**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.

### Part I - Summary

1. Briefly describe the organization's mission or most significant activities: **SEE SCHEDULE O**

### Activities & Governance

3. Number of voting members of the governing body (Part VI, line 1a) 8

4. Number of independent voting members of the governing body (Part VI, line 1b) 7

5. Total number of individuals employed in calendar year 2019 (Part V, line 2a) 7

6. Total number of volunteers (estimate if necessary) 2

### Revenue

9. Contributions and grants (Part VIII, line 1h) 693,680. 286,475.

10. Program service revenue (Part VIII, line 2g) 481,779. 572,808.

12. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 1,136,730. 857,772.

### Expenses

15. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 769,742. 501,808.

16a. Professional fundraising fees (Part IX, column (A), line 11e) 31,059.

17. Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 612,880. 522,771.

18. Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 1,382,622. 1,024,579.


### Net Assets or Fund Balances

20. Total assets (Part X, line 16) 1,243,867. 1,098,292.

21. Total liabilities (Part X, line 26) 52,563. 68,272.

22. Net assets or fund balances. Subtract line 21 from line 20 1,191,304. 1,030,020.

### Part II - 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**: MATHIS WACKERNAGEL, PRESIDENT
- **Preparer's signature**: PATRICIA A. WINTROATH
- **Preparer's PTIN**: 00430440
- **Firm's EIN**: 4129781
- **Phone no.**: 925-974-3310

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No
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:
OUR VISION IS THAT ALL PEOPLE FLOURISH WITHIN THE MEANS OF OUR ONE PLANET. OUR MISSION IS TO MAKE ECOLOGICAL LIMITS CENTRAL TO DECISION-MAKING.

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 ☐ 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

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 $ 159,388. including grants of $ ) (Revenue $ 103,757.)

SEE SCHEDULE O FOR DESCRIPTION

4b

(Code: ) (Expenses $ 719,634. including grants of $ ) (Revenue $ 466,801.)

PROGRAMS - GLOBAL FOOTPRINT NETWORK ADVANCES NOVEL APPLICATIONS OF THE ECOLOGICAL FOOTPRINT THROUGH VARIOUS PROJECTS INCLUDING CITY FOOTPRINT ASSESSMENTS, COUNTRY STUDIES AND INVESTMENT APPRAISALS. WE ALSO SUPPORT CITIES, REGIONS, COUNTRIES, BUSINESSES AND OTHER INSTITUTIONS BY APPLYING THE ECOLOGICAL FOOTPRINT METHODOLOGY TO AID IN DECISION MAKING AND RISK ANALYSIS.

4c

(Code: ) (Expenses $ including grants of $ ) (Revenue $ )

SEE SCHEDULE O FOR DESCRIPTION

4d

Other program services (Describe on Schedule O.)

(Expenses $ including grants of $ ) (Revenue $ )

4e

Total program service expenses $ 879,022.
<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Is the organization described in section 501(c)(3) or 4947(a)(1)</td>
<td></td>
<td>X</td>
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<tr>
<td>(other than a private foundation)? If &quot;Yes,&quot; complete Schedule A</td>
<td></td>
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<tr>
<td>2. Is the organization required to complete Schedule B, Schedule of</td>
<td></td>
<td>X</td>
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<tr>
<td>Contributors? If &quot;Yes,&quot; complete Schedule C, Part I</td>
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<tr>
<td>3. Did the organization engage in direct or indirect political</td>
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<td>X</td>
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<td>campaign activities on behalf of or in opposition to candidates for</td>
<td></td>
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<tr>
<td>public office? If &quot;Yes,&quot; complete Schedule C, Part I</td>
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<tr>
<td>4. <strong>Section 501(c)(3) organizations.</strong> Did the organization engage in</td>
<td></td>
<td>X</td>
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<tr>
<td>lobbying activities, or have a section 501(h) election in effect during</td>
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<tr>
<td>the tax year? If &quot;Yes,&quot; complete Schedule C, Part II</td>
<td></td>
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<tr>
<td>5. Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6)</td>
<td></td>
<td>X</td>
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<tr>
<td>organization that receives membership dues, assessments, or similar</td>
<td></td>
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<tr>
<td>amounts as defined in Revenue Procedure 98-19? If &quot;Yes,&quot; complete</td>
<td></td>
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<tr>
<td>Schedule C, Part III</td>
<td></td>
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<tr>
<td>6. Did the organization maintain any donor advised funds or accounts for</td>
<td></td>
<td>X</td>
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<tr>
<td>which donors have the right to provide advice on the distribution or</td>
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<td>investment, or aggregate foreign investments valued at $100,000 or</td>
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<td>more? If &quot;Yes,&quot; complete Schedule C, Part I</td>
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<td>7. Did the organization receive or hold a conservation easement,</td>
<td></td>
<td>X</td>
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<tr>
<td>including easements to preserve open space, the environment, historic</td>
<td></td>
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<tr>
<td>land areas, or historic structures? If &quot;Yes,&quot; complete Schedule D, Part</td>
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<tr>
<td>II</td>
<td></td>
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<tr>
<td>8. Did the organization maintain collections of works of art, historical</td>
<td></td>
<td>X</td>
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<tr>
<td>treasures, or other similar assets? If &quot;Yes,&quot; complete</td>
<td></td>
<td></td>
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<tr>
<td>Schedule D, Part III</td>
<td></td>
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<tr>
<td>9. Did the organization report an amount in Part X, line 21, for escrow</td>
<td></td>
<td>X</td>
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<tr>
<td>or custodial account liability, serve as a custodian for amounts not</td>
<td></td>
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<td>listed in Part X; or provide credit counseling, debt management, credit</td>
<td></td>
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<tr>
<td>repair, or debt negotiation services? If &quot;Yes,&quot; complete Schedule D, Part</td>
<td></td>
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<tr>
<td>IV</td>
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<tr>
<td>10. Did the organization, directly or through a related organization,</td>
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<td>X</td>
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<tr>
<td>hold assets in donor-restricted endowments or in quasi-</td>
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<tr>
<td>endowments? If &quot;Yes,&quot; complete Schedule D, Part V</td>
<td></td>
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<tr>
<td>11. If the organization's answer to any of the following questions is</td>
<td>X</td>
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<tr>
<td>&quot;Yes,&quot; then complete Schedule D, Parts VI, VII, VIII, IX, or X as</td>
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<tr>
<td>applicable.</td>
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<tr>
<td>a. Did the organization report an amount for land, buildings, and</td>
<td></td>
<td>X</td>
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<tr>
<td>equipment in Part X, line 10? If &quot;Yes,&quot; complete Schedule D, Part VI</td>
<td></td>
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<tr>
<td>b. Did the organization report an amount for investments - other</td>
<td></td>
<td>X</td>
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<tr>
<td>securities in Part X, line 12, that is 5% or more of its total assets</td>
<td></td>
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<td>reported in Part X, line 16? If &quot;Yes,&quot; complete Schedule D, Part VII</td>
<td></td>
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<tr>
<td>c. Did the organization report an amount for investments - program</td>
<td></td>
<td>X</td>
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<tr>
<td>related in Part X, line 13, that is 5% or more of its total assets</td>
<td></td>
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<td>reported in Part X, line 16? If &quot;Yes,&quot; complete Schedule D, Part VIII</td>
<td></td>
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<td>d. Did the organization report an amount for other assets in Part X,</td>
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<td>X</td>
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<tr>
<td>line 15, that is 5% or more of its total assets reported in Part X,</td>
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<td>line 16? If &quot;Yes,&quot; complete Schedule D, Part IX</td>
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<tr>
<td>e. Did the organization report an amount for other liabilities in Part</td>
<td></td>
<td>X</td>
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<td>X, line 25? If &quot;Yes,&quot; complete Schedule D, Part X</td>
<td></td>
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<tr>
<td>f. Did the organization's separate or consolidated financial statements</td>
<td></td>
<td>X</td>
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<tr>
<td>for the tax year include a footnote that addresses the</td>
<td></td>
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<tr>
<td>organization's liability for uncertain tax positions under FIN 48 (ASC</td>
<td></td>
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<tr>
<td>740)? If &quot;Yes,&quot; complete Schedule D, Part X</td>
<td></td>
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<tr>
<td>12a. Did the organization obtain separate, independent audited</td>
<td></td>
<td>X</td>
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<tr>
<td>financial statements for the tax year? If &quot;Yes,&quot; complete Schedule D,</td>
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<tr>
<td>Parts XI and XII</td>
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<tr>
<td>12b. Was the organization included in consolidated, independent</td>
<td></td>
<td>X</td>
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<tr>
<td>audited financial statements for the tax year? If &quot;Yes,&quot; and if the</td>
<td></td>
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<tr>
<td>organization answered &quot;No&quot; to line 12a, then completing Schedule D, Parts</td>
<td></td>
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<tr>
<td>XI and XII</td>
<td></td>
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<tr>
<td>13. Is the organization a school described in section 170(b)(1)(A)(ii)?</td>
<td></td>
<td>X</td>
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<td>If &quot;Yes,&quot; complete Schedule E</td>
<td></td>
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<tr>
<td>14a. Did the organization maintain an office, employees, or agents</td>
<td></td>
<td>X</td>
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<tr>
<td>outside of the United States?</td>
<td></td>
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<tr>
<td>14b. Did the organization have aggregate revenues or expenses of more</td>
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<td>X</td>
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<td>than $10,000 from grantmaking, fundraising, business, investment,</td>
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<td>and program service activities outside the United States, or aggregate</td>
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<td>foreign investments valued at $100,000 or more? If &quot;Yes,&quot; complete</td>
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<tr>
<td>Schedule F, Parts I and IV</td>
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<tr>
<td>15. Did the organization report on Part IX, column (A), line 3, more</td>
<td></td>
<td>X</td>
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<td>than $5,000 of grants or other assistance to or for any</td>
<td></td>
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<tr>
<td>foreign organization? If &quot;Yes,&quot; complete Schedule F, Parts II and IV</td>
<td></td>
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<tr>
<td>16. Did the organization report on Part IX, column (A), line 3, more</td>
<td></td>
<td>X</td>
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<tr>
<td>than $5,000 of aggregate grants or other assistance to or for</td>
<td></td>
<td></td>
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<tr>
<td>foreign individuals? If &quot;Yes,&quot; complete Schedule F, Parts III and IV</td>
<td></td>
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<tr>
<td>17. Did the organization report a total of more than $15,000 of</td>
<td></td>
<td>X</td>
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<tr>
<td>expenses for professional fundraising services on Part IX, column (A),</td>
<td></td>
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<tr>
<td>lines 6 and 11e? If &quot;Yes,&quot; complete Schedule G, Part I</td>
<td></td>
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<tr>
<td>18. Did the organization report more than $15,000 total of</td>
<td></td>
<td>X</td>
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<tr>
<td>fundraising event gross income and contributions on Part VIII, lines</td>
<td></td>
<td></td>
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<tr>
<td>1c and 8a? If &quot;Yes,&quot; complete Schedule G, Part II</td>
<td></td>
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<tr>
<td>19. Did the organization report more than $15,000 of gross income from</td>
<td></td>
<td>X</td>
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<tr>
<td>gaming activities on Part VIII, line 9a? If &quot;Yes,&quot; complete</td>
<td></td>
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<tr>
<td>Schedule G, Part III</td>
<td></td>
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<tr>
<td>20a. Did the organization operate one or more hospital facilities? If</td>
<td></td>
<td>X</td>
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<tr>
<td>&quot;Yes,&quot; complete Schedule H</td>
<td></td>
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<tr>
<td>b. If &quot;Yes&quot; to line 20a, did the organization attach a copy of its</td>
<td></td>
<td>X</td>
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<tr>
<td>audited financial statements to this report?</td>
<td></td>
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<tr>
<td>21. Did the organization report more than $5,000 of grants or other</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>assistance to any domestic organization or domestic government on Part</td>
<td></td>
<td></td>
</tr>
<tr>
<td>IX, column (A), line 17? If &quot;Yes,&quot; complete Schedule I, Parts I and II</td>
<td></td>
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</tbody>
</table>
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  
   [ ] Yes [ ] No  

23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees?  
   If "Yes," complete Schedule J  
   [ ] Yes [ ] No  

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  
   [ ] Yes [ ] No  

24b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?  
   [ ] Yes [ ] No  

24c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?  
   [ ] Yes [ ] No  

24d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  
   [ ] Yes [ ] No  

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  
   [ ] Yes [ ] No  

25b 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  
   [ ] Yes [ ] No  

26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons?  
   If "Yes," complete Schedule L, Part II  
   [ ] Yes [ ] No  

27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons?  
   If "Yes," complete Schedule L, Part II  
   [ ] Yes [ ] No  

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, key employee, creator or founder, or substantial contributor?  
      If "Yes," complete Schedule L, Part IV  
      [ ] Yes [ ] No  

   b A family member of any individual described in line 28a?  
      If "Yes," complete Schedule L, Part IV  
      [ ] Yes [ ] No  

   c A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b?  
      If "Yes," complete Schedule L, Part IV  
      [ ] Yes [ ] No  

29 Did the organization receive more than $25,000 in non-cash contributions?  
   If "Yes," complete Schedule M  
   [ ] Yes [ ] No  

30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions?  
   If "Yes," complete Schedule M  
   [ ] Yes [ ] No  

31 Did the organization liquidate, terminate, or dissolve and cease operations?  
   If "Yes," complete Schedule N, Part I  
   [ ] Yes [ ] No  

32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?  
   If "Yes," complete Schedule N, Part II  
   [ ] Yes [ ] No  

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  
   [ ] Yes [ ] No  

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  
   [ ] Yes [ ] No  

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?  
   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  
   [ ] Yes [ ] No  

35b **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  
   [ ] Yes [ ] No  

36 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  
   [ ] Yes [ ] No  

37 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?  
   [ ] Yes [ ] No  

**Note:** All Form 990 filers are required to complete Schedule O  

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**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  
   [ ] Yes [ ] No  

1b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable  
   [ ] Yes [ ] No  

1c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?  
   [ ] Yes [ ] No  

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Form 990 (2019)  

GLOBAL FOOTPRINT NETWORK, INC. 73-1672982  

Page 4  

12510812 794364 GLOBALFOOT 2019.04010 GLOBAL FOOTPRINT NETWORK, I GLOBALF1
2a. Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, 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?  

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  

SWITZERLAND  


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?  

15. Is the organization subject to the section 4960 tax on payment(s) of more than $1,000,000 in remuneration or excess parachute payment(s) during the year?  

15a. If "Yes," see instructions and file Form 4720, Schedule N.  

16. Is the organization an educational institution subject to the section 4968 excise tax on net investment income?  

If "Yes," complete Form 4720, Schedule O.
GLOBAL FOOTPRINT NETWORK, INC. 73-1672982

Part VI | Governance, Management, and Disclosure

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

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

Section A. Governing Body and Management

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 on Schedule O.

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

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?

3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?

4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?

5 Did the organization become aware during the year of a significant diversion of the organization's assets?

6 Did the organization have members or stockholders?

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?

7b 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

8 Did the organization document contemporaneously 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

9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O

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?

11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?

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

12a Did the organization have a written conflict of interest policy? If "No," go to line 13

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

13 Did the organization have a written whistleblower policy?

14 Did the organization have a written document retention and destruction policy?

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

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?

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed

CA

18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.

☐ Own website ☑ Another's website ☑ Upon request ☐ Other (explain on Schedule O)

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

20 State the name, address, and telephone number of the person who possesses the organization's books and records

RACHEL ROBERTS - 510-839-8879

1528 WEBSTER STREET, SUITE 11, OAKLAND, CA 94612

Form 990 (2019)
## Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization’s tax year.

- List all of the organization’s **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter 0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization’s **current** key employees, if any. See instructions for definition of “key employee.”
- List the organization’s **five current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than $100,000 from the organization and any related organizations.
- List all of the organization’s **former** officers, key employees, and highest compensated employees who received more than $100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization’s **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than $10,000 of reportable compensation from the organization and any related organizations.

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

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

<table>
<thead>
<tr>
<th>(A) Name and title</th>
<th>(B) Average hours per week</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>(1) SUSAN BURNS</td>
<td>1.00</td>
<td>DIRECTOR</td>
<td>2,000.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>(2) MATHIS WACKERNAGEL</td>
<td>40.00</td>
<td>CHIEF EXECUTIVE OFFICER</td>
<td>112,570.</td>
<td>0.</td>
<td>6,981.</td>
</tr>
<tr>
<td>(3) JULIA MARTON-LEFEVRE</td>
<td>1.00</td>
<td>DIRECTOR</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>(4) LYNDAMANSON</td>
<td>1.00</td>
<td>SECRETARY</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>(5) SAROSH KUMANA</td>
<td>1.00</td>
<td>DIRECTOR</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>(6) KEITH TUFFLEY</td>
<td>1.00</td>
<td>PRESIDENT</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>(7) DANIEL GOLDSCHEIDER</td>
<td>1.00</td>
<td>TREASURER</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>(8) SANDRA BROWNE</td>
<td>1.00</td>
<td>DIRECTOR</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>(9) ALEXA FIRMENICH</td>
<td>1.00</td>
<td>DIRECTOR</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
</tbody>
</table>
### Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

<table>
<thead>
<tr>
<th>(A) Name and title</th>
<th>(B) Average hours per week (list any hours for related organizations below line)</th>
<th>(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)</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></td>
<td></td>
<td>Individual trustee or director</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Institutional trustee</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Officer</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Highest compensated employee</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Key employee</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Former</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

1b Subtotal: 114,570.00, 0.00, 6,981.00

c Total from continuation sheets to Part VII, Section A: 0.00, 0.00, 0.00

d Total (add lines 1b and 1c): 114,570.00, 0.00, 6,981.00

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: 1

3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual: Yes, 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: No, 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: No, 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>NONE</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>(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>
</tr>
<tr>
<td>1 b Membership dues</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 c Fundraising events</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 d Related organizations</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 e Government grants (contributions)</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>286,475.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 g Noncash contributions included in lines 1a-1f</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>h Total. Add lines 1a-1f</td>
<td>286,475.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 a SERVICE FEES</td>
<td>541900</td>
<td>535,711.</td>
<td>535,711.</td>
</tr>
<tr>
<td>2 b LICENSE FEES</td>
<td>541900</td>
<td>22,593.</td>
<td>22,593.</td>
</tr>
<tr>
<td>2 c HONORARIA</td>
<td>541900</td>
<td>13,958.</td>
<td>13,958.</td>
</tr>
<tr>
<td>2 d MISCELLANEOUS</td>
<td>541900</td>
<td>546.</td>
<td>546.</td>
</tr>
<tr>
<td>2 e Total. Add lines 2a-2f</td>
<td>572,808.</td>
<td></td>
<td></td>
</tr>
<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></td>
<td></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>(i) 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>(i) 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). See Part IV, line 18</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8 b Less: direct expenses</td>
<td></td>
<td></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. See Part IV, line 19</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9 b Less: direct expenses</td>
<td></td>
<td></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></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 GAIN (LOSS) ON EXCHANG</td>
<td>541900</td>
<td>-2,250.</td>
<td>-2,250.</td>
</tr>
<tr>
<td>11 b</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11 c</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11 d All other revenue</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11 e Total. Add lines 11a-11d</td>
<td></td>
<td></td>
<td>-2,250.</td>
</tr>
</tbody>
</table>

### Miscellaneous Revenue

| 12 Total. Add lines 11a-11d | 857,772. | 570,558. | 0. | 739. |
### 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).

<table>
<thead>
<tr>
<th>Line</th>
<th>Description</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></td>
<td></td>
<td></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>
<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>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Benefits paid to or for members</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Compensation of current officers, directors, trustees, and key employees</td>
<td>112,570</td>
<td>96,221</td>
<td>12,779</td>
<td>3,570</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>333,517</td>
<td>281,658</td>
<td>41,406</td>
<td>10,453</td>
</tr>
<tr>
<td>7</td>
<td>Other salaries and wages</td>
<td></td>
<td></td>
<td></td>
<td></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>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Other employee benefits</td>
<td>22,281</td>
<td>19,712</td>
<td>1,838</td>
<td>731</td>
</tr>
<tr>
<td>10</td>
<td>Payroll taxes</td>
<td>33,440</td>
<td>28,583</td>
<td>3,796</td>
<td>1,061</td>
</tr>
<tr>
<td>11</td>
<td>Fees for services (nonemployees):</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>a Management</td>
<td>12,867</td>
<td>6,247</td>
<td>1,970</td>
<td>4,650</td>
</tr>
<tr>
<td></td>
<td>b Legal</td>
<td>2,230</td>
<td>2,230</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>c Accounting</td>
<td>13,687</td>
<td>1,873</td>
<td>11,744</td>
<td>70</td>
</tr>
<tr>
<td></td>
<td>d Lobbying</td>
<td></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>
<td></td>
</tr>
<tr>
<td></td>
<td>f Investment management fees</td>
<td></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 Sch O.)</td>
<td>154,903</td>
<td>151,169</td>
<td>101</td>
<td>3,633</td>
</tr>
<tr>
<td>12</td>
<td>Advertising and promotion</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13</td>
<td>Office expenses</td>
<td>3,606</td>
<td>2,835</td>
<td>663</td>
<td>108</td>
</tr>
<tr>
<td>14</td>
<td>Information technology</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>15</td>
<td>Royalties</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>16</td>
<td>Occupancy</td>
<td>38,883</td>
<td>17,594</td>
<td>20,636</td>
<td>653</td>
</tr>
<tr>
<td>17</td>
<td>Travel</td>
<td>14,186</td>
<td>13,420</td>
<td>766</td>
<td></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>
<td></td>
</tr>
<tr>
<td>19</td>
<td>Conferences, conventions, and meetings</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>20</td>
<td>Interest</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>21</td>
<td>Payments to affiliates</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>22</td>
<td>Depreciation, depletion, and amortization</td>
<td>10,292</td>
<td>10,292</td>
<td></td>
<td></td>
</tr>
<tr>
<td>23</td>
<td>Insurance</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>24</td>
<td>Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>a DIRECT PROGRAM EXPENSES</td>
<td>210,251</td>
<td>209,915</td>
<td>53</td>
<td>283</td>
</tr>
<tr>
<td></td>
<td>b COMPUTER EXPENSES</td>
<td>48,022</td>
<td>41,064</td>
<td>5,113</td>
<td>1,845</td>
</tr>
<tr>
<td></td>
<td>c BANK FEES &amp; CHARGES</td>
<td>5,713</td>
<td>127</td>
<td>1,845</td>
<td>3,741</td>
</tr>
<tr>
<td></td>
<td>d TELEPHONE</td>
<td>784</td>
<td>670</td>
<td>89</td>
<td>25</td>
</tr>
<tr>
<td></td>
<td>e All other expenses</td>
<td>705</td>
<td>27</td>
<td>653</td>
<td>25</td>
</tr>
<tr>
<td>25</td>
<td>Total functional expenses. Add lines 1 through 24e</td>
<td>1,024,579</td>
<td>879,022</td>
<td>114,498</td>
<td>31,059</td>
</tr>
<tr>
<td>26</td>
<td>Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Check if Schedule O contains a response or note to any line in this Part IX [X]
### Balance Sheet - Part X

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

<table>
<thead>
<tr>
<th>Assets</th>
<th>(A)</th>
<th>(B)</th>
</tr>
</thead>
<tbody>
<tr>
<td>2. Savings and temporary cash investments</td>
<td>455,595.</td>
<td>460,918.</td>
</tr>
<tr>
<td>4. Accounts receivable, net</td>
<td></td>
<td>4</td>
</tr>
<tr>
<td>5. Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons</td>
<td></td>
<td>5</td>
</tr>
<tr>
<td>6. Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)</td>
<td></td>
<td>6</td>
</tr>
<tr>
<td>7. Notes and loans receivable, net</td>
<td></td>
<td>7</td>
</tr>
<tr>
<td>8. Inventories for sale or use</td>
<td></td>
<td>8</td>
</tr>
<tr>
<td>10a. Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10b. Less: accumulated depreciation</td>
<td>39,793.</td>
<td>24,512.</td>
</tr>
<tr>
<td>11. Investments - publicly traded securities</td>
<td></td>
<td>11</td>
</tr>
<tr>
<td>12. Investments - other securities. See Part IV, line 11</td>
<td></td>
<td>12</td>
</tr>
<tr>
<td>13. Investments - program-related. See Part IV, line 11</td>
<td></td>
<td>13</td>
</tr>
<tr>
<td>14. Intangible assets</td>
<td></td>
<td>14</td>
</tr>
<tr>
<td>15. Other assets. See Part IV, line 11</td>
<td></td>
<td>15</td>
</tr>
<tr>
<td>16. Total assets. Add lines 1 through 15 (must equal line 33)</td>
<td>1,243,867.</td>
<td>1,098,292.</td>
</tr>
<tr>
<td>17. Accounts payable and accrued expenses</td>
<td>52,563.</td>
<td>68,272.</td>
</tr>
<tr>
<td>18. Grants payable</td>
<td></td>
<td>18</td>
</tr>
<tr>
<td>19. Deferred revenue</td>
<td></td>
<td>19</td>
</tr>
<tr>
<td>20. Tax-exempt bond liabilities</td>
<td></td>
<td>20</td>
</tr>
<tr>
<td>21. Escrow or custodial account liability. Complete Part IV of Schedule D</td>
<td></td>
<td>21</td>
</tr>
<tr>
<td>22. Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons</td>
<td></td>
<td>22</td>
</tr>
<tr>
<td>23. Secured mortgages and notes payable to unrelated third parties</td>
<td></td>
<td>23</td>
</tr>
<tr>
<td>24. Unsecured notes and loans payable to unrelated third parties</td>
<td></td>
<td>24</td>
</tr>
<tr>
<td>25. 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>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Liabilities</th>
<th>(A)</th>
<th>(B)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Form 990 (2019)**

*GLOBAL FOOTPRINT NETWORK, INC.* 73-1672982 **Page 11**

**Assets**

- **Total assets**: $1,243,867.00

**Liabilities**

- **Total liabilities**: $52,563.00

**Net Assets or Fund Balances**

- **Total net assets or fund balances**: $1,191,304.00

Form 990 (2019)
**Part XI Reconciliation of Net Assets**

<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Total revenue (must equal Part VIII, column (A), line 12)</td>
<td>857,772.</td>
</tr>
<tr>
<td>2</td>
<td>Total expenses (must equal Part IX, column (A), line 25)</td>
<td>1,024,579.</td>
</tr>
<tr>
<td>3</td>
<td>Revenue less expenses. Subtract line 2 from line 1</td>
<td>-166,807.</td>
</tr>
<tr>
<td>4</td>
<td>Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))</td>
<td>1,191,304.</td>
</tr>
<tr>
<td>5</td>
<td>Net unrealized gains (losses) on investments</td>
<td>5,523.</td>
</tr>
<tr>
<td>6</td>
<td>Donated services and use of facilities</td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Investment expenses</td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>Prior period adjustments</td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Other changes in net assets or fund balances (explain on Schedule O)</td>
<td>0.</td>
</tr>
<tr>
<td>10</td>
<td>Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))</td>
<td>1,030,020.</td>
</tr>
</tbody>
</table>

**Part XII Financial Statements and Reporting**

<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>2a</td>
<td>Were the organization’s financial statements compiled or reviewed by an independent accountant?</td>
<td>Yes</td>
</tr>
<tr>
<td>2b</td>
<td>Were the organization’s financial statements audited by an independent accountant?</td>
<td>Yes</td>
</tr>
<tr>
<td>2c</td>
<td>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></td>
</tr>
<tr>
<td>3a</td>
<td>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>Yes</td>
</tr>
<tr>
<td>3b</td>
<td>If “Yes,” did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits</td>
<td></td>
</tr>
</tbody>
</table>
### Part I  Reason for Public Charity Status

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

<table>
<thead>
<tr>
<th></th>
<th>Description</th>
<th>Yes</th>
<th>No</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>
<td></td>
<td></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>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).</td>
<td></td>
<td></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>
<td></td>
<td></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>
<td></td>
<td></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>
<td></td>
<td></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>
<td></td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>A community trust described in section 170(b)(1)(A)(vii). (Complete Part II.)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>An agricultural research organization described in section 170(b)(1)(A)(ix) 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>
<td></td>
<td></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>
<td>X</td>
<td></td>
</tr>
<tr>
<td>11</td>
<td>An organization organized and operated exclusively to test for public safety. See section 509(a)(4).</td>
<td></td>
<td></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>
<td></td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by 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>
<td></td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by 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>
<td></td>
<td></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>
<td></td>
<td></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>
<td></td>
<td></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>
<td></td>
<td></td>
</tr>
<tr>
<td>f</td>
<td>Enter the number of supported organizations</td>
<td></td>
<td></td>
</tr>
<tr>
<td>g</td>
<td>Provide the following information about the supported organization(s).</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Part II  Name of Supported Organization

<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></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Total Runway**

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 932021 09-25-19  Schedule A (Form 990 or 990-EZ) 2019

12510812 794364 GLOBALFOOT  2019.04010 GLOBAL FOOTPRINT NETWORK, I GLOBALF1
### Section A. Public Support

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2015</th>
<th>(b) 2016</th>
<th>(c) 2017</th>
<th>(d) 2018</th>
<th>(e) 2019</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1  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>
<td></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></td>
</tr>
<tr>
<td>3  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>
<td></td>
</tr>
<tr>
<td>4  <strong>Total. Add lines 1 through 3</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></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></td>
</tr>
<tr>
<td>6  <strong>Public support. Subtract line 5 from line 4.</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Section B. Total Support

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2015</th>
<th>(b) 2016</th>
<th>(c) 2017</th>
<th>(d) 2018</th>
<th>(e) 2019</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>7  <strong>Amounts from line 4</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8  Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></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></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></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11  <strong>Total support. Add lines 7 through 10</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></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></td>
</tr>
<tr>
<td>13  <strong>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.</strong></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) 2015</th>
<th>(b) 2016</th>
<th>(c) 2017</th>
<th>(d) 2018</th>
<th>(e) 2019</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>14  Public support percentage for 2019 (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 2018 Schedule A, Part II, line 14</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>16a  <strong>33 1/3% support test - 2019. 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.</strong> The organization qualifies as a publicly supported organization</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>17a  <strong>10% - facts-and-circumstances test - 2019. 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 &quot;facts-and-circumstances&quot; test, check this box and stop here.</strong> The organization qualifies as a publicly supported organization</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>18  <strong>Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions.</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

---

**Schedule A (Form 990 or 990-EZ) 2019**

GLOBAL FOOTPRINT NETWORK, INC. 73-1672982

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| 12510812 794364 GLOBALFOOT | 2019.04010 GLOBAL FOOTPRINT NETWORK, I GLOBALF1 |
### Part II 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) 2015</th>
<th>(b) 2016</th>
<th>(c) 2017</th>
<th>(d) 2018</th>
<th>(e) 2019</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Gifts, grants, contributions, and membership fees received. (Do not include any &quot;unusual grants.&quot;)</td>
<td>2398330.</td>
<td>1537878.</td>
<td>1071811.</td>
<td>693,680.</td>
<td>286,475.</td>
<td>598,8174.</td>
</tr>
<tr>
<td>2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose</td>
<td>477,696.</td>
<td>379,279.</td>
<td>207,325.</td>
<td>481,779.</td>
<td>572,808.</td>
<td>2118887.</td>
</tr>
<tr>
<td>3 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>
<td></td>
</tr>
<tr>
<td>4 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></td>
</tr>
<tr>
<td>5 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>
<td></td>
</tr>
<tr>
<td>6 Total. Add lines 1 through 5</td>
<td>2876026.</td>
<td>1917157.</td>
<td>1279136.</td>
<td>1175459.</td>
<td>859,283.</td>
<td>8107061.</td>
</tr>
<tr>
<td>7a Amounts included on lines 1, 2, and 3 received from disqualified persons</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>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</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8 Public support. (Subtract line 7c from line 6)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### Section B. Total Support

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2015</th>
<th>(b) 2016</th>
<th>(c) 2017</th>
<th>(d) 2018</th>
<th>(e) 2019</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>9 Amounts from line 6</td>
<td>2876026.</td>
<td>1917157.</td>
<td>1279136.</td>
<td>1175459.</td>
<td>859,283.</td>
<td>8107061.</td>
</tr>
<tr>
<td>10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources</td>
<td>1,242.</td>
<td>9,529.</td>
<td>380.</td>
<td>139.</td>
<td>739.</td>
<td>12,029.</td>
</tr>
<tr>
<td>10b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on</td>
<td>1,242.</td>
<td>9,529.</td>
<td>380.</td>
<td>139.</td>
<td>739.</td>
<td>12,029.</td>
</tr>
<tr>
<td>12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)</td>
<td>575.</td>
<td>201.</td>
<td>-2,250.</td>
<td>-1,474.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>13 Total support. (Add lines 9, 10c, 11, and 12)</td>
<td>2877268.</td>
<td>1927261.</td>
<td>1279717.</td>
<td>1175598.</td>
<td>857,772.</td>
<td>8117616.</td>
</tr>
<tr>
<td>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</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

| 15 Public support percentage for 2019 (line 8, column (f), divided by line 13, column (f)) | 15 | 99.87 % |
| 16 Public support percentage from 2018 Schedule A, Part III, line 15 | 16 | 99.95 % |

#### Section D. Computation of Investment Income Percentage

| 17 Investment income percentage for 2019 (line 10c, column (f), divided by line 13, column (f)) | 17 | .15 % |
| 18 Investment income percentage from 2018 Schedule A, Part III, line 17 | 18 | .15 % |
| 19a 33 1/3% support tests - 2019. 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 - 2018. 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 | | |

Schedule A (Form 990 or 990-EZ) 2019 Page 3

GLOBAL FOOTPRINT NETWORK, INC. 73-1672982
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 confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 508(a)(2)? If "Yes," explain in Part VI when and how the organization made the determination.

   c  Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.

4a  Was any supported organization not organized in the United States (“foreign supported organization”)? If "Yes," and if you checked 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," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.

   c  Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.

5a  Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (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 organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).

   b  Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization’s organizing document?

   c  Substitutions only. Was the substitution the result of an event beyond the organization’s control?

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

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

#### Section B. Type I Supporting Organizations

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>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 &quot;No,&quot; describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization’s activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If &quot;Yes,&quot; 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.</td>
<td></td>
</tr>
</tbody>
</table>

#### Section C. Type II Supporting Organizations

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>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 &quot;No,&quot; 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).</td>
<td></td>
</tr>
</tbody>
</table>

#### Section D. All Type III Supporting Organizations

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>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?</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>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 &quot;No,&quot; describe in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>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 &quot;Yes,&quot; explain in Part VI the role the organization’s supported organizations played in this regard.</td>
<td></td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).</td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>The organization satisfied the Activities Test. Complete line 2 below.</td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>The organization is the parent of each of its supported organizations. Complete line 3 below.</td>
<td></td>
</tr>
<tr>
<td>c</td>
<td>The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Activities Test. Answer (a) and (b) below.</td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>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 &quot;Yes,&quot; 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.</td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>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 &quot;Yes,&quot; 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.</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Parent of Supported Organizations. Answer (a) and (b) below.</td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>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.</td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>Did the organization exercise a substantive degree of direction over the policies, programs, and activities of each of its supported organizations? If &quot;Yes,&quot; describe in Part VI the role played by the organization in this regard.</td>
<td></td>
</tr>
</tbody>
</table>
### Section A - Adjusted Net Income

<table>
<thead>
<tr>
<th>(A) Prior Year</th>
<th>(B) Current Year (optional)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Net short-term capital gain</td>
<td>1</td>
</tr>
<tr>
<td>2. Recoveries of prior-year distributions</td>
<td>2</td>
</tr>
<tr>
<td>3. Other gross income (see instructions)</td>
<td>3</td>
</tr>
<tr>
<td>4. Add lines 1 through 3.</td>
<td>4</td>
</tr>
<tr>
<td>5. Depreciation and depletion</td>
<td>5</td>
</tr>
<tr>
<td>6. Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)</td>
<td>6</td>
</tr>
<tr>
<td>7. Other expenses (see instructions)</td>
<td>7</td>
</tr>
<tr>
<td><strong>Adjusted Net Income</strong> (subtract lines 5, 6, and 7 from line 4)</td>
<td><strong>8</strong></td>
</tr>
</tbody>
</table>

### Section B - Minimum Asset Amount

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

### Section C - Distributable Amount

<table>
<thead>
<tr>
<th>Current Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Adjusted net income for prior year (from Section A, line 8, Column A)</td>
</tr>
<tr>
<td>2. Enter 85% of line 1.</td>
</tr>
<tr>
<td>3. Minimum asset amount for prior year (from Section B, line 8, Column A)</td>
</tr>
<tr>
<td>4. Enter greater of line 2 or line 3.</td>
</tr>
<tr>
<td>5. Income tax imposed in prior year</td>
</tr>
<tr>
<td>6. Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).</td>
</tr>
</tbody>
</table>

Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).
Part V
Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

Section D - Distributions

<table>
<thead>
<tr>
<th>Current Year</th>
<th></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 2019 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>(i) Excess Distributions</th>
<th>(ii) Underdistributions Pre-2019</th>
<th>(iii) Distributable Amount for 2019</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Distributable amount for 2019 from Section C, line 6</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Underdistributions, if any, for years prior to 2019 (reasonable cause required- explain in Part VI), See instructions.</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Excess distributions carryover, if any, to 2019</td>
<td></td>
</tr>
<tr>
<td>a From 2014</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b From 2015</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c From 2016</td>
<td></td>
<td></td>
</tr>
<tr>
<td>d From 2017</td>
<td></td>
<td></td>
</tr>
<tr>
<td>e From 2018</td>
<td></td>
<td></td>
</tr>
<tr>
<td>f Total of lines 3a through e</td>
<td></td>
<td></td>
</tr>
<tr>
<td>g</td>
<td>Applied to underdistributions of prior years</td>
<td></td>
</tr>
<tr>
<td>h</td>
<td>Applied to 2019 distributable amount</td>
<td></td>
</tr>
<tr>
<td>i</td>
<td>Carryover from 2014 not applied (see instructions)</td>
<td></td>
</tr>
<tr>
<td>j</td>
<td>Remainder. Subtract lines 3g, 3h, and 3i from 3f.</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Distributions for 2019 from Section D, line 7: $</td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>Applied to underdistributions of prior years</td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>Applied to 2019 distributable amount</td>
<td></td>
</tr>
<tr>
<td>c</td>
<td>Remainder. Subtract lines 4a and 4b from 4.</td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.</td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.</td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Excess distributions carryover to 2020. Add lines 3j and 4c.</td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>Excess from 2015</td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>Excess from 2016</td>
<td></td>
</tr>
<tr>
<td>c</td>
<td>Excess from 2017</td>
<td></td>
</tr>
<tr>
<td>d</td>
<td>Excess from 2018</td>
<td></td>
</tr>
<tr>
<td>e</td>
<td>Excess from 2019</td>
<td></td>
</tr>
</tbody>
</table>

Schedule A (Form 990 or 990-EZ) 2019
Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information.

(See instructions.)
Schedule B
(Form 990, 990-EZ, or 990-PF)
Department of the Treasury
Internal Revenue Service

Name of the organization
GLOBAL FOOTPRINT NETWORK, INC.

Employer identification number
73-1672982

Organization type (check one):
Form 990 or 990-EZ
501(c)(3) (enter number) organization
4947(a)(1) nonexempt charitable trust not treated as a private foundation
527 political organization
Form 990-PF
501(c)(3) exempt private foundation
4947(a)(1) nonexempt charitable trust treated as a private foundation
501(c)(3) taxable private foundation

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

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

General Rule

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

Special Rules

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

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

**Employer identification number**

<table>
<thead>
<tr>
<th>Part I</th>
<th>Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.</th>
</tr>
</thead>
<tbody>
<tr>
<td>(a)</td>
<td>(b) Name, address, and ZIP + 4</td>
</tr>
<tr>
<td>(c)</td>
<td>(d) Type of contribution</td>
</tr>
<tr>
<td>No.</td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>MAVA STIFTUNG FUR NATURSCHUTZ</td>
</tr>
<tr>
<td></td>
<td>RUE MAUVERNEY 28</td>
</tr>
<tr>
<td></td>
<td>GLAND, SWITZERLAND 1196</td>
</tr>
<tr>
<td></td>
<td>$ 92,885.</td>
</tr>
<tr>
<td></td>
<td>Type of contribution: Person Payroll Noncash</td>
</tr>
<tr>
<td></td>
<td>(Complete Part II for noncash contributions.)</td>
</tr>
<tr>
<td>2</td>
<td>SAROSH KUMANA</td>
</tr>
<tr>
<td></td>
<td>639 MARTIS PEAK ROAD</td>
</tr>
<tr>
<td></td>
<td>INCLINE VILLAGE, NV 89451</td>
</tr>
<tr>
<td></td>
<td>$ 5,000.</td>
</tr>
<tr>
<td></td>
<td>Type of contribution: Person Payroll Noncash</td>
</tr>
<tr>
<td></td>
<td>(Complete Part II for noncash contributions.)</td>
</tr>
<tr>
<td>3</td>
<td>PETER SEIDEL</td>
</tr>
<tr>
<td></td>
<td>5300 HAMILTON AVENUE, #1403</td>
</tr>
<tr>
<td></td>
<td>CINCINNATI, OH 45224</td>
</tr>
<tr>
<td></td>
<td>$ 20,000.</td>
</tr>
<tr>
<td></td>
<td>Type of contribution: Person Payroll Noncash</td>
</tr>
<tr>
<td></td>
<td>(Complete Part II for noncash contributions.)</td>
</tr>
<tr>
<td>4</td>
<td>NICHOLAS BENFEY CHARITABLE FUND</td>
</tr>
<tr>
<td></td>
<td>C/O CHARLES SCHWAB, 211 MAIN STREET</td>
</tr>
<tr>
<td></td>
<td>SAN FRANCISCO, CA 94105</td>
</tr>
<tr>
<td></td>
<td>$ 8,000.</td>
</tr>
<tr>
<td></td>
<td>Type of contribution: Person Payroll Noncash</td>
</tr>
<tr>
<td></td>
<td>(Complete Part II for noncash contributions.)</td>
</tr>
</tbody>
</table>
Schedule B (Form 990, 990-EZ, or 990-PF) (2019)

Name of organization

GLOBAL FOOTPRINT NETWORK, INC. 73-1672982

Employer identification number

<table>
<thead>
<tr>
<th>Part II</th>
<th>Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.</th>
</tr>
</thead>
<tbody>
<tr>
<td>(a) No. from Part I</td>
<td>(b) Description of noncash property given</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>(a) No. from Part I</td>
<td>(b) Description of noncash property given</td>
</tr>
<tr>
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<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>(a) No. from Part I</td>
<td>(b) Description of noncash property given</td>
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<tr>
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<td></td>
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<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>(a) No. from Part I</td>
<td>(b) Description of noncash property given</td>
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<tr>
<td></td>
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</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>(a) No. from Part I</td>
<td>(b) Description of noncash property given</td>
</tr>
<tr>
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<td></td>
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</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>(a) No. from Part I</td>
<td>(b) Description of noncash property given</td>
</tr>
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<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>(a) No. from Part I</td>
<td>(b) Description of noncash property given</td>
</tr>
<tr>
<td></td>
<td></td>
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<td></td>
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<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>(a) No. from Part I</td>
<td>(b) Description of noncash property given</td>
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<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>(a) No. from Part I</td>
<td>(b) Description of noncash property given</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>
**GLOBAL FOOTPRINT NETWORK, INC.**

73-1672982

**Part III**

Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than $1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of **$1,000 or less for the year.**

Use duplicate copies of Part III if additional space is needed.

<table>
<thead>
<tr>
<th>(a) No. from Part I</th>
<th>(b) Purpose of gift</th>
<th>(c) Use of gift</th>
<th>(d) Description of how gift is held</th>
<th>(e) Transfer of gift</th>
<th>Transferee's name, address, and ZIP + 4</th>
<th>Relationship of transferor to transferee</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
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<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Schedule B (Form 990, 990-EZ, or 990-PF) (2019)**

Name of organization: **GLOBAL FOOTPRINT NETWORK, INC.**

Employer identification number: 73-1672982

12510812 794364 GLOBALFOOT 2019.04010 GLOBAL FOOTPRINT NETWORK, I GLOBALF1
### 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.

<table>
<thead>
<tr>
<th></th>
<th>(a) Donor advised funds</th>
<th>(b) Funds and other accounts</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Total number at end of year</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Aggregate value of contributions to (during year)</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Aggregate value of grants from (during year)</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Aggregate value at end of year</td>
<td></td>
</tr>
</tbody>
</table>

**Notes:**
- Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? 
  - Yes □ No □
- Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? 
  - Yes □ No □

#### Part II: Conservation Easements

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

1. **Part I:** Purpose(s) of conservation easements held by the organization (check all that apply).
   - □ Preservation of land for public use (for example, recreation or education)
   - □ Preservation of a historically important land area
   - □ Preservation of a historically important land area
   - □ Preservation of open space

2. **Part II:** Number of conservation easements held by the organization at the end of the tax year.
   - a) Total number of conservation easements: 2a
   - b) Total acreage restricted by conservation easements: 2b
   - c) Number of conservation easements on a certified historic structure included in (a): 2c
   - d) Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register: 2d

3. Number of conservation easements modified, transferred, released, extinguished, or terminated by the 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? 
  - Yes □ No □

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)? 
  - Yes □ No □

9. In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that 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.

1a. If the organization elected, as permitted under FASB 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.

1b. If the organization elected, as permitted under FASB 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 FASB ASC 958 relating to these items:
   - a) Revenue included on Form 990, Part VIII, line 1: $ __________
   - b) Assets included in Form 990, Part X: $ __________
### 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 make significant use of its collection items (check all that apply):

- Public exhibition
- Scholarly research
- Preservation for future generations
- Loan or exchange program
- Other

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>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>1c</td>
</tr>
<tr>
<td>1d</td>
</tr>
<tr>
<td>1e</td>
</tr>
<tr>
<td>1f</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:

<table>
<thead>
<tr>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>a Board designated or quasi-endowment</td>
</tr>
<tr>
<td>b Permanent endowment</td>
</tr>
<tr>
<td>c Term endowment</td>
</tr>
</tbody>
</table>

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:

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>i Unrelated organizations</td>
<td></td>
</tr>
<tr>
<td>ii Related organizations</td>
<td></td>
</tr>
</tbody>
</table>

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></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                   | 54,013 | 39,793 | 14,220 | 14,220 |

Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)
### 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>
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<tr>
<td>(C)</td>
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<tr>
<td>(G)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(H)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)

### 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>
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<tr>
<td>(3)</td>
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<tr>
<td>(4)</td>
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<td>(7)</td>
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<tr>
<td>(8)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(9)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)

### Part IX Other Assets

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

<table>
<thead>
<tr>
<th>(a) Description</th>
<th>(b) Book value</th>
</tr>
</thead>
<tbody>
<tr>
<td>GENEVA GIFT TO BE TRANSFERED</td>
<td>106,648</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>
</tbody>
</table>

Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)

### Part X Other Liabilities

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

1. **(a) Description of liability**
   - (1) Federal income taxes
   - (2)
   - (3)
   - (4)
   - (5)
   - (6)
   - (7)
   - (8)
   - (9)

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization’s financial statements that reports the organization’s liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII □
### 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>Line</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>1,055,495</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>5,523</td>
</tr>
<tr>
<td></td>
<td>b. Donated services and use of facilities</td>
<td>192,200</td>
</tr>
<tr>
<td></td>
<td>c. Recoveries of prior year grants</td>
<td>192,200</td>
</tr>
<tr>
<td></td>
<td>d. Other (Describe in Part XIII.)</td>
<td>857,772</td>
</tr>
<tr>
<td></td>
<td>e. Add lines 2a through 2d</td>
<td>197,723</td>
</tr>
<tr>
<td>3</td>
<td>Subtract line 2e from line 1</td>
<td>857,772</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>192,200</td>
</tr>
<tr>
<td></td>
<td>b. Other (Describe in Part XIII.)</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>c. Add lines 4a and 4b</td>
<td>0</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>857,772</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>Line</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>1,216,779</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>192,200</td>
</tr>
<tr>
<td></td>
<td>b. Prior year adjustments</td>
<td>192,200</td>
</tr>
<tr>
<td></td>
<td>c. Other losses</td>
<td>1,024,579</td>
</tr>
<tr>
<td></td>
<td>d. Other (Describe in Part XIII.)</td>
<td>0</td>
</tr>
<tr>
<td>3</td>
<td>Subtract line 2e from line 1</td>
<td>1,024,579</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>192,200</td>
</tr>
<tr>
<td></td>
<td>b. Other (Describe in Part XIII.)</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>c. Add lines 4a and 4b</td>
<td>0</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>1,024,579</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.
### Part I  General Information on Activities Outside the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

1. 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

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

3. 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>EUROPE</td>
<td>1</td>
<td>2</td>
<td>PROGRAM SERVICES RESEARCH AND REPORTS</td>
<td></td>
<td>86,647.</td>
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<tr>
<td>EAST ASIA &amp; THE PACIFIC</td>
<td>0</td>
<td>1</td>
<td>PROGRAM SERVICES RESEARCH AND REPORTS</td>
<td></td>
<td>65,510.</td>
</tr>
</tbody>
</table>

3 a Subtotal .......................................................... 1 3 152,157.

b Total from continuation sheets to Part I ........ 0 0 0.

c Totals (add lines 3a and 3b) ........................................... 1 3 152,157.
<table>
<thead>
<tr>
<th></th>
<th>Name of organization</th>
<th>IRS code section and EIN (if applicable)</th>
<th>Region</th>
<th>Purpose of grant</th>
<th>Amount of cash grant</th>
<th>Manner of cash disbursement</th>
<th>Amount of noncash assistance</th>
<th>Description of noncash assistance</th>
<th>Method of valuation (book, FMV, appraisal, other)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>GLOBAL FOOTPRINT NETWORK, INC.</td>
<td>73-1672982</td>
<td>EUROPE</td>
<td>TO PROVIDE NFA PRODUCTION AND RESEARCH ACTIVITIES AS WELL AS GENERAL</td>
<td>0</td>
<td></td>
<td>0</td>
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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.

3. Enter total number of other organizations or entities.

SEE PART V FOR COLUMN (D) DESCRIPTIONS
Part III  Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.

Part III can be duplicated if 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>
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</tbody>
</table>
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; don't 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; don't file with Form 990)  
   □ Yes X No
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 II, COLUMN (D):

REGION: EUROPE

(D) PURPOSE OF GRANT: TO PROVIDE NFA PRODUCTION AND RESEARCH ACTIVITIES AS WELL AS GENERAL SUPPORT TO THE GFN SWITZERLAND OFFICE
## Part I: Questions Regarding Compensation

**1a** Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- [ ] First-class or charter travel
- [ ] Travel for companions
- [ ] Tax indemnification and gross-up payments
- [ ] Discretionary spending account
- [ ] Housing allowance or residence for personal use
- [ ] Payments for business use of personal residence
- [ ] Health or social club dues or initiation fees
- [ ] Personal services (such as maid, chauffeur, chef)

**b** If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain.

**2** Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?

**3** Indicate which, if any, of the following the organization used to establish the compensation of the organization’s CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- [ ] Compensation committee
- [ ] Independent compensation consultant
- [x] Compensation survey or study
- [ ] Written employment contract
- [ ] Approval by the board or compensation committee

**4** During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- [x] Receive a severance payment or change-of-control payment?
- [x] Participate in, or receive payment from, a supplemental nonqualified retirement plan?
- [x] Participate in, or receive payment from, an equity-based compensation arrangement?

If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

**5** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- [x] The organization?

If "Yes" on line 5a or 5b, describe in Part III.

**6** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- [x] The organization?

If "Yes" on line 6a or 6b, describe in Part III.

**7** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III.

**8** Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III.

**9** If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

---

**Employer identification number**

GLOBAL FOOTPRINT NETWORK, INC. 73-1672982

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.
For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii).

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

<table>
<thead>
<tr>
<th>(A) Name and Title</th>
<th>(B) Breakdown of W-2 and/or 1099-MISC compensation</th>
<th>(C) Retirement and other deferred compensation</th>
<th>(D) Nontaxable benefits</th>
<th>(E) Total of columns (B)(i)-(D)</th>
<th>(F) Compensation in column (B) reported as deferred on prior Form 990</th>
</tr>
</thead>
<tbody>
<tr>
<td>(i)</td>
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</table>
Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.
# Transactions With Interested Persons

**SCHEDULE L**

**Part I - Excess Benefit Transactions**

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.

<table>
<thead>
<tr>
<th></th>
<th>(a) Name of disqualified person</th>
<th>(b) Relationship between disqualified person and organization</th>
<th>(c) Description of transaction</th>
<th>(d) Corrected?</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td>Yes</td>
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<tr>
<td>2</td>
<td>Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958</td>
<td></td>
<td></td>
<td>$</td>
</tr>
<tr>
<td>3</td>
<td>Enter the amount of tax, if any, on line 2, above, reimbursed by the organization</td>
<td></td>
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<td>$</td>
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</tbody>
</table>

**Part II - Loans to and/or From Interested Persons.**

Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22.

<table>
<thead>
<tr>
<th></th>
<th>(a) Name of interested person</th>
<th>(b) Relationship with organization</th>
<th>(c) Purpose of loan</th>
<th>(d) Loan to or from the organization?</th>
<th>(e) Original principal amount</th>
<th>(f) Balance due</th>
<th>(g) In default?</th>
<th>(h) Approved by board or committee?</th>
<th>(i) Written agreement?</th>
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Total: $ |

**Part III - Grants or Assistance Benefiting Interested Persons.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

<table>
<thead>
<tr>
<th></th>
<th>(a) Name of interested person</th>
<th>(b) Relationship between interested person and the organization</th>
<th>(c) Amount of assistance</th>
<th>(d) Type of assistance</th>
<th>(e) Purpose of assistance</th>
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<tbody>
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LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.
### Part IV: Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

<table>
<thead>
<tr>
<th>(a) Name of interested person</th>
<th>(b) Relationship between interested person and the organization</th>
<th>(c) Amount of transaction</th>
<th>(d) Description of transaction</th>
<th>(e) Sharing of organization's revenues?</th>
</tr>
</thead>
<tbody>
<tr>
<td>GLOBAL FOOTPRINT NETWORK-SWITZERLAND FOUNDATION</td>
<td>SHARED EMPLOYEE SALARIES ON JOINT PROJECT</td>
<td></td>
<td></td>
<td>Yes</td>
</tr>
</tbody>
</table>

### Part V: Supplemental Information.

Provide additional information for responses to questions on Schedule L (see instructions).

SCH L, PART IV, BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS:

(A) NAME OF INTERESTED PERSON:

GLOBAL FOOTPRINT NETWORK-SWITZERLAND FOUNDATION

(D) DESCRIPTION OF TRANSACTION: SHARED EMPLOYEE SALARIES ON JOINT PROJECT
FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

OUR VISION IS THAT ALL PEOPLE FLOURISH WITHIN THE MEANS OF OUR ONE PLANET. OUR MISSION IS TO MAKE ECOLOGICAL LIMITS CENTRAL TO DECISION-MAKING.

FORM 990, PART III, LINE 4A

RESEARCH - GLOBAL FOOTPRINT NETWORK AND ITS STAFF ARE KNOWN FOR HAVING DEVELOPED THE ECOLOGICAL FOOTPRINT, THE ONLY ACCOUNTING SYSTEM IN THE WORLD THAT COMPREHENSIVELY COMPARES OVERALL HUMAN DEMAND ON NATURE WITH WHAT OUR PLANET, OR EACH REGION'S ECOSYSTEMS CAN RENEW. IT SUMMARIZES THE RESULTS IN A SINGLE, EASY TO UNDERSTAND METRIC: NUMBER OF EARTHS USED. THIS RESOURCE ACCOUNTING SYSTEM CAN BE APPLIED, FROM THE INDIVIDUAL TO THE CITY TO THE GLOBAL LEVEL. OUR NATIONAL FOOTPRINT ACCOUNTS, CONTAIN ECOLOGICAL FOOTPRINT AND BIO-CAPACITY DATA FOR NEARLY EVERY COUNTRY SINCE 1961 AND THIS CORE DATA IS DRAWN FROM UNITED NATIONS DATA SOURCES. SOME 2,000 UNIVERSITIES AROUND THE WORLD HAVE DOWNLOADED ECOLOGICAL FOOTPRINT DATA FOR RESEARCH, ARTICLES AND BOOKS. GLOBAL FOOTPRINT NETWORK'S DATA AND GRAPHS ARE CITED IN VIRTUALLY EVERY SUSTAINABILITY REPORT, AS THE DATA IS USED TO TELL A STORY AND TO DEMONSTRATE COLLECTIVE TRENDS AND VARIATIONS AROUND NATIONS/REGIONS. OUR EARTH OVERTHROW DAY IS KNOWN AROUND THE WORLD, GENERATING 4 BILLION MEDIA IMPRESSIONS IN 2019.

FORM 990, PART III, LINE 4C

OUTREACH/COMMUNICATIONS - IN ORDER TO MAKE FOOTPRINT CALCULATIONS RELEVANT AND EMPOWERING FOR ANY USER, WE COMMUNICATE THE RESULTS IN
CREATIVE AND ENGAGING WAYS:

*A KEY ENTRY POINT FOR OUR COMMUNICATIONS EFFORTS IS OUR POPULAR ECOLOGICAL FOOTPRINT CALCULATOR, (HTTP://WWW.FOOTPRINTCALCULATOR.ORG/).


*ANNUAL EARTH OVERSHOOT DAY MEDIA CAMPAIGN
(HTTPS://WWW.OVERSHOOTDAY.ORG/) EVERY YEAR SINCE 2006, GLOBAL FOOTPRINT NETWORK HAS BEEN MARKING EARTH OVERSHOOT DAY: THE DATE WHEN HUMANITY HAS EXHAUSTED THE PLANET'S ECOLOGICAL BUDGET FOR THE WHOLE YEAR. IN 2019, WE HAVE DOCUMENTED OVER 6400 NEWS STORIES IN OVER 120 COUNTRIES, LEADING TO OVER 4.4 BILLION MEDIA IMPRESSIONS.

*WE PUBLISHED OUR ANNUAL NATIONAL FOOTPRINT ACCOUNTS, WHICH CONTAINS ECOLOGICAL FOOTPRINT AND BIO-CAPACITY RESULTS OF NEARLY EVERY COUNTRY SINCE 1961, UNDER A CREATIVE COMMONS LICENSE SO IT CAN BE FREE AND ACCESSIBLE TO ALL PEOPLE. THIS OPEN DATA PLATFORM IS CALLED ECOLOGICAL FOOTPRINT EXPLORER HTTP://DATA.FOOTPRINTNETWORK.ORG/#/

*WE ARE WORKING WITH YORK UNIVERSITY IN TORONTO TO ESTABLISH A NEW AND INDEPENDENT INTERNATIONAL NOT-FOR-PROFIT THAT CAN MAINTAIN AND IMPROVE THE NATIONAL FOOTPRINT AND BIOCAPACITY ACCOUNTS. THIS WILL MAKE THE RESULTS MORE TRUSTED AND MORE BROADLY ACCEPTED. THE WEBSITE FOR THIS VENTURE IS WWW.FODAFO.ORG

FORM 990, PART VI, SECTION A, LINE 2:

SUSAN BURNS, FOUNDER/DIRECTOR OF FINANCE FOR CHANGE, IS MARRIED TO MATHIS WACKERNAGEL, FOUNDER/CEO.
FORM 990, PART VI, SECTION A, LINE 7A:
PER THE BYLAWS, MATHIS WACKERNAGEL AND SUSAN BURNS HAVE THE AUTHORITY TO EACH APPOINT 2 MEMBERS TO THE BOARD OF DIRECTORS.

FORM 990, PART VI, SECTION B, LINE 11B:
THE FOUNDER/CEO AND ACCOUNTING MANAGER REVIEW THE FORM 990 PRIOR TO FILING, BEFORE THEY PROVIDE A COMPLETE COPY OF THE 990 TO ALL MEMBERS OF THE BOARD FOR APPROVAL.

FORM 990, PART VI, SECTION B, LINE 12C:
THE CONFLICT OF INTEREST POLICY IS DISTRIBUTED TO BOARD MEMBERS AND ALL MEMBERS OF THE GOVERNING BODY. POTENTIAL CONFLICTS OF INTEREST WOULD BE DISCUSSED AT THIS TIME.

FORM 990, PART VI, SECTION B, LINE 15:
SALARIES FOR ALL EMPLOYEES, INCLUDING OFFICERS AND KEY INDIVIDUALS, IS DETERMINED BASED ON COMPARABLE RATES AS DETERMINED VIA COMPENSATION STUDIES AND ARE INCLUDED IN THE BUDGET. THE CEO, PRESIDENT AND HIGHEST PAID INDIVIDUALS ARE REVIEWED ANNUALLY BY THE COMPENSATION COMMITTEE.

FORM 990, PART VI, SECTION C, LINE 18:
THE ORGANIZATION MAKES IT’S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS AVAILABLE UPON REQUEST OF AN INDIVIDUAL OR ORGANIZATION. THE FORM 990 IS AVAILABLE ON THE GUIDESTAR WEBSITE.

FORM 990, PART VI, SECTION C, LINE 19:
THE GOVERNING DOCUMENTS (ARTICLES OF INCORPORATION, BYLAWS) AND CONFLICT OF INTEREST POLICY OF THE ORGANIZATION THAT ARE SUBJECT TO THE FEDERAL PUBLIC
**GLOBAL FOOTPRINT NETWORK, INC.**

**Employer identification number**

73-1672982

---

**DISCLOSURE RULES (OR STATE PUBLIC DISCLOSURE RULES), THESE DOCUMENTS WILL BE MADE PUBLICLY AVAILABLE AS APPLICABLE LAW MAY REQUIRE. OTHERWISE, THE GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY WILL BE PROVIDED TO THE PUBLIC, AT THE DISCRETION OF MANAGEMENT.**

---

**FORM 990, PART IX, LINE 11G, OTHER FEES:**

**TECHNICAL SERVICES:**

<table>
<thead>
<tr>
<th>Program Service Expenses</th>
<th>Management and General Expenses</th>
<th>Fundraising Expenses</th>
</tr>
</thead>
<tbody>
<tr>
<td>57,350.</td>
<td>0.</td>
<td>0.</td>
</tr>
</tbody>
</table>

**TOTAL EXPENSES**

57,350.

**IT CONSULTING:**

<table>
<thead>
<tr>
<th>Program Service Expenses</th>
<th>Management and General Expenses</th>
<th>Fundraising Expenses</th>
</tr>
</thead>
<tbody>
<tr>
<td>15,888.</td>
<td>101.</td>
<td>28.</td>
</tr>
</tbody>
</table>

**TOTAL EXPENSES**

16,017.

**COMMUNICATIONS:**

<table>
<thead>
<tr>
<th>Program Service Expenses</th>
<th>Management and General Expenses</th>
<th>Fundraising Expenses</th>
</tr>
</thead>
<tbody>
<tr>
<td>77,931.</td>
<td>0.</td>
<td>3,605.</td>
</tr>
</tbody>
</table>

**TOTAL EXPENSES**

81,536.

**TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A**

154,903.

---

**FORM 990, PART XII, LINE 2C**

**NO CHANGES TO THE PROCESS HAVE BEEN MADE SINCE THE PRIOR YEAR.**
FORM 990, SCHEDULE L, PART IV, COLUMN B

THEIR BOARD IS CONTROLLED BY CURRENT AND FORMER GLOBAL FOOTPRINT NETWORK TRUSTEES, DIRECTORS, OFFICERS AND KEY EMPLOYEES.
Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

<table>
<thead>
<tr>
<th>Name, address, and EIN (if applicable) of disregarded entity</th>
<th>Primary activity</th>
<th>Legal domicile (state or foreign country)</th>
<th>Total income</th>
<th>End-of-year assets</th>
<th>Direct controlling entity</th>
</tr>
</thead>
<tbody>
<tr>
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</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Name, address, and EIN of related organization</th>
<th>Primary activity</th>
<th>Legal domicile (state or foreign country)</th>
<th>Exempt Code section</th>
<th>Public charity status (if section 501(c)(3))</th>
<th>Direct controlling entity</th>
<th>Section 512(b)(13) controlled entity?</th>
</tr>
</thead>
<tbody>
<tr>
<td>GLOBAL FOOTPRINT NETWORK-SWITZERLAND</td>
<td>PROMOTE AND SECURE</td>
<td>SWITZERLAND</td>
<td>STIFTUNG</td>
<td>N/A</td>
<td>X</td>
<td>Yes</td>
</tr>
<tr>
<td>FOUNDATION, 18 AVENUE LOUIS-CASAI, GENEVA</td>
<td>FINANCIAL SUPPORT FOR THE SWITZERLAND 1209</td>
<td>ECOLOGICAL FOOTPRINT</td>
<td>SWITZERLAND</td>
<td>N/A</td>
<td>N/A</td>
<td>X</td>
</tr>
<tr>
<td></td>
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</tr>
</tbody>
</table>
### Identification of Related Organizations Taxable as a Partnership

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

<table>
<thead>
<tr>
<th>(a) Name, address, and EIN of related organization</th>
<th>(b) Primary activity</th>
<th>(c) Legal domicile (state or foreign country)</th>
<th>(d) Direct controlling entity</th>
<th>(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)</th>
<th>(f) Share of total income</th>
<th>(g) Share of end-of-year assets</th>
<th>(h) Disproportionate allocations?</th>
<th>(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)</th>
<th>(j) General or managing partner?</th>
<th>(k) Percentage ownership</th>
</tr>
</thead>
</table>

### Identification of Related Organizations Taxable as a Corporation or Trust

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

<table>
<thead>
<tr>
<th>(a) Name, address, and EIN of related organization</th>
<th>(b) Primary activity</th>
<th>(c) Legal domicile (state or foreign country)</th>
<th>(d) Direct controlling entity</th>
<th>(e) Type of entity (C corp, S corp, or trust)</th>
<th>(f) Share of total income</th>
<th>(g) Share of end-of-year assets</th>
<th>(h) Percentage ownership</th>
<th>(i) General or managing partner?</th>
<th>(j) Section 512(b)(13) controlled entity?</th>
</tr>
</thead>
</table>

GLOBAL FOOTPRINT NETWORK, INC. 73-1672982
Schedule R (Form 990) 2019
GLOBAL FOOTPRINT NETWORK, INC.

Page 3

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

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

1. During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?
   a. Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity
   b. Gift, grant, or capital contribution to related organization(s)
   c. Gift, grant, or capital contribution from related organization(s)
   d. Loans or loan guarantees to or for related organization(s)
   e. Loans or loan guarantees by related organization(s)
   f. Dividends from related organization(s)
   g. Sale of assets to related organization(s)
   h. Purchase of assets from related organization(s)
   i. Exchange of assets with related organization(s)
   j. Lease of facilities, equipment, or other assets to related organization(s)
   k. Lease of facilities, equipment, or other assets from related organization(s)
   l. Performance of services or membership or fundraising solicitations for related organization(s)
   m. Performance of services or membership or fundraising solicitations by related organization(s)
   n. Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)
   o. Sharing of paid employees with related organization(s)
   p. Reimbursement paid to related organization(s) for expenses
   q. Reimbursement paid by related organization(s) for expenses
   r. Other transfer of cash or property to related organization(s)
   s. Other transfer of cash or property from related organization(s)

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

<table>
<thead>
<tr>
<th>(a) Name of related organization</th>
<th>(b) Transaction type (a-s)</th>
<th>(c) Amount involved</th>
<th>(d) Method of determining amount involved</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. GLOBAL FOOTPRINT NETWORK-SWITZERLAND FOUNDATION</td>
<td>L</td>
<td>0</td>
<td>STAFF HOURS</td>
</tr>
<tr>
<td>2. GLOBAL FOOTPRINT NETWORK-SWITZERLAND FOUNDATION</td>
<td>M</td>
<td>0</td>
<td>STAFF HOURS - NOT TRACKED</td>
</tr>
<tr>
<td>3. GLOBAL FOOTPRINT NETWORK-SWITZERLAND FOUNDATION</td>
<td>N</td>
<td>0</td>
<td>MAIL LISTS - NOT VALUED</td>
</tr>
<tr>
<td>4. GLOBAL FOOTPRINT NETWORK-SWITZERLAND FOUNDATION</td>
<td>B</td>
<td>0</td>
<td>CASH AMOUNT</td>
</tr>
</tbody>
</table>

Schedule R (Form 990) 2019

932163 09-10-19

46
### Unrelated Organizations Taxable as a Partnership

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

<table>
<thead>
<tr>
<th>(a) Name, address, and EIN of entity</th>
<th>(b) Primary activity</th>
<th>(c) Legal domicile (state or foreign country)</th>
<th>(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)</th>
<th>(e) Are all partners sec. 501(c)(3) orgs.?</th>
<th>(f) Share of total income</th>
<th>(g) Share of end-of-year assets</th>
<th>(h) Disproportionate allocations</th>
<th>(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)</th>
<th>(j) General or managing partner?</th>
<th>(k) Percentage ownership</th>
</tr>
</thead>
<tbody>
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</tbody>
</table>

Schedule R (Form 990) 2019  GLOBAL FOOTPRINT NETWORK, INC.  73-1672982  Page 4
Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R. See instructions.
<table>
<thead>
<tr>
<th>Asset No.</th>
<th>Description</th>
<th>Date Acquired</th>
<th>Method</th>
<th>Life</th>
<th>Unadjusted Cost Or Basis</th>
<th>Bus % Excl</th>
<th>Section 179 Expense</th>
<th>Reduction In Basis</th>
<th>Basis For Depreciation</th>
<th>Beginning Accumulated Depreciation</th>
<th>Current Sec 179 Expense</th>
<th>Current Year Deduction</th>
<th>Ending Accumulated Depreciation</th>
</tr>
</thead>
<tbody>
<tr>
<td>2</td>
<td>COMPUTER EQUIPMENT</td>
<td>03/10/16</td>
<td>SL</td>
<td>5.00</td>
<td>19,703.</td>
<td></td>
<td></td>
<td>19,703.</td>
<td>14,776.</td>
<td>3,940.</td>
<td>18,716.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>WEBSITE</td>
<td>03/07/16</td>
<td>SL</td>
<td>5.00</td>
<td>15,430.</td>
<td></td>
<td></td>
<td>15,430.</td>
<td>5,915.</td>
<td>3,086.</td>
<td>9,001.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>WEBSITE</td>
<td>12/21/16</td>
<td>SL</td>
<td>5.00</td>
<td>10,801.</td>
<td></td>
<td></td>
<td>10,801.</td>
<td>4,140.</td>
<td>2,160.</td>
<td>6,300.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>WEBSITE</td>
<td>01/24/17</td>
<td>SL</td>
<td>5.00</td>
<td>5,529.</td>
<td></td>
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<td>5,529.</td>
<td>2,120.</td>
<td>1,106.</td>
<td>3,226.</td>
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</tr>
<tr>
<td></td>
<td>* TOTAL 990 PAGE 10 DEPR</td>
<td></td>
<td></td>
<td></td>
<td>54,013.</td>
<td></td>
<td></td>
<td>54,013.</td>
<td>29,501.</td>
<td>10,292.</td>
<td>39,793.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

(D) · Asset disposed  
* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone
Form 8868
(Rev. January 2020)

Department of the Treasury
Internal Revenue Service

File by the
due date for
filing your
return. See
instructions.

923841 12-30-19

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

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

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

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

| Type or print |
| Name of exempt organization or other filer, see instructions. |
| Taxpayer identification number (TIN) |
| GLOBAL FOOTPRINT NETWORK, INC. |
| 73-1672982 |

| File by the due date for filing your return. See instructions. |
| Number, street, and room or suite no. If a P.O. box, see instructions. |
| 1528 WEBSTER STREET, SUITE 11 |
| OAKLAND, CA 94612 |

Enter the Return Code for the return that this application is for (file a separate application for each return)

| Application Is For Return Code | Application Is For Return Code |
| Form 990 or Form 990-EZ 01 | Form 990-T (corporation) 07 |
| Form 990-BL 02 | Form 1041-A 08 |
| Form 4720 (individual) 03 | Form 4720 (other than individual) 09 |
| Form 990-PF 04 | Form 5227 10 |
| Form 990-T (sec. 401(a) or 408(a) trust) 05 | Form 6069 11 |
| Form 990-T (trust other than above) 06 | Form 8870 12 |

RACHEL ROBERTS

The books are in the care of 1528 WEBSTER STREET, SUITE 11 – OAKLAND, CA 94612

Telephone No. 510-839-8879 Fax No. 510-251-2410

If the organization does not have an office or place of business in the United States, check this box. If this is for a Group Return, enter the organization’s four digit Group Exemption Number (GEN). If this is for the whole group, check this box. If it is for part of the group, check this box and attach a list with the names and TINs of all members the extension is for.

I request an automatic 6-month extension of time until NOVEMBER 16, 2020, to file the exempt organization return for the organization named above. The extension is for the organization’s return for:

☐ calendar year 2019 or ☐ tax year beginning ☐ and ending ☐.

If the tax year entered in line 1 is for less than 12 months, check reason: ☐ Initial return ☐ Final return ☐ Change in accounting period

3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.
3a $ 0.

b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.
3b $ 0.

c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.
3c $ 0.

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

LHA For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form 8868 (Rev. 1-2020)
**TAXABLE YEAR**

**California Exempt Organization Annual Information Return**

**2019**

Calendar Year 2019 or fiscal year beginning (mm/dd/yyyy), and ending (mm/dd/yyyy) .

**GLOBAL FOOTPRINT NETWORK, INC.**

**Filing Fee**

- Revenues
  - not reported to the FTB? See instructions ¥ Yes No
  - Did the organization have any changes to its guidelines
    - If "Yes," what is the parent’s name?
  - Is this organization in a group exemption
  - Federal return filed? (1) ¥ (2) ¥ (3) ¥
  - Is the organization a Limited Liability Company? ¥ Yes No
  - Check accounting method: (1) (2) (3) ~~~~~~~~~~~~~ ¥
  - Enter date: (mm/dd/yyyy)
  - ¥ If organization is a public charity exempt under R&TC
    - Final Information Return?
    - First Return ~~~~~~~~~~~~~~~~~~~ Yes No
  - If exempt under R&TC Section 23701d, has the organization
    - engaged in political activities? See instructions. ¥ Yes X No
  - If "Yes," enter the gross receipts from nonmember sources $ X
  - If organization is a public charity exempt under R&TC
    - Section 23701d and meets the filing fee exception, check
      - box. No filing fee is required X
  - Is the organization a Limited Liability Company? ¥ Yes X No
  - Did the organization file Form 100 or Form 109 to
    - report taxable income? ¥ Yes X No
  - Is the organization under audit by the IRS or has the
    - IRS audited in a prior year? ¥ Yes No
  - report taxable income? Is this a group filing? See instructions ¥ Yes No
  - engaged in political activities? See instructions. ¥ Yes No
  - Is the organization engaged in political activities?
  - Is the organization a Limited Liability Company? ¥ Yes No
  - Did the organization file Form 100 or Form 109 to
    - report taxable income? ¥ Yes No
  - Is the organization under audit by the IRS or has the
    - IRS audited in a prior year? ¥ Yes No
  - report taxable income? Is this a group filing? See instructions ¥ Yes No
  - engaged in political activities? See instructions. ¥ Yes No
  - If "Yes," enter the gross receipts from nonmember sources $ X
  - If organization is a public charity exempt under R&TC
    - Section 23701d and meets the filing fee exception, check
      - box. No filing fee is required X
  - Is the organization a Limited Liability Company? ¥ Yes X No
  - Did the organization file Form 100 or Form 109 to
    - report taxable income? ¥ Yes X No
  - Is the organization under audit by the IRS or has the
    - IRS audited in a prior year? ¥ Yes No

**Part I Complete Part I unless not required to file this form. See General Information B and C.**

<table>
<thead>
<tr>
<th>Receipts and Revenues</th>
<th>Expenses</th>
<th>Filing Fee</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>9</td>
<td>11</td>
</tr>
<tr>
<td>2</td>
<td>10</td>
<td>12</td>
</tr>
<tr>
<td>3</td>
<td>11</td>
<td>13</td>
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<td>12</td>
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<td>17</td>
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<tr>
<td>10</td>
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</tbody>
</table>

**Sign Here**

<table>
<thead>
<tr>
<th>Signature of officer</th>
<th>Title</th>
<th>Date</th>
<th>Telephone</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>PRESIDENT</td>
<td></td>
<td>510-839-8879</td>
</tr>
</tbody>
</table>

**Preparer’s Paid Use Only**

<table>
<thead>
<tr>
<th>Firm’s name (or yours, if self-employed) and address</th>
<th>Firm’s FEIN</th>
<th>Telephone</th>
</tr>
</thead>
<tbody>
<tr>
<td>PATRICIA A. WINTROATH, CPA</td>
<td>00430440</td>
<td>925-974-3310</td>
</tr>
</tbody>
</table>

May the FTB discuss this return with the preparer shown above? See instructions ¥ Yes X No

---

**Form 199 2019 Side 1**
### Schedule M-1

#### Reconciliation of income per books with income per return

<table>
<thead>
<tr>
<th>Description</th>
<th>Line 1</th>
<th>Line 2</th>
<th>Line 3</th>
<th>Line 4</th>
<th>Line 5</th>
<th>Line 6</th>
</tr>
</thead>
<tbody>
<tr>
<td>Net income per books</td>
<td>1</td>
<td>-166,807</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Federal income tax</td>
<td>2</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Excess of capital losses over capital gains</td>
<td>3</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Income not recorded on books this year</td>
<td>4</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Expenses recorded on books this year not deducted in this return</td>
<td>5</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total, Add line 1 through line 5</td>
<td>6</td>
<td>-166,807</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Income recorded on books this year</td>
<td>7</td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>Deductions in this return not charged against book income this year</td>
<td>8</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total, Add line 7 and line 8</td>
<td>9</td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Net income per return</td>
<td>10</td>
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<td></td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

\[\text{Global Footprint Network, Inc. 73-1672982} \]

**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.

#### Assets

<table>
<thead>
<tr>
<th>Description</th>
<th>Line 1</th>
<th>Line 2</th>
<th>Line 3</th>
<th>Line 4</th>
<th>Line 5</th>
<th>Line 6</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Cash</td>
<td></td>
<td>571,329</td>
<td></td>
<td></td>
<td></td>
<td>692,313</td>
</tr>
<tr>
<td>2. Net accounts receivable</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Net notes receivable</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. Inventories</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5. Federal and state government obligations</td>
<td></td>
<td></td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>6. Investments in other bonds</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7. Investments in stock</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8. Mortgage loans</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9. Other investments</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10. Depreciable assets</td>
<td></td>
<td>54,013</td>
<td></td>
<td>54,013</td>
<td></td>
<td></td>
</tr>
<tr>
<td>11. Less accumulated depreciation</td>
<td></td>
<td>29,501</td>
<td></td>
<td>24,512</td>
<td></td>
<td>14,220</td>
</tr>
<tr>
<td>12. Other assets</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13. Total assets</td>
<td></td>
<td>1,243,867</td>
<td></td>
<td>1,098,292</td>
<td>1,191,304</td>
<td>1,030,020</td>
</tr>
</tbody>
</table>

#### Liabilities and net worth

<table>
<thead>
<tr>
<th>Description</th>
<th>Line 1</th>
<th>Line 2</th>
<th>Line 3</th>
<th>Line 4</th>
<th>Line 5</th>
<th>Line 6</th>
</tr>
</thead>
<tbody>
<tr>
<td>14. Accounts payable</td>
<td></td>
<td>52,563</td>
<td></td>
<td></td>
<td></td>
<td>68,272</td>
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<tr>
<td>15. Contributions, gifts, or grants payable</td>
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<td></td>
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<tr>
<td>16. Bonds and notes payable</td>
<td></td>
<td></td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>17. Mortgages payable</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>18. Other liabilities</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>19. Capital stock or principal fund</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>20. Paid-in or capital surplus, Attach reconciliation</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>21. Retained earnings or income fund</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>22. Total liabilities and net worth</td>
<td></td>
<td>1,243,867</td>
<td></td>
<td>1,098,292</td>
<td>1,191,304</td>
<td>1,030,020</td>
</tr>
</tbody>
</table>

#### Notes

- Do not complete this schedule if the amount on Schedule L, line 13, column (d), is less than $50,000.
- End of taxable year
- Balance Sheet

**Form 199 2019**

**Side 2**
### CASH CONTRIBUTIONS STATEMENT 1

<table>
<thead>
<tr>
<th>CONTRIBUTOR'S NAME</th>
<th>CONTRIBUTOR'S ADDRESS</th>
<th>DATE OF GIFT</th>
<th>AMOUNT</th>
</tr>
</thead>
<tbody>
<tr>
<td>MAVA STIFTUNG FUR NATURSCHUTZ</td>
<td>RUE MAUVERNEY 28 GLAND SWITZERLAND 1196</td>
<td>10/02/19</td>
<td>92,885.</td>
</tr>
<tr>
<td>SAROSH KUMANA</td>
<td>639 MARTIS PEAK ROAD INCLINE VILLAGE, NV 89451</td>
<td>12/31/19</td>
<td>5,000.</td>
</tr>
<tr>
<td>PETER SEIDEL</td>
<td>5300 HAMILTON AVENUE, #1403 CINCINNATI, OH 45224</td>
<td>12/19/19</td>
<td>20,000.</td>
</tr>
<tr>
<td>NICHOLAS BENFEY CHARITABLE FUND</td>
<td>C/O CHARLES SCHWAB, 211 MAIN STREET SAN FRANCISCO, CA 94105</td>
<td>01/24/19</td>
<td>8,000.</td>
</tr>
</tbody>
</table>

TOTAL INCLUDED ON LINE 3

125,885.

### OTHER INCOME STATEMENT 2

<table>
<thead>
<tr>
<th>DESCRIPTION</th>
<th>AMOUNT</th>
</tr>
</thead>
<tbody>
<tr>
<td>GAIN (LOSS) ON EXCHANGE RATE ACCOUNT</td>
<td>-2,250.</td>
</tr>
<tr>
<td>SERVICE FEES</td>
<td>535,711.</td>
</tr>
<tr>
<td>HONORARIA</td>
<td>13,958.</td>
</tr>
<tr>
<td>LICENSE FEES</td>
<td>22,593.</td>
</tr>
<tr>
<td>MISCELLANEOUS</td>
<td>546.</td>
</tr>
</tbody>
</table>

TOTAL TO FORM 199, PART II, LINE 7

570,558.

STATEMENT(S) 1, 2
<table>
<thead>
<tr>
<th>NAME AND ADDRESS</th>
<th>TITLE AND NAME AND ADDRESS</th>
<th>AVERAGE HRS WORKED/WK</th>
<th>COMPENSATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>SUSAN BURNS</td>
<td>DIRECTOR</td>
<td>1.00</td>
<td>0.0</td>
</tr>
<tr>
<td>1528 WEBSTER STREET, SUITE 11 OAKLAND, CA 94612</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>MATHIS WACKERNAGEL</td>
<td>CHIEF EXECUTIVE OFFICER</td>
<td>40.00</td>
<td>112,570.0</td>
</tr>
<tr>
<td>1528 WEBSTER STREET, SUITE 11 OAKLAND, CA 94612</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>JULIA MARTON-LEFEBVRE</td>
<td>DIRECTOR</td>
<td>1.00</td>
<td>0.0</td>
</tr>
<tr>
<td>1528 WEBSTER STREET, SUITE 11 OAKLAND, CA 94612</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>LYNDI MANNSON</td>
<td>SECRETARY</td>
<td>1.00</td>
<td>0.0</td>
</tr>
<tr>
<td>1528 WEBSTER STREET, SUITE 11 OAKLAND, CA 94612</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>SAROSI KUMANA</td>
<td>DIRECTOR</td>
<td>1.00</td>
<td>0.0</td>
</tr>
<tr>
<td>1528 WEBSTER STREET, SUITE 11 OAKLAND, CA 94612</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>KEITH TUFFLEY</td>
<td>PRESIDENT</td>
<td>1.00</td>
<td>0.0</td>
</tr>
<tr>
<td>1528 WEBSTER STREET, SUITE 11 OAKLAND, CA 94612</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>DANIEL GOLDSCHEIDER</td>
<td>TREASURER</td>
<td>1.00</td>
<td>0.0</td>
</tr>
<tr>
<td>1528 WEBSTER STREET, SUITE 11 OAKLAND, CA 94612</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>SANDRA BROWNE</td>
<td>DIRECTOR</td>
<td>1.00</td>
<td>0.0</td>
</tr>
<tr>
<td>1528 WEBSTER STREET, SUITE 11 OAKLAND, CA 94612</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>ALEXA FIRMENICH</td>
<td>DIRECTOR</td>
<td>1.00</td>
<td>0.0</td>
</tr>
<tr>
<td>1528 WEBSTER STREET, SUITE 11 OAKLAND, CA 94612</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

TOTAL TO FORM 199, PART II, LINE 11 112,570.0
### CA 199  
**OTHER EXPENSES**

<table>
<thead>
<tr>
<th>DESCRIPTION</th>
<th>AMOUNT</th>
</tr>
</thead>
<tbody>
<tr>
<td>DIRECT PROGRAM EXPENSES</td>
<td>210,251.</td>
</tr>
<tr>
<td>COMPUTER EXPENSES</td>
<td>48,022.</td>
</tr>
<tr>
<td>BANK FEES &amp; CHARGES</td>
<td>5,713.</td>
</tr>
<tr>
<td>TELEPHONE</td>
<td>784.</td>
</tr>
<tr>
<td>OTHER EMPLOYEE BENEFITS</td>
<td>22,281.</td>
</tr>
<tr>
<td>MANAGEMENT FEES</td>
<td>12,867.</td>
</tr>
<tr>
<td>LEGAL FEES</td>
<td>2,230.</td>
</tr>
<tr>
<td>ACCOUNTING FEES</td>
<td>13,687.</td>
</tr>
<tr>
<td>OTHER PROFESSIONAL FEES</td>
<td>154,903.</td>
</tr>
<tr>
<td>OFFICE EXPENSES</td>
<td>3,606.</td>
</tr>
<tr>
<td>TRAVEL</td>
<td>14,186.</td>
</tr>
<tr>
<td>INSURANCE</td>
<td>6,642.</td>
</tr>
<tr>
<td>ALL OTHER EXPENSES</td>
<td>705.</td>
</tr>
<tr>
<td><strong>TOTAL TO FORM 199, PART II, LINE 17</strong></td>
<td>495,877.</td>
</tr>
</tbody>
</table>

### CA 199  
**OTHER ASSETS**

<table>
<thead>
<tr>
<th>DESCRIPTION</th>
<th>BEG. OF YEAR</th>
<th>END OF YEAR</th>
</tr>
</thead>
<tbody>
<tr>
<td>PLEDGES AND GRANTS RECEIVABLE</td>
<td>512,377.</td>
<td>260,599.</td>
</tr>
<tr>
<td>PREPAID EXPENSES AND DEFERRED CHARGES</td>
<td>19,981.</td>
<td>24,512.</td>
</tr>
<tr>
<td>DEPOSITS</td>
<td>9,020.</td>
<td>0.</td>
</tr>
<tr>
<td><strong>TOTAL TO FORM 199, SCHEDULE L, LINE 12</strong></td>
<td>648,026.</td>
<td>391,759.</td>
</tr>
</tbody>
</table>

### CA 199  
**FUND BALANCES**

<table>
<thead>
<tr>
<th>DESCRIPTION</th>
<th>BEG. OF YEAR</th>
<th>END OF YEAR</th>
</tr>
</thead>
<tbody>
<tr>
<td>NET ASSETS WITHOUT DONOR RESTRICTIONS</td>
<td>728,792.</td>
<td>1,014,337.</td>
</tr>
<tr>
<td>NET ASSETS WITH DONOR RESTRICTIONS</td>
<td>462,512.</td>
<td>15,683.</td>
</tr>
<tr>
<td><strong>TOTAL TO FORM 199, SCHEDULE L, LINE 21</strong></td>
<td>1,191,304.</td>
<td>1,030,020.</td>
</tr>
</tbody>
</table>
### Part I: Election To Expense Certain Property Under IRC Section 179

<table>
<thead>
<tr>
<th></th>
<th>Description of property</th>
<th>Cost (business use only)</th>
<th>Elected cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Maximum deduction under IRC Section 179 for California</td>
<td>1</td>
<td>$25,000</td>
</tr>
<tr>
<td>2</td>
<td>Total cost of IRC Section 179 property placed in service</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Threshold cost of IRC Section 179 property before reduction in limitation</td>
<td>3</td>
<td>$200,000</td>
</tr>
<tr>
<td>4</td>
<td>Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-</td>
<td>4</td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Dollar limitation for taxable year. Subtract line 4 from line 1. If zero or less, enter -0-</td>
<td>5</td>
<td></td>
</tr>
</tbody>
</table>

### Part II: Depreciation and Election of Additional First Year Depreciation Deduction Under R&TC Section 24356

<table>
<thead>
<tr>
<th></th>
<th>Description of property</th>
<th>Date acquired (mm/dd/yyyy)</th>
<th>Cost or other basis</th>
<th>Depreciation allowed or allowable in earlier years</th>
<th>Depreciation method</th>
<th>Life or rate</th>
<th>Depreciation for this year</th>
<th>Additional first year depreciation</th>
</tr>
</thead>
<tbody>
<tr>
<td>14</td>
<td></td>
<td></td>
<td></td>
<td></td>
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<td></td>
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</table>

### Part III: Summary

<p>| | | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>16</td>
<td>If the corporation is electing:</td>
<td>IRC Section 179 expense, add the amount on line 12 and line 15, column (g) or Additional first year depreciation under R&amp;TC Section 24356, add the amounts on line 15, columns (g) and (h) or Depreciation (if no election is made), enter the amount from line 15, column (g)</td>
<td>16</td>
</tr>
<tr>
<td>17</td>
<td>Total depreciation claimed for federal purposes from federal Form 4562, line 22</td>
<td>17</td>
<td>$10,292</td>
</tr>
<tr>
<td>18</td>
<td>Depreciation adjustment. If line 17 is greater than line 16, enter the difference here and on Form 100 or Form 100W, Side 1, line 6. If line 17 is less than line 16, enter the difference here and on Form 100 or Form 100W, Side 2, line 12. (If California depreciation amounts are used to determine net income before state adjustments on Form 100 or Form 100W, no adjustment is necessary.)</td>
<td>18</td>
<td>0</td>
</tr>
</tbody>
</table>

### Part IV: Amortization

<table>
<thead>
<tr>
<th></th>
<th>Description of property</th>
<th>Date acquired (mm/dd/yyyy)</th>
<th>Cost or other basis</th>
<th>Amortization allowed or allowable in earlier years</th>
<th>R&amp;TC Section (see instructions)</th>
<th>Period or percentage</th>
<th>Amortization for this year</th>
</tr>
</thead>
<tbody>
<tr>
<td>19</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<p>| | | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>20</td>
<td>Total. Add the amounts in column (g)</td>
<td>20</td>
<td></td>
</tr>
<tr>
<td>21</td>
<td>Total amortization claimed for federal purposes from federal Form 4562, line 44</td>
<td>21</td>
<td></td>
</tr>
<tr>
<td>22</td>
<td>Amortization adjustment. If line 21 is greater than line 20, enter the difference here and on Form 100 or Form 100W, Side 1, line 6. If line 21 is less than line 20, enter the difference here and on Form 100 or Form 100W, Side 2, line 12</td>
<td>22</td>
<td></td>
</tr>
<tr>
<td>ASSET NO./DESCRIPTION</td>
<td>DATE IN SERVICE</td>
<td>COST OR BASIS</td>
<td>PRIOR DEPR</td>
</tr>
<tr>
<td>-----------------------</td>
<td>----------------</td>
<td>---------------</td>
<td>------------</td>
</tr>
<tr>
<td>1 QUICKBOOKS SOFTWARE</td>
<td>08/22/14</td>
<td>2,550.</td>
<td>2,550.</td>
</tr>
<tr>
<td>2 COMPUTER EQUIPMENT</td>
<td>03/10/16</td>
<td>19,703.</td>
<td>14,776.</td>
</tr>
<tr>
<td>3 WEBSITE</td>
<td>03/07/16</td>
<td>15,430.</td>
<td>5,915.</td>
</tr>
<tr>
<td>4 WEBSITE</td>
<td>12/21/16</td>
<td>10,801.</td>
<td>4,140.</td>
</tr>
<tr>
<td>5 WEBSITE</td>
<td>01/24/17</td>
<td>5,529.</td>
<td>2,120.</td>
</tr>
<tr>
<td><strong>TOTAL TO FORM 3885</strong></td>
<td></td>
<td><strong>54,013.</strong></td>
<td><strong>29,501.</strong></td>
</tr>
</tbody>
</table>
**California e-file Return Authorization for Exempt Organizations**

**Part I  Electronic Return Information (whole dollars only)**

<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Total gross receipts (Form 199, line 4)</td>
<td>1</td>
</tr>
<tr>
<td>2</td>
<td>Total gross income (Form 199, line 8)</td>
<td>2</td>
</tr>
<tr>
<td>3</td>
<td>Total expenses and disbursements (Form 199, line 9)</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Part II  Settle Your Account Electronically for Taxable Year 2019**

<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>4</td>
<td>Electronic funds withdrawal</td>
<td>4a</td>
</tr>
<tr>
<td></td>
<td>Amount</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Withdrawal date (mm/dd/yyyy)</td>
<td>4b</td>
</tr>
<tr>
<td></td>
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</tr>
</tbody>
</table>

**Part III  Banking Information (Have you verified the exempt organization’s banking information?)**

<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
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</tr>
</thead>
<tbody>
<tr>
<td>5</td>
<td>Routing number</td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>Account number</td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Type of account: Checking, Savings</td>
<td></td>
</tr>
<tr>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

**Part IV  Declaration of Officer**

I authorize the exempt organization’s account to be settled as designated in Part II. If I check Part II, Box 4, I authorize an electronic funds withdrawal for the amount listed on line 4a.

Under penalties of perjury, I declare that I am an officer of the above exempt organization and that the information I provided to my electronic return originator (ERO), transmitter, or intermediate service provider and the amounts in Part I above agree with the amounts on the corresponding lines of the exempt organization's 2019 California electronic return. To the best of my knowledge and belief, the exempt organization’s return is true, correct, and complete. If the exempt organization is filing a balance due return, I understand that if the Franchise Tax Board (FTB) does not receive full and timely payment of the exempt organization’s fee liability, the exempt organization will remain liable for the fee liability and all applicable interest and penalties. I authorize the exempt organization return and accompanying schedules and statements to be transmitted to the FTB by the ERO, transmitter, or intermediate service provider. If the processing of the exempt organization’s return or refund is delayed, I authorize the FTB to disclose to the ERO or intermediate service provider the reason(s) for the delay.

**Part V  Declaration of Electronic Return Originator (ERO) and Paid Preparer.**

I declare that I have reviewed the above exempt organization’s return and that the entries on form FTB 8453-EO are complete and correct to the best of my knowledge. If I am only an intermediate service provider, I understand that I am not responsible for reviewing the exempt organization’s return. I declare, however, that form FTB 8453-EO accurately reflects the data on the return. I have obtained the organization officer’s signature on form FTB 8453-EO before transmitting this return to the FTB; I have provided the organization officer with a copy of all forms and information that I will file with the FTB, and I have followed all other requirements described in FTB Pub. 1345, 2019 Handbook for Authorized e-file Providers. I will keep form FTB 8453-EO on file for four years from the due date of the return or four years from the date the exempt organization return is filed, whichever is later, and I will make a copy available to the FTB upon request. If I am also the paid preparer, under penalties of perjury, I declare that I have examined the above exempt organization’s return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. I make this declaration based on all information of which I have knowledge.

**ERO**

<table>
<thead>
<tr>
<th>Firm's name</th>
<th>Date</th>
<th>Check if also paid preparer</th>
<th>Check if self-employed</th>
<th>ERO’s PTIN</th>
</tr>
</thead>
<tbody>
<tr>
<td>PATRICIA A. WINTROATH</td>
<td></td>
<td></td>
<td></td>
<td>P00430440</td>
</tr>
<tr>
<td>2121 N. CALIFORNIA BLVD., SUITE 290</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>WALNUT CREEK, CA</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Paid Preparer**

<table>
<thead>
<tr>
<th>Firm's name</th>
<th>Date</th>
<th>Check if self-employed</th>
<th>Paid preparer’s PTIN</th>
</tr>
</thead>
<tbody>
<tr>
<td>PATRICIA A. WINTROATH, CPA</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2121 N. CALIFORNIA BLVD., SUITE 290</td>
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</tr>
</tbody>
</table>

**For Privacy Notice, get FTB 1131 ENG/SP.**

FTB 8453-EO 2019
GLOBAL FOOTPRINT NETWORK, INC.

Name of Organization

List all DBAs and names the organization uses or has used

1528 WEBSTER STREET, SUITE 11

Address (Number and Street)

OAKLAND, CA  94612

City or Town, State, and ZIP Code

RACHEL.ROBERTS@FOOTPRINTNETWORK.ORG

Telephone Number E-mail Address

Gross Annual Revenue Noncash Contributions Total Assets

CT  123517

State Charity Registration Number

2541075

Corporation or Organization No.

73–1672982

Federal Employer ID No.

01/01/2019 12/31/2019

Program Expenses $ Total Expenses $ 879,022 $1,024,579

PART A - ACTIVITIES

For your most recent full accounting period (beginning ending) list:

Gross Annual Revenue $857,772 Noncash Contributions $ 0 Total Assets $1,098,292

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

Note: All questions must be answered. If you answer "yes" to any of the questions below, you must attach a separate page 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 X

2. During this reporting period, was there any theft, embezzlement, diversion or misuse of the organization’s charitable property or funds? Yes X

3. During this reporting period, were any organization funds used to pay any penalty, fine or judgment? Yes X

4. During this reporting period, were the services of a commercial fundraiser, fundraising counsel for charitable purposes, or commercial coventurer used? Yes X

5. During this reporting period, did the organization receive any governmental funding? Yes X

6. During this reporting period, did the organization hold a raffle for charitable purposes? Yes X

7. Does the organization conduct a vehicle donation program? Yes X

8. Did the organization conduct an independent audit and prepare audited financial statements in accordance with generally accepted accounting principles for this reporting period? X

9. At the end of this reporting period, did the organization hold restricted net assets, while reporting negative unrestricted net assets? Yes X

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

MATHIS WACKERNAGEL PRESIDENT

Signature of Authorized Agent Printed Name Title Date