | Yes No                         |
|   |                         | araging Period Under             |                         |                              |                                |
| (Some organizations t   | hat made a section 50   | 01(h) election do not l          | nave to complete all c  | of the five columns be       | low.                           |
|   | See the separa          | ate instructions for lin         | es 2a through 2f.)      |                              |                                |
|   | Lobbying Exper          | nditures During 4-Yea            | r Averaging Period      |                              |                                |
| Calendar year   | ( ) 0010                | <i>(</i> ) 0000                  | ( ) 0001                | ( 1) 0000                    | () 7-1-1                       |
| (or fiscal year beginning in)   | <b>(a)</b> 2019         | <b>(b)</b> 2020                  | <b>(c)</b> 2021         | ( <b>d</b> ) 2022            | (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   | 1,000,000.              | 1,000,000.                       | 1,000,000.              | 1,000,000.                   | 4,000,000.                     |
| (150% of line 2a, column(e))  |                         |                                  |                         |                              | 6,000,000.                     |
|   |                         |                                  |                         |                              |                                |
| c Total lobbying expenditures   | 662,640.                | 265,161.                         | 384,463.                | 260,755.                     | 1,573,019.                     |
|   |                         |                                  |                         |                              |                                |
| 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.                     |
|   | 000 040                 |                                  | 100 101                 |                              |                                |
| f Grassroots lobbying expenditures  | 233,840.                |                                  | 172,101.                | 75,819.                      | 481,760.                       |
|   |                         |                                  |                         | Schedu                       | le C (Form 990) 2022           |

# 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 e  | For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description<br>of the lobbying activity.   |                              |                      | (b)       |       |
|--------|--|------------------------------|----------------------|-----------|-------|
| of the |  |                              | No                   | Amo       | ount  |
| 1<br>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)? $\dots$   |                              |                      |           |       |
| c      | Media advertisements?  |                              |                      |           |       |
|        | Mailings to members, legislators, or the public?   |                              |                      |           |       |
|        | Publications, or published or broadcast statements?  |                              |                      |           |       |
|        | Grants to other organizations for lobbying purposes?   |                              |                      |           |       |
|        | Direct contact with legislators, their staffs, government officials, or a legislative body?  |                              |                      |           |       |
|        | Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?  |                              |                      |           |       |
|        | Other activities?  |                              |                      |           |       |
|        | Total. Add lines 1c through 1i   |                              |                      |           |       |
|        | 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  |                              |                      |           |       |
|        | 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?<br>t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).   | n 501(c)(5)                  | , or sec             | tion      |       |
|        |  |                              |                      | Yes       | No    |
| 1      | Were substantially all (90% or more) dues received nondeductible by members?   |                              | 1                    |           | -     |
| 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 the  |                              |                      |           |       |
|        | 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."   | n 501(c)(5)<br>'No" OR (k    | , or sec<br>) Part I |           | 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 politic  | a                            |                      |           |       |
|        | expenses for which the section 527(f) tax was paid).   |                              |                      |           |       |
|        | Current year   |                              |                      |           |       |
| b      | Carryover from last year   |                              | . <u>2</u> b         |           |       |
| С      | Total  |                              | <u>2c</u>            |           |       |
| 3      | Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  |                              | 3                    |           |       |
| 4      | If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exce  |                              |                      |           |       |
|        | does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and po   | olitical                     |                      |           |       |
|        | expenditures 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) <sup>.</sup> 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) 2022

232043 11-08-22

| SCHEDULE D<br>(Form 990)<br>Department of the Treasury<br>nternal Revenue Service | Complete if the organ<br>Part IV, line 6, 7, 8, 9, 10,<br>At                                   | I Financial Statements<br>ization answered "Yes" on Form 990,<br>11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b<br>tach to Form 990.<br>1 for instructions and the latest informat | OMB No. 1545-0047 2022 Open to Public Inspection |                              |      |
|---|--|---|--|------------------------------|------|
| Name of the organizati  | on<br>SIERRA CLUB FOUNDAT  | ION   |  | er identification<br>94-6069 |      |
|   | ations Maintaining Donor Advised<br>n answered "Yes" on Form 990, Part IV, line                |   | or Accounts.                                     | Complete if t                | he   |
|   |  | (a) Donor advised funds   | <b>(b)</b> Funds a                               | nd other acco                | unts |
| 1 Total number at er  | nd of year   | 3   |  |                              |      |
|   | f contributions to (during year)   | 95,826.   |  |                              |      |
| 3 Aggregate value o   | f grants from (during year)  | 73,333.   |  |                              |      |
| 4 Aggregate value a   | t end of year  | 396,358.  |  |                              |      |
| 8   | on inform all donors and donor advisors in w<br>on's property, subject to the organization's e | •   |  | X Yes                        | No   |
| 6 Did the organization  | on inform all grantees, donors, and donor ad   | lvisors in writing that grant funds can be ι  | ised only  |                              |      |
| for charitable purp   | oses and not for the benefit of the donor or   | donor advisor, or for any other purpose c   | onferring  |                              |      |
| impermissible priv  | ate benefit?   |   |  | X Yes                        | No   |
| Part II Conserv   | ation Easements. Complete if the orga  | anization answered "Yes" on Form 990, P   | art IV, line 7.                                  |                              |      |

| 1 | Purpose(s) of conservation easements held by the organization (check all that apply).  |          |                                 |
|---|--|----------|---------------------------------|
|   | Preservation of land for public use (for example, recreation or education)   | rically  | important land area             |
|   | Protection of natural habitat Preservation of a certi  | fied his | storic structure                |
|   | Preservation of open space   |          |                                 |
| 2 | Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a contribution of a contributic of a contributic of a contributic o | nserva   | tion 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 structure included in (a)   | 2c       |                                 |
| d | Number of conservation easements included in (c) acquired after July 25,2006, and not on a   |          |                                 |
|   | historic structure listed in the National Register   | 2d       |                                 |
| 3 | Number of conservation easements modified, transferred, released, extinguished, or terminated by the organi  | zation   | during the tax                  |
|   | year   |          |                                 |
| 4 | Number of states where property subject to conservation easement is located  |          |                                 |
| 5 | Does the organization have a written policy regarding the periodic monitoring, inspection, handling of   |          |                                 |
|   | violations, and enforcement of the conservation easements it holds?  |          | Yes No                          |
| 6 | Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservatio   | n ease   | ments during the year           |
|   |  |          |                                 |
| 7 | Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation east   | semen    | ts during the year              |
|   |  |          |                                 |
| ~ |  | (h)      |                                 |

| 8  | Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i)                |            |       |
|----|--|------------|-------|
|    | and section 170(h)(4)(B)(ii)?  | Yes        | No No |
| 9  | In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and            |            |       |
|    | balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describe   | ces the    |       |
|    | organization's accounting for conservation easements.  |            |       |
| Pa | rt III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar                                    | Assets.    |       |
|    | Complete if the organization answered "Yes" on Form 990, Part IV, line 8.  |            |       |
| 1a | If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance she           | et works   |       |
|    | of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of pu  | blic       |       |
|    | service, provide in Part XIII the text of the footnote to its financial statements that describes these items.                 |            |       |
| b  | If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet w           | orks of    |       |
|    | art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public | c service, |       |
|    | provide the following amounts relating to these items:   |            |       |
|    | (i) Revenue included on Form 990, Part VIII, line 1 \$   |            |       |
|    | (ii) Assats included in Form 900 Part Y  |            |       |

|        | 28   |                            |
|--------|--|----------------------------|
| 232051 | 1 09-01-22   |                            |
| LHA    | For Paperwork Reduction Act Notice, see the Instructions for Form 990.   | Schedule D (Form 990) 2022 |
| b      | Assets included in Form 990, Part X  | \$                         |
| а      | Revenue included on Form 990, Part VIII, line 1  | \$                         |
|        | the following amounts required to be reported under FASB ASC 958 relating to these items:                                    |                            |
| 2      | If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide | de                         |
|        | (ii) Assets included in Form 990, Part X   | Ф                          |

| 20         |        |      |            |
|------------|--------|------|------------|
| 2022.04030 | SIERRA | CLUB | FOUNDATION |

No

| Sche             | dule D (Form 990) 2022 SIERRA (  | CLUB FOUNDA                  | TION                         |                       |                     | 9              | 4-60  | 69890             | Pa     | ge <b>2</b> |
|------------------|--|------------------------------|------------------------------|-----------------------|---------------------|----------------|---|-------------------|--------|-------------|
| Pa               | t III Organizations Maintaining Co   | ollections of Art            | , Historical Tr              | easures, or (         | Other S             | Similar        | Assets  | (continu          | .ed)   |             |
| 3                | Using the organization's acquisition, accession  | on, and other records        | , check any of the           | following that m      | nake sign           | ificant us     | se of its                                     |                   |        |             |
|                  | collection items (check all that apply):   | ,                            | , <b>,</b>                   | 5                     | 5                   |                |   |                   |        |             |
| а                | Public exhibition  | d                            | Loan or ex                   | change program        | n                   |                |   |                   |        |             |
| b                | Scholarly research   | e                            |                              | eriarige pregram      |                     |                |   |                   |        |             |
| c                | Preservation for future generations  | Ū                            |                              |                       |                     |                |   |                   |        |             |
| 4                | Provide a description of the organization's co   | llections and explain        | how they further t           | he organization'      | s exemnt            | nurnos         | a in Part                                     | хш                |        |             |
| 5                | During the year, did the organization solicit or   | •                            | •                            |                       |                     |                | o intrait.                                    | /                 |        |             |
| Ū                | to be sold to raise funds rather than to be ma   |                              |                              |                       |                     |                |   | Yes               |        | No          |
| Pa               | t IV Escrow and Custodial Arrange  |                              |                              |                       |                     |                | <br>Part IV I                                 |                   |        | 110         |
|                  | reported an amount on Form 990, Par  |                              | te il the organizati         | on answered in        |                     | , mi 330,      | i ait iv, i                                   | ine 3, 0i         |        |             |
| 10               | Is the organization an agent, trustee, custodia  |                              | any for contribution         | s or other asset      | e not inc           | udod           |   |                   |        |             |
| Id               |  |                              |                              |                       |                     |                |   | Vee               |        | No          |
|                  | on Form 990, Part X?   |                              |                              |                       |                     |                | ∟   | Yes               |        | No          |
| D                | If "Yes," explain the arrangement in Part XIII a   | and complete the follo       | owing table:                 |                       |                     |                |   | Amount            |        |             |
|                  | S · · · · ·  |                              |                              |                       |                     |                |   | Amount            |        |             |
| С                | Beginning balance  |                              |                              |                       |                     | 1c             |   |                   |        |             |
| d                | Additions during the year  |                              |                              |                       |                     | 1d             |   |                   |        |             |
| е                | Distributions during the year  |                              |                              |                       |                     | 1e             |   |                   |        |             |
| f                | Ending balance   |                              |                              |                       |                     | 1f             |   | 1                 |        |             |
| 2a               | Did the organization include an amount on Fo   |                              |                              |                       |                     | ?              | ∟   | Yes               |        | No          |
| _                | If "Yes," explain the arrangement in Part XIII.  |                              |                              |                       |                     |                | <u></u>                                       |                   |        |             |
| Pa               | <b>t V Endowment Funds.</b> Complete if  |                              |                              |                       |                     | . Thursday     |   | () [              |        |             |
|                  | -  | (a) Current year             | (b) Prior year               | (c) Two years         | · · ·               |                | ars back                                      | (e) Four          |        |             |
| 1a               | Beginning of year balance  | 45,631,836.                  | 43,119,100                   |                       |                     |                | 6,347.  |                   | 998,1  |             |
| b                | Contributions  | 33,400.                      | 78,793                       |                       | 308.                |                | 1,460.  |                   | 045,1  |             |
| С                | Net investment earnings, gains, and losses   | -8,255,041.                  | 4,464,751                    | 6,960,                | 807.                | 7,29           | 8,126.  | -1,               | 594,7  | 72.         |
| d                | Grants or scholarships   |                              |                              |                       |                     |                |   |                   |        |             |
| е                | Other expenditures for facilities  |                              |                              |                       |                     |                |   |                   |        |             |
|                  | and programs   | 2,131,017.                   | 2,030,808                    | 2,263,                | 265.                | 1,78           | 0,683.  | 1,                | 652,2  | :33.        |
| f                | Administrative expenses  |                              |                              |                       |                     |                |   |                   |        |             |
| g                | End of year balance  | 35,279,178.                  | 45,631,836                   | . 43,119,             | 100.                | 38,33          | 5,250.  | 32,               | 796,3  | 47.         |
| 2                | Provide the estimated percentage of the curre  | ent year end balance         | (line 1g, column (a          | a)) he <b>l</b> d as: |                     |                |   |                   |        |             |
| а                | Board designated or quasi-endowment  | 4.7070                       | _%                           |                       |                     |                |   |                   |        |             |
| b                | Permanent endowment $78.0940$  | %                            | _                            |                       |                     |                |   |                   |        |             |
| с                | Term endowment 17.1990   | %                            |                              |                       |                     |                |   |                   |        |             |
|                  | The percentages on lines 2a, 2b, and 2c should be a should be should be a should be a should be a should be should be a should | ıld equal 100%.              |                              |                       |                     |                |   |                   |        |             |
| 3a               | Are there endowment funds not in the posses  | sion of the organizat        | ion that are he <b>l</b> d a | nd administered       | for the             |                |   |                   |        |             |
|                  | organization by:   |                              |                              |                       |                     |                |   | [`                | Yes    | No          |
|                  | (i) Unrelated organizations  |                              |                              |                       |                     |                |   | 3a(i)             |        | Х           |
|                  | (ii) Related organizations   |                              |                              |                       |                     |                |   | 3a(ii)            |        | Х           |
| b                | If "Yes" on line 3a(ii), are the related organizat   | tions listed as require      | d on Schedule R?             |                       |                     |                |   | 3b                |        |             |
| 4                | Describe in Part XIII the intended uses of the   |                              |                              |                       |                     |                |   |                   |        |             |
| Pa               | t VI   Land, Buildings, and Equipme  |                              |                              |                       |                     |                |   |                   |        |             |
|                  | Complete if the organization answered  |                              | Part IV, line 11a,           | See Form 990, F       | Part X, <b>j</b> in | e 10.          |   |                   |        |             |
|                  | Description of property  | (a) Cost or ot               |                              | st or other           |                     | umulated       | 4   | (d) Book          | value  |             |
|                  | Description of property  | basis (investm               | • • •                        | s (other)             |                     | ciation        | 1   | ( <b>u</b> ) Book | value  |             |
| 10               | Land   |                              | ,                            | 57,421.               |                     |                |   | 67                | ,42    | 1.          |
|                  | Land   |                              |                              | 52,039.               | 3                   | 3,23           | 8   |                   | , 30   |             |
| b                | Buildings  |                              |                              |                       |                     | ,,,,,,,        | <u> </u>                                      | 10                | ,00    | <u> </u>    |
| C<br>            | Leasehold improvements   |                              |                              | 26,093.               | 0                   | 25,86          | 7   |                   | 2.2    | 6.          |
|                  | Equipment  |                              |                              | 58,918.               |                     | 13,80<br>18,19 |   |                   |        | 5.          |
| <u>e</u><br>Tata | Other  |                              |                              |                       | 0                   | , , , , , 9    | <u>, , , , , , , , , , , , , , , , , , , </u> | 0 7               | ,17    |             |
| <u>i ota</u>     | . Add lines 1a through 1e. <i>(Column (d) must e</i> c   | <u>qual Form 990. Part X</u> | <u>, column (B), line</u>    | 10c.)                 |                     |                |   |                   |        |             |
|                  |  |                              |                              |                       |                     | S              | cnedule                                       | D (Form           | 990) 2 | 2022        |

| Dort VII   | Invoctmonto     | Other Securit | line |            |
|------------|-----------------|---------------|------|------------|
| Schedule D | (Form 990) 2022 | SIERRA        | CLUB | FOUNDATION |

| Part VII | Investn | nents - C | Other Secu | rities. |   |      |  |
|----------|---------|-----------|------------|---------|---|------|--|
|          | -       |           |            |         | _ | <br> |  |

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>(b)</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   | 10,507,967.           | END-OF-YEAR MARKET VALUE                                  |
| (B) LIMITED PARTNERSHIPS   | 21,702,081.           | END-OF-YEAR MARKET VALUE                                  |
| (C)  |                       |   |
| (D)  |                       |   |
| (E)  |                       |   |
| (F)  |                       |   |
| (G)  |                       |   |
| (H)  |                       |   |
| Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)     | 32,210,048.           |   |

#### 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>(b)</b> Book va <b>l</b> ue |
|--|--------------------------------|
| (1) SPLIT-INTEREST AGREEMENT                                       | 22,211,652.                    |
| (2) INTEREST RECEIVABLE  | 143,490.                       |
| (3) RIGHT OF USE ASSET   | 275,469.                       |
| (4)  |                                |
| (5)  |                                |
| (6)  |                                |
| (7)  |                                |
| (8)  |                                |
| (9)  |                                |
| Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) | 22,630,611.                    |
| Part X Other Liabilities   |                                |

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>(b)</b> Book value |
|--|-----------------------|
| (1) Federal income taxes   |                       |
| (2) SPLIT-INTEREST AGREEMENT                                       | 14,668,381.           |
| (3) LEASE LIABILITY  | 319,852.              |
| (4)  |                       |
| (5)  |                       |
| (6)  |                       |
| (7)  |                       |
| (8)  |                       |
| (9)  |                       |
| Total. (Column (b) must equal Form 990. Part X. col. (B) line 25.) | 14,988,233.           |

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

Schedule D (Form 990) 2022

232053 09-01-22

| Sche | dule D (Form 990) 2022 SIERRA CLUB FOUNDATION                                    |           |                    | 94-   | 6069890 | Page 4       |
|------|--|-----------|--------------------|-------|---------|--------------|
| Par  | t XI Reconciliation of Revenue per Audited Financial Statemer                    | nts With  | Revenue per Re     | turn. |         |              |
|      | Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.      |           |                    |       |         |              |
| 1    | Total revenue, gains, and other support per audited financial statements         |           |                    | 1     | 56,478  | ,614.        |
| 2    | Amounts included on line 1 but not on Form 990, Part VIII, line 12:              |           |                    |       |         |              |
| а    | Net unrealized gains (losses) on investments                                     | 2a - 3    | <u>31,614,436.</u> |       |         |              |
| b    | Donated services and use of facilities   | 2b        |                    |       |         |              |
| с    | Recoveries of prior year grants  | 2c        |                    |       |         |              |
| d    | Other (Describe in Part XIII.)   | 2d        | 346,191.           |       |         |              |
| е    | Add lines 2a through 2d  |           |                    | 2e    | -31,268 |              |
| 3    | Subtract line 2e from line 1   |           |                    | 3     | 87,746  | <u>,859.</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     | 87,746  | <u>,859.</u> |
| Pa   | rt XII Reconciliation of Expenses per Audited Financial Stateme                  | ents With | i Expenses per F   | Retur | n.      |              |
|      | Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.      |           |                    |       |         |              |
| 1    | Total expenses and losses per audited financial statements                       |           |                    | 1     | 113,448 | <u>,406.</u> |
| 2    | Amounts included on line 1 but not on Form 990, Part IX, line 25:                |           |                    |       |         |              |
| а    | Donated services and use of facilities   | 2a        |                    |       |         |              |
| b    | Prior year adjustments   | 2b        |                    |       |         |              |
| С    | Other losses   | 2c        |                    |       |         |              |
| d    | Other (Describe in Part XIII.)   | 2d        |                    |       |         |              |
| е    | Add lines 2a through 2d  |           |                    | 2e    |         | 0.           |
| 3    | Subtract line 2e from line 1   |           |                    | 3     | 113,448 | <u>,406.</u> |
| 4    | Amounts included on Form 990, Part IX, line 25, but not on line 1:               |           |                    |       |         |              |
| а    | Investment expenses not included on Form 990, Part VIII, line 7b                 | 4a        |                    |       |         |              |
| b    | Other (Describe in Part XIII.)   | 4b        |                    |       |         |              |
| с    | Add lines 4a and 4b  |           |                    | 4c    |         | 0.           |
| 5    | Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) |           |                    | 5     | 113,448 | ,406.        |
| Pa   | rt XIII Supplemental Information.  |           |                    |       |         |              |

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

31

EVALUATED ITS SIGNIFICANT TAX POSITIONS FOR WHICH THE STATUTE OF

232054 09-01-22

Schedule D (Form 990) 2022

15361018 758661 81036

2022.04030 SIERRA CLUB FOUNDATION

| Part XIII Supplemental Information (continued)                             |
|--|
| 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:

Schedule D (Form 990) 2022

CHANGE IN VALUE OF SPLIT-INTEREST AGREEMENTS

346,191.

Schedule D (Form 990) 2022

232055 09-01-22

| SCHEDULE I<br>(Form 990)  | G G<br>Complexity  | Grants and Other Assistance to Organizations,<br>Governments, and Individuals in the United States<br><sup>Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22</sup> . | Other Assistance to Organizations,<br>, and Individuals in the United States<br><sup>zation answered "Yes" on Form 990, Part IV, line 21 or 2</sup> | se to Organi<br>s in the Unit<br>on Form 990, Parl | zations,<br>ed States<br>tV, line 21 or 22.                    |  | OMB No. 1545-0047                                    |
|---|--|--|---|--|--|--|--|
| Department of the Treasury<br>Internal Revenue Service  |  | Go to www.irs  | Attach to Form 990.<br>Go to www.irs.gov/Form990 for the latest information.  | 990.<br>the latest informa                         | tion.  |  | Open to Public<br>Inspection                         |
| Name of the organization SIERRA CLUB  | UB FOUNDATION  | LION   |   |  |  |  | Employer identification number<br>94-6069890         |
| Part I General Information on Grants and Assistance   | and Assistance   |  |   |  |  |  |  |
| 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? | to substantiate the  | amount of the grants   | or assistance, the <u>c</u>   | yrantees' eligibility i                            | for the grants or assis  | tance, and the selection                 | n<br>X Vec No  |
| 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.   | ocedures for monito  | oring the use of grant f   | unds in the United  | States.  |  |  | ]  |
| art   | Domestic Organiz<br>\$5,000. Part II can   | ations and Domestic<br>be duplicated if additic  | nestic Governments. Con<br>additional space is needed   | omplete if the orga<br>d.                          | nization answered "Y   | es" on Form 990, Part                    | IV, line 21, for any                                 |
| 1 (a) Name and address of organization<br>or government   | (q)  | <b>(c)</b> IRC section<br>(if applicable)  | <b>(d)</b> Amount of<br>cash grant  | (e) Amount of<br>noncash<br>assistance             | (f) Method of<br>valuation (book,<br>FMV, appraisal,<br>other) | (g) Description of<br>noncash assistance | (h) Purpose of grant<br>or assistance                |
| SIERRA CLUB<br>2101 WEBSTER STREET STE 1300<br>0AKLAND CA 94612   | 9 <b>4</b> -1153307  | 501(C)(4)  | 94 050 499.   | .0   |  |  | ENVIRONMENTAL EDUCATION                              |
| SOCIAL AND ENVIRONMENTAL  |  |  | • / /   |  |  |  | GENERAL SUPPORT OF THE                               |
| ENTREPRENEURS - 23564 CALABASAS   |  |  |   |  |  |  | MISSION OF BUILDING                                  |
| ROAD, SUITE 201 - CALABASAS, CA   |  |  |   |  |  |  | EQUITY AND ALIGNMENT FOR                             |
| 91302-1338  | 95-4116679   | 501(C)(3)  | 220,000.  | 0.   |  |  | IMPACT (BEA) AND FOR BEA                             |
|   |  |  |   |  |  |  | FOR GENERAL SUPPORT OF                               |
| CONFLUENCE FALLANTHROFY<br>1 PENN PLAZA, BOX 6169   |  |  |   |  |  |  | MISSION TO TRANSFORM THE<br>PRACTICE OF INVESTING BY |
| <b>EW YORK, NY 1011</b> 5   | 27-3018135   | 501(C)(3)  | 15,000.   | 0.   |  |  | ALIGNING CAPITAL WITH OUR                            |
| UNIVERSITY OF CALIFORNIA, BERKELEY<br>FOUNDATION - 1995 UNIVERSITY  |  |  |   |  |  |  | TO RECORD THE ORAL<br>HISTORY FROM SIERRA CLUB       |
| ITE   |  |  |   |  |  |  |  |
| 94704-1058  | 94-6090626 501(C)(3)   | 501(C)(3)  | 40,000.   | 0.   |  |  | MEMBERS FOR PRESERVATION                             |
|   |  |  |   |  |  |  |  |
| AUDUBON SOCIETY OF NEW YORK INC.  |  |  |   |  |  |  | ROOSEVELT SANCTUARY &                                |
| 134 COVE ROAD<br>Overmen bay av 11771 2410  | 11 1609061   | E01/2/201  | 006 3   | c  |  |  | AUDUBON CENTER'S FOR THE                             |
|   | TOOOTLET   |  | <b>N</b>  |  |  |  | TO BRING NATIONAL                                    |
| THE PARTNERSHIP PROJECT   |  |  |   |  |  |  | ENVIRONMENTAL GROUPS AND                             |
| PO BOX 65826  |  |  |   |  |  |  | EJ GROUPS FROM ACROSS THE                            |
| WASHINGTON, DC 20035-5826   | 52-2192070 501(C)(3)   | 501(C)(3)  | 350,000.  | 0.   |  |  | COUNTRY TOGETHER TO BUILD                            |
|   | and government org   |  | in the line 1 table   |  |  |  | 21.  |
| -   | ns listed in the line 1  | table  |   |  |  |  | T.   |
| LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.<br>SEE DART TV FOR COLITMNI (H) T  | iction Act Notice, see the Instructions for Form 9<br>公民民、PART、TV、FOR COL ITMN (H) | DIS for Form 990.  | 0.<br>DESCRTPTIONS  |  |  |  | Schedule I (Form 990) 2022                           |

ILCTION ACT NOTICE, SEE THE INSTRUCTIONS FOR FORM 990. SEE PART IV FOR COLUMIN (H) DESCRIPTIONS

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| Schedule I (Form 990) SIERRA CLUB FOUNDATION<br>Part II Continuation of Grants and Other Assistance to Domestic Organiz | UB FOUNDATION | TION<br>mestic Organizations     | and Domestic Go                 | vernments (Sche                        | ations and Domestic Governments (Schedule I (Form 990), Part II) |  | 94-6069890 Page 1   |
|---|---------------|----------------------------------|---------------------------------|--|--|--|---|
|   | (b) EIN       | (c) IRC section<br>if applicable | <b>(d)</b> Amount of cash grant | (e) Amount of<br>noncash<br>assistance | (f) Method of<br>valuation<br>(book, FMV,<br>appraisal, other)   | (g) Description of non-cash assistance | (h) Purpose of grant<br>or assistance   |
| FLORIDA RISING TOGETHER<br>10800 BISCAYNE BLVD, SUITE 1050<br>MIAMI FL 33161  | 45 - 3956785  | 501<br>( 2 ) ( 3 )               |                                 | c                                      |  |  | TO BUILD POWER,<br>ESPECIALLY IN FRONT-LINE<br>COMMUNITIES, TO SUPPORT<br>THE MOTEMENT TO 100%  |
|   | -8434340      | 501(C)(3)                        | 20,000.                         | 0.0                                    |  |  | TO REPLANT NATIVE<br>COTTONWOOD AND WILLOW AT<br>ONE OF THE MOST HEAVILY<br>ALTERED AREAS OF THE                                      |
| GREEN DIVERSITY INITIATIVE DBA<br>GREEN 2.0 - 6218 GEORGIA AVENUE<br>NW, SUITE 1 - WASHINGTON, DC 20011                 | 46-5220283    | 501(C)(3)                        | 100,000.                        |  |  |  | FOR GENERAL SUPPORT OF<br>MISSION TO ENSURE THAT<br>THE ENVIRONMENTAL<br>MOVEMENT IS COMMITTED TO                                     |
| CITIZEN ACTION OF WISCONSIN<br>EDUCATION FUND - 221 SOUTH 2ND<br>STREET, #300 - MILWAUKEE, WI 53204                     | 39-1520619    | 501(C)(3)                        | 100,000.                        | .0                                     |  |  | TO ADVOCATE FOR INCREASED<br>PROGRAMS THAT WILL REDUCE<br>ENERGY BURDEN AND ENERGY<br>BURDEN DISPARITIES IN                           |
| SICANGU COMMUNITY DEVELOPMENT<br>CORPORATION - 27565 RESEARCH PARK<br>DRIVE - MISSION, SD 57555                         | 83-3857527    | 501(C)(3)                        | 10,500.                         | .0                                     |  |  | FOR SPONSORSHIP OF<br>SICANGU LAKOTA OYATE 7GEN<br>IMPACT INVESTING SUMMIT<br>(IN COOPERATION WITH THE                                |
| SUSTAINABILITY<br>SUSTAINABILITY<br>OWNS DRIVE SW<br>A, GA 30311-34   |               | 501(C)(3)                        | 35,000.                         |  |  |  | TO DIRECTLY SUPPORT<br>FRONTLINE PARTNERS IN<br>ATLANTA THAT ARE FURSUING<br>THE CITY'S TRANSITION TO                                 |
| PROGRESSIVE LEADERSHIP ALLIANCE OF<br>NEVADA - 2330 PASEO DE PRADO C 109<br>- LAS VEGAS, NV 89102                       | 88-0318655    | 501(C)(3)                        | 70,000.                         | 0.                                     |  |  | TO SUPPORT ORGANIZING<br>EFFORTS FOR A PUBLIC<br>TRANSPORTATION SYSTEM<br>THAT WORKS FOR THE PEOPLE                                   |
| POWER SHIFT NETWORK<br>PO BOX 73116<br>WASHINGTON, DC 20056-3116  | 45-5616367    | 501(C)(3)                        | 75,000.                         | 0.                                     |  |  | TO FUND PART OF THE POWER<br>SHIFT CONVERGENCE (APRIL<br>5-8, 2023), WHICH HAS<br>BEEN A CRITICAL PART OF                             |
| WE ACT FOR ENVIRONMENTAL JUSTICE<br>1854 AMSTERDAM AVENUE, 2ND FLOOR<br>NEW YORK, NY 10031                              | 13-3800068    | 501(C)(3)                        | 75,000.                         |  |  |  | TO FOSTER CONNECTIONS AND<br>COLLABORATION AT THE 27TH<br>CONFERENCE OF THE PARTIES<br>(COP27) AMONG CLIMATE<br>Schedule   (Form 990) |
|   |               |                                  |                                 |  |  |  |   |

04-01-22

| Schedule I (Form 990) SIERRA CLUB FOUNDATION<br>Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments | JB FOUNDATION<br>ssistance to Domestic | ГІОN<br>nestic Organizations            | and Domestic Go                         |   | (Schedule I (Form 990), Part II.)   |   | 94-6069890 Page 1                                    |
|--|--|---|---|---|---|---|--|
| <b>(a)</b> Name and address of organization or government  | (b) EIN                                | <b>(c)</b> IRC section<br>if applicable | <b>(d)</b> Amount of<br>cash grant      | <b>(e)</b> Amount of noncash assistance | <ul> <li>(f) Method of<br/>valuation<br/>(book, FMV,<br/>appraisal, other)</li> </ul> | (g) Description of<br>non-cash assistance | <b>(h)</b> Purpose of grant<br>or assistance         |
| NONPROFIT LEGAL SERVICES OF UTAH   |  |   |   |   |   |   | TO BUILD NARRATIVE POWER<br>AND NARRATIVE            |
| 623 E 2100 S, SUITE B1<br>SALT LAKE CITY, UT 84106-1827  | 47-4827863                             | 501(C)(3)                               | 100,000.                                | .0                                      |   |   | INFRASTRUCTURE TO MAKE A<br>JUST TRANSITION FROM AN  |
| RIGHT TO THE CITY ALLIANCE   |  |   |   |   |   |   | TO SUPPORT HOMES FOR ALL<br>ST. LOUIS, A BLACK-LED   |
| 388 ATLANTIC AVENUE, 3RD FLOOR<br>BROOKLYN, NY 11217-3651  | 94-3462187                             | 501(C)(3)                               | 175,000.                                | .0                                      |   |   | COALITION OF TENANT<br>ASSOCIATIONS, GRASSROOTS      |
| AMANESER 2025  |  |   |   |   |   |   | TO EXPAND THE CREATION OF<br>COMMUNITY-LED EMERGENCY |
| 405 AVE AMERICO MIRANDA<br>SAN JUAN, PR 00927-4624   | 66-0870990 501(C)(3)                   | 501(C)(3)                               | 95,000.                                 | .0                                      |   |   | SOLAR INSTALLATION<br>SYSTEMS IN PUERTO RICO         |
|  |  |   |   |   |   |   | TO PARTNER WITH SIERRA                               |
| CENTER FOR INVESTIGATIVE   |  |   |   |   |   |   | CLUB PUERTO RICO TO                                  |
| - FU BUX<br>1914-6834  | 66-0705065                             | 501(C)(3)                               | 95,000.                                 | .0                                      |   |   | DEVELOF CAFACITIES,<br>SKILLS AND TOOLS NEEDED       |
|  |  |   |   |   |   |   | GENERAL SUPPORT OF                                   |
| POPULATION MEDIA CENTER<br>30 KIMBALL AVENUE SUITTE 302  |  |   |   |   |   |   | POPULATION MEDIA CENTER'S<br>MISSION TO USE          |
| SOUTH BURLINGTON, VT 05403-6825  | 03-0358029                             | 501(C)(3)                               | 939,274.                                | .0                                      |   |   | ENTERTAINMENT-EDUCATION                              |
|  |  |   |   |   |   |   | FOR GENERAL SUPPORT OF                               |
| BIKE PITTSBURGH  |  |   |   |   |   |   | BIKE PITTSBURGH'S MISSION                            |
| 188 43RD STREET #1<br>PITTSBURGH, PA 15201-3152  | 36-4491002                             | 501(C)(3)                               | 8,000.                                  | .0                                      |   |   | TO TRANSFORM STREETS TO<br>MAKE BIKING AND WALKING   |
|  |  |   |   |   |   |   | FOR THE AMERICA THE                                  |
|  |  |   |   |   |   |   | BEAUTIFUL FOR ALL                                    |
| LS H   |  |   |   |   |   |   |  |
|  |  |   | • |   |   |   | A LOT PULL FULL &                                    |
|  |  |   |   |   |   |   |  |
|  |  |   |   |   |   |   | Schedule I (Form 990)                                |

| Schedule I (Form 990) 2022 SIERRA CLUB FOUI  | FOUNDATION                  |                             |                                       |  | 94-6069890 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. | Complete if the             | organization answe          | sred "Yes" on Form 9                  | 90, Part IV, line 22.                                    |                                       |
| (a) Type of grant or assistance  | (b) Number of<br>recipients | (c) Amount of<br>cash grant | (d) Amount of non-<br>cash assistance | (e) Method of valuation<br>(book, FMV, appraisal, other) | (f) Description of noncash assistance |
|  |                             |                             |                                       |  |                                       |
|  |                             |                             |                                       |  |                                       |
|  |                             |                             |                                       |  |                                       |
|  |                             |                             |                                       |  |                                       |
|  |                             |                             |                                       |  |                                       |
| Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.  | l<br> uired in Part I, line | e 2; Part III, column       | (b); and any other ad                 | ditional information.                                    |                                       |
| PART I, LINE 2:  |                             |                             |                                       |  |                                       |
| ALL GRANTEES ARE REQUIRED TO SIGN ?  | AND RETURN                  | N A GRANT                   | AGREEMENT WHICH                       | VHICH STATES   |                                       |
| FUNDS MAY BE SPENT ONLY IN ACCORDANCE  | Μ                           | THE BUDGE1                  | ITH THE BUDGET AND PURPOSES AS        | SES AS   |                                       |
| STATED IN THE APPROVED PROJECT PROF  | PROPOSAL, TH                | THAT NO PORT                | PORTION OF THE                        | GRANT FUNDS  |                                       |
| SHALL BE USED TO CARRY ON PROPAGANDA,  | OR                          | OTHERWISE A1                | ATTEMPT TO II                         | INFLUENCE  |                                       |
| LEGISLATION OR THE OUTCOME OF ANY F  | ANY PUBLIC EL               | ECTION EXC                  | EPT AS PERI                           | C ELECTION EXCEPT AS PERMITTED UNDER                     |                                       |
| THE APPLICABLE GRANT AGREEMENT, OR   | FOR                         | ANY NON-CHARITABLE,         |                                       | NON-EDUCATIONAL  |                                       |
| PURPOSES; THAT THE ACTIVITIES SUPPO  | SUPPORTED BY                | THE GRANT                   | ARE CARRIED                           | OUT FOR  |                                       |
| PUBLIC BENEFIT AND ANY WORK PRODUCTS   | AS                          | ATED WITH                   | SOCIATED WITH THE GRANT SHOULD        | SHOULD BE  |                                       |
| 232102 10-31-22  |                             |                             |                                       |  | Schedule I (Form 990) 2022            |

Part IV Supplemental Information

MADE AVAILABLE TO THE GENERAL PUBLIC 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:

SOCIAL AND ENVIRONMENTAL ENTREPRENEURS

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

BUILDING EQUITY AND ALIGNMENT FOR IMPACT (BEA) AND FOR BEA FUND, A

PARTICIPATORY GRANTMAKING FUND THAT DISTRIBUTES CRITICAL RESOURCES TO THE

GRASSROOTS ENVIRONMENTAL JUSTICE MOVEMENT

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:

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: AUDUBON SOCIETY OF NEW YORK INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT THE THEODORE ROOSEVELT

SANCTUARY & AUDUBON CENTER'S FOR THE BIRDS! PROGRAM AT LANDING ELEMENTARY

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SCHOOL IN GLEN COVE, NY

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NAME OF ORGANIZATION OR GOVERNMENT: THE PARTNERSHIP PROJECT (H) PURPOSE OF GRANT OR ASSISTANCE: TO BRING NATIONAL ENVIRONMENTAL GROUPS AND EJ GROUPS FROM ACROSS THE COUNTRY TOGETHER TO BUILD TRUST, BRIDGE HISTORIC DIVIDES, ALIGN AROUND A CORE SET OF POLICY PRINCIPLES AND COMMITMENTS, AND ADVOCATE FOR BOLD AND EQUITABLE CLIMATE POLICIES

NAME OF ORGANIZATION OR GOVERNMENT: FLORIDA RISING TOGETHER

(H) PURPOSE OF GRANT OR ASSISTANCE: TO BUILD POWER, ESPECIALLY IN

FRONT-LINE COMMUNITIES, TO SUPPORT THE MOVEMENT TO 100% CLEAN AND

RENEWABLE ENERGY FOR ALL

NAME OF ORGANIZATION OR GOVERNMENT: RIO GRANDE RETURN (H) PURPOSE OF GRANT OR ASSISTANCE: TO REPLANT NATIVE COTTONWOOD AND WILLOW AT ONE OF THE MOST HEAVILY ALTERED AREAS OF THE SANTA FE RIVER USED YEARS AGO AS PART OF A GRAVEL MINING OPERATION

NAME OF ORGANIZATION OR GOVERNMENT:

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:

CITIZEN ACTION OF WISCONSIN EDUCATION FUND

(H) PURPOSE OF GRANT OR ASSISTANCE: TO ADVOCATE FOR INCREASED PROGRAMS

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THAT WILL REDUCE ENERGY BURDEN AND ENERGY BURDEN DISPARITIES IN

Schedule I (Form 990)

232291 04-01-22 Part IV Supplemental Information

MILWAUKEE, WI THROUGH ADMINISTRATIVE ADVOCACY AND COMMUNITY ORGANIZING

NAME OF ORGANIZATION OR GOVERNMENT:

SICANGU COMMUNITY DEVELOPMENT CORPORATION

(H) PURPOSE OF GRANT OR ASSISTANCE: FOR SPONSORSHIP OF SICANGU LAKOTA

OYATE 7GEN IMPACT INVESTING SUMMIT (IN COOPERATION WITH THE ROSEBUD

ECONOMIC DEVELOPMENT CORPORATION) TO INTRODUCE INVESTORS, FUNDERS, AND

PARTNERS TO THE 7GEN INVESTING FRAMEWORK

NAME OF ORGANIZATION OR GOVERNMENT: BLACK SUSTAINABILITY

(H) PURPOSE OF GRANT OR ASSISTANCE: TO DIRECTLY SUPPORT FRONTLINE

PARTNERS IN ATLANTA THAT ARE PURSUING THE CITY'S TRANSITION TO 100% CLEAN

ENERGY

NAME OF ORGANIZATION OR GOVERNMENT:

PROGRESSIVE LEADERSHIP ALLIANCE OF NEVADA

(H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT ORGANIZING EFFORTS FOR A

PUBLIC TRANSPORTATION SYSTEM THAT WORKS FOR THE PEOPLE AND WORKERS AND IS

FAST, EASY TO NAVIGATE, AND CONSISTENT

NAME OF ORGANIZATION OR GOVERNMENT: POWER SHIFT NETWORK

(H) PURPOSE OF GRANT OR ASSISTANCE: TO FUND PART OF THE POWER SHIFT

CONVERGENCE (APRIL 5-8, 2023), WHICH HAS BEEN A CRITICAL PART OF YOUTH

MOVEMENT BUILDING FOR OVER 10 YEARS

NAME OF ORGANIZATION OR GOVERNMENT: WE ACT FOR ENVIRONMENTAL JUSTICE

(H) PURPOSE OF GRANT OR ASSISTANCE: TO FOSTER CONNECTIONS AND

COLLABORATION AT THE 27TH CONFERENCE OF THE PARTIES (COP27) AMONG CLIMATE Schedule I (Form 990)

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2022.04030 SIERRA CLUB FOUNDATION 81036\_1

Part IV | Supplemental Information

JUSTICE ADVOCATES, GOVERNMENT AND BUSINESS LEADERS, AND MAINSTREAM

#### ENVIRONMENTAL ORGANIZATIONS

NAME OF ORGANIZATION OR GOVERNMENT: NONPROFIT LEGAL SERVICES OF UTAH (H) PURPOSE OF GRANT OR ASSISTANCE: TO BUILD NARRATIVE POWER AND NARRATIVE INFRASTRUCTURE TO MAKE A JUST TRANSITION FROM AN EXTRACTIVE ECONOMY TO A LIVING ECONOMY POLITICALLY POSSIBLE IN UTAH AND FOSTER A CULTURAL TRANSFORMATION THAT UPROOTS HARMFUL STORIES UPHOLDING THE STATE'S EXTRACTIVE ECONOMY, REPAIRS HARM, AND BIRTHS NEW STORIES FOR A LIVING ECONOMY

NAME OF ORGANIZATION OR GOVERNMENT: RIGHT TO THE CITY ALLIANCE (H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT HOMES FOR ALL ST. LOUIS, A BLACK-LED COALITION OF TENANT ASSOCIATIONS, GRASSROOTS GROUPS, AND ALLIED HOUSING-JUSTICE ADJACENT NONPROFITS BUILDING POWER BY CATALYZING TENANT ASSOCIATIONS, WHICH SERVE AS AN ACCOUNTABILITY MECHANISM TO IMPROVE HOUSING QUALITY AND LAUNCH PUBLIC POLICY CAMPAIGNS

NAME OF ORGANIZATION OR GOVERNMENT: AMANESER 2025

(H) PURPOSE OF GRANT OR ASSISTANCE: TO EXPAND THE CREATION OF

COMMUNITY-LED EMERGENCY SOLAR INSTALLATION SYSTEMS IN PUERTO RICO FOR

INCREASED RESILIENCE IN THE FACE OF HURRICANES, EARTHQUAKES, AND

UNRELIABLE ELECTRICAL SYSTEMS

NAME OF ORGANIZATION OR GOVERNMENT: CENTER FOR INVESTIGATIVE JOURNALISM

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PARTNER WITH SIERRA CLUB PUERTO

RICO TO DEVELOP CAPACITIES, SKILLS AND TOOLS NEEDED TO DO WATCHDOG

CLIMATE JUSTICE WORK THROUGH AN EMERGING OBSERVATORIO DE ACCION CLIMATICA 232291 04-01-22
Schedule I (Form 990)

(OAC) STEERING COMMITTEE AND TO TRAIN AND GIVE REPORTING GRANTS TO LOCAL

JOURNALISTS THAT WANT TO INVESTIGATE PRESSING CLIMATE CRISES ISSUE

NAME OF ORGANIZATION OR GOVERNMENT: POPULATION MEDIA CENTER

(H) PURPOSE OF GRANT OR ASSISTANCE: GENERAL SUPPORT OF POPULATION MEDIA

CENTER'S MISSION TO USE ENTERTAINMENT-EDUCATION AND MASS MEDIA TO PROMOTE

SOCIAL AND CULTURAL CHANGE BY ADDRESSING THE INTERCONNECTED ISSUES OF THE

FULL RIGHTS OF WOMEN AND GIRLS, POPULATION, AND THE ENVIRONMENT

NAME OF ORGANIZATION OR GOVERNMENT: BIKE PITTSBURGH

(H) PURPOSE OF GRANT OR ASSISTANCE: FOR 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: GREEN LATINOS

(H) PURPOSE OF GRANT OR ASSISTANCE: FOR THE AMERICA THE BEAUTIFUL FOR ALL COALITION'S COMMUNITY SUPPORT FUNDING POT & OPERATIONS FUND TO ENSURE THE COALITION IS NEED-BLIND AND THAT FRONTLINE AND BIPOC ORGANIZATIONS INTERESTED IN PARTICIPATING CAN DO SO, SO THAT THE COALITION REFLECTS THE DIVERSITY OF AMERICA AND CENTERS THE VOICES OF PEOPLE OF COLOR WORKING TO CONSERVE 30 PERCENT OF U.S. LANDS, WATER, AND OCEANS BY 2030

Schedule I (Form 990)

232291 04-01-22

Schedule I (Form 990)

Part IV | Supplemental Information

| SCHEDULE J               | Compensation Information   | 1          | OMB No. 1             | 545 <b>-</b> 004 | 47   |
|--------------------------|--|------------|-----------------------|------------------|------|
| (Form 990)               | For certain Officers, Directors, Trustees, Key Employees, and Highest  |            | 20                    | 99               | )    |
|                          | Compensated Employees<br>Complete if the organization answered "Yes" on Form 990, Part IV, line 23.  |            | 20                    | <b>_</b> _       | •    |
| Department of the Treas  |  |            | Open to               |                  | ic   |
| Internal Revenue Service | Go to www.irs.gov/Form990 for instructions and the latest information.   |            | Inspe                 |                  |      |
| Name of the orgar        |  | Employer i |                       |                  | nber |
|                          | SIERRA CLUB FOUNDATION   | 94-6       | 06989                 | 0                |      |
| Part I Ques              | tions Regarding Compensation   |            |                       |                  |      |
|                          | na si ta ba (a ) if tha anno i a ti anno i ta dan a falla falla si a ta an fan a na sa su li ta dan Earra  | 000        |                       | Yes              | No   |
|                          | propriate box(es) if the organization provided any of the following to or for a person listed on Form  | 990,       |                       |                  |      |
|                          | on A, line 1a. Complete Part III to provide any relevant information regarding these items.  |            |                       |                  |      |
|                          | s or charter travel Housing allowance or residence for person  |            |                       |                  |      |
|                          | companions Payments for business use of personal re<br>nnification and gross-up payments Health or social club dues or initiation fee                  |            |                       |                  |      |
|                          | nary spending account Personal services (such as maid, chauffer  |            |                       |                  |      |
|                          |  |            |                       |                  |      |
| <b>b</b> If any of the h | oxes on line 1a are checked, did the organization follow a written policy regarding payment or   |            |                       |                  |      |
|                          | t or provision of all of the expenses described above? If "No," complete Part III to explain   |            | 1b                    |                  |      |
|                          | zation require substantiation prior to reimbursing or allowing expenses incurred by all directors,   |            |                       |                  |      |
| 0                        | officers, including the CEO/Executive Director, regarding the items checked on line 1a?  |            | 2                     |                  |      |
| tractoco, ana            |  |            |                       |                  |      |
| 3 Indicate whic          | , if any, of the following the organization used to establish the compensation of the organization's   | 3          |                       |                  |      |
|                          | e Director. Check all that apply. Do not check any boxes for methods used by a related organizati  |            |                       |                  |      |
|                          | pensation of the CEO/Executive Director, but explain in Part III.  |            |                       |                  |      |
|                          | ation committee  |            |                       |                  |      |
| ·                        | ent compensation consultant X Compensation survey or study   |            |                       |                  |      |
|                          | of other organizations   | committee  |                       |                  |      |
|                          |  |            |                       |                  |      |
| 4 During the ye          | r, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing   |            |                       |                  |      |
| organization             | r a related organization:  |            |                       |                  |      |
| a Receive a sev          | erance payment or change-of-control payment?   |            | 4a                    |                  | X    |
| b Participate in         | or receive payment from a supplemental nonqualified retirement plan?   |            | 4b                    |                  | X    |
| c Participate in         | or receive payment from an equity-based compensation arrangement?  |            | 4c                    |                  | X    |
| If "Yes" to an           | of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.  |            |                       |                  |      |
|                          |  |            |                       |                  |      |
| -                        | 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.  |            |                       |                  |      |
|                          | ted on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation   | n          |                       |                  |      |
| •                        | the revenues of:   |            |                       |                  | 37   |
| a The organizat          | on?  |            | <u>5a</u>             |                  | X    |
|                          | ganization?  |            | <u>5</u> b            |                  | X    |
|                          | e 5a or 5b, describe in Part III.  |            |                       |                  |      |
| -                        | ted on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation   | n          |                       |                  |      |
| •                        | the net earnings of:   |            | 0-                    |                  | x    |
|                          | on?  |            |                       |                  | X    |
|                          | ganization?  |            | <u>6b</u>             |                  |      |
|                          | e 6a or 6b, describe in Part III.  |            |                       |                  |      |
|                          | ted on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments on lines 5 and 62 If "Yes," describe in Part III.    |            | 7                     |                  | x    |
|                          | on lines 5 and 6? If "Yes," describe in Part III<br>unts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to tl |            | 7                     |                  |      |
|                          |  |            | 8                     |                  | x    |
|                          | exception described in Regulations section 55.4950-4(a)(5)? If thes, describe in Part III  |            | ·····   •             |                  |      |
|                          | sction 53.4958-6(c)?   |            | 9                     |                  |      |
|                          | rk Reduction Act Notice, see the Instructions for Form 990.  |            | ၂ ୬  <br>lule J (Forn | n 990'           | 2022 |
|                          |  | 001104     |                       |                  |      |

232111 10-18-22

| Schedule J (Form 990) 2022 SIERRA   |                 | CLUB FOUNDATI  | TION                                      |   | 94-6069890                        | 890                            |                                    | Page 2                                    |
|---|-----------------|--|---|---|-----------------------------------|--------------------------------|------------------------------------|---|
| Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed   | oldu            | yees, and Highest C  | ompensated Empl                           | oyees. Use duplica                        | te copies if additional s         | pace 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. | oe rep<br>orm 9 | oorted on Schedule J<br>190, Part VII.                             | , report compensati                       | on from the organiza                      | ation on row (i) and fron         | n related organizations        | s, described in the instr          | uctions, on row (ii).                     |
| 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   | bd ind          | lividual must equal th   | e total amount of Fc                      | orm 990, Part VII, Se                     | ction A, line 1a, applic          | able column (D) and (E         | ) amounts for that indiv           | vidual.                                   |
|   |                 | (B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation | 2 and/or 1099-MISC<br>compensation        | C and/or 1099-NEC                         | (C) Retirement and other deferred | <b>(D)</b> Nontaxable benefits | (E) Total of columns<br>(B)(i)-(D) | (F) Compensation<br>in column (B)         |
| (A) Name and Title  |                 | (i) Base<br>compensation   | (ii) Bonus &<br>incentive<br>compensation | (iii) Other<br>reportable<br>compensation | compensation                      |                                |                                    | reported as deferred<br>on prior Form 990 |
| (1) DAN CHU   | Ξ               | 362,433.   | 5,000.                                    | 600.                                      | 39,270.                           | 31,484.                        | 438,787.                           | .0  |
| EXECUTIVE DIRECTOR  | (ii)            |  |   | .0  |                                   |                                |                                    | .0  |
| (2) KEVIN MCGAHAN   | (i)             | 275,128.   | 5,000.                                    | 600.                                      | 20,47                             | 36,327.                        | 337,52                             | •0  |
|   | ( <u>i</u> )    |  |   | 0.  |                                   |                                |                                    | •0  |
| HENRY HOLMES  | Ξ               | 201,980.   | 5,000.                                    | 600.                                      | 28,91                             | 11,850.                        | 248,340.                           | .00                                       |
| DIRECTOR, PROGRAMS & COMPLIANCE   |                 |  |   | 0.  | t                                 |                                |                                    | •   |
| (4) AGANA MORENO<br>DIRECTOR OF FINANCE   | Ξ               | 158,283.<br>0-   | 5,000.                                    | 600.                                      | 16,933.<br>0.                     | 29,902.<br>0-                  | 210,718.                           | .0.0                                      |
| (5) JENNIE PALMER   | 9               | 108.984.   | 5,000.                                    | 600.                                      | 15.434.                           | 26.796.                        | 156.81                             |   |
|   |                 |  | •0  | •0  |                                   | - I                            | 0                                  | 0   |
|   | Ξ               |  |   |   |                                   |                                |                                    |   |
|   | (ii)            |  |   |   |                                   |                                |                                    |   |
|   | Ξ               |  |   |   |                                   |                                |                                    |   |
|   | (ii)            |  |   |   |                                   |                                |                                    |   |
|   | (i)             |  |   |   |                                   |                                |                                    |   |
|   | (ii)            |  |   |   |                                   |                                |                                    |   |
|   | (i)             |  |   |   |                                   |                                |                                    |   |
|   | (II)            |  |   |   |                                   |                                |                                    |   |
|   | (i)             |  |   |   |                                   |                                |                                    |   |
|   | (ii)            |  |   |   |                                   |                                |                                    |   |
|   | Ξ               |  |   |   |                                   |                                |                                    |   |
|   | <u>(</u>        |  |   |   |                                   |                                |                                    |   |
|   | Ξ               |  |   |   |                                   |                                |                                    |   |
|   | (ii)            |  |   |   |                                   |                                |                                    |   |
|   | Ξ               |  |   |   |                                   |                                |                                    |   |
|   | (ii)            |  |   |   |                                   |                                |                                    |   |
|   | Ξ               |  |   |   |                                   |                                |                                    |   |
|   | (ii)            |  |   |   |                                   |                                |                                    |   |
|   | Ξ               |  |   |   |                                   |                                |                                    |   |
|   | (ii)            |  |   |   |                                   |                                |                                    |   |
|   | (i)             |  |   |   |                                   |                                |                                    |   |
|   | (ii)            |  |   |   |                                   |                                |                                    |   |
|   |                 |  |   |   |                                   |                                | Schedu                             | Schedule J (Form 990) 2022                |

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## 232112 10-18-22

## SCHEDULE M (Form 990)

## **Noncash Contributions**

OMB No. 1545-0047

20 22 Open to Public Inspection

| Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. |
|--|
| 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

## Employer identification number

| ame | 0I | uie | organization |  |
|-----|----|-----|--------------|--|
|     |    |     |              |  |

94-6069890

|        | SIERRA            | CLUB | FOUNDATION |
|--------|-------------------|------|------------|
| Part I | Types of Property |      |            |

| Fai |   |                                      |   |   |                          |                                      |    |    |
|-----|---|--------------------------------------|---|---|--------------------------|--------------------------------------|----|----|
|     |   | <b>(a)</b><br>Check if<br>applicable | (b)<br>Number of<br>contributions or<br>items contributed | (c)<br>Noncash contribution<br>amounts reported on<br>Form 990, Part VIII, line 1 | Method o<br>noncash cont | (d)<br>f determining<br>ribution amo |    |    |
| 1   | Art - Works of art  |                                      |   |   |                          |                                      |    |    |
|     | Art - Historical treasures  |                                      |   |   |                          |                                      |    |    |
|     | Art - Fractional interests  |                                      |   |   |                          |                                      |    |    |
|     | Books and publications  |                                      |   |   |                          |                                      |    |    |
|     | Clothing and household goods  |                                      |   |   |                          |                                      |    |    |
|     | Cars and other vehicles   | x                                    | 494   | 506 020   | .FAIR MARK               | ET VALU                              | E  |    |
|     | Boats and planes  |                                      |   | 5007020   |                          |                                      |    |    |
|     | Intellectual property   |                                      |   |   |                          |                                      |    |    |
|     |   | x                                    | 318   | 2 008 939   | .FAIR MARK               | ምም የፖልተታ                             | ਸ  |    |
|     | Securities - Publicly traded  |                                      | 510   | 2,000,555   | • FAIN MANN              |                                      |    |    |
|     | Securities - Closely held stock                                       |                                      |   |   |                          |                                      |    |    |
|     | Securities - Partnership, LLC, or                                     |                                      |   |   |                          |                                      |    |    |
|     | trust interests   |                                      |   |   |                          |                                      |    |    |
|     | Securities - Miscellaneous  |                                      |   |   |                          |                                      |    |    |
|     | Qualified conservation contribution -                                 |                                      |   |   |                          |                                      |    |    |
|     | Historic structures   |                                      |   |   |                          |                                      |    |    |
|     | Qualified conservation contribution - Other                           |                                      |   |   |                          |                                      |    |    |
|     | Real estate - Residential   |                                      |   |   |                          |                                      |    |    |
|     | Real estate - Commercial  |                                      |   |   | _                        |                                      |    |    |
|     | Real estate - Other   |                                      |   |   | _                        |                                      |    |    |
|     | Collectibles  |                                      |   |   |                          |                                      |    |    |
|     | Food inventory  |                                      |   |   |                          |                                      |    |    |
| 20  | Drugs and medical supplies  |                                      |   |   |                          |                                      |    |    |
| 21  | Taxidermy   |                                      |   |   |                          |                                      |    |    |
| 22  | Historical artifacts  |                                      |   |   |                          |                                      |    |    |
|     | Scientific specimens  |                                      |   |   |                          |                                      |    |    |
| 24  | Archeological artifacts   |                                      |   |   |                          |                                      |    |    |
| 25  | Other ( SOFTWARE LICENS )   | X                                    | 1   | 661,480   | .FAIR MARK               | ET VALU                              | ΓE |    |
| 26  | Other ( )   |                                      |   |   |                          |                                      |    |    |
| 27  | Other ( )   |                                      |   |   |                          |                                      |    |    |
| 28  | Other ( )   |                                      |   |   |                          |                                      |    |    |
| 29  | Number of Forms 8283 received by the organiz                          | zation during                        | g the tax year for co                                     | ontributions  |                          |                                      |    |    |
|     | for which the organization completed Form 82                          | 83, Part V, D                        | onee Acknowledg   | ement 29  |                          |                                      | 9  |    |
|     |   |                                      |   |   |                          | Y                                    | es | No |
| 30a | During the year, did the organization receive by                      | y contributio                        | n any property rep  | orted in Part I, lines 1 thro   | ugh 28, that it          |                                      |    |    |
|     | must hold for at least 3 years from the date of                       | the initial co                       | ntribution, and whi                                       | ch isn't required to be use   | d for                    |                                      |    |    |
|     | exempt purposes for the entire holding period?                        | ?                                    |   |   |                          | 30a                                  |    | Х  |
| b   | If "Yes," describe the arrangement in Part II.                        |                                      |   |   |                          |                                      |    |    |
|     | Does the organization have a gift acceptance p                        | oolicy that re                       | quires the review o                                       | of any nonstandard contrib  | outions?                 |                                      | ζ  |    |
|     | Does the organization hire or use third parties                       |                                      |   |   |                          |                                      |    |    |
|     | contributions?  |                                      | •   |   |                          | 32a 🛛                                | ς  |    |
| b   | If "Yes," describe in Part II.  |                                      |   |   |                          |                                      |    |    |
|     |   |                                      |   |   |                          |                                      |    |    |
|     | If the organization didn't report an amount in c                      | olumn (c) toi                        | r a type of property                                      | r for which column (a) is ch  | necked.                  |                                      |    |    |
|     | If the organization didn't report an amount in c describe in Part II. | olumn (c) foi                        | r a type of property                                      | <sup>,</sup> for which co <b>l</b> umn (a) is ch                                  | necked,                  |                                      |    |    |

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) 2022

232142 09-09-22

SCHEDULE O (Form 990)

Department of the Treasury

Name of the organization

Internal Revenue Service

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

Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or 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 4B, 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

LHAFor Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.Schedule O (Form 990) 202223221110-28-22

|  | 94-6069890      |
|--|-----------------|
| O SUPPORT CHARITABLE, EDUCATION, SCIENTIFIC, LITERARY AN | D LEGAL         |
| NDEAVORS THAT FURTHER ITS CHARITABLE MISSION.            |                 |
| XPENSES \$ 36,938,112. INCLUDING GRANTS OF \$ 36,337,997 | . REVENUE \$ 0. |
| ORM 990, PART VI, SECTION B, LINE 11B:                   |                 |
| HE FINAL FORM 990 WAS REVIEWED BY SENIOR STAFF AND AUDIT | COMMITTEE WITH  |

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:

232212 10-28-22

Schedule O (Form 990) 2022

| Schedule O (Form 990) 2022 Name of the organization        | Page 2<br>Employer identification number |
|--|--|
| SIERRA CLUB FOUNDATION                                     | 94-6069890                               |
|  |  |
| 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 2022, \$86,435 OF DAN CHU'S COMPENSATION AND \$17,707 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 Schedule O (Form 990) 2022 232212 10-28-22 49

2022.04030 SIERRA CLUB FOUNDATION

| Schedule O (Form 990) 2022<br>Name of the organization |                         | Page 2 Employer identification number |
|--|-------------------------|---------------------------------------|
| SIERRA CLUB FOUNDATIO                                  | N                       | 94-6069890                            |
| FUNDRAISING SALARIES AND OTHER FUNDE                   | RAISING EXPENSES INCURR | ED ON BEHALF                          |
| OF THE FOUNDATION; THE REIMBURSED AN                   | MOUNTS ARE REFLECTED AS | FUNDRAISING                           |
| REIMBURSEMENT" ON THE STATEMENT OF H                   | FUNCTIONAL EXPENSES, FC | RM 990, PART                          |
| <u>IX.</u>   |                         |                                       |
|  |                         |                                       |
| FORM 990, PART XI, LINE 9, CHANGES                     | IN NET ASSETS:          |                                       |
| CHANGE IN VALUE OF SPLIT-INTEREST AG                   | GREEMENTS               | 346,191.                              |
|  |                         |                                       |
|  |                         |                                       |
|  |                         |                                       |
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|  |                         | Sabadula O (Earra 000) 0000           |
| 232212 10-28-22  | 50                      | Schedule O (Form 990) 2022            |

| SCHEDULE R<br>(Form 990)<br>Department of the Treasury<br>Internal Revenue Service   | Related Organizations and Unrelated Partnerships<br>Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.<br>Attach to Form 990.<br>Go to www.irs.gov/Form990 for instructions and the latest information. | ons and Unrelated Par<br>ed "Yes" on Form 990, Part IV, lin<br>Attach to Form 990.<br>90 for instructions and the latest i | <b>tnerships</b><br>e 33, 34, 35b, 36,<br>nformation. | or 37.  |  | OMB No. 1545-0047<br>2022<br>Open to Public<br>Inspection |
|--|---|--|---|---|--|---|
| Name of the organization <b>SIERRA CLUB FOUNDATION</b>   | JUNDATION   |  |   |   | Employer identification number<br>94-6069890 | cation number<br>3 9 0                                    |
| Part I Identification of Disregarded Entities. Complete if the organization  | ite if the organization answered "Yes"  | answered "Yes" on Form 990, Part IV, line 33.  |   |   |  |   |
| <b>(a)</b><br>Name, address, and EIN (if applicable)<br>of disregarded entity  | <b>(b)</b><br>Primary activity  | <b>(c)</b><br>Legal domicile (state or<br>foreign country)   | (d)<br>Total income                                   | ne End-of-year assets                                     |  | (f)<br>Direct controlling<br>entity                       |
|  |   |  |   |   |  |   |
|  |   |  |   |   |  |   |
|  |   |  |   |   |  |   |
|  |   |  |   |   |  |   |
| <b>Part II</b> 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. | ations. Complete if the organization a  | answered "Yes" on Form 990,  | Part IV, line 34, b                                   | ecause it had one c                                       | r more related tax-exe                       | mpt   |
| <b>(a)</b><br>Name, address, and EIN<br>of related organization  | <b>(b)</b><br>Primary activity  | <b>(c)</b><br>Legal domicile (state or<br>foreign country)   | (d)<br>Exempt Code<br>section                         | (e)<br>Public charity<br>status (if section<br>501(c)(3)) | (f)<br>Direct controlling<br>entity          | Section 512(b)(13)<br>controlled<br>entity?<br>Yes No     |
|  |   |  |   |   |  |   |
|  |   |  |   |   |  |   |
|  |   |  |   |   |  |   |
|  |   |  |   |   |  |   |
| For Paperwork Reduction Act Notice, see the Instructions for Form 990.   | ns for Form 990.  |  |   |   | Schedule R                                   | Schedule R (Form 990) 2022                                |

232161 09-14-22 LHA

| Schedule B (Form 990) 2022 SIERRA CLUB F   | FOUNDATION  | ON                                  |   |   |  |  |              | 94-60  | -6069890                              | Pade 2  |
|--|---|-------------------------------------|---|---|--|--|--------------|--|---------------------------------------|---|
| Related Organiz<br>ted as a partners   | <b>ble as a Partn</b><br>ne tax year.               |                                     | f the organiza  | Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related | ss" on Form 990,                                       | Part IV, line 34                         | , because i  | t had one or mo                                      | ore related                           |   |
| (a) (b) (b) Name, address, and EIN Primary activity of related organization  | :Y (c)<br>Legal<br>domicile<br>(state or<br>foreign | (d)<br>Direct controlling<br>entity | Predomina<br>(related, i<br>excluded fro                  | (e)<br>Predominant income<br>(related, unrelated,<br>excluded from tax under<br>excluded from tax under       | (f)<br>Share of total S<br>income end                  | (g)<br>Share of<br>end-of-year<br>assets | ortionate    | (i)<br>Code V-UBI<br>amount in box<br>20 of Schedule |                                       | <b>(k)</b><br>Percentage<br>ownership                 |
|  | country)  |                                     | 2001  | (+10.210  |  | <u>&gt;</u>                              | Yes No       |  |                                       |   |
|  |   |                                     |   |   |  |  |              |  |                                       |   |
|  |   |                                     |   |   |  |  |              |  |                                       |   |
|  |   |                                     |   |   |  |  |              |  |                                       |   |
| Part IV Identification of Related Organizations Taxable as a Corporation or ganizations treated as a corporation or trust during the tax year. | ble as a Corpo                                      | or Trust.                           | omplete if th   | Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related | wered "Yes" on F                                       | orm 990, Part I                          | IV, line 34, | because it had                                       | one or mo                             | re related  |
| (a)<br>Name, address, and EIN<br>of related organization   | Prin  | <b>(b)</b><br>Primary activity      | (c)<br>Legal domicile<br>(state or<br>foreign<br>country) | (d)<br>Direct controlling<br>entity   | (e)<br>Type of entity<br>(C corp, S corp,<br>or trust) | (f)<br>Share of total<br>income          |              | (g)<br>Share of Pe<br>end-of-year o<br>assets        | <b>(h)</b><br>Percentage<br>ownership | (i)<br>Section<br>512(b)(13)<br>controlled<br>entity? |
| CHARITABLE REMAINDER TRUSTS (32)<br>2101 WEBSTER STREET, SUITE 1250<br>OAKLAND, CA 94612   | INVESTMENT  | Ę                                   | CA<br>CA  | THE SIERRA<br>CLUB<br>FOUNDATION  | TRUST  |  |              |  |                                       |   |
| POOLED INCOME FUNDS (2)<br>2101 WEBSTER STREET, SUITE 1250<br>OAKLAND, CA 94612  | INVESTMENT  | Ę                                   | CA<br>CA  | THE SIERRA<br>CLUB<br>FOUNDATION  | TRUST  |  |              |  |                                       | ×   |
| GIFT ANNUITY POOLS (1)<br>2101 WEBSTER STREET, SUITE 1250<br>OAKLAND, CA 94612   | INVESTMENT  | Ę                                   | CA<br>CA  | THE SIERRA<br>CLUB<br>FOUNDATION  | TRUST  |  |              |  |                                       | ×   |
|  |   |                                     |   |   |  |  |              |  |                                       |   |
|  |   |                                     |   |   |  |  |              |  |                                       |   |
| 232162 09-14-22  |   |                                     | с<br>ц  |   |  |  |              | Schedu   | e R (Forn                             | Schedule R (Form 990) 2022                            |

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

| Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.  |                           |                               |  | ≯                          | Yes No   |
|--|---------------------------|-------------------------------|--|----------------------------|----------|
| 1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?                          | s with one or more rel    | ated organizations listed i   | in Parts II-IV?                              |                            |          |
| a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity  | ۷                         |                               |  | <b>1</b> a                 | ×        |
| <b>b</b> Gift, grant, or capital contribution to related organization(s)   |                           |                               |  | 1b                         | ×        |
| G  |                           |                               |  | ţ                          | X        |
|  |                           |                               |  | 2                          | Þ        |
| d Loans or loan guarantees to or for related organization(s)   |                           |                               |  | <b>P</b>                   | 4        |
| e Loans or loan guarantees by related organization(s)  |                           |                               |  | 1e                         | ×        |
|  |                           |                               |  |                            |          |
| f Dividends from related organization(s)   |                           |                               |  | ¥                          | X        |
|  |                           |                               |  | , t                        | ×        |
| g date of assets to related organization(s)  |                           |                               |  | 6                          | 4        |
| h Purchase of assets from related organization(s)  |                           |                               |  | ŧ                          | ×        |
| i Exchange of assets with related organization(s)  |                           |                               |  | ÷                          | ×        |
| j Lease of facilities, equipment, or other assets to related organization(s)   |                           |                               |  | 1j                         | X        |
|  |                           |                               |  |                            |          |
| k Lease of facilities, equipment, or other assets from related organization(s)   |                           |                               |  | ¥                          | ×        |
|  | nization(s)               |                               |  | 1                          | X        |
|  | nization(s)               |                               |  | E F                        | ×        |
|  |                           |                               |  | Ξ.                         |          |
| n Sharing of tacilities, equipment, mailing lists, or other assets with related organization(s)  | on(s)                     |                               |  | Ę                          |          |
| <ul> <li>Sharing of paid employees with related organization(s)</li> </ul>   |                           |                               |  | ٩                          | ×        |
|  |                           |                               |  |                            |          |
| <b>b</b> Reimbursement paid to related organization(s) for expenses  |                           |                               |  | 10                         | ×        |
|  |                           |                               |  | - 7<br>F                   | ×        |
|  |                           |                               |  | 2                          | :        |
|  |                           |                               |  | ł                          | ~        |
|  |                           |                               |  | -                          |          |
| s Other transfer of cash or property from related organization(s)  |                           |                               |  | 1s                         | ×        |
| 2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds. | tho must complete thi     | s line, including covered r   | elationships and transaction thresholds.     |                            |          |
| (a)<br>Name of related organization  | <b>(b)</b><br>Transaction | <b>(c)</b><br>Amount involved | (d)<br>Method of determining amount involved | lvolved                    |          |
|  | type (a-s)                |                               |  |                            |          |
|  |                           |                               |  |                            |          |
| (1)  |                           |                               |  |                            |          |
| 3  |                           |                               |  |                            |          |
| (2)  |                           |                               |  |                            |          |
| 5  |                           |                               |  |                            |          |
| (3)  |                           |                               |  |                            |          |
| :  |                           |                               |  |                            |          |
| (4)  |                           |                               |  |                            |          |
|  |                           |                               |  |                            |          |
|  |                           |                               |  |                            |          |
| (6)  |                           |                               |  |                            |          |
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|  | с<br>Ц                    |                               |  |                            |          |

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