Form 990

Return of Organization Exempt From Income Tax

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

- 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.

For the 2017 calendar year, or tax year beginning , 2017, and ending.

### Activities & Governance

1. Briefly describe the organization's mission or most significant activities:
   Pollinator Partnership protects and promotes the health of pollinating animals vital to our ecosystems and agriculture. Signature initiatives include the North American Pollinator Protection Campaign, National Pollinator Week, and Ecoregional Planting Guides.

2. Check this box □ if the organization discontinued its operations or disposed of more than 25% of its net assets.

3. Number of voting members of the governing body (Part VI, line 1a).
   10

4. Number of independent voting members of the governing body (Part VI, line 1b).
   10

5. Total number of individuals employed in calendar year 2017 (Part V, line 2a).
   13

6. Total number of volunteers (estimate if necessary).
   15

7a. Total unrelated business revenue from Part VIII, column (C), line 12.
   0

7b. Net unrelated business taxable income from Form 990-T, line 34.
   0

### Revenue

8. Contributions and grants (Part VIII, line 1h).
   $1,145,582.

9. Program service revenue (Part VIII, line 2g).
   $59,722.

10. Investment income (Part VIII, column (A), lines 3, 4, and 7d).
    $656.

11. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e).
    $24,647.

12. Total revenue — add lines 8 through 11 (must equal Part VIII, column (A), line 12).
    $1,230,607.

### Expenses

13. Grants and similar amounts paid (Part IX, column (A), lines 1-3).
    $193,368.

14. Benefits paid to or for members (Part IX, column (A), line 4).
    $435,355.

15. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10).
    $494,481.

16a. Professional fundraising fees (Part IX, column (A), line 11e).

b. Total fundraising expenses (Part IX, column (D), line 25) □
   $160,391.

17. Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e).
    $505,225.

18. Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25).
    $1,133,948.

    $1,072,782.

### Net Assets or Fund Balances

20. Total assets (Part X, line 16).
    $1,409,724.

21. Total liabilities (Part X, line 26).
    $19,171.

22. Net assets or fund balances. Subtract line 21 from line 20.
    $1,390,553.

### Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

**Signature of officer**

Val Dolcini

President & CEO

**Type or print name and title**

Allan Liu

Preparer's signature

Date

Check if self-employed

PTIN

Allan Liu

Preparer's name

201 WILLOW AVE

MILLBRAE, CA 94030-2536

Phone no. (650) 692-1172

Firm's EIN

27-1724652

May the IRS discuss this return with the preparer shown above? (see instructions)

X Yes  No

BAA For Paperwork Reduction Act Notice, see the separate instructions.

OMB No. 1545-0047

2017

Open to Public Inspection

Form 990 (2017)
Part III  Statement of Program Service Accomplishments

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

1. Briefly describe the organization's mission:

   **Pollinator Partnership (P2) is a non-profit 501(c)3 organization—the largest organization in the world dedicated exclusively to promote the health of pollinators, critical to food and ecosystems, through conservation, education, and research.**

2. Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

   - Yes [x] No [ ]

   If 'Yes,' describe these new services on Schedule O.

3. Did the organization cease conducting, or make significant changes in how it conducts, any program services?

   - Yes [ ] No [x]

   If 'Yes,' describe these changes on Schedule O.

4. Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.

   **Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.**

   **4a (Code: ______ ) (Expenses $312,659. including grants of $________) (Revenue $________)**

   **NAPPC General:**

   The North American Pollinator Protection Campaign (NAPPC) is a growing, collaborative body of more than 160 diverse partners, including respected scientists, researchers, conservationists, government officials and dedicated volunteers. NAPPC is succeeding with major programs to protect pollinators, to raise pollinator-related issues, and to benefit the health of all species—particularly those most threatened. NAPPC's mission is to encourage the health of resident and migratory pollinating animals in North America. NAPPC partners gather from throughout the North American continent and beyond to raise public awareness and education and promote constructive dialogue about pollinators’ importance to agriculture, ecosystem health, and food supplies.

   **4b (Code: ______ ) (Expenses $171,134. including grants of $________) (Revenue $________)**

   The Pollinator Partnership conducts studies to assess the effects of habitat plantings, restorations, competition between species, and sustainable programs to support pollinator habitat. In addition to this monitoring and survey function, the Pollinator Partnership (P2) advocates our S.H.A.R.E. (Simply Have Areas Reserved for the Environment) approach to the planet. When you plant for pollinators, then plants, pollinators, people, and the environment all benefit. From backyards to window boxes, schools to farms, from churches to corporations, everyone is getting involved and registering their S.H.A.R.E. landscape. Our goal is to register 1,000,000 S.H.A.R.E. sites by 2020. The resulting map is building across the globe, showing places for keen pollinator interest as well as opportunities to increase habitat for pollinators.

   **4c (Code: ______ ) (Expenses $75,276. including grants of $________) (Revenue $________)**

   Monarchs—Pollinator Partnership (P2) program called Monarch Wings Across America (MWAA) launched in response to the Presidential directive on supporting the monarch migration. As many people know, the monarch migration is in peril. The number of monarchs making the annual migration has plummeted in recent years, but P2 has stepped forward in unprecedented numbers to make a difference. MWAA is now in 9 states and has resulted in over 5,000 acres of enhanced habitat. P2 has created various planting guidelines for the public and trainings for land managers.

   **4d Other program services (Describe in Schedule O) See Schedule O**

   (Expenses $74,486. including grants of $________) (Revenue $________)

   **4e Total program service expenses** $633,555.
1. Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A. 

   Yes  No  
   1  X  

2. Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 

   Yes  No  
   2  X  

3. Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I. 

   Yes  No  
   3  X  

4. Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II. 

   Yes  No  
   4  X  

5. Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III. 

   Yes  No  
   5  X  

6. Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I. 

   Yes  No  
   6  X  

7. Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If 'Yes,' complete Schedule D, Part II. 

   Yes  No  
   7  X  

8. Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III. 

   Yes  No  
   8  X  

9. Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV. 

   Yes  No  
   9  X  

10. Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V. 

    Yes  No  
    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. 

   a. Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI. 

      Yes  No  
      11a  X  

   b. Did the organization report an amount for investments – other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII. 

      Yes  No  
      11b  X  

   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. 

      Yes  No  
      11c  X  

   d. Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX. 

      Yes  No  
      11d  X  

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

      Yes  No  
      11e  X  

   f. Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X. 

      Yes  No  
      11f  X  

12a. Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI and XII. 

      Yes  No  
      12a  X  

   b. Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional. 

      Yes  No  
      12b  X  

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

    Yes  No  
    13  X  

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

    Yes  No  
    14a  X  

   b. Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at $100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV. 

      Yes  No  
      14b  X  

15. Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or other assistance to or for any foreign organization? If 'Yes,' complete Schedule F, Parts II and IV. 

    Yes  No  
    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? If 'Yes,' complete Schedule F, Parts III and IV. 

    Yes  No  
    16  X  

17. Did the organization report a total of more than $15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions). 

    Yes  No  
    17  X  

18. Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II. 

    Yes  No  
    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. 

    Yes  No  
    19  X  

---

Form 990 (2017) Pollinator Partnership 94-3283967 Page 3
20a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H. ........................................
  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

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

23 Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current
and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete
Schedule J ................................................................. 23

24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of
the last day of the year, that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and
complete Schedule K. If 'No,' go to line 25a ........................................ 24a
  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

25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit
transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I ...................................... 25a
  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

26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or
former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons?
If 'Yes,' complete Schedule L, Part II ....................................... 26

27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial
contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member
of any of these persons? If 'Yes,' complete Schedule L, Part III ................................................................. 27

28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV
instructions for applicable filing thresholds, conditions, and exceptions):
  a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV .............................. 28a
  b A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete
Schedule L, Part IV ...................................................... 28b
  c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an
officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV .............................. 28c

29 Did the organization receive more than $25,000 in non-cash contributions? If 'Yes,' complete Schedule M ........................................ 29

30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation
contributions? If 'Yes,' complete Schedule M ........................................ 30

31 Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I ........................................ 31

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

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

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

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

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

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
Part 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.

---

1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.  
1b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.  
1c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return.  
2b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 

Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)  
3a Did the organization have unrelated business gross income of $1,000 or more during the year?  
3b If "Yes," has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation in Schedule O.  
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? 
4b If 'Yes,' enter the name of the foreign country: 

5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  
5b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  
5c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?  
6a 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? 
6b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 

7 Organizations that may receive deductible contributions under section 170(c).  
7a Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?  
7b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?  
7c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?  
7d If 'Yes,' indicate the number of Forms 8282 filed during the year.  
7e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  
7f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  
7g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?  
7h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?  

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?  

9 Sponsoring organizations maintaining donor advised funds.  
9a Did the sponsoring organization make any taxable distributions under section 4966?  
9b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?  

10 Section 501(c)(7) organizations. Enter.  
10a Initiation fees and capital contributions included on Part VIII, line 12. 
10b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 

11 Section 501(c)(12) organizations. Enter.  
11a Gross income from members or shareholders 
11b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  

12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 
12b If "Yes," enter the amount of tax-exempt interest received or accrued during the year.  

13 Section 501(c)(29) qualified nonprofit health insurance issuers.  
13a Is the organization licensed to issue qualified health plans in more than one state?  

Note. See the instructions for additional information the organization must report on Schedule O.  
13b 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.  
13c Enter the amount of reserves on hand.  

14a Did the organization receive any payments for indoor tanning services during the tax year?  
14b If "Yes," has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O.  

---

Form 990 (2017) Pollinator Partnership 94-3283967  Page 5
Section A. Governing Body and Management

1a Enter the number of voting members of the governing body at the end of the tax year.  
   If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.  
   
   1a 10

b Enter the number of voting members included in line 1a, above, who are independent.  
   
   1b 10

2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?  
   
   Yes No

3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?  
   
   Yes No

4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?  
   
   Yes No

5 Did the organization become aware during the year of a significant diversion of the organization's assets?  
   
   Yes No

6 Did the organization have members or stockholders?  
   
   Yes No

7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?  
   
   Yes No

b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?  
   
   Yes No

8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:  
   a The governing body?  
   b Each committee with authority to act on behalf of the governing body?  
   c The organization's CEO, Executive Director, or top management official?  
   d Other officers or key employees of the organization?  
   
   a Yes No  
   b Yes No  
   c Yes No  
   d Yes No

9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O.  
   
   Yes No

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

10a Did the organization have local chapters, branches, or affiliates?  
   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?  
   
   a Yes No  
   b Yes No

11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  
   
   Yes No

b Describe in Schedule O the process, if any, used by the organization to review this Form 990.  
   
   See Schedule O

12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13.  
   b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise 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.  
   
   a Yes No  
   b Yes No  
   c Yes No

13 Did the organization have a written whistleblower policy?  
   
   Yes No

14 Did the organization have a written document retention and destruction policy?  
   
   Yes No

15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?  
   a The organization's CEO, Executive Director, or top management official.  
   b Other officers or key employees of the organization.  
   
   a Yes No  
   b Yes No

If 'Yes' to line 15a or 15b, describe the process in Schedule O (see instructions).

16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  
   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?  
   
   a Yes No  
   b Yes No

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed.  
   
   Yes No

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.  
   
   Yes No

19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.  
   
   See Schedule O

20 State the name, address, and telephone number of the person who possesses the organization's books and records.  
   
   Val Dolcini 423 Washington Street, 5th Floor San Francisco CA 94111 (415) 362-1137

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

(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 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.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

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

| (A) | Name and Title                     | (B) | Position (do not check more than one box, unless person is both an officer and a director/trustee) | (C) | Average hours per week (list any hours for related organizations below dotted line) | (D) | Reportable compensation from the organization (W-2/1099-MISC) | (E) | Reportable compensation from related organizations (W-2/1099-MISC) | (F) | Estimated amount of other compensation from the organization and related organizations |
|-----|-----------------------------------|-----|-------------------------------------------------|-----|---------------------------------------------|-----|------------------------------------------------|-----|------------------------------------------------|-----|------------------------------------------------|-----|
| (1) | Laurie Davies Adams               | 4   | Secretary                                       | 0   | X X                                         | 54,395. | 0. | 995. |
| (2) | Martin Rosen                      | 3   | Vice Chair                                      | 0   | X X                                         | 0. | 0. | 0. |
| (3) | Steve Shestag                     | 3   | Chairman                                        | 0   | X X                                         | 0. | 0. | 0. |
| (4) | Terry Witzel                      | 3   | Treasurer                                       | 0   | X X                                         | 0. | 0. | 0. |
| (5) | Robert L. Kilpatrick, Ph.D        | 2   | Director                                        | 0   | X                                           | 0. | 0. | 0. |
| (6) | Gladys Phillips-Evans, Ph.D       | 2   | Director                                        | 0   | X                                           | 0. | 0. | 0. |
| (7) | Mark Moffet, PhD                  | 2   | Director                                        | 0   | X                                           | 0. | 0. | 0. |
| (8) | Daniel Bennett                    | 2   | Director                                        | 0   | X                                           | 0. | 0. | 0. |
| (9) | James L. Bennington, M.D.         | 2   | Director                                        | 0   | X                                           | 0. | 0. | 0. |
| (10) | Jason D. Burke                    | 2   | Director                                        | 0   | X                                           | 0. | 0. | 0. |
| (11) |                                  |     |                                                |     |                                             |     |                                             |     |                                             |     |                                             |
| (12) |                                  |     |                                                |     |                                             |     |                                             |     |                                             |     |                                             |
| (13) |                                  |     |                                                |     |                                             |     |                                             |     |                                             |     |                                             |
| (14) |                                  |     |                                                |     |                                             |     |                                             |     |                                             |     |                                             |
### Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

<table>
<thead>
<tr>
<th>(A) Name and title</th>
<th>(B) Average hours per week (do not check more than one box, unless person is both an officer and a director/trustee)</th>
<th>(C) Position</th>
<th>(D) Reportable compensation from the organization (W-2/1099-MISC)</th>
<th>(E) Reportable compensation from related organizations (W-2/1099-MISC)</th>
<th>(F) Estimated amount of other compensation from the organization and related organizations</th>
</tr>
</thead>
<tbody>
<tr>
<td>(15)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(16)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(17)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(18)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(19)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(20)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(21)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(22)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(23)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(24)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(25)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

1b Sub-total .................................................................................................................. 54,395. 0. 995.

c Total from continuation sheets to Part VII, Section A .................................................................................................................. 0. 0. 0.

d Total (add lines 1b and 1c) .................................................................................................................. 54,395. 0. 995.

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization ........................................................................................................... 0

3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If 'Yes,' complete Schedule J for such individual. 3 X

4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than $150,000? If 'Yes,' complete Schedule J for such individual. 4 X

5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If 'Yes,' complete Schedule J for such person. 5 X

### Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than $100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

<table>
<thead>
<tr>
<th>(A) Name and business address</th>
<th>(B) Description of services</th>
<th>(C) Compensation</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 of compensation from the organization ........................................................................................................... 0
### Part VIII Statement of Revenue

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

<table>
<thead>
<tr>
<th>Contributions, Gifts, Grants and Other Similar Amounts</th>
<th>(A) Total revenue</th>
<th>(B) Related or exempt function revenue</th>
<th>(C) Unrelated business revenue</th>
<th>(D) Revenue excluded from tax under sections 512-514</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 a Federated campaigns</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 b Membership dues</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 c Fundraising events</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 d Related organizations</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 e Government grants (contributions)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 f All other contributions, gifts, grants, and similar amounts not included above</td>
<td>470,093.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 g Noncash contributions included in lines 1a-1f: $</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 h Total. Add lines 1a-1f</td>
<td>1,197,419.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Program Service Revenue</th>
<th>Business Code</th>
<th>(A) Total revenue</th>
<th>(B) Related or exempt function revenue</th>
<th>(C) Unrelated business revenue</th>
<th>(D) Revenue excluded from tax under sections 512-514</th>
</tr>
</thead>
<tbody>
<tr>
<td>2 a Contract Income</td>
<td>541900</td>
<td>46,051.</td>
<td>46,051.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 c Program Fees</td>
<td>541900</td>
<td>2,710.</td>
<td>2,710.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 d Shipping Reimbursement</td>
<td>541900</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 e All other program service revenue</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 g Total. Add lines 2a-2f</td>
<td>63,976.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Revenue (A)</th>
<th>(B) Related or exempt function revenue</th>
<th>(C) Unrelated business revenue</th>
<th>(D) Revenue excluded from tax under sections 512-514</th>
</tr>
</thead>
<tbody>
<tr>
<td>3 Investment income (including dividends, interest and other similar amounts)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4 Income from investment of tax-exempt bond proceeds</td>
<td>1,687.</td>
<td>1,687.</td>
<td></td>
</tr>
<tr>
<td>5 Royalties</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6 a Gross rents</td>
<td></td>
<td>(i) Real</td>
<td>(ii) Personal</td>
</tr>
<tr>
<td>6 b Less: rental expenses</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6 c Rental income or (loss)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6 d Net rental income or (loss)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7 a Gross amount from sales of assets other than inventory</td>
<td></td>
<td>(i) Securities</td>
<td>(ii) Other</td>
</tr>
<tr>
<td>7 b Less: cost or other basis and sales expenses</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7 c Gain or (loss)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7 d Net gain or (loss)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8 a Gross income from fundraising events (not including $ of contributions reported on line 1c)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>See Part IV, line 18</td>
<td></td>
<td>a</td>
<td></td>
</tr>
<tr>
<td>8 b Less: direct expenses</td>
<td></td>
<td>b</td>
<td></td>
</tr>
<tr>
<td>8 c Net income or (loss) from fundraising events</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9 a Gross income from gaming activities</td>
<td></td>
<td>a</td>
<td></td>
</tr>
<tr>
<td>See Part IV, line 19</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9 b Less: direct expenses</td>
<td></td>
<td>b</td>
<td></td>
</tr>
<tr>
<td>9 c Net income or (loss) from gaming activities</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10 a Gross sales of inventory, less returns and allowances</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10 b Less: cost of goods sold</td>
<td></td>
<td>b</td>
<td></td>
</tr>
<tr>
<td>10 c Net income or (loss) from sales of inventory</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11 a Other Income</td>
<td>900099</td>
<td>1,455.</td>
<td>1,455.</td>
</tr>
<tr>
<td>11 b All other revenue</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11 e Total. Add lines 11a-11d</td>
<td>1,455.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Miscellaneous Revenue</th>
<th>Business Code</th>
<th>(A) Total revenue</th>
<th>(B) Related or exempt function revenue</th>
<th>(C) Unrelated business revenue</th>
</tr>
</thead>
<tbody>
<tr>
<td>12 Total. Add lines 11a-11d</td>
<td></td>
<td>1,264,537.</td>
<td>67,118.</td>
<td>0.</td>
</tr>
</tbody>
</table>
### 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 response or note to any line in this Part IX. [x]*

<table>
<thead>
<tr>
<th>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</th>
<th>(A) Total expenses</th>
<th>(B) Program service expenses</th>
<th>(C) Management and general expenses</th>
<th>(D) Fundraising expenses</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21.</td>
<td>111,689.</td>
<td>111,689.</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Grants and other assistance to domestic individuals. See Part IV, line 22.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Benefits paid to or for members.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Compensation of current officers, directors, trustees, and key employees</td>
<td>54,395.</td>
<td>43,517.</td>
<td>5,439.</td>
</tr>
<tr>
<td>6</td>
<td>Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B).</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>7</td>
<td>Other salaries and wages</td>
<td>372,200.</td>
<td>228,038.</td>
<td>32,421.</td>
</tr>
<tr>
<td>8</td>
<td>Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Other employee benefits</td>
<td>33,865.</td>
<td>343.</td>
<td>33,522.</td>
</tr>
<tr>
<td>10</td>
<td>Payroll taxes</td>
<td>34,021.</td>
<td>21,632.</td>
<td>3,028.</td>
</tr>
<tr>
<td></td>
<td>b Legal</td>
<td>26,586.</td>
<td>26,586.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>c Accounting</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>d Lobbying</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>e Professional fundraising services. See Part IV, line 17.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>f Investment management fees</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O. Check here G)</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>12</td>
<td>Advertising and promotion</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13</td>
<td>Office expenses</td>
<td>30,799.</td>
<td>21,901.</td>
<td>6,743.</td>
</tr>
<tr>
<td>14</td>
<td>Information technology</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>15</td>
<td>Royalties</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>16</td>
<td>Occupancy</td>
<td>60,920.</td>
<td>60,920.</td>
<td></td>
</tr>
<tr>
<td>17</td>
<td>Travel</td>
<td>54,643.</td>
<td>46,057.</td>
<td>6,587.</td>
</tr>
<tr>
<td>18</td>
<td>Payments of travel or entertainment expenses for any federal, state, or local public officials</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>19</td>
<td>Conferences, conventions, and meetings</td>
<td>40,043.</td>
<td>37,443.</td>
<td>1,958.</td>
</tr>
<tr>
<td>20</td>
<td>Interest</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>21</td>
<td>Payments to affiliates</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>22</td>
<td>Depreciation, depletion, and amortization</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>23</td>
<td>Insurance</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>24</td>
<td>Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)</td>
<td>2,235.</td>
<td>2,235.</td>
<td>2,235.</td>
</tr>
<tr>
<td></td>
<td>a Printing and Publications</td>
<td>39,352.</td>
<td>26,262.</td>
<td>4,523.</td>
</tr>
<tr>
<td></td>
<td>b Miscellaneous</td>
<td>20,214.</td>
<td>401.</td>
<td>19,715.</td>
</tr>
<tr>
<td></td>
<td>c Postage and Shipping</td>
<td>15,921.</td>
<td>1,381.</td>
<td>14,540.</td>
</tr>
<tr>
<td></td>
<td>d Website</td>
<td>6,174.</td>
<td>99.</td>
<td>6,075.</td>
</tr>
<tr>
<td></td>
<td>e All other expenses</td>
<td>15,820.</td>
<td>1,859.</td>
<td>11,435.</td>
</tr>
<tr>
<td>25</td>
<td>Total functional expenses. Add lines 1 through 24e.</td>
<td>1,072,782.</td>
<td>633,555.</td>
<td>278,836.</td>
</tr>
</tbody>
</table>

**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). **[ ]**
### Part X Balance Sheet

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

<table>
<thead>
<tr>
<th>Line</th>
<th>Description</th>
<th>Beginning of year</th>
<th>End of year</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Cash — non-interest-bearing</td>
<td>21,406</td>
<td>7,238</td>
</tr>
<tr>
<td>2</td>
<td>Savings and temporary cash investments</td>
<td>1,238,624</td>
<td>1,300,728</td>
</tr>
<tr>
<td>3</td>
<td>Pledges and grants receivable, net</td>
<td>134,228</td>
<td>286,157</td>
</tr>
<tr>
<td>4</td>
<td>Accounts receivable, net</td>
<td></td>
<td>4</td>
</tr>
<tr>
<td>5</td>
<td>Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L</td>
<td></td>
<td>5</td>
</tr>
<tr>
<td>6</td>
<td>Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employer and sponsoring organizations of section 501(c)(9) voluntary employee beneficiary organizations (see instructions). Complete Part II of Schedule L</td>
<td></td>
<td>6</td>
</tr>
<tr>
<td>7</td>
<td>Notes and loans receivable, net</td>
<td></td>
<td>7</td>
</tr>
<tr>
<td>8</td>
<td>Inventories for sale or use</td>
<td></td>
<td>8</td>
</tr>
<tr>
<td>9</td>
<td>Prepaid expenses and deferred charges</td>
<td>7,103</td>
<td>2,783</td>
</tr>
<tr>
<td>10a</td>
<td>Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10b</td>
<td>Less: accumulated depreciation</td>
<td></td>
<td>10c</td>
</tr>
<tr>
<td>11</td>
<td>Investments — publicly traded securities</td>
<td></td>
<td>11</td>
</tr>
<tr>
<td>12</td>
<td>Investments — other securities. See Part IV, line 11</td>
<td></td>
<td>12</td>
</tr>
<tr>
<td>13</td>
<td>Investments — program-related. See Part IV, line 11</td>
<td></td>
<td>13</td>
</tr>
<tr>
<td>14</td>
<td>Intangible assets</td>
<td></td>
<td>14</td>
</tr>
<tr>
<td>15</td>
<td>Other assets. See Part IV, line 11</td>
<td>8,363</td>
<td>28,666</td>
</tr>
<tr>
<td>16</td>
<td><strong>Total assets.</strong> Add lines 1 through 15 (must equal line 34)</td>
<td>1,409,724</td>
<td>1,625,572</td>
</tr>
<tr>
<td>17</td>
<td>Accounts payable and accrued expenses</td>
<td>19,171</td>
<td>43,264</td>
</tr>
<tr>
<td>18</td>
<td>Grants payable</td>
<td></td>
<td>18</td>
</tr>
<tr>
<td>19</td>
<td>Deferred revenue</td>
<td></td>
<td>19</td>
</tr>
<tr>
<td>20</td>
<td>Tax-exempt bond liabilities</td>
<td></td>
<td>20</td>
</tr>
<tr>
<td>21</td>
<td>Escrow or custodial account liability. Complete Part IV of Schedule D</td>
<td></td>
<td>21</td>
</tr>
<tr>
<td>22</td>
<td>Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L</td>
<td></td>
<td>22</td>
</tr>
<tr>
<td>23</td>
<td>Secured mortgages and notes payable to unrelated third parties</td>
<td></td>
<td>23</td>
</tr>
<tr>
<td>24</td>
<td>Unsecured notes and loans payable to unrelated third parties</td>
<td></td>
<td>24</td>
</tr>
<tr>
<td>25</td>
<td>Other liabilities (including federal income tax; payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D</td>
<td></td>
<td>25</td>
</tr>
<tr>
<td>26</td>
<td><strong>Total liabilities.</strong> Add lines 17 through 25</td>
<td>19,171</td>
<td>43,264</td>
</tr>
<tr>
<td>27</td>
<td>Organizations that follow SFAS 117 (ASC 958), check here X and complete lines 27 through 29, and lines 33 and 34</td>
<td>1,370,735</td>
<td>1,582,308</td>
</tr>
<tr>
<td>28</td>
<td>Unrestricted net assets.</td>
<td>19,818</td>
<td>28</td>
</tr>
<tr>
<td>29</td>
<td>Temporarily restricted net assets.</td>
<td></td>
<td>29</td>
</tr>
<tr>
<td>30</td>
<td>Permanently restricted net assets.</td>
<td></td>
<td>30</td>
</tr>
<tr>
<td>31</td>
<td>Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34</td>
<td></td>
<td>31</td>
</tr>
<tr>
<td>32</td>
<td>Capital stock or trust principal, or current funds</td>
<td></td>
<td>32</td>
</tr>
<tr>
<td>33</td>
<td>Paid-in or capital surplus, or land, building, or equipment fund</td>
<td>1,390,553</td>
<td>1,582,308</td>
</tr>
<tr>
<td>34</td>
<td>Retained earnings, endowment, accumulated income, or other funds.</td>
<td>1,409,724</td>
<td>1,625,572</td>
</tr>
</tbody>
</table>

**Net Assets or Fund Balances**

<table>
<thead>
<tr>
<th>Line</th>
<th>Description</th>
<th>Beginning of year</th>
<th>End of year</th>
</tr>
</thead>
<tbody>
<tr>
<td>33</td>
<td>Total net assets or fund balances</td>
<td>1,390,553</td>
<td>1,582,308</td>
</tr>
<tr>
<td>34</td>
<td>Total liabilities and net assets/fund balances</td>
<td>1,409,724</td>
<td>1,625,572</td>
</tr>
</tbody>
</table>
### Part XI Reconciliation of Net Assets

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

<p>| | | | | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>1</strong> Total revenue (must equal Part VIII, column (A), line 12).</td>
<td>1</td>
<td>1,264,537.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>2</strong> Total expenses (must equal Part IX, column (A), line 25).</td>
<td>2</td>
<td>1,072,782.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>3</strong> Revenue less expenses. Subtract line 2 from line 1.</td>
<td>3</td>
<td>191,755.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>4</strong> Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)).</td>
<td>4</td>
<td>1,390,553.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>5</strong> Net unrealized gains (losses) on investments.</td>
<td>5</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>6</strong> Donated services and use of facilities.</td>
<td>6</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>7</strong> Investment expenses.</td>
<td>7</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>8</strong> Prior period adjustments.</td>
<td>8</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>9</strong> Other changes in net assets or fund balances (explain in Schedule O).</td>
<td>9</td>
<td>0.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>10</strong> Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)).</td>
<td>10</td>
<td>1,582,308.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Part XII Financial Statements and Reporting

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

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>1</strong> Accounting method used to prepare the Form 990:</td>
<td>Cash</td>
<td>X</td>
</tr>
<tr>
<td>If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>2</strong> Were the organization's financial statements compiled or reviewed by an independent accountant?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>X Separate basis</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Consolidated basis</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Both consolidated and separate basis</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>2a</strong> Were the organization's financial statements audited by an independent accountant?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>X Separate basis</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Consolidated basis</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Both consolidated and separate basis</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>2b</strong> 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?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.</td>
<td>See Schedule O</td>
<td></td>
</tr>
<tr>
<td><strong>3</strong> 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?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td><strong>3b</strong> If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

BAA
### 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.

### Name of the organization

Pollinator Partnership

### Employer identification number

94-3283967

#### Part I

**Reason for Public Charity Status** (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) See instructions.

<table>
<thead>
<tr>
<th>Line</th>
<th>Reason for Public Charity Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).</td>
</tr>
<tr>
<td>2</td>
<td>A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).)</td>
</tr>
<tr>
<td>3</td>
<td>A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).</td>
</tr>
<tr>
<td>4</td>
<td>A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital’s name, city, and state:</td>
</tr>
<tr>
<td>5</td>
<td>An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)</td>
</tr>
<tr>
<td>6</td>
<td>A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).</td>
</tr>
<tr>
<td>7</td>
<td>An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)</td>
</tr>
<tr>
<td>8</td>
<td>A community trust described in section 170(b)(1)(A)(vii). (Complete Part II.)</td>
</tr>
<tr>
<td>9</td>
<td>An agricultural research organization described in section 170(b)(1)(A)(x) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university:</td>
</tr>
<tr>
<td>10</td>
<td>An organization that normally receives: (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)</td>
</tr>
<tr>
<td>11</td>
<td>An organization organized and operated exclusively to test for public safety. See section 509(a)(4).</td>
</tr>
<tr>
<td>12</td>
<td>An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.</td>
</tr>
<tr>
<td>a</td>
<td>Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B.</td>
</tr>
<tr>
<td>b</td>
<td>Type II. A supporting organization supervised or controlled in connection with its supported organization(s), having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C.</td>
</tr>
<tr>
<td>c</td>
<td>Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E.</td>
</tr>
<tr>
<td>d</td>
<td>Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V.</td>
</tr>
<tr>
<td>e</td>
<td>Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.</td>
</tr>
<tr>
<td>f</td>
<td>Enter the number of supported organizations</td>
</tr>
<tr>
<td>g</td>
<td>Provide the following information about the supported organization(s).</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>(i) Name of supported organization</th>
<th>(ii) EIN</th>
<th>(iii) Type of organization (described on lines 1-10 above (see instructions))</th>
<th>(iv) Is the organization listed in your governing document?</th>
<th>(v) Amount of monetary support (see instructions)</th>
<th>(vi) Amount of other support (see instructions)</th>
</tr>
</thead>
<tbody>
<tr>
<td>(A)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(B)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(C)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(D)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(E)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Total**

---

**BAA** For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.
### 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.)

#### Section A. Public Support

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2013</th>
<th>(b) 2014</th>
<th>(c) 2015</th>
<th>(d) 2016</th>
<th>(e) 2017</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Gifts, grants, contributions, and membership fees received (Do not include any unusual grants)</td>
<td>1,142,278.</td>
<td>1,646,678.</td>
<td>986,795.</td>
<td>1,145,582.</td>
<td>1,197,419.</td>
<td>6,118,752.</td>
</tr>
<tr>
<td>2 Tax revenues levied for the organization’s benefit and either paid to or expended on its behalf</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>0.</td>
</tr>
<tr>
<td>3 The value of services or facilities furnished by a governmental unit to the organization without charge</td>
<td>4,500.</td>
<td>4,500.</td>
<td>5,340.</td>
<td>17,044.</td>
<td>9,453.</td>
<td>40,837.</td>
</tr>
<tr>
<td>4 Total. Add lines 1 through 3</td>
<td>1,146,778.</td>
<td>1,651,178.</td>
<td>992,135.</td>
<td>1,162,626.</td>
<td>1,206,872.</td>
<td>6,159,589.</td>
</tr>
<tr>
<td>5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>0.</td>
</tr>
<tr>
<td>6 Public support. Subtract line 5 from line 4</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>6,159,589.</td>
</tr>
</tbody>
</table>

#### Section B. Total Support

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2013</th>
<th>(b) 2014</th>
<th>(c) 2015</th>
<th>(d) 2016</th>
<th>(e) 2017</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>7 Amounts from line 4</td>
<td>1,146,778.</td>
<td>1,651,178.</td>
<td>992,135.</td>
<td>1,162,626.</td>
<td>1,206,872.</td>
<td>6,159,589.</td>
</tr>
<tr>
<td>8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources</td>
<td>327.</td>
<td>979.</td>
<td>876.</td>
<td>656.</td>
<td>1,687.</td>
<td>4,525.</td>
</tr>
<tr>
<td>9 Net income from unrelated business activities, whether or not the business is regularly carried on</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>0.</td>
</tr>
<tr>
<td>10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI)</td>
<td>15.</td>
<td>7,076.</td>
<td>3,646.</td>
<td>24,647.</td>
<td>1,455.</td>
<td>36,839.</td>
</tr>
<tr>
<td>11 Total support. Add lines 7 through 10</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>6,200,953.</td>
</tr>
<tr>
<td>12 Gross receipts from related activities, etc. (see instructions)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>793,671.</td>
</tr>
<tr>
<td>13 First five years. If the Form 990 is for the organization’s first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### Section C. Computation of Public Support Percentage

<table>
<thead>
<tr>
<th>(a) 2013</th>
<th>(b) 2014</th>
<th>(c) 2015</th>
<th>(d) 2016</th>
<th>(e) 2017</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>14 Public support percentage for 2017 (line 6, column (f) divided by line 11, column (f))</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>15 Public support percentage from 2016 Schedule A, Part II, line 14</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

- **16a 33-1/3% support test—2017.** If the organization did not check the box on line 13, and line 14 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization.

- **b 33-1/3% support test—2016.** If the organization did not check a box on line 13 or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization.

- **17a 10%-facts-and-circumstances test—2017.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part VI how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization.

- **b 10%-facts-and-circumstances test—2016.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part VI how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization.

- **18 Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions...
**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.)

### Section A. Public Support

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2013</th>
<th>(b) 2014</th>
<th>(c) 2015</th>
<th>(d) 2016</th>
<th>(e) 2017</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Gifts, grants, contributions, and membership fees received. (Do not include any &quot;unusual grants.&quot;)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>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</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Gross receipts from activities that are not an unrelated trade or business under section 513</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Tax revenues levied for the organization's benefit and either paid to or expended on its behalf</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>The value of services or facilities furnished by a governmental unit to the organization without charge</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

6 **Total.** Add lines 1 through 5

7a Amounts included on lines 1, 2, and 3 received from disqualified persons.

7b 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.

7c Add lines 7a and 7b

8 **Public support.** (Subtract line 8 from line 6.)

### Section B. Total Support

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2013</th>
<th>(b) 2014</th>
<th>(c) 2015</th>
<th>(d) 2016</th>
<th>(e) 2017</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>9</td>
<td>Amounts from line 6</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources.

10b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.

11c Add lines 10a and 10b

11 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.)

13 **Total support.** (Add lines 9, 10c, 11, and 12.)

14 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here.

### Section C. Computation of Public Support Percentage

<table>
<thead>
<tr>
<th>(a) 2013</th>
<th>(b) 2014</th>
<th>(c) 2015</th>
<th>(d) 2016</th>
<th>(e) 2017</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>15</td>
<td>Public support percentage for 2017 (line 8, column (f) divided by line 13, column (f))</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>16</td>
<td>Public support percentage from 2016 Schedule A, Part III, line 15</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Section D. Computation of Investment Income Percentage

<table>
<thead>
<tr>
<th>(a) 2013</th>
<th>(b) 2014</th>
<th>(c) 2015</th>
<th>(d) 2016</th>
<th>(e) 2017</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>17</td>
<td>Investment income percentage for 2017 (line 10c, column (f) divided by line 13, column (f))</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>18</td>
<td>Investment income percentage from 2016 Schedule A, Part III, line 17</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

19a **33-1/3% support tests—2017.** If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization.

19b **33-1/3% support tests—2016.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33-1/3%, and line 18 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization.

20 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions.
**Part IV Supporting Organizations**

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

### Section A. All Supporting Organizations

1. Are all of the organization's supported organizations listed by name in the organization's governing documents? If 'No,' describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.

2. Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If 'Yes,' explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).

3a. Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If 'Yes,' answer (b) and (c) below.
   - b. 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.
   - c. Did the organization offer any support to such organizations? If 'Yes,' explain in Part VI why the organization provided such support.

4a. Was any supported organization not organized in the United States ('foreign supported organization')? If 'Yes' and if you checked 12a or 12b in Part I, answer (b) and (c) below.
   - b. Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If 'Yes,' explain in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
   - c. Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If 'Yes,' explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.

5a. Did the organization add, substitute, or remove any supported organizations during the tax year? If 'Yes,' answer (b) and (c) 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 governing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the governing document).
   - b. Was the substitution the result of an event beyond the organization's control?
   - c. Was the substitution the result of an event beyond the organization's control?

6. Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If 'Yes,' provide detail in Part VI.

7. Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If 'Yes,' complete Part I of Schedule L (Form 990 or 990-EZ).

8. Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If 'Yes,' complete Part I of Schedule L (Form 990 or 990-EZ).

9a. Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If 'Yes,' provide detail in Part VI.
   - b. Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If 'Yes,' provide detail in Part VI.
   - c. Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If 'Yes,' provide detail in Part VI.

10a. Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If 'Yes,' answer 10b below.
   - b. Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)
### Part IV Supporting Organizations (continued)

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>11 Has the organization accepted a gift or contribution from any of the following persons?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b A family member of a person described in (a) above?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c A 35% controlled entity of a person described in (a) or (b) above?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>If 'Yes' to a, b, or c, provide detail in Part VI.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Section B. Type I Supporting Organizations

1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If 'No,' describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities.

2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization(s)? If 'Yes,' explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.

### Section C. Type II Supporting Organizations

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

### Section D. All Type III Supporting Organizations

1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?

2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If 'Yes,' describe in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).

3 By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If 'Yes,' describe in Part VI the role the organization's supported organizations played in this regard.

### Section E. Type III Functionally Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).
   a The organization satisfied the Activities Test. **Complete line 2 below.**
   b The organization is the parent of each of its supported organizations. **Complete line 3 below.**
   c The organization supported a governmental entity. **Describe in Part VI how you supported a government entity (see instructions).**

2 Activities Test. **Answer (a) and (b) below.**
   a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If 'Yes,' then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
   b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If 'Yes,' explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.

3 Parent of Supported Organizations. **Answer (a) and (b) below.**
   a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? **Provide details in Part VI.**
   b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If 'Yes,' describe in Part VI the role played by the organization in this regard.
**Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations**

1. Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

### Section A – Adjusted Net Income

<table>
<thead>
<tr>
<th></th>
<th>(A) Prior Year</th>
<th>(B) Current Year (optional)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Net short-term capital gain</td>
<td>1</td>
</tr>
<tr>
<td>2</td>
<td>Recoveries of prior-year distributions</td>
<td>2</td>
</tr>
<tr>
<td>3</td>
<td>Other gross income (see instructions)</td>
<td>3</td>
</tr>
<tr>
<td>4</td>
<td>Add lines 1 through 3.</td>
<td>4</td>
</tr>
<tr>
<td>5</td>
<td>Depreciation and depletion</td>
<td>5</td>
</tr>
<tr>
<td>6</td>
<td>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)</td>
<td>6</td>
</tr>
<tr>
<td>7</td>
<td>Other expenses (see instructions)</td>
<td>7</td>
</tr>
<tr>
<td>8</td>
<td>Adjusted Net Income (subtract lines 5, 6, and 7 from line 4).</td>
<td>8</td>
</tr>
</tbody>
</table>

### Section B – Minimum Asset Amount

<table>
<thead>
<tr>
<th></th>
<th>(A) Prior Year</th>
<th>(B) Current Year (optional)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):</td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>Average monthly value of securities</td>
<td>1a</td>
</tr>
<tr>
<td>b</td>
<td>Average monthly cash balances</td>
<td>1b</td>
</tr>
<tr>
<td>c</td>
<td>Fair market value of other non-exempt-use assets</td>
<td>1c</td>
</tr>
<tr>
<td>d</td>
<td>Total (add lines 1a, 1b, and 1c)</td>
<td>1d</td>
</tr>
<tr>
<td>e</td>
<td>Discount claimed for blockage or other factors (explain in detail in Part VI):</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Acquisition indebtedness applicable to non-exempt-use assets</td>
<td>2</td>
</tr>
<tr>
<td>3</td>
<td>Subtract line 2 from line 1d.</td>
<td>3</td>
</tr>
<tr>
<td>4</td>
<td>Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).</td>
<td>4</td>
</tr>
<tr>
<td>5</td>
<td>Net value of non-exempt-use assets (subtract line 4 from line 3)</td>
<td>5</td>
</tr>
<tr>
<td>6</td>
<td>Multiply line 5 by .035.</td>
<td>6</td>
</tr>
<tr>
<td>7</td>
<td>Recoveries of prior-year distributions</td>
<td>7</td>
</tr>
<tr>
<td>8</td>
<td>Minimum Asset Amount (add line 7 to line 6)</td>
<td>8</td>
</tr>
</tbody>
</table>

### Section C – Distributable Amount

<table>
<thead>
<tr>
<th></th>
<th>Current Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Adjusted net income for prior year (from Section A, line 8, Column A)</td>
</tr>
<tr>
<td>2</td>
<td>Enter 85% of line 1.</td>
</tr>
<tr>
<td>3</td>
<td>Minimum asset amount for prior year (from Section B, line 8, Column A)</td>
</tr>
<tr>
<td>4</td>
<td>Enter greater of line 2 or line 3.</td>
</tr>
<tr>
<td>5</td>
<td>Income tax imposed in prior year</td>
</tr>
<tr>
<td>6</td>
<td><strong>Distributable Amount.</strong> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).</td>
</tr>
<tr>
<td>7</td>
<td>Check here if the current year is the organization’s first as a non-functionally integrated Type III supporting organization (see instructions).</td>
</tr>
</tbody>
</table>
### Part V  Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

#### Section D — Distributions

<table>
<thead>
<tr>
<th></th>
<th>Current Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Amounts paid to supported organizations to accomplish exempt purposes</td>
</tr>
<tr>
<td>2</td>
<td>Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity</td>
</tr>
<tr>
<td>3</td>
<td>Administrative expenses paid to accomplish exempt purposes of supported organizations</td>
</tr>
<tr>
<td>4</td>
<td>Amounts paid to acquire exempt-use assets</td>
</tr>
<tr>
<td>5</td>
<td>Qualified set-aside amounts (prior IRS approval required)</td>
</tr>
<tr>
<td>6</td>
<td>Other distributions (describe in Part VI). See instructions.</td>
</tr>
<tr>
<td>7</td>
<td>Total annual distributions. Add lines 1 through 6.</td>
</tr>
<tr>
<td>8</td>
<td>Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.</td>
</tr>
<tr>
<td>9</td>
<td>Distributable amount for 2017 from Section C, line 6</td>
</tr>
<tr>
<td>10</td>
<td>Line 8 amount divided by line 9 amount</td>
</tr>
</tbody>
</table>

#### Section E — Distribution Allocations (see instructions)

<table>
<thead>
<tr>
<th></th>
<th>(i) Excess Distributions</th>
<th>(ii) Underdistributions Pre-2017</th>
<th>(iii) Distributable Amount for 2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Distributable amount for 2017 from Section C, line 6</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Underdistributions, if any, for years prior to 2017 (reasonable cause required — explain in Part VI). See instructions.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Excess distributions carryover, if any, to 2017</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>From 2013 ..................</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>From 2014 .................</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c</td>
<td>From 2015 ..................</td>
<td></td>
<td></td>
</tr>
<tr>
<td>d</td>
<td>From 2016 ..................</td>
<td></td>
<td></td>
</tr>
<tr>
<td>e</td>
<td>Total of lines 3a through e</td>
<td></td>
<td></td>
</tr>
<tr>
<td>f</td>
<td>Applied to underdistributions of prior years</td>
<td></td>
<td></td>
</tr>
<tr>
<td>g</td>
<td>Applied to 2017 distributable amount</td>
<td></td>
<td></td>
</tr>
<tr>
<td>h</td>
<td>Carryover from 2012 not applied (see instructions)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>j</td>
<td>Remainder. Subtract lines 3g, 3h, and 3i from 3f.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Distributions for 2017 from Section D, line 7: $</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>Applied to underdistributions of prior years</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>Applied to 2017 distributable amount</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c</td>
<td>Remainder. Subtract lines 4a and 4b from 4.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Remaining underdistributions for years prior to 2017, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>Remaining underdistributions for 2017. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Excess distributions carryover to 2018. Add lines 3j and 4c.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>Breakdown of line 7:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>Excess from 2013 .........</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>Excess from 2014 .........</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c</td>
<td>Excess from 2015 .........</td>
<td></td>
<td></td>
</tr>
<tr>
<td>d</td>
<td>Excess from 2016 .........</td>
<td></td>
<td></td>
</tr>
<tr>
<td>e</td>
<td>Excess from 2017 .........</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
## 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

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Other Income</td>
<td>$1,455</td>
<td>$24,647</td>
<td>$3,646</td>
<td>$7,076</td>
<td>$15</td>
</tr>
<tr>
<td>Total</td>
<td>$1,455</td>
<td>$24,647</td>
<td>$3,646</td>
<td>$7,076</td>
<td>$15</td>
</tr>
</tbody>
</table>
# Political Campaign and Lobbying Activities

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

- Complete if the organization is described below.  - Attach to Form 990 or Form 990-EZ.
- Go to www.irs.gov/Form990 for instructions and the latest information.

### 2017

#### G Complete if the organization is described below.  
#### G Attach to Form 990 or Form 990-EZ.  
#### Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

If the organization answered 'Yes,' on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered 'Yes,' on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered 'Yes,' on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

### Part I-A

<table>
<thead>
<tr>
<th>Name of organization</th>
<th>Pollinator Partnership</th>
</tr>
</thead>
<tbody>
<tr>
<td>Employer identification number</td>
<td>94-3283967</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Complete if the organization is exempt under section 501(c) or is a section 527 organization.</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
</tr>
<tr>
<td>2</td>
</tr>
<tr>
<td>3</td>
</tr>
</tbody>
</table>

### Part I-B

<table>
<thead>
<tr>
<th>Complete if the organization is exempt under section 501(c)(3).</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
</tr>
<tr>
<td>2</td>
</tr>
<tr>
<td>3</td>
</tr>
<tr>
<td>4</td>
</tr>
<tr>
<td></td>
</tr>
</tbody>
</table>

### Part I-C

<table>
<thead>
<tr>
<th>Complete if the organization is exempt under section 501(c), except section 501(c)(3).</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
</tr>
<tr>
<td>2</td>
</tr>
<tr>
<td>3</td>
</tr>
<tr>
<td>4</td>
</tr>
<tr>
<td>5</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>(a) Name</th>
<th>(b) Address</th>
<th>(c) EIN</th>
<th>(d) Amount paid from filing organization's funds, if none, enter 0.</th>
<th>(e) Amount of political contributions received and promptly and directly delivered to a separate political organization, if none, enter 0.</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(3)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(4)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(5)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(6)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule C (Form 990 or 990-EZ) 2017
Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

A Check □ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).

B Check □ if the filing organization checked box A and 'limited control' provisions apply.

**Limits on Lobbying Expenditures**
(The term 'expenditures' means amounts paid or incurred.)

<table>
<thead>
<tr>
<th>Limits on Lobbying Expenditures</th>
<th>(a) Filing organization's totals</th>
<th>(b) Affiliated group totals</th>
</tr>
</thead>
<tbody>
<tr>
<td>1a Total lobbying expenditures to influence public opinion (grass roots lobbying)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1b Total lobbying expenditures to influence a legislative body (direct lobbying)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1c Total lobbying expenditures (add lines 1a and 1b)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1d Other exempt purpose expenditures</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1e Total exempt purpose expenditures (add lines 1c and 1d)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1f Lobbying nontaxable amount. Enter the amount from the following table in both columns.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>If the amount on line 1e, column (a) or (b) is:</th>
<th>The lobbying nontaxable amount is:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Not over $500,000</td>
<td>20% of the amount on line 1e.</td>
</tr>
<tr>
<td>Over $500,000 but not over $1,000,000</td>
<td>$100,000 plus 15% of the excess over $500,000.</td>
</tr>
<tr>
<td>Over $1,000,000 but not over $1,500,000</td>
<td>$175,000 plus 10% of the excess over $1,000,000.</td>
</tr>
<tr>
<td>Over $1,500,000 but not over $17,000,000</td>
<td>$225,000 plus 5% of the excess over $1,500,000.</td>
</tr>
<tr>
<td>Over $17,000,000</td>
<td>$1,000,000.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>g Grassroots nontaxable amount (enter 25% of line 1f).</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>h Subtract line 1g from line 1a. If zero or less, enter -0-.</td>
<td></td>
</tr>
<tr>
<td>i Subtract line 1f from line 1c. If zero or less, enter -0-.</td>
<td></td>
</tr>
<tr>
<td>j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?</td>
<td>Yes □ No □</td>
</tr>
</tbody>
</table>

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

**Lobbying Expenditures During 4-Year Averaging Period**

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2014</th>
<th>(b) 2015</th>
<th>(c) 2016</th>
<th>(d) 2017</th>
<th>(e) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>2a Lobbying nontaxable amount . . . . . . .</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b Lobbying ceiling amount (150% of line 2a, column (e)) . . . .</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c Total lobbying expenditures . . . . . . . .</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d Grassroots nontaxable amount . . . . . . .</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e Grassroots ceiling amount (150% of line 2d, column (e)) . . . .</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>f Grassroots lobbying expenditures . . . . . . .</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Part II-B  Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each 'Yes' response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.

<table>
<thead>
<tr>
<th></th>
<th>(a)</th>
<th>(b)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:</td>
<td>Yes</td>
</tr>
<tr>
<td>a</td>
<td>Volunteers?</td>
<td>X</td>
</tr>
<tr>
<td>b</td>
<td>Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?</td>
<td>X</td>
</tr>
<tr>
<td>c</td>
<td>Media advertisements?</td>
<td>X</td>
</tr>
<tr>
<td>d</td>
<td>Mailings to members, legislators, or the public?</td>
<td>X</td>
</tr>
<tr>
<td>e</td>
<td>Publications, or published or broadcast statements?</td>
<td>X</td>
</tr>
<tr>
<td>f</td>
<td>Grants to other organizations for lobbying purposes?</td>
<td>X</td>
</tr>
<tr>
<td>g</td>
<td>Direct contact with legislators, their staffs, government officials, or a legislative body?</td>
<td></td>
</tr>
<tr>
<td>h</td>
<td>Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?</td>
<td>X</td>
</tr>
<tr>
<td>i</td>
<td>Other activities?</td>
<td>X</td>
</tr>
<tr>
<td>j</td>
<td>Total. Add lines 1c through 1i.</td>
<td></td>
</tr>
</tbody>
</table>

2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? X

2b If 'Yes,' enter the amount of any tax incurred under section 4912

2c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912

2d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?

Part III-A  Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Were substantially all (90% or more) dues received nondeductible by members?</td>
<td>1</td>
</tr>
<tr>
<td>2</td>
<td>Did the organization make only in-house lobbying expenditures of $2,000 or less?</td>
<td>2</td>
</tr>
<tr>
<td>3</td>
<td>Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?</td>
<td>3</td>
</tr>
</tbody>
</table>

Part III-B  Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c) (6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No.' OR (b) Part III-A, line 3, is answered 'Yes.'

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Dues, assessments and similar amounts from members.</td>
<td>1</td>
</tr>
<tr>
<td>2</td>
<td>Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).</td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>Current year.</td>
<td>2a</td>
</tr>
<tr>
<td>b</td>
<td>Carrying from last year.</td>
<td>2b</td>
</tr>
<tr>
<td>c</td>
<td>Total.</td>
<td>2c</td>
</tr>
<tr>
<td>3</td>
<td>Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues</td>
<td>3</td>
</tr>
<tr>
<td>4</td>
<td>If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?</td>
<td>4</td>
</tr>
<tr>
<td>5</td>
<td>Taxable amount of lobbying and political expenditures (see instructions)</td>
<td>5</td>
</tr>
</tbody>
</table>

Part IV  Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions); and Part II-B, line 1. Also, complete this part for any additional information.
Pollinator Partnership

Name of the organization: Pollinator Partnership
Employer identification number: 94-3283967

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 6.

1 Total number at end of year: (a) Donor advised funds (b) Funds and other accounts
2 Aggregate value of contributions to (during year) 
3 Aggregate value of grants from (during year) 
4 Aggregate value at end of year
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? 
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? 

Part II Conservation Easements.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).
   - Preservation of land for public use (e.g., recreation or education)
   - Preservation of a historically important land area
   - Protection of natural habitat
   - Preservation of a certified historic structure
   - Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.
   a Total number of conservation easements: 
   b Total acreage restricted by conservation easements: 
   c Number of conservation easements on a certified historic structure included in (a): 
   d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register: 
3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year
4 Number of states where property subject to conservation easement is located
5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? 
6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year
8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? 
9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 8.

1 a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.
   b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:
      (i) Revenue included on Form 990, Part VIII, line 1
      (ii) Assets included in Form 990, Part X

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:
   a Revenue included on Form 990, Part VIII, line 1
   b Assets included in Form 990, Part X
Schedule D (Form 990) 2017  Pollinator Partnership  94-3283967  Page 2

Part III  Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization’s acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
   a  Public exhibition  d  Loan or exchange programs
   b  Scholarly research  e  Other
   c  Preservation for future generations

4 Provide a description of the organization’s collections and explain how they further the organization’s exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization’s collection? □ Yes □ No

Part IV  Escrow and Custodial Arrangements. Complete if the organization answered ‘Yes’ on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? □ Yes □ No

b If ‘Yes,’ explain the arrangement in Part XIII and complete the following table:

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>c Beginning balance</td>
<td></td>
</tr>
<tr>
<td>d Additions during the year</td>
<td></td>
</tr>
<tr>
<td>e Distributions during the year</td>
<td></td>
</tr>
<tr>
<td>f Ending balance</td>
<td></td>
</tr>
</tbody>
</table>

2a Did the organization include an amount on Form 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 explanation has been provided on Part XIII.

Part V  Endowment Funds. Complete if the organization answered ‘Yes’ on Form 990, Part IV, line 10.

1a 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 current year end balance (line 1g, column (a)) held as:
   a Board designated or quasi-endowment ▶ %
   b Permanent endowment ▶ %
   c Temporarily restricted endowment ▶ %

   The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
   (i) unrelated organizations
   (ii) related organizations

b If ‘Yes’ on line 3a(ii), are the related organizations listed as required on Schedule R? □ Yes □ No

4 Describe in Part XIII the intended uses of the organization’s endowment funds.

Part VI  Land, Buildings, and Equipment.
Complete if the organization answered ‘Yes’ on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

<table>
<thead>
<tr>
<th>Description of property</th>
<th>(a) Cost or other basis (investment)</th>
<th>(b) Cost or other basis (other)</th>
<th>(c) Accumulated depreciation</th>
<th>(d) Book value</th>
</tr>
</thead>
<tbody>
<tr>
<td>1a Land</td>
<td></td>
<td></td>
<td></td>
<td>0</td>
</tr>
<tr>
<td>1b Buildings</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1c Leasehold improvements</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1d Equipment</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1e Other</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Total, Add lines 1a through 1e, (Column (d) must equal Form 990, Part X, column (b), line 10c). ▶ 0.

BAA  Schedule D (Form 990) 2017
Schedule D (Form 990) 2017 Pollinator Partnership 94-3283967 Page 3

**Part VII Investments – Other Securities.**
Complete if the organization answered ‘Yes’ on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

<table>
<thead>
<tr>
<th>(a) Description of security or category (including name of security)</th>
<th>(b) Book value</th>
<th>(c) Method of valuation: Cost or end-of-year market value</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) Financial derivatives</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2) Closely-held equity interests</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(3) Other</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(A)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(B)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(C)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(D)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(E)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(F)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(G)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(H)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(I)</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Total. (Column (b) must equal Form 990, Part X, column (B) line 12.)</strong></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Part VIII Investments – Program Related.**
Complete if the organization answered ‘Yes’ on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

<table>
<thead>
<tr>
<th>(a) Description of investment</th>
<th>(b) Book value</th>
<th>(c) Method of valuation: Cost or end-of-year market value</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(3)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(4)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(5)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(6)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(7)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(8)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(9)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(10)</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Total. (Column (b) must equal Form 990, Part X, column (B) line 13.)</strong></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Part IX Other Assets.**
Complete if the organization answered ‘Yes’ on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

<table>
<thead>
<tr>
<th>(a) Description</th>
<th>(b) Book value</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
<td></td>
</tr>
<tr>
<td>(2)</td>
<td></td>
</tr>
<tr>
<td>(3)</td>
<td></td>
</tr>
<tr>
<td>(4)</td>
<td></td>
</tr>
<tr>
<td>(5)</td>
<td></td>
</tr>
<tr>
<td>(6)</td>
<td></td>
</tr>
<tr>
<td>(7)</td>
<td></td>
</tr>
<tr>
<td>(8)</td>
<td></td>
</tr>
<tr>
<td>(9)</td>
<td></td>
</tr>
<tr>
<td>(10)</td>
<td></td>
</tr>
<tr>
<td><strong>Total. (Column (b) must equal Form 990, Part X, column (B) line 15.)</strong></td>
<td></td>
</tr>
</tbody>
</table>

**Part X Other Liabilities.**
Complete if the organization answered ‘Yes’ on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25

<table>
<thead>
<tr>
<th>(a) Description of liability</th>
<th>(b) Book value</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) Federal income taxes</td>
<td></td>
</tr>
<tr>
<td>(2)</td>
<td></td>
</tr>
<tr>
<td>(3)</td>
<td></td>
</tr>
<tr>
<td>(4)</td>
<td></td>
</tr>
<tr>
<td>(5)</td>
<td></td>
</tr>
<tr>
<td>(6)</td>
<td></td>
</tr>
<tr>
<td>(7)</td>
<td></td>
</tr>
<tr>
<td>(8)</td>
<td></td>
</tr>
<tr>
<td>(9)</td>
<td></td>
</tr>
<tr>
<td>(10)</td>
<td></td>
</tr>
<tr>
<td><strong>Total. (Column (b) must equal Form 990, Part X, column (B) line 25.)</strong></td>
<td></td>
</tr>
</tbody>
</table>

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization’s financial statements that reports the organization’s liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII. ----------------------------------------------- □
### Part XI | Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered ‘Yes’ on Form 990, Part IV, line 12a.

<table>
<thead>
<tr>
<th></th>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Total revenue, gains, and other support per audited financial statements</td>
<td>1,462,893</td>
</tr>
<tr>
<td>2</td>
<td>Amounts included on line 1 but not on Form 990, Part VIII, line 12:</td>
<td></td>
</tr>
<tr>
<td></td>
<td>a Net unrealized gains (losses) on investments</td>
<td></td>
</tr>
<tr>
<td></td>
<td>b Donated services and use of facilities</td>
<td>198,356</td>
</tr>
<tr>
<td></td>
<td>c Recoveries of prior year grants</td>
<td></td>
</tr>
<tr>
<td></td>
<td>d Other (Describe in Part XIII.)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>e Add lines 2a through 2d</td>
<td>198,356</td>
</tr>
<tr>
<td>3</td>
<td>Subtract line 2e from line 1</td>
<td>1,264,537</td>
</tr>
<tr>
<td>4</td>
<td>Amounts included on Form 990, Part VIII, line 12, but not on line 1:</td>
<td></td>
</tr>
<tr>
<td></td>
<td>a Investment expenses not included on Form 990, Part VIII, line 7b.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>b Other (Describe in Part XIII.)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>c Other losses</td>
<td></td>
</tr>
<tr>
<td></td>
<td>d Other (Describe in Part XIII.)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>e Add lines 4a and 4b</td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)</td>
<td>1,264,537</td>
</tr>
</tbody>
</table>

### Part XII | Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered ‘Yes’ on Form 990, Part IV, line 12a.

<table>
<thead>
<tr>
<th></th>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Total expenses and losses per audited financial statements</td>
<td>1,271,138</td>
</tr>
<tr>
<td>2</td>
<td>Amounts included on line 1 but not on Form 990, Part IX, line 25:</td>
<td></td>
</tr>
<tr>
<td></td>
<td>a Donated services and use of facilities</td>
<td>198,356</td>
</tr>
<tr>
<td></td>
<td>b Prior year adjustments</td>
<td></td>
</tr>
<tr>
<td></td>
<td>c Other losses</td>
<td></td>
</tr>
<tr>
<td></td>
<td>d Other (Describe in Part XIII.)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>e Add lines 2a through 2d</td>
<td>198,356</td>
</tr>
<tr>
<td>3</td>
<td>Subtract line 2e from line 1</td>
<td>1,072,782</td>
</tr>
<tr>
<td>4</td>
<td>Amounts included on Form 990, Part IX, line 25, but not on line 1:</td>
<td></td>
</tr>
<tr>
<td></td>
<td>a Investment expenses not included on Form 990, Part VIII, line 7b.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>b Other (Describe in Part XIII.)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>c Add lines 4a and 4b</td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)</td>
<td>1,072,782</td>
</tr>
</tbody>
</table>

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

**Name of the organization**

**Employer identification number**

94-3283967

## Part I General Information on Activities Outside the United States

**For grantmakers.** Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  

- **Yes**
- **No**

**For grantmakers.** Describe in Part V the organization’s procedures for monitoring the use of its grants and other assistance outside the United States.

**Part V**

Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)

<table>
<thead>
<tr>
<th>(a) Region</th>
<th>(b) Number of offices in the region</th>
<th>(c) Number of employees, agents, and independent contractors in the region</th>
<th>(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)</th>
<th>(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region</th>
<th>(f) Total expenditures for and investments in the region</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) Canada</td>
<td>Program Services</td>
<td>Research honey bee-varroa mite</td>
<td>10,000.</td>
<td></td>
<td>10,000.</td>
</tr>
<tr>
<td>(2)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(3)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(4)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(5)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(6)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(7)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(8)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(9)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(10)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(11)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(12)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(13)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(14)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(15)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(16)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(17)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

3a Sub-total: 10,000.

b Total from continuation sheets to Part I: 0

c Totals (add lines 3a and 3b): 10,000.
**Part II Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered 'Yes' on Form 990, Part IV, line 15, for any recipient who received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
<th>(a) Name of organization</th>
<th>(b) IRS code section and EIN (if applicable)</th>
<th>(c) Region</th>
<th>(d) Purpose of grant</th>
<th>(e) Amount of cash grant</th>
<th>(f) Manner of cash disbursement</th>
<th>(g) Amount of noncash assistance</th>
<th>(h) Description of noncash assistance</th>
<th>(i) Method of valuation (book, FMV, appraisal, other)</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(3)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(4)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(5)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(6)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(7)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(8)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(9)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(10)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(11)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(12)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(13)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(14)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(15)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(16)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter. ................................................................. 0

3 Enter total number of other organizations or entities ................................................................. 0

BAA

Schedule F (Form 990) 2017
### Grants and Other Assistance to Individuals Outside the United States

Complete if the organization answered 'Yes' on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Type of grant or assistance</th>
<th>(b) Region</th>
<th>(c) Number of recipients</th>
<th>(d) Amount of cash grant</th>
<th>(e) Manner of cash disbursement</th>
<th>(f) Amount of noncash assistance</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Method of valuation (book, FMV, appraisal, other)</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) Cash</td>
<td>Canada</td>
<td>1</td>
<td>Check</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(3)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(4)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(5)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(6)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(7)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(8)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(9)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(10)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(11)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(12)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(13)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(14)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(15)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(16)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(17)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(18)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Part IV Foreign Forms

1. Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If ‘Yes,’ the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926).

   [ ] Yes [x] No

2. Did the organization have an interest in a foreign trust during the tax year? If ‘Yes,’ the organization may be required to separately file Form 3520, Annual Return To Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; do not file with Form 990).

   [ ] Yes [x] No

3. Did the organization have an ownership interest in a foreign corporation during the tax year? If ‘Yes,’ the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations (see Instructions for Form 5471).

   [ ] Yes [x] No

4. Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If ‘Yes,’ the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621).

   [ ] Yes [x] No

5. Did the organization have an ownership interest in a foreign partnership during the tax year? If ‘Yes,’ the organization may be required to file Form 8865, Return of U.S. Persons With Respect To Certain Foreign Partnerships (see Instructions for Form 8865).

   [ ] Yes [x] No

6. Did the organization have any operations in or related to any boycotting countries during the tax year? If ‘Yes,’ the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; do not file with Form 990).

   [ ] Yes [x] No
Part V Supplemental Information

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

Part I, Line 2 - Grantmakers Explanation For Monitoring Use of Funds Outside US

All grants are awarded through a ranking evaluation done by a committee of scientists outside our organization. We require a report midway through the grant period and a final report with a full accounting.
**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?  
   - Yes [ ] No [X]  

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.

<table>
<thead>
<tr>
<th></th>
<th>Name and address of organization or government</th>
<th>EIN</th>
<th>IRC section (if applicable)</th>
<th>Amount of cash grant</th>
<th>Amount of non-cash assistance</th>
<th>Method of valuation (book, FMV, appraisal, other)</th>
<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>The Pennsylvania State Univ.</td>
<td></td>
<td></td>
<td>9,652</td>
<td>0</td>
<td></td>
<td>Research about bee health</td>
<td></td>
</tr>
<tr>
<td></td>
<td>110 Technology Center</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>University Park, PA 16802</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Fort Lewis College</td>
<td></td>
<td></td>
<td>10,000</td>
<td>0</td>
<td></td>
<td>Research about bee health</td>
<td></td>
</tr>
<tr>
<td></td>
<td>1000 Rim Drive</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Durango, CO 81301</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Brigham Young University</td>
<td></td>
<td></td>
<td>10,000</td>
<td>0</td>
<td></td>
<td>Research about bee health</td>
<td></td>
</tr>
<tr>
<td></td>
<td>BYU</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Provo, UT 16802</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Cornell University</td>
<td></td>
<td></td>
<td>8,384</td>
<td>0</td>
<td></td>
<td>Research about bee health</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Dept of Neuro. W345 Mudd Hall</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Ithaca, NY 14850</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>The Pennsylvania State Univ.</td>
<td></td>
<td></td>
<td>9,777</td>
<td>0</td>
<td></td>
<td>Research about bee health</td>
<td></td>
</tr>
<tr>
<td></td>
<td>W-234A Millenium Sci Complex</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>University Park, PA 16802</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>The Pennsylvania State Univ.</td>
<td></td>
<td></td>
<td>9,652</td>
<td>0</td>
<td></td>
<td>Research about bee health</td>
<td></td>
</tr>
<tr>
<td></td>
<td>W-234A Millenium Sci Complex</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>University Park, PA 16802</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td></td>
<td></td>
<td></td>
<td>0.9903</td>
<td>0</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8</td>
<td></td>
<td></td>
<td></td>
<td>0.9903</td>
<td>0</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.  
   - 0

3. Enter total number of other organizations listed in the line 1 table.  
   - 5

---

Name of the organization: Pollinator Partnership  
Employer identification number: 94-3283967
### Grants and Other Assistance to Domestic Individuals

Complete if the organization answered 'Yes' on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
<th>(a) Type of grant or assistance</th>
<th>(b) Number of recipients</th>
<th>(c) Amount of cash grant</th>
<th>(d) Amount of noncash assistance</th>
<th>(e) Method of valuation (book, FMV, appraisal, other)</th>
<th>(f) Description of noncash assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td><strong>Part IV</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Supplemental Information.** Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.
Form 990, Part III, Line 4d - Other Program Services Description

Other Programs

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

All board members receive an electronic or paper copy of the IRS form 990 prior to its submission. Board members must submit any questions or changes to Executive Director within 7 days of receiving their copy. The Executive Director will then submit changes to the form 990 preparer.

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

Each Board member or other interested person is required to read the conflict of interest policy annually and submit a signed annual declaration at the final board meeting (Held in December) of each year.

Form 990, Part VI, Line 15b - Compensation Review & Approval Process - Officers & Key Employees

Compensation review and approval by the board is required for the Executive Director, the top financial officer, and any other officer or key employee. Salary surveys are performed and documented in the minutes of the Board meetings as are Board approval of compensation arrangements. Person with a conflict of interest regarding any compensation arrangement will excuse themselves from the discussion and vote pertaining to such arrangements.

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

The organization's governing documents, conflict of interest policy, and financial statements are available upon request.
**Form 990, Part IX, Line 11g**

**Other Fees For Services**

<table>
<thead>
<tr>
<th></th>
<th>(A) Total</th>
<th>(B) Program Services</th>
<th>(C) Management &amp; General</th>
<th>(D) Fund-Raising</th>
</tr>
</thead>
<tbody>
<tr>
<td>Computer and database</td>
<td>7,145.</td>
<td>4,500.</td>
<td>2,645.</td>
<td></td>
</tr>
<tr>
<td>Design and graphics</td>
<td>14,220.</td>
<td>14,220.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Development/FR</td>
<td>3,000.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>General</td>
<td>101,535.</td>
<td>52,463.</td>
<td>36,709.</td>
<td>12,363.</td>
</tr>
<tr>
<td>Government relations</td>
<td>24,250.</td>
<td>21,750.</td>
<td></td>
<td>2,500.</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>$150,150.</strong></td>
<td><strong>$92,933.</strong></td>
<td><strong>$39,354.</strong></td>
<td><strong>$17,863.</strong></td>
</tr>
</tbody>
</table>

**Form 990, Part XII, Line 2 - Change of Oversight or Selection Process**

The audit committee selects and oversees an independent accounting firm to conduct the audit. No change in selecting method occurred this year.
## California Exempt Organization Annual Information Return

**Form 199**

### Part I

#### Receipts and Revenues

1. Gross sales or receipts from other sources. From Side 2, Part II, line 8: **$67,118.**
2. Gross dues and assessments from members and affiliates: **$2.**
3. Gross contributions, gifts, grants, and similar amounts received: **$1,197,419.**
4. Total gross receipts for filing requirement test. Add line 1 through line 3. **$1,264,537.**
   - This line must be completed.
5. Cost of goods sold: **$5.**
6. Cost or other basis, and sales expenses of assets sold: **$6.**
7. Total costs. Add line 5 and line 6: **$7.**
8. Total gross income. Subtract line 7 from line 4: **$1,264,537.**
9. Total expenses and disbursements. From Side 2, Part II, line 18: **$255,631.**
10. Excess of receipts over expenses and disbursements. Subtract line 9 from line 8: **$1,008,906.**

#### Expenses

- **$1,008,906.**
- **$255,631.**

### Filing Fee

- **Balance due. Add line 12, line 15, and line 16. Then subtract line 11 from the result.**
  - **$0.**

### Sign Here

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

**Signature of officer**

**Title**

**Date**

**Telephone**

(415) 362-1137

**Paid Preparer’s Use Only**

**Preparer’s signature**

**Date**

**Check if self-employed**

**Fax**

**Telephone**

(650) 692-1172

**May the FTB discuss this return with the preparer shown above? See instructions.**

**Yes**

**No**

---

**Note:** This text is a representation of the content on the page, using markdown formatting to enhance readability. The actual form includes additional instructions and fields that are not fully captured here.
## Part II
Organizations with gross receipts of more than $50,000 and private foundations regardless of amount of gross receipts – complete Part II or furnish substitute information.

### Receipts from Other Sources

<table>
<thead>
<tr>
<th>Line</th>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Gross sales or receipts from all business activities. See instructions.</td>
<td>1,260,030.</td>
</tr>
<tr>
<td>2</td>
<td>Interest</td>
<td>134,228.</td>
</tr>
<tr>
<td>3</td>
<td>Dividends</td>
<td>15,466.</td>
</tr>
<tr>
<td>4</td>
<td>Gross rents.</td>
<td>47,813.</td>
</tr>
<tr>
<td>5</td>
<td>Gross royalties.</td>
<td>11,146.</td>
</tr>
<tr>
<td>6</td>
<td>Gross amount received from sale of assets (See Instructions).</td>
<td>307,966.</td>
</tr>
<tr>
<td>7</td>
<td>Other income. Attach schedule.</td>
<td>286,157.</td>
</tr>
<tr>
<td>8</td>
<td>Total gross sales or receipts from other sources. Add line 1 through line 7. Enter here and on Side 1, Part I, line 1.</td>
<td>1,625,572.</td>
</tr>
<tr>
<td>9</td>
<td>Contributions, gifts, grants, and similar amounts paid. Attach schedule.</td>
<td>1,390,553.</td>
</tr>
<tr>
<td>10</td>
<td>Disbursements to or for members.</td>
<td>20,303.</td>
</tr>
<tr>
<td>11</td>
<td>Compensation of officers, directors, and trustees. Attach schedule.</td>
<td>19,171.</td>
</tr>
<tr>
<td>12</td>
<td>Other salaries and wages.</td>
<td>60,920.</td>
</tr>
<tr>
<td>13</td>
<td>Interest</td>
<td>34,021.</td>
</tr>
<tr>
<td>14</td>
<td>Taxes</td>
<td>1,307,966.</td>
</tr>
<tr>
<td>15</td>
<td>Rents</td>
<td>6,092.</td>
</tr>
<tr>
<td>16</td>
<td>Depreciation and depletion (See instructions).</td>
<td>439,557.</td>
</tr>
<tr>
<td>17</td>
<td>Other Expenses and Disbursements. Attach schedule.</td>
<td>372,200.</td>
</tr>
<tr>
<td>18</td>
<td>Total expenses and disbursements. Add line 9 through line 17. Enter here and on Side 1, Part I, line 9.</td>
<td>1,008,906.</td>
</tr>
</tbody>
</table>

### Expenses and Disbursements

<table>
<thead>
<tr>
<th>Line</th>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>2</td>
<td>Other salaries and wages.</td>
<td>307,966.</td>
</tr>
<tr>
<td>3</td>
<td>Interest</td>
<td>11,146.</td>
</tr>
<tr>
<td>4</td>
<td>Taxes</td>
<td>1,307,966.</td>
</tr>
<tr>
<td>5</td>
<td>Rents</td>
<td>6,092.</td>
</tr>
<tr>
<td>6</td>
<td>Depreciation and depletion (See instructions).</td>
<td>439,557.</td>
</tr>
<tr>
<td>7</td>
<td>Other Expenses and Disbursements. Attach schedule.</td>
<td>372,200.</td>
</tr>
<tr>
<td>8</td>
<td>Total expenses and disbursements. Add line 9 through line 17. Enter here and on Side 1, Part I, line 9.</td>
<td>1,008,906.</td>
</tr>
</tbody>
</table>

### Schedule L Balance Sheet

<table>
<thead>
<tr>
<th>Assets</th>
<th>Balance Sheet</th>
<th>Beginning of taxable year</th>
<th>End of taxable year</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Cash</td>
<td>1,260,030.</td>
<td>1,307,966.</td>
</tr>
<tr>
<td>2</td>
<td>Net accounts receivable</td>
<td>134,228.</td>
<td>286,157.</td>
</tr>
<tr>
<td>3</td>
<td>Net notes receivable</td>
<td>15,466.</td>
<td>47,813.</td>
</tr>
<tr>
<td>4</td>
<td>Inventories</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Federal and state government obligations</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>Investments in other bonds</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Investments in stock</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>Mortgage loans</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Other investments. Attach schedule.</td>
<td>20,303.</td>
<td></td>
</tr>
<tr>
<td>10a</td>
<td>Depreciable assets.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>Less accumulated depreciation</td>
<td></td>
<td></td>
</tr>
<tr>
<td>11</td>
<td>Land</td>
<td>15,466.</td>
<td>11,146.</td>
</tr>
<tr>
<td>12</td>
<td>Other assets. Attach schedule.</td>
<td>STM 4</td>
<td></td>
</tr>
<tr>
<td>13</td>
<td>Total assets</td>
<td>1,409,724.</td>
<td>1,625,572.</td>
</tr>
</tbody>
</table>

### Liabilities and net worth

<table>
<thead>
<tr>
<th>Liabilities and net worth</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>14 Accounts payable</td>
<td>19,171.</td>
</tr>
<tr>
<td>15 Contributions, gifts, or grants payable</td>
<td></td>
</tr>
<tr>
<td>16 Bonds and notes payable</td>
<td></td>
</tr>
<tr>
<td>17 Mortgages payable</td>
<td></td>
</tr>
<tr>
<td>18 Other liabilities. Attach schedule.</td>
<td></td>
</tr>
<tr>
<td>19 Capital stock or principal fund</td>
<td>1,390,553.</td>
</tr>
<tr>
<td>20 Paid-in or capital surplus. Attach reconciliation.</td>
<td></td>
</tr>
<tr>
<td>21 Retained earnings or income fund</td>
<td></td>
</tr>
<tr>
<td>22 Total liabilities and net worth</td>
<td>1,409,724.</td>
</tr>
</tbody>
</table>

### Schedule M-1 Reconciliation of income per books with income per return

Do not complete this schedule if the amount on Schedule L, line 13, column (d), is less than $50,000.

<table>
<thead>
<tr>
<th>Line</th>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Net income per books.</td>
<td>255,631.</td>
</tr>
<tr>
<td>2</td>
<td>Federal income tax.</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Excess of capital losses over capital gains</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Income not recorded on books this year. Attach schedule.</td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Expenses recorded on books this year not deducted in this return. Attach schedule</td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>Total. Add line 1 through line 5.</td>
<td>255,631.</td>
</tr>
<tr>
<td>7</td>
<td>Income recorded on books this year not included in this return. Attach schedule.</td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>Deductions in this return not charged against book income this year. Attach schedule</td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Total. Add line 7 and line 8.</td>
<td></td>
</tr>
<tr>
<td>10</td>
<td>Net income per return. Subtract line 9 from line 6.</td>
<td>255,631.</td>
</tr>
</tbody>
</table>
## Statement 1
Form 199, Part II, Line 7

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Other Income</td>
<td>$ 1,455.</td>
</tr>
<tr>
<td>Other Investment Income</td>
<td>$ 1,687.</td>
</tr>
<tr>
<td>Program Service Revenue</td>
<td>$ 63,976.</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>$ 67,118.</strong></td>
</tr>
</tbody>
</table>

## Statement 2
Form 199, Part II, Line 9

<table>
<thead>
<tr>
<th>Donee's Name</th>
<th>Donee's Street Address</th>
<th>Donee's City, State, ZIP</th>
<th>Amount Given</th>
</tr>
</thead>
<tbody>
<tr>
<td>The Pennsylvania State Univ.</td>
<td>110 Technology Center</td>
<td>University Park, PA 16802</td>
<td>$ 9,652.</td>
</tr>
<tr>
<td>Fort Lewis College</td>
<td>1000 Rim Drive</td>
<td>Durango, CO 81301</td>
<td>$ 10,000.</td>
</tr>
<tr>
<td>Brigham Young University</td>
<td>BYU</td>
<td>Provo, UT 16802</td>
<td>$ 10,000.</td>
</tr>
<tr>
<td>Cornell University</td>
<td>Dept of Neuro. W345 Mudd Hall</td>
<td>Ithaca, NY 14850</td>
<td>$ 8,384.</td>
</tr>
<tr>
<td>The Pennsylvania State Univ.</td>
<td>W-234A Millenium Sci Complex</td>
<td>University Park, PA 16802</td>
<td>$ 9,777.</td>
</tr>
</tbody>
</table>

**Total $ 47,813.**

## Statement 3
Form 199, Part II, Line 17

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Accounting Fees</td>
<td>$ 26,586.</td>
</tr>
<tr>
<td>Conferences, Conventions, and Meetings</td>
<td>$ 40,043.</td>
</tr>
<tr>
<td>Insurance</td>
<td>$ 2,235.</td>
</tr>
<tr>
<td>Legal Fees</td>
<td>$ 3,755.</td>
</tr>
<tr>
<td>Miscellaneous</td>
<td>$ 20,214.</td>
</tr>
<tr>
<td>Office Expenses</td>
<td>$ 30,799.</td>
</tr>
<tr>
<td>Other Employee Benefit</td>
<td>$ 33,865.</td>
</tr>
<tr>
<td>Other Fees</td>
<td>$ 150,150.</td>
</tr>
<tr>
<td>Postage and Shipping</td>
<td>$ 15,921.</td>
</tr>
<tr>
<td>Printing and Publications</td>
<td>$ 39,352.</td>
</tr>
<tr>
<td>Service charges</td>
<td>$ 4,470.</td>
</tr>
<tr>
<td>Telephone</td>
<td>$ 5,711.</td>
</tr>
</tbody>
</table>
### Statement 3 (continued)
**Form 199, Part II, Line 17**
**Other Expenses**

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Travel</td>
<td>$54,643.</td>
</tr>
<tr>
<td>Website</td>
<td>$6,174.</td>
</tr>
<tr>
<td>Workers compensation</td>
<td>$5,639.</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>$439,557.</td>
</tr>
</tbody>
</table>

### Statement 4
**Form 199, Schedule L, Line 12**
**Other Assets**

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Deposits</td>
<td>$8,363.</td>
</tr>
<tr>
<td>Prepaid Expenses and Deferred Charges</td>
<td>$2,783.</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>$11,146.</td>
</tr>
</tbody>
</table>
IN ANNUAL MAIL TO:
Registry of Charitable Trusts
P.O. Box 903447
Sacramento, CA 94203-4470
Telephone: (916) 445-2021

WEBSITE ADDRESS:
http://ag.ca.gov/charities/

ANNUAL REGISTRATION RENEWAL FEE REPORT
TO ATTORNEY GENERAL OF CALIFORNIA
Sections 12586 and 12587, California Government Code
11 Cal. Code Regs. sections 301-307, 311 and 312

Failure to submit this report annually no later than four months and fifteen days after the
end of the organization’s accounting period may result in the loss of tax exemption and
the assessment of a minimum tax of $800, plus interest, and/or fines or filing penalties as
defined in Government Code Section 12586.1. IRS extensions will be honored.

State Charity Registration Number  CT 108767

POLLINATOR PARTNERSHIP

Name of Organization

423 WASHINGTON STREET, 5TH FLOOR
Address (Number and Street)

SAN FRANCISCO, CA 94111
City or Town State ZIP Code

Corporate or Organization No. 2058130

Federal Employer I.D. No. 94-3283967

ANNUAL REGISTRATION RENEWAL FEE SCHEDULE (11 Cal. Code Regs. sections 301-307, 311 and 312)
Make Check Payable to Attorney General’s Registry of Charitable Trusts

<table>
<thead>
<tr>
<th>Gross Annual Revenue</th>
<th>Fee</th>
</tr>
</thead>
<tbody>
<tr>
<td>Less than $25,000</td>
<td>0</td>
</tr>
<tr>
<td>Between $25,000 and $100,000</td>
<td>$25</td>
</tr>
<tr>
<td>Between $100,001 and $250,000</td>
<td>$50</td>
</tr>
<tr>
<td>Between $250,001 and $1 million</td>
<td>$75</td>
</tr>
<tr>
<td>Between $1,000,001 and $10 million</td>
<td>$150</td>
</tr>
<tr>
<td>Between $10,000,001 and $50 million</td>
<td>$225</td>
</tr>
<tr>
<td>Greater than $50 million</td>
<td>$300</td>
</tr>
</tbody>
</table>

PART A – ACTIVITIES

For your most recent full accounting period (beginning 1/01/17 ending 12/31/17 ) list:

Gross annual revenue $1,264,537. Total assets $1,625,572.

PART B – STATEMENTS REGARDING ORGANIZATION DURING THE PERIOD OF THIS REPORT

Note: If you answer ‘yes’ to any of the questions below, you must attach a separate sheet providing an explanation and details for each ‘yes’ response. Please review RRF-1 instructions for information required.

1. During this reporting period, were there any contracts, loans, leases or other financial transactions between the organization and any officer, director or trustee thereof either directly or with an entity in which any such officer, director or trustee had any financial interest? Yes No

2. During this reporting period, was there any theft, embezzlement, diversion or misuse of the organization’s charitable property or funds? Yes No

3. During this reporting period, did non-program expenditures exceed 50% of gross revenues? Yes No

4. During this reporting period, were any organization funds used to pay any penalty, fine or judgment? If you filed a Form 4720 with the Internal Revenue Service, attach a copy. Yes No

5. During this reporting period, were the services of a commercial fundraiser or fundraising counsel for charitable purposes used? If ‘yes,’ provide an attachment listing the name, address, and telephone number of the service provider. Yes No

6. During this reporting period, did the organization receive any governmental funding? If so, provide an attachment listing the name of the agency, mailing address, contact person, and telephone number. SEE STATEMENT 1

7. During this reporting period, did the organization hold a raffle for charitable purposes? If ‘yes,’ provide an attachment indicating the number of raffles and the date(s) they occurred. Yes No

8. Does the organization conduct a vehicle donation program? If ‘yes,’ provide an attachment indicating whether the program is operated by the charity or whether the organization contracts with a commercial fundraiser for charitable purposes. Yes No

9. Did your organization have prepared an audited financial statement in accordance with generally accepted accounting principles for this reporting period? Yes No

Organization’s area code and telephone number (415) 362-1137

Organization’s e-mail address

I declare under penalty of perjury that I have examined this report, including accompanying documents, and to the best of my knowledge and belief, it is true, correct and complete.

VAL DOLCINI PRESIDENT & CEO

Signature of authorized officer Printed Name Title Date

CAEA9801L 11/30/15 RRF-1 (3-05)
Statement 1
Form RRF-1, Part B, Line 6
Government Agency That Provided Funding

1) Department of Defense
   4000 Defense Blvd.
   Washington DC 20301
   Alison Dalsimer (703) 545-6700

2) US Geological Survey
   P.O. Box 708, 77 Liberty Corner Road
   Far Hills, NJ 07931
   Steve Hilburger (703) 648-4036

3) USDA NRCS
   1400 Independence Avenue SW
   Washington, DC 20250
   John Englert (202) 720-0536

4) US Botanic Garden
   4700 Shepherd Parkway SW.
   Washington, DC 20032
   Ari Novy (301) 504-6191

5) USDA NIFA
   800 9th St. SW Rm 3438
   Washington, DC 20024
   Mary Purcell-Miramontes (202) 401-5158

6) USDA - APHIS
   4700 River Rd, Unit 55
   Riverdale, MD 20737
   Robyn Rose (301) 851-2851

7) USDA - Forest Service
   1400 Independence Avenue, S.W., Stop 0506
   Washington, DC 20250-0506
   William Carromero (479) 280-3242

8) USDA
   1400 Independence Avenue, S.W.
   Washington, DC 20250-0506
   Kevin Hackett (202) 720-2791

9) USDA FSA
   1400 Independence Avenue, S.W., Stop 0506
   Washington, DC 20250-0506
   Rich Iovanna (202) 720-0796