Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

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

Open to Public Inspection

Α	For the	e 2020 caien	dar year, or tax year begin	ning	, 2020,	and ending	l		,	20	
В	Check if	applicable:	С					D Employ	er identi	fication number	
	Add	ress change	Global Energy Mon	nitor				82-	2723	327	
	X Nam	ne change	1254 Utah Street				ŀ	E Telepho			
	H	al return	San Francisco, C					115	-206	-0906	
	-		·				ŀ	413	200	0900	
		return/terminated						^ -		. 1 540	0.01
	\vdash	ended return	F			Ι.	I(-) lo this s	G Gross r			
	App	lication pending		Ted Nace			` '			103	—
			Same As C Above			'	If "No,"	subordinates attach a list	. See ins	1? Yes tructions	No
<u> </u>	Tax-ex	kempt status:	X 501(c)(3) 501(c) ()◀ (insert no.)	4947(a)(1) or	527					
J	Web	site: ► ww	w.globalenergymor	nitor.org		H	l(c) Group e	exemption nu	umber 🕨	•	
K	Form o	of organization:	X Corporation Trust	Association Other ►	LY	ear of formation	n: 2017	7 M s	State of le	egal domicile: CA	I
Pa	art I	Summar	у								
	1 E	Briefly descri	be the organization's missi	on or most significant a	activities:The	purpos	e of (Global	Ene	rgy Monit	or
മ			velop shared info								
Activities & Governance	1	movement	to address the i	impacts of foss	il fuels	and mov	ve to	clean	ener	gy source	es.
Ĕ											
8			ox ► if the organization						net as:	sets.	
Ğ			oting members of the gover						3		5
တ			dependent voting members						4		4
÷			of individuals employed in						5		17
훓			of volunteers (estimate if						6		6
Ă			ed business revenue from F						7a		0.
	b N	vet unrelated	d business taxable income	from Form 990-1, Part	I, line II				7b		0.
		S 4 - : 15 4 :	and mante (Deat VIII line	11-1				rior Year		Current Y	
<u>e</u>			and grants (Part VIII, line					,128,0		1,537	
Revenue			vice revenue (Part VIII, line					46,9	95.	6	,000.
é			ncome (Part VIII, column (A	-				- 1	2.4		
ш.			e (Part VIII, column (A), lir						34.	1 540	001
			e – add lines 8 through 11					,174,9	124.	· · · · · · · · · · · · · · · · · · ·	,001.
			imilar amounts paid (Part I							10	,000.
			to or for members (Part I)								
ø	15		er compensation, employee					513,0	96.	1,131	<u>,062.</u>
nse	16a F	Professional	fundraising fees (Part IX, o	olumn (A), line 11e)							
Expenses	b∃	Total fundrais	sing expenses (Part IX, col	umn (D), line 25) ►	4	7,499.					
ш	17	Other expens	ses (Part IX, column (A), lir	nes 11a-11d, 11f-24e)				228,7	700.	375	,242.
			es. Add lines 13-17 (must e					741,7			,304.
			expenses. Subtract line 1					433,1			, 697.
- S							Reginnin	a of Currer		End of Ye	•
anc anc	20 T	Total assets	(Part X, line 16)				Degillilli	840,8			,979.
Net Assets Fund Balanc	21 1		es (Part X, line 26)					22,2		175	744.
E t	22 N		fund balances. Subtract li								
	art II	Signatur		ne zi nom me zo				818,5	38.	812	,235.
com	er penaitie plete. Dec	es of perjury, I de claration of prepa	eclare that I have examined this retu arer (other than officer) is based on a	rn, including accompanying scr all information of which prepare	nedules and statem er has any knowled	nents, and to th lge.	e best of my	y knowleage	and bell	et, it is true, correc	t, and
c:		Signatu	re of officer				Dat	ie .			
Siç He	JII	то а	Maga				Dmaai	dont			
110	10		Nace print name and title				Presi	.aent			
			preparer's name	Preparer's signature		Date	I	0 1	7	PTIN	
_			·			Date		-	<u> </u>		,
Pa			n Burstyn	Harmon Burstyn	l	<u> </u>		self-employ	ed	P00855188	i
Pro	eparei		mmulon Bolloll								
US	e Only	y Firm's addre						Firm's EIN		-0228024	
			WALNUT CREEK,					Phone no.	(925	5) 286 - 352	22
Ma	y the IR	RS discuss th	is return with the preparer	shown above? See ins	tructions					. X Yes	No

4 c (Code: _) (Expenses \$	221,141.	including grants	of \$) (Revenue	\$	530,526.
	Share	d program expenses	benefit two	or more of	her progra	m categories	(Coal,	Oil and
(Gas,	Steel). These expen	ses include	personnel	consultin	g, and operat	ing cos	sts that
č	aren'	t applicable to a s	ingle GEM p	rogram. The	interconn	ected nature	of GEM	's work
<u>r</u>	<u>means</u>	that many of our p	rojects sha	re staff an	nd resource	s. Shared pro	gram o	ıtputs
_	<u>inclu</u>	de the more than 20	,000 public	ly-availab	le pages on	GEM Wiki as	well as	s_all
_(<u>other</u>	publications, repo	rts, tracke	rs, data se	ets, and ot	<u>her informati</u>	onal ma	aterial
1	that	<u>GEM_creates_to_serv</u>	<u>e stakehold</u>	er needs.				
_								
_								
_								
_								
4 d C	Other pro	ogram services (Describe on S	Schedule O.)	See Sch	edule O			

\$

143,167. including grants of

(Expenses

4 e Total program service expenses ▶

See Schedule O

) (Revenue \$

Form 990 (2020) Global Energy Monitor Part IV Checklist of Required Schedules

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

Form 990 (2020) Global Energy Monitor Part IV 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? <i>If 'Yes,' complete Schedule J.</i>	23		Х
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		Х
- 1	b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
•	c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
	d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25	a 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		Х
1	b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If 'Yes,' complete Schedule L, Part II</i>	26		Х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If 'Yes,' complete Schedule L, Part III.	27		Х
28	instructions, for applicable filing thresholds, conditions, and exceptions):			
;	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If 'Yes,' complete Schedule L, Part IV	28a		X
ı	b A family member of any individual described in line 28a? If 'Yes,' complete Schedule L, Part IV.	28b		X
•	c A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If Yes,' complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If 'Yes,' complete Schedule M</i>	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		Χ
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II.	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Schedule R, Part I	33		Х
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
35	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
ļ	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		
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		Х
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		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O.	38	Х	
Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			
1:	a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		Yes	No
	b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
	c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c		
BAA			990 (3020°

Form 990 (2020) Global Energy Monitor

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

			Yes	No
	a 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 17			
ı	f at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			• • •
	a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3 a		Х
	b If 'Yes,' has it filed a Form 990-T for this year? <i>If 'No' to line 3b, provide an explanation on Schedule 0</i>	3 b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4 a		Х
١	b If 'Yes,' enter the name of the foreign country ►			
.	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	5 a		X
	a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		X
	c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5 c		71
	<u>-</u>	30		
	a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6 a		Х
	b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6 b		
7	Organizations that may receive deductible contributions under section 170(c).			
ä	a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and	7 -		Х
	services provided to the payor?	7 a 7 b		Λ
	c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file	7 D		
	Form 8282?	7с		Х
	d If 'Yes,' indicate the number of Forms 8282 filed during the year			
	e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 e		X
	F Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		X
	g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 g		
ı	n If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7 h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring			
	organization have excess business holdings at any time during the year?	8		
	Sponsoring organizations maintaining donor advised funds.	-		
	a Did the sponsoring organization make any taxable distributions under section 4966?	9 a		
	b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9 b		
	Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12			
	o Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
	Section 501(c)(12) organizations. Enter:			
	a Gross income from members or shareholders			
ı	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
12 a	a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
ı	b 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.			
ä	a Is the organization licensed to issue qualified health plans in more than one state?	13 a		
	Note: See the instructions for additional information the organization must report on Schedule O.			
ı	b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand			77
	a Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
	a If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation on Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	15		Х
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		Х
	If 'Yes,' complete Form 4720, Schedule O.			

Kimberly Kelly 649 Mission St.,

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

San Francisco CA 94105 415-655-4980

5th Floor

Form 990	(2020)	Global	Energy	Monitor
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Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

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

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

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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.										
				(C))					
(A) Name and title	(B) Average hours per	Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other
	week (list any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	compensation from the organization and related organizations
_(1) Ted Nace	42									
President	0	Χ		Χ				102,458.	0.	19,500.
(2) Joshua Kruskal Ops./Fin. Dir.	<u>40</u>			Х				48,998.	0.	0.
	1	Х		Χ				0.	0.	0.
(4) Dan Newman	0.25									
Director	0	Χ						0.	0.	0.
Secretary	0.25	Х		Х				0.	0.	0.
(6) Han Chen Director	0.25	Х						0.	0.	0.
		21						0.	0.	0.
(10)										
(11)										
(12)										
(13)										
(14)										

·u	T VII Section A. Officers, Directors, Tru		ley	<u> </u>	•		C3,	anı	i riigilest coli	iperisateu Lilipi	Oyees (Jonunueu)
		(B)			(C	•						_
	(A)	Average hours	box	, unle	ss pe	erson	than	n an	(D) Reportable	(E) Reportable	(F	
	Name and title	per week	offic	cer ar	nd a	direct	or/trus	tee)	compensation from	compensation from	Estimated of ot	ther .
		(list any hours	Individual trustee or director	nstit	Officer	Key employee	empl High	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compensa the organ	nization
		for related	rect	ution	ΦĘ	emp	est c	<u>e</u>			and re organiz	
		organiza - tions below	¥ ₹	ปลา		loye	mp					
		dotted line)	stee	Institutional trustee		O	Highest compensated employee					
				O			ted					
(15)												
			•									
(16)												
<u>(17)</u>			-									
(1.0)												
(18)			-									
(19)												
<u>\.</u>			•									
(20)												
			•									
(21)												
(22)												
(23)												
(23)			-									
(24)												
			-									
(25)												
	Subtotal							•	151,456.	0.	19	9,500.
	Total from continuation sheets to Part VII, Section							-	0.	0.	1 (0.
	Total (add lines 1b and 1c) Total number of individuals (including but not limited								151,456.	0.		9,500.
_	from the organization \(\bullet \)	10 11030 1	isicu	abov	vc) i	WIIO	ICCCI	vcu	more than \$100,00	o or reportable comp	crisation	
1	1										Υ	es No
3	Did the organization list any former officer, direct	tor. truste	e. ke	ev er	lam	ovee	e. or	hial	nest compensated	emplovee		
	on line 1a? If 'Yes,' complete Schedule J for such	h individu	al								. 3	X
4	For any individual listed on line 1a, is the sum of	reportab	le co	mpe	nsa	tion	and	oţh	er compensation	from		
	the organization and related organizations greate such individual										. 4	Х
5	Did any person listed on line 1a receive or accrue	e compen	satio	n fro	om	any	unre	late	ed organization or	individual		
	for services rendered to the organization? If 'Yes	,' comple	te So	ched	lule	J fo	r suc	ch p	erson		. 5	X
<u>Sec</u>	tion B. Independent Contractors Complete this table for your five highest compensations.	sated inde	enen	dent	COL	ntrad	rtors	tha	t received more t	nan \$100 000 of		
	Complete this table for your five highest compensation from the organization. Report compensation	sation for	the c	alen	dar	year	endi	ng v	vith or within the or	ganization's tax year		
	(A) Name and business addr	.000							(B) Description (of convious	(C) Compens	ation
	Name and pusiness addi	USS							Description	of services	Compens	alion
2	Total number of independent contractors (including b	ut not lim	ited to	o tho	se I	isted	abo	ve)	who received more	than		
	100,000 of compensation from the organization	D 0										(2020)

	•		- 11	_	_
Part VIII	Ctata	mant of E	Povioniio		
raitviii	State	mentorr	tevenue		

		Check if Schedule O contains a response or note to	any line in this Part V	III		
			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	b c d e	Federated campaigns 1a Membership dues 1b Fundraising events 1c Related organizations 1d Government grants (contributions) 1e All other contributions, gifts, grants, and similar amounts not included above 1f 1,537,001				
Contribu and Othe	_	Noncash contributions included in lines 1a-1f	1,537,001.			
Revenue	2a b	Program Revenue 900099	6,000.	6,000.		
Program Service Revenue	c d e					
Progra	g	All other program service revenue Total. Add lines 2a-2f	6,000.			
	3 4 5	Investment income (including dividends, interest, and other similar amounts) Income from investment of tax-exempt bond proceeds Royalties	>			
	b c	(i) Real (ii) Personal				
	7 a	Net rental income or (loss)				
		Gain or (loss)	>			
Other Revenue		Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18				
Q		Net income or (loss) from fundraising events	>			
		Gross income from gaming activities. See Part IV, line 19				
	С	Net income or (loss) from gaming activities Gross sales of inventory, less	>			
		returns and allowances	>			
<u> </u>		Business Code				
ž ž	11 a b c d					
層	מ					
Miscellaneous Revenue	d	All other revenue				
	е	Total. Add lines 11a-11d	•			
	12	Total revenue. See instructions	1,543,001.	6,000.	0.	0.

Part IX Statement of Functional Expenses
Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

	Check if Schedule O contains a re			(C)	(D)
Do i 6b,	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	10,000.	10,000.		
2	Grants and other assistance to domestic individuals. See Part IV, line 22	,	,		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	170,956.	151,467.	7,351.	12,138.
6	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7	Other salaries and wages	849,453.	735,663.	82,154.	31,636.
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	0137103.	7337003.	02/101.	31,030.
9	Other employee benefits	30,766.		30,766.	
10	Payroll taxes	79,887.	71,272.	5,077.	3,538.
11	Fees for services (nonemployees):				
a	Management				
ŀ) Legal	1,000.		1,000.	
(Accounting	40,968.		40,968.	
C	Lobbying				
•	Professional fundraising services. See Part IV, line 17				
	Investment management fees				
	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule 0.\$ch. OAdvertising and promotion	276,372.	275,322.	1,050.	
13	Office expenses	701.		701.	
14	Information technology	17,073.	15,941.	1,132.	
15	Royalties	11,013.	10/311.	1,102.	
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 20	Conferences, conventions, and meetings				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	1,412.		1,412.	
	Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.).	1,412.		1,412.	
ā	Database Sub. Fees	24,266.	24,266.		
	Computer Hardware & Fees	7,554.	6,790.	764.	
	Payroll Fees	2,190.		2,190.	
	Exchange Loss	1,979.		1,979.	
	All other expenses	1,727.	844.	696.	187.
25	Total functional expenses. Add lines 1 through 24e	1,516,304.	1,291,565.	177,240.	47,499.
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)				

		Check if Schedule O contains a response or note to	o any line	e in this Part X					
					(A) Beginning of year		(B) End of year		
	1	Cash — non-interest-bearing			167,838.	1	588,090.		
	2	Savings and temporary cash investments				2			
	3	Pledges and grants receivable, net				3			
	4	Accounts receivable, net			671,947.	4	389,706.		
	5	Loans and other receivables from any current or form trustee, key employee, creator or founder, substantia controlled entity or family member of any of these pe	ner officer I contribu ersons	tor, or 35%		5			
	6	Loans and other receivables from other disqualified p		_					
		section 4958(f)(1)), and persons described in section				6			
	7	Notes and loans receivable, net		/ ` /		7			
ts	8	Inventories for sale or use		<u> </u>		8			
Assets	9	Prepaid expenses and deferred charges		<u> </u>	1,000.	9	2,493.		
As	_		1 1		1,000.		2,455.		
٠	10 a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10 a	7,690.					
		Less: accumulated depreciation		., 5551		10 c	7,690.		
	11	Investments – publicly traded securities				11	.,		
	12	Investments – other securities. See Part IV, line 11		<u>-</u>		12			
	13	Investments – program-related. See Part IV, line 11.		-		13			
	14	Intangible assets			14				
	15	Other assets. See Part IV, line 11		52.	15				
	16	Total assets. Add lines 1 through 15 (must equal line		840,837.	16	987,979.			
	17	Accounts payable and accrued expenses			22,299.	17	175,744.		
	18	Grants payable			18				
	19	Deferred revenue		_		19			
	20	Tax-exempt bond liabilities		_		20			
ies	21	Escrow or custodial account liability. Complete Part				21			
Liabilities	22	Loans and other payables to any current or former of key employee, creator or founder, substantial contribution controlled entity or family member of any of these pe	ficer, dire utor, or 3! ersons	ector, trustee, 5%		22			
	23	Secured mortgages and notes payable to unrelated the		_		23			
	24	Unsecured notes and loans payable to unrelated third	•	<u></u>		24			
	25	Other liabilities (including federal income tax, payable and other liabilities not included on lines 17-24). Com	es to relat oplete Par	ted third parties, rt X of Schedule D.		25			
	26	Total liabilities. Add lines 17 through 25			22,299.	26	175,744.		
ıces		Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33.	e ► [X					
ılar	27	Net assets without donor restrictions			237,636.	27	-629,615.		
ä	28	Net assets with donor restrictions			580,902.	28	1,441,850.		
Net Assets or Fund Balance		Organizations that do not follow FASB ASC 958, che and complete lines 29 through 33.	• 🛮 📗						
ō	29	Capital stock or trust principal, or current funds	Capital stock or trust principal, or current funds						
sts	30	Paid-in or capital surplus, or land, building, or equipn				29 30			
SS	31	Retained earnings, endowment, accumulated income				31			
t A	32	Total net assets or fund balances			818,538.	32	812,235.		
Ne	33	Total liabilities and net assets/fund balances		<u></u>	840,837.	33	987,979.		
ВΛ	^		TFFA01111		,		Earm 990 (2020)		

Pa	rt XI Reconciliation of Net Assets				_
	Check if Schedule O contains a response or note to any line in this Part XI.				. X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,5	43,0	01.
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,5	16,3	304.
3	Revenue less expenses. Subtract line 2 from line 1	3		26,6	<u> 97.</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	8	18,5	38.
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O). See Schedule O	9	_	33,0	000.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
_	column (B))	10	8	12,2	<u> 235.</u>
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.				
2	a 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 reviewe separate basis, consolidated basis, or both: Separate basis Both consolidated and separate basis	d on a			
	b Were the organization's financial statements audited by an independent accountant?		. 2b		X
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separa basis, consolidated basis, or both:	te			
	Separate basis Consolidated basis Both consolidated and separate basis				
•	c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?		. 2c		
	If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.				
3	a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		. За		Х
	b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits				
BAA	TEEA0112L 10/19/20		Form	1 990 ((2020)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2020

Open to Public Inspection

		a December 1					Employer identii	
		l Energy Monitor	······································			- 1 - 1 - i -	82-27233	
		Reason for Public Cha						actions.
111e (nya T	A church, convention of church	`			,	,	
2	_	A school described in section 1	•		,		1).	
	-			•		•	\V:::\	
3 4	-	A hospital or a cooperative h A medical research organiza	,				• • •	Enter the beenitelle
4		name, city, and state:				u III sec		
5		An organization operated for section 170(b)(1)(A)(iv). (Co	the benefit of a collemplete Part II.)	ege or university owned	or oper	ated by	a governmental unit	described in
6		A federal, state, or local gove	ernment or governme	ental unit described in s	ection 1	70(b)(1)	(A)(v).	
7	X	An organization that normally r in section 170(b)(1)(A)(vi).	eceives a substantial p Complete Part II.)	part of its support from a	governm	ental uni	t or from the general p	ublic described
8		A community trust described	in section 170(b)(1)(A)(vi). (Complete Part I	l.)			
9		An agricultural research organia	zation described in sec	ction 170(b)(1)(A)(ix) oper	ated in c	onjunctio	on with a land-grant co	llege
	<u> </u>	or university or a non-land-gran	nt college of agriculture		the nan	ne, city,		
10		An organization that normally from activities related to its investment income and unrel June 30, 1975. See section 5	exempt functions, sub lated business taxabl	oject to certain exception e income (less section	ns; and	(2) no r	nore than 33-1/3% of	its support from gross
11		An organization organized ar	nd operated exclusive	ely to test for public safe	ety. See	section	1 509(a)(4).	
12		An organization organized ar or more publicly supported o lines 12a through 12d that de	rganizations describe	ed in section 509(a)(1) c	r sectio	n 509(a)(2). See section 509	(a)(3). Check the box in
а		Type I. A supporting organization organization(s) the power to recomplete Part IV, Sections A	on operated, supervise	d, or controlled by its sup	ported o	Irganizat	ion(s), typically by givin	ng the supported
b		Type II. A supporting organiz management of the supporting must complete Part IV. Secti	ation supervised or or organization vested in	controlled in connection the same persons that c	with its ontrol or	support manage	ed organization(s), b the supported organiz	y having control or ation(s). You
С		Type III functionally integrated organization(s) (see instruction		tion operated in connection	n with, a	nd functio	onally integrated with, it	s supported
d		Type III non-functionally integrated. The o	r ated. A supporting org organization generally	janization operated in cor v must satisfy a distribu	nection	with its s	supported organization	(s) that is not
е		instructions). You must com Check this box if the organize integrated, or Type III non-fu	ation received a writt	en determination from	the IRS	that it is	a Type I, Type II, Ty	pe III functionally
f	Er	nter the number of supported of						
		ovide the following information	-					
	(i) Na	ame of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	organizat in your g	s the tion listed overning nent?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
					Yes	No		
(A)								
(B)								
(C)								
(D)								
<u>(E)</u>								
-								

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

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

Sec	tion A. Public Support						
begi	ndar year (or fiscal year nning in) ►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.')			616,685.	1,128,063.	1,537,001.	3,281,749.
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0.
	Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly supported	0.	0.	616,685.	1,128,063.	1,537,001.	3,281,749.
	organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						2,640,764.
6	Public support. Subtract line 5 from line 4						640,985.
Sec	tion B. Total Support						
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
7	Amounts from line 4	0.	0.	616,685.	1,128,063.	1,537,001.	3,281,749.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						0.
9	Net income from unrelated business activities, whether or not the business is regularly carried on						0.
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) See Part VI.			9,000.			9,000.
	Total support. Add lines 7 through 10						3,290,749.
12	Gross receipts from related activ	ities, etc. (see ins	structions)			12	0.
13	First 5 years. If the Form 990 is organization, check this box and	for the organization stop here	on's first, second,	third, fourth, or f	ifth tax year as a	section 501(c)(3)	▶ 🗓
Sec	tion C. Computation of Pul	olic Support P	ercentage				
14	Public support percentage for 20	20 (line 6, column	n (f), divided by li	ne 11, column (f))	14	%
	Public support percentage from 2	•	•				%
	33-1/3% support test—2020. If the and stop here. The organization	qualifies as a pub	olicly supported or	rganization			▶ ∐
b	33-1/3% support test—2019. If th and stop here. The organization	e organization did qualifies as a pub	I not check a box olicly supported o	on line 13 or 16a rganization	a, and line 15 is 3	3-1/3% or more, o	check this box
17a	10%-facts-and-circumstances te or more, and if the organization the organization meets the facts	meets the facts-ar	nd-circumstances	test, check this I	box and stop here	e. Explain in Part	VI how
	10%-facts-and-circumstances te or more, and if the organization organization meets the 'facts-and	meets the facts-ard-circumstances' t	nd-circumstances est. The organiza	test, check this lation qualifies as	box and stop here a publicly support	e. Explain in Part ed organization.	VI how the ►
18	Private foundation. If the organiz	zation did not che	ck a box on line 1	13, 16a, 16b, 17a	, or 17b, check th	is box and see ins	structions

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

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

Sec	tion A. Public Support	ists listed below,	please complete	i ait ii.)			
	lar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.')	(a) 2010	(b) 2017	(6) 2010	(u) 2019	(e) 2020	(i) Total
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose.						•
3	Gross receipts from activities that are not an unrelated trade or business under section 513.						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year.						
С	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
	tion B. Total Support			1	1		
	dar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
	Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
	Total support. (Add lines 9, 10c, 11, and 12.)						
	First 5 years. If the Form 990 is organization, check this box and	stop here					▶ □
	tion C. Computation of Pul						
	Public support percentage for 20	•			-		%
	Public support percentage from 2					16	%
	tion D. Computation of Inv					<u>. </u>	
	Investment income percentage for	· ·		-			0/0
	Investment income percentage f						%
	33-1/3% support tests—2020. If t is not more than 33-1/3%, check	this box and sto	p here. The orgar	nization qualifies	as a publicly supp	orted organization	۱ 🟲 📗
	33-1/3% support tests—2019. If t line 18 is not more than 33-1/3% Private foundation. If the organization	, check this box	and stop here. Th	e organization qu	ialifies as a public	ly supported organ	nization ►
20	i iivate ibuiiuatibii. Ii tile orgalii.	Zation ald Hot CHE		1 -1 , 13a, 01 130, (CHECK THIS DOX ALL	1 300 11131111101115.	· · · · · · · · · · · · · · · · · · ·

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

			Yes	No
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.	1		
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).	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.	3a		
k	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.	3b		
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.	3c		
4 a	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.	4a		
t	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.	4b		
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.	4c		
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).	5a		
t	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?	5b		
c	: Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
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? <i>If 'Yes,' provide detail in Part VI.</i>	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If 'Yes,' complete Part I of Schedule L (Form 990 or 990-EZ).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If 'Yes,' complete Part I of Schedule L (Form 990 or 990-EZ).	8		
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 .	9a		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If 'Yes,' provide detail in Part VI .	9b		
c	: Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If 'Yes,' provide detail in Part VI.	9с		
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)? If 'Yes,' answer line 10b below.	10a		
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.).	10b		

BAA

Part	t IV	Supporting Organizations (continued)			
11	Lloc t	the examination eccented a gift or contribution from any of the following persons?		Yes	No
		the organization accepted a gift or contribution from any of the following persons? son who directly or indirectly controls, either alone or together with persons described in lines 11b and 11c below,			
-		overning body of a supported organization?	11a		
b	A fan	nily member of a person described in line 11a above?	11b		
		controlled entity of a person described in line 11a or 11b above? If 'Yes' to line 11a, 11b, or 11c, provide detail in Part VI .	11c		
Sect	tion I	B. Type I Supporting Organizations		11	
1	Did #	he governing body, members of the governing body, officers acting in their official capacity, or membership of one		Yes	No
'	or mo office organ than	ore supported organizations have the power to regularly appoint or elect at least a majority of the organization's ers, directors, or trustees at all times during the tax year? If 'No,' describe in Part VI how the supported inization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers			
		g the tax year.	1		
2	that o	the organization operate for the benefit of any supported organization other than the supported organization(s) operated, supervised, or controlled the supporting organization? If 'Yes,' explain in Part VI how providing such fit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the orting organization.	2		
Sect	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 ch of the organization's supported organization(s)? If 'No,' describe in Part VI how control or management of the			
		orting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
Sect	tion I	D. All Type III Supporting Organizations			
1	Did #	he organization provide to each of its supported organizations, by the last day of the fifth month of the		Yes	No
'	organ	nization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
		(ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the nization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were	any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
_	organ	nization(s) or (ii) serving on the governing body of a supported organization? If 'No,' explain in Part VI how organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	Ry re:	ason of the relationship described in line 2, above, did the organization's supported organizations have a significant			
Ū	voice	in the organization's investment policies and in directing the use of the organization's income or assets at mes during the tax year? If 'Yes,' describe in Part VI the role the organization's supported organizations played			
		is regard.	3		
Sect	tion I	E. Type III Functionally Integrated Supporting Organizations			
1	Check	k the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
а	Пт	The organization satisfied the Activities Test. Complete line 2 below.			
b	Πт	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	Πт	he organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see	instrı	ıctions	s).
•	Λ - 1::	The Tark Annual Case Or and Oh halves	ĺ		
		ities Test. Answer lines 2a and 2b below.		Yes	No
а	organ respo	substantially all of the organization's activities during the tax year directly further the exempt purposes of the organization(s) to which the organization was responsive? If 'Yes,' then in Part VI identify those supported nizations and explain how these activities directly furthered their exempt purposes, how the organization was possive to those supported organizations, and how the organization determined that these activities constituted			
	subst	tantially all of its activities.	2a		
b	more	he activities described in line 2a, above, constitute activities that, but for the organization's involvement, one or of the organization's supported organization(s) would have been engaged in? If 'Yes,' explain in Part VI the			
		ons for the organization's position that its supported organization(s) would have engaged in these activities or the organization's involvement.	2b		
3	Parer	nt of Supported Organizations. <i>Answer lines 3a and 3b below.</i>			
	Did th	the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of of the supported organizations? <i>If 'Yes' or 'No,' provide details in Part VI.</i>	3a		
b	Did th	ne organization exercise a substantial degree of direction over the policies, programs, and activities of each of its orted organizations? If 'Yes,' describe in Part VI the role played by the organization in this regard.	3b		

Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting Orga	anizati	ions	
1	Check here if the organization satisfied the Integral Part Test as a qualifying trus instructions. All other Type III non-functionally integrated supporting organization	t on No ns mus	v. 20, 1970 (explain in t complete Sections A	n Part VI). See through E.
Sec	tion A – Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sec	tion B — Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
ā	Average monthly value of securities	1a		
	Average monthly cash balances	1b		
	Fair market value of other non-exempt-use assets	1c		
	Total (add lines 1a, 1b, and 1c)	1d		
•	e 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		
Sec	tion C — Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functionally inte (see instructions).	egrated	Type III supporting or	ganization

Schedule A (Form 990 or 990-EZ) 2020

BAA

Pa	rt V \parallel Type III Non-Functionally integrated 509(a)(3) Supporting Organizations (cont	inuea)	
Sec	tion D – Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1	
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2	
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3	
4	Amounts paid to acquire exempt-use assets	4	
5	Qualified set-aside amounts (prior IRS approval required – provide details in Part VI)	5	
6	Other distributions (describe in Part VI). See instructions.	6	
7	Total annual distributions. Add lines 1 through 6.	7	
8	Distributions to attentive supported organizations to which the organization is responsive (provide details		
	in Part VI). See instructions.	8	
9	Distributable amount for 2020 from Section C, line 6	9	
10	Line 8 amount divided by line 9 amount	10	

Section E — Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2020	(iii) Distributable Amount for 2020
1 Distributable amount for 2020 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2020 (reasonable cause required — explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2020			
a From 2015			
b From 2016			
c From 2017			
d From 2018			
e From 2019			
f Total of lines 3a through 3e			
g Applied to underdistributions of prior years			
h Applied to 2020 distributable amount			
i Carryover from 2015 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2020 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2020 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2020, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
6 Remaining underdistributions for 2020. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
7 Excess distributions carryover to 2021. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2016			
b Excess from 2017			
c Excess from 2018			
d Excess from 2019			
e Excess from 2020			
BAA		Schedule A (Fo	rm 990 or 990-EZ) 2020

BAA

Schedule A (Form 990 or 990-EZ) 2020

82-2723327

Page 8

Part VI

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

Part II, Line 10 - Other Income

Nature and Source	2020	2019	2018	2017	2016
Other Total	<u>e</u> 0	٠	\$ 9,000.	٠	٥
IULai	Ş 0.	\$ 0.	\$ 9,000.	Ş 0.	Ş 0.

Schedule B

(Form 990, 990-EZ, or 990-PF)
Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

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

Employer identification number

2020

Globa	l Energy Monit	or	82-2723327
Organiza	ation type (check one):		
Filers of	:	Section:	
Form 99	0 or 990-EZ	X 501(c)(3) (enter number) organization	
		4947(a)(1) nonexempt charitable trust not treated as a private foundation	on
		527 political organization	
Form 99)-PF	501(c)(3) exempt private foundation	
		4947(a)(1) nonexempt charitable trust treated as a private foundation	
		501(c)(3) taxable private foundation	
		ed by the General Rule or a Special Rule . (8), or (10) organization can check boxes for both the General Rule and a S	pecial Rule. See instructions.
General	Rule		
X		ng Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling ne contributor. Complete Parts I and II. See instructions for determining a contribu	
Special I	Rules		
	under sections 509(a)(received from any on	escribed in section 501(c)(3) filing Form 990 or 990-EZ that met the 33-1/3% (1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line contributor, during the year, total contributions of the greater of (1) \$5,000; ne 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.	e 13, 16a, or 16b, and that
	during the year, total	escribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that rece contributions of more than \$1,000 <i>exclusively</i> for religious, charitable, scient revention of cruelty to children or animals. Complete Parts I (entering 'N/A' address), II, and III.	ific, literary, or educational
	during the year, contr \$1,000. If this box is charitable, etc., purpo	escribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that receibutions exclusively for religious, charitable, etc., purposes, but no such contabecked, enter here the total contributions that were received during the years. Don't complete any of the parts unless the General Rule applies to this vively religious, charitable, etc., contributions totaling \$5,000 or more during the	ributions totaled more than r for an <i>exclusively</i> religious, organization because
Caution	An organization that is	en't covered by the General Rule and/or the Special Rules doesn't file Sched	ula R (Form 990, 990,F7, or

990-PF), but it must answer 'No' on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF,

Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

1

Name of organization

Employer identification number

Global Energy Monitor

82-2723327

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional s	space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Cloud Mountain Foundation	_	Person X
	120 Kellogg Road	\$30,000.	Payroll
	Sheffield, MA 01257	-	(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	European Climate Foundation		Person X
	Reviervismarkt 5	\$ <u>728,475.</u>	Payroll
	The Hague, The Hague 2513 AM Netherlands	-	(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	KR Foundation		Person X
	Linnesgrad 25	\$ <u>180,741.</u>	Payroll
	Copenhagen, Copenhagen 1361 Denmark	-	(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
(a) No.	(b) Name, address, and ZIP + 4 Carbon Tracker Initiative	Total	Type of contribution Person X
	Name, address, and ZIP + 4	Total	Type of contribution
	Name, address, and ZIP + 4 Carbon Tracker Initiative	Total contributions	Person X Payroll
	Name, address, and ZIP + 4 Carbon Tracker Initiative 40 Bermondsey Street	Total contributions	Person X Payroll Noncash (Complete Part II for
	Name, address, and ZIP + 4 Carbon Tracker Initiative 40 Bermondsey Street London, Europe 3 United Kingdom (b)	\$ 100,000.	Type of contribution Person X Payroll
(a) No.	Name, address, and ZIP + 4 Carbon Tracker Initiative 40 Bermondsey Street London, Europe 3 United Kingdom (b) Name, address, and ZIP + 4	\$ 100,000.	Type of contribution Person X Payroll
(a) No.	Name, address, and ZIP + 4 Carbon Tracker Initiative 40 Bermondsey Street London, Europe 3 United Kingdom (b) Name, address, and ZIP + 4 ClimateWorks Foundation	\$ 100,000. (c) Total contributions	Type of contribution Person X Payroll
(a) No.	Name, address, and ZIP + 4 Carbon Tracker Initiative 40 Bermondsey Street London, Europe 3 United Kingdom (b) Name, address, and ZIP + 4 ClimateWorks Foundation 235 Montgomery St., 13th Floor	\$ 100,000. (c) Total contributions	Type of contribution Person X Payroll
(a) No.	Name, address, and ZIP + 4 Carbon Tracker Initiative 40 Bermondsey Street London, Europe 3 United Kingdom (b) Name, address, and ZIP + 4 ClimateWorks Foundation 235 Montgomery St., 13th Floor San Francisco, CA 94104 (b)	\$100_,000 . \$100_,000 . (c) Total contributions \$145_,000 . (c) Total	Type of contribution Person X Payroll
(a) No.	Name, address, and ZIP + 4 Carbon Tracker Initiative 40 Bermondsey Street London, Europe 3 United Kingdom Name, address, and ZIP + 4 ClimateWorks Foundation 235 Montgomery St., 13th Floor San Francisco, CA 94104 Name, address, and ZIP + 4	\$100_,000 . \$100_,000 . (c) Total contributions \$145_,000 . (c) Total	Type of contribution Person X Payroll

Global Energy Monitor

Employer identification number

82-2723327

Part I	Contributors	(see instructions).	Use duplicate copie	es of Part I if additional	space is needed.
--------	--------------	---------------------	---------------------	----------------------------	------------------

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	SeaChange Foundation		Person X Payroll
	One Ferry Building	\$200,000.	Noncash
	San Francisco, CA 94111		(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8	Deutsche Gesellschaft		Person X
	Friedrich-Ebert-Allee 32+36	\$45 <u>,</u> 526.	Payroll Noncash
	Bonn, EU 53113 Germany		(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9	Ford Foundation		Person X Payroll
	320 East 43rd Street	\$120,000.	Noncash
	New York, NY 10017		(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
10_	Sustainable Markets Foundation		Person X
	45 W 36th St., 6th Floor	\$75,000.	Payroll Noncash
	New York, NY 10018		(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
BAA	TEEA0702L 07/28/20		0, 990-EZ, or 990-PF) (2020)

1

Name of organization

Employer identification number 82-2723327

Global Energy Monitor

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

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	N/A	 	
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		 _s	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		 \$ 	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	<u></u>	 	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	<u></u>	 \$ 	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
BAA		chedule B (Form 990, 990-E	

Global Energy Monitor 82-2723327 Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.).........▶\$ Use duplicate copies of Part III if additional space is needed. (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held N/A (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Supplemental Financial Statements

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

► Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection
Employer identification number

Glo	bbal Energy Monitor			82-2723327
Par	付Ⅰ Organizations Maintaining Dono	r Advised Funds or Other S	Similar Funds or A	ccounts.
	Complete if the organization answ	wered 'Yes' on Form 990, P	art IV, line 6.	
_		(a) Donor advised fund	ls (b)	Funds and other accounts
1	Total number at end of year			
2	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and dor are the organization's property, subject to the			
6	Did the organization inform all grantees, dono for charitable purposes and not for the benefit impermissible private benefit?	t of the donor or donor advisor, or	for any other purpose of	conferring
Par				
ı aı	Complete if the organization answ	wered 'Yes' on Form 990, P	art IV, line 7.	
1	Purpose(s) of conservation easements held by			_
	Preservation of land for public use (for examp	ple, recreation or education)	Preservation of a his	storically important land area
	Protection of natural habitat		Preservation of a ce	rtified historic structure
	Preservation of open space	·		
2	Complete lines 2a through 2d if the organization hast day of the tax year.	neld a qualified conservation contribu	tion in the form of a cons	servation easement on the
				Held at the End of the Tax Year
•	a Total number of conservation easements			
	Total acreage restricted by conservation easer			
•	Number of conservation easements on a certif	fied historic structure included in (a) 2c	
(d Number of conservation easements included in structure listed in the National Register		2d	
3	Number of conservation easements modified, trantax year ►	nsferred, released, extinguished, or to	erminated by the organiza	ation during the
4	Number of states where property subject to conse	ervation easement is located >		
5	Does the organization have a written policy reand enforcement of the conservation easemer			
6	Staff and volunteer hours devoted to monitoring, i			
7	Amount of expenses incurred in monitoring, insper ►\$	ecting, handling of violations, and ent	forcing conservation ease	ments during the year
8	Does each conservation easement reported or and section 170(h)(4)(B)(ii)?	n line 2(d) above satisfy the requir	ements of section 170(h)(4)(B)(i) Yes No
9	In Part XIII, describe how the organization rep include, if applicable, the text of the footnote t conservation easements.	orts conservation easements in its to the organization's financial state	s revenue and expense ements that describes t	statement and balance sheet, and he organization's accounting for
Par	Organizations Maintaining Colle Complete if the organization answ	ctions of Art, Historical Tre wered 'Yes' on Form 990, P	asures, or Other Sart IV, line 8.	imilar Assets.
1 8	If the organization elected, as permitted under historical treasures, or other similar assets he Part XIII the text of the footnote to its financia	ld for public exhibition, education,	or research in furtheral	nd balance sheet works of art, nce of public service, provide in
I	o If the organization elected, as permitted under historical treasures, or other similar assets held for following amounts relating to these items:	FASB ASC 958, to report in its report public exhibition, education, or res	evenue statement and be earch in furtherance of p	palance sheet works of art, ublic service, provide the
	(i) Revenue included on Form 990, Part VIII,			
	(ii) Assets included in Form 990, Part X			
	amounts required to be reported under FASB	ASC 958 relating to these items:		
	a Revenue included on Form 990, Part VIII, line			
I	Assets included in Form 990, Part X			▶\$

Part III Organizations Maintaining Colle	ections of Art, Histo	orical Treasures, o	r Other Similar Ass	sets (continu	ıed)
3 Using the organization's acquisition, accession, a items (check all that apply):	and other records, check a	ny of the following that m	nake significant use of its	collection	
a Public exhibition	d Loan	or exchange program			
b Scholarly research	e Other				
c Preservation for future generations	<u>—</u>	_			
4 Provide a description of the organization's collect Part XIII.	tions and explain how they	y further the organization	's exempt purpose in		
5 During the year, did the organization solicit or to be sold to raise funds rather than to be ma	aintained as part of the o	organization's collection	.?	Yes	No
Part IV Escrow and Custodial Arranger line 9, or reported an amount or	nents. Complete if t n Form 990, Part X,	the organization an Iine 21.	swered 'Yes' on Fo	orm 990, Par	t IV,
1 a Is the organization an agent, trustee, custodia on Form 990, Part X?	an or other intermediary	for contributions or oth	er assets not included	∏Yes	No
b If 'Yes,' explain the arrangement in Part XIII a				L	
•	·			Amount	
c Beginning balance			1с	-	
d Additions during the year			1 d		
e Distributions during the year			1 e		
f Ending balance			1f		
2 a Did the organization include an amount on Fo	orm 990, Part X, line 21,	for escrow or custodial	account liability?	Yes	No
b If 'Yes,' explain the arrangement in Part XIII.	Check here if the explain	nation has been provide	ed on Part XIII		
Part V Endowment Funds. Complete if	the organization ar	nswered 'Yes' on Fo	orm 990, Part IV, li	ne 10.	
(a) Curren	t year (b) Prior yea	r (c) Two years bac	k (d) Three years back	(e) Four year	s back
1 a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					
2 Provide the estimated percentage of the curre	ent year end balance (lir	ne 1g, column (a)) held	as:		
a Board designated or quasi-endowment ►	ું જ				
b Permanent endowment ►	5				
c Term endowment ► %					
The percentages on lines 2a, 2b, and 2c should e	equal 100%.				
3 a Are there endowment funds not in the possession	n of the organization that a	are held and administered	d for the		
organization by:				Yes	No
(i) Unrelated organizations				. 3a(i)	
(ii) Related organizations				3a(ii)	
b If 'Yes' on line 3a(ii), are the related organization	·			3b	
4 Describe in Part XIII the intended uses of the	organization's endowme	ent funds.			
Part VI Land, Buildings, and Equipmen	rt.				
Complete if the organization ans	swered 'Yes' on Fori	m 990, Part IV, line	e 11a. See Form 99	0, Part X, Iir	ne 10.
Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book va	alue
1 a Land	, , , , ,	\ · /		,	
b Buildings				,	
c Leasehold improvements					
d Equipment		7,690.		7	,690.
e Other		1,030.			, 000.
Total. Add lines 1a through 1e. (Column (d) must e		column (B), line 10c)	-	7	,690.
					, 000.

Schedule D (Form 990) 2020

Part VII Investments — Other Securities. Complete if the organization answered	L'Voc' on Form 99	N/A	990 Part V lina 12
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-	
(1) Financial derivatives	(2) 2001. 10.00	(b) motion of variations cook of one	or your market value
(2) Closely held equity interests.			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
(l)			
Total. (Column (b) must equal Form 990, Part X, column (B) line 12.) ▶			
Part VIII Investments - Program Related.		N/A	200 5 1 1 10
Complete if the organization answered			
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end	d-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
<u>(9)</u> (10)			
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) •			
Part IX Other Assets.	N/A		
Complete if the organization answered		0, Part IV, line 11d. See Form	
	scription		(b) Book value
(1)			
(2) (3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
(10)			
Total. (Column (b) must equal Form 990, Part X, column (B) line 15.)		
Part X Other Liabilities. Complete if the organization answered 'Yes' on F	form 000 Part IV line 1	10 or 11f Soo Form 990 Part V line 2	5
	iption of liability	Te of TH. See Form 930, Part A, fille 23	(b) Book value
(1) Federal income taxes	iption of hability		(b) Book value
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
(10) (11)			
_ ` '			•
Total. (Column (b) must equal Form 990, Part X, column (B) line 25.)			i contract of the contract of
2. Liability for uncertain tax positions. In Part XIII, provide the text of the fo			

Part XI Reconciliation of Revenue per Audited Financial Statements With Re	venue per Return. N/A
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
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:	
a Net unrealized gains (losses) on investments	
b Donated services and use of facilities	
c Recoveries of prior year grants	
d Other (Describe in Part XIII.)	
e Add lines 2a through 2d.	2e
3 Subtract line 2e from line 1	3
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:	
a Investment expenses not included on Form 990, Part VIII, line 7b 4a	
b Other (Describe in Part XIII.)	
c Add lines 4a and 4b.	4c
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5
Part XII Reconciliation of Expenses per Audited Financial Statements With Ex	
Part XII Reconciliation of Expenses per Audited Financial Statements With Excomplete if the organization answered 'Yes' on Form 990, Part IV, line	
	12a.
Complete if the organization answered 'Yes' on Form 990, Part IV, line	12a.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 1 Total expenses and losses per audited financial statements	12a.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25:	12a.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 1 Total expenses and losses per audited financial statements	12a.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities b Prior year adjustments 2 a 2 b	12a.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities b Prior year adjustments c Other losses. 2 Donated Services and Use of facilities	12a.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 1 Total expenses and losses per audited financial statements. 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities. b Prior year adjustments. c Other losses. d Other (Describe in Part XIII.) 2 Interval 1	12a
Complete if the organization answered 'Yes' on Form 990, Part IV, line 1 Total expenses and losses per audited financial statements. 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities. b Prior year adjustments. c Other losses. d Other (Describe in Part XIII.) e Add lines 2a through 2d.	12a
Complete if the organization answered 'Yes' on Form 990, Part IV, line 1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities b Prior year adjustments c Other losses d Other (Describe in Part XIII.) e Add lines 2a through 2d 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b. 4 a	12a
Complete if the organization answered 'Yes' on Form 990, Part IV, line 1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities b Prior year adjustments c Other losses c Other losses d Other (Describe in Part XIII.) e Add lines 2a through 2d 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b 4 a b Other (Describe in Part XIII.) 4 b	12a.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities b Prior year adjustments c Other losses d Other (Describe in Part XIII.) e Add lines 2a through 2d 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b. 4 a	12a.

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

BAA Schedule D (Form 990) 2020

SCHEDULE I (Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Complete if the organization answered 'Yes' on Form 990, Part IV, line 21 or 22. ► Attach to Form 990. ► Go to www.irs.gov/Form990 for the latest information.

Open to Public Inspection

Employer identification number

82-2723327 Global Energy Monitor Part I General Information on Grants 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?..... No 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered 'Yes' on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (c) IRC section (b) EIN (d) Amount of cash grant (f) Method of valuation 1 (a) Name and address of organization (e) Amount of non-cash (a) Description of (h) Purpose of grant or government (book, FMV, appraisal, noncash assistance or assistance assistance (1) Conservation Action Trust Dev. of wiki 5, Shakar Bhavan, LBS Road pages doc. coal Mumbai, India 400086 India 10,000. 0. Cash mines 3 Enter total number of other organizations listed in the line 1 table.

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
1					
2					
3					
4					
5					
6					
7					

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

Part I, Line 2 - Procedures for Monitoring Use of Grants Funds in U.S.

Grant is monitored on the basis of tangible work completed (number of web pages produced).

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization ► Go to www.irs.gov/Form990 for the latest information.

Global Energy Monitor

Employer identification number 82-2723327

Form 990, Part III, Line 4a - Program Service Accomplishments

Coal-

Global Energy Monitor's coal program includes wiki-based information, a global coal plant database, a global coal mine database, a global coal public finance database, a weekly newsletter, and an informational website. Over 15,000 pages on coal-related topics have been posted on GEM.wiki. Topics include environmental and health impacts of coal; profiles of existing and proposed coal plants and mines; and overviews of coal issues in particular states and countries. GEMS's Global Coal Plant Tracker (GCPT) is a database containing information on over 13,000 existing, proposed, and retired coal-fired generating units worldwide. The tracker provides interactive maps and tables on GEM"s public website. The interactive maps and tables allow users to see the location and satellite imagery of individual facilities and to click on links providing footnoted wiki pages on each facility. The GCPT data is also provided in spreadsheet format to researchers at nonprofit groups, universities, international agencies, and media organizations. Its data has been used or cited by over 300 projects. The GCPT is updated twice per year and its findings are publicized in regular reports, most notably in the annual "Boom and Bust" reports released in nine languages (Chinese, English, Hindi, Indonesian, Japanese, Korean, Thai, Turkish, and Vietnamese). GCPT results are widely reported by wire services such as Reuters, the Associated Press, and the BBC, with results reported in over 1,000 media outlets with combined audience bases of over a billion people. CoalWire is a weekly news digest on coal provided via email at no charge to over 1,600 subscribers. GEM's Global Coal Public Finance Tracker shows major government financing for global coal projects, covering all projects since 2013 which have received or are likely to receive public support, including proposed projects. Currently the tracker documents public finance

Name of the organization

Global Energy Monitor

Employer identification number
82-2723327

Form 990, Part III, Line 4a - Program Service Accomplishments

Tracker will provide universal coverage of major global coal extraction, making this data publicly available for free on GEM's website.

Form 990, Part III, Line 4b - Program Service Accomplishments

Oil and Gas-

GEM's oil and gas program includes wiki-based information and a global infrastructure database. Over 6,500 wiki pages on oil and gas-related topics have been posted on GEM.wiki. Topics include environmental and health impacts of oil and gas; profiles of existing and proposed pipelines and terminals; and overviews of oil and gas issues in particular states and countries. The Global Fossil Infrastructure Tracker (GFIT) is a database containing information on over 2,000 existing, proposed, and retired pipelines and terminals worldwide. The tracker provides interactive maps and tables on GEM's website, allowing users to see the location and satellite imagery of individual facilities, and to click on links providing footnoted wiki pages on each facility. The GFIT data is also provided in spreadsheet format to researchers at nonprofit groups, universities, international agencies, and media organizations. The GFIT is updated regularly and its findings are published in regular reports. CoalSwarm has also created the Europe Gas Tracker, which includes over 1,500 pipelines, power plants, terminals, and extraction areas. GEM's Gas Index models the U.S. natural gas system to calculate life cycle methane leakage for natural gas supplies for 71 cities across the country, providing granular data on the emissions from use of natural gas.

Form 990, Part III, Line 4d - Other Program Services Description

Steel-

GEM's forthcoming Global Steel Plant Tracker provides information on global crude steel production plants, and includes information on every plant currently operating at a capacity of one million tonnes per year (mtpa) or more of crude steel. The GSPT

Name of the organization	Employer identification number
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Form 990, Part III, Line 4d - Other Program Services Description

is currently being expanded to include all plants meeting the one mtpa threshold that have been proposed since 2017 or retired or mothballed since 2020. The GSPT map and underlying data are updated annually in January. Each plant included in the tracker is linked to a wiki page on GEM.wiki, which provides additional details. GEM maintains over 1,500 wiki pages on global steel production and related topics.

Form 990, Part VI, Line 11b - Form 990 Review Process

A draft of the Form 990 is provided to the Board for review. Any needed changes are made prior to its filing.

Form 990, Part VI, Line 12c - Explanation of Monitoring and Enforcement of Conflicts

If a possible conflict arises the interested party will not be present while the Board discusses resolution.

Form 990, Part VI, Line 15a - Compensation Review & Approval Process - CEO & Top Management

In setting the salary for the executive director, the directors reviewed a survey of salaries for executive directors at non-profits of similar size in the Bay Area and elsewhere.

Form 990, Part VI, Line 18 - Explanation of Other Means Forms Available For Public Inspection

Form 990 is available at guidestar.org.

Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available

Upon request.

Form 990, Part IX, Line 11g Other Fees For Services

	(A)	(B)	(C)	(D)
<u> </u>	Total	Program Services	Management <u>& General</u>	Fund- <u>raising</u>
Editing, Translation & Design	53,311.	53,311.		
Other Professional Fees	320.	320.		
Program Consultants	222,741.	221,691.	1,050.	
Total §	276,372.	\$ 275,322.	\$ 1,050.	\$ 0.

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Form 990, Part XI, Line 9 Other Changes In Net Assets Or Fund Balances