

PUBLIC DISCLOSURE COPY

Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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

2018

Department of the Treasury
Internal Revenue Service

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

Open to Public Inspection

A For the 2018 calendar year, or tax year beginning and ending

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization RUDOLF STEINER FOUNDATION, INC.		D Employer identification number 13-6082763
	Doing business as RSF SOCIAL FINANCE		E Telephone number (415) 561-3900
	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	G Gross receipts \$ 96,142,547.
	1002A O'REILLY AVENUE		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	City or town, state or province, country, and ZIP or foreign postal code SAN FRANCISCO, CA 94129-0915		H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No
F Name and address of principal officer: JASPER J. VAN BRAKEL SAME AS C ABOVE		If "No," attach a list. (see instructions)	
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527			
J Website: ▶ WWW.RSFSOCIALFINANCE.ORG			
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		L Year of formation: 1936	M State of legal domicile: NY

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: LENDING AND GRANTMAKING TO NOT-FOR-PROFIT AND SOCIALLY BENEFICIAL ORGANIZATIONS.		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	10
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	7
	5 Total number of individuals employed in calendar year 2018 (Part V, line 2a)	5	41
	6 Total number of volunteers (estimate if necessary)	6	8
	7 a Total unrelated business revenue from Part VIII, column (C), line 12	7a	135,816.
b Net unrelated business taxable income from Form 990-T, line 38	7b	83,402.	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	35,102,858.	94,575,857.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	567,363.	774,951.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	223,908.	791,539.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	6,817.	200.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	35,900,946.	96,142,547.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	18,238,057.	21,570,921.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	0.	0.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	2,340,703.	3,405,306.
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 479,417.	0.	0.
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	4,051,344.	4,394,138.
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	24,630,104.	29,370,365.
19 Revenue less expenses. Subtract line 18 from line 12	11,270,842.	66,772,182.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21 Total liabilities (Part X, line 26)	137,465,140.	207,417,473.
	22 Net assets or fund balances. Subtract line 21 from line 20	64,135,803.	66,858,310.
		73,329,337.	140,559,163.

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.

Sign Here	Signature of officer		Date		
	▶ APRIL HINES, CFO Type or print name and title				
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check if self-employed <input type="checkbox"/>	PTIN
	TRACY S. PAGLIA	TRACY S. PAGLIA	11/14/19		P00366884
Firm's name ▶ MOSS ADAMS LLP			Firm's EIN ▶ 91-0189318		
Firm's address ▶ 101 SECOND STREET SUITE 900 SAN FRANCISCO, CA 94105			Phone no. 415-956-1500		

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 [X]

1 Briefly describe the organization's mission: TO CREATE FINANCIAL RELATIONSHIPS THAT ARE DIRECT, TRANSPARENT, PERSONAL, AND FOCUSED ON LONG-TERM SOCIAL ECONOMIC AND ECOLOGICAL BENEFIT. WE ACHIEVE OUR MISSION BY: (1) OFFERING INVESTORS AND DONORS DYNAMIC WAYS TO ALIGN THEIR MONEY WITH THEIR VALUES; (2) CONNECTING

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [] Yes [X] No If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [] Yes [X] 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 \$ 24,677,726. including grants of \$ 21,570,921.) (Revenue \$ 774,951.) IN 2018, RSF SOCIAL FINANCE MADE GRANTS TO A VARIETY OF ORGANIZATIONS AND PROJECTS ALIGNED WITH THE FOUNDATION'S CHARITABLE MISSION TO PROMOTE A MORE SUSTAINABLE WORLD. IN ADDITION TO GRANTS MADE, RSF PROVIDED MISSION-RELATED LOANS TO FOR-PROFIT SOCIAL ENTERPRISES AND NON-PROFIT ORGANIZATIONS.

4b (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services (Describe in Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses 24,677,726.

Part IV Checklist of Required Schedules

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

Part IV Checklist of Required Schedules (continued)

	Yes	No
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	22 X	
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23 X	
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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>	24a	X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c	
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a	X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>	25b	X
26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i>	26	X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27	X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a	X
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b	X
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c	X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29 X	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30	X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31	X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32	X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33	X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	34 X	
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a X	
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b X	
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36	X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37	X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38 X	

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

	Yes	No
1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a 117	
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b 0	
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c X	

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

Table with columns for question number, question text, and Yes/No checkboxes. Includes questions 2a through 16 regarding employee counts, tax returns, gross income, foreign accounts, prohibited transactions, and charitable contributions.

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 in Schedule O. See instructions.

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

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a (10), 1b (7), 2 (X), 3 (X), 4 (X), 5 (X), 6 (X), 7a (X), 7b (X), 8a (X), 8b (X), 9 (X).

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

Table with 3 columns: Question, Yes, No. Rows include: 10a (X), 10b, 11a (X), 11b, 12a (X), 12b (X), 12c (X), 13 (X), 14 (X), 15a (X), 15b (X), 16a (X), 16b (X).

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed AL, AK, AZ, CA, CO, CT, DC, DE, FL, HI, ID, IN
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.
19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, address, and telephone number of the person who possesses the organization's books and records APRIL HINES - (415) 561-3900 1002A O'REILLY AVENUE, SAN FRANCISCO, CA 94129-0915

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

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

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.

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) JASPER J. VAN BRAKEL CEO/TRUSTEE	40.00 2.00	X		X				336,385.	0.	21,590.
(2) RON ALSTON CHAIR START 6/2018	3.00 2.00	X		X				0.	0.	0.
(3) MARK FINSER CHAIR THROUGH 6/2018 / DIRECTOR	3.00 40.00	X		X				0.	220,129.	24,352.
(4) NEIL BLOMQUIST TRUSTEE	1.00 0.00	X						0.	0.	0.
(5) ANTHONY CHANG TRUSTEE THROUGH 2/1/2018	1.00 0.00	X						0.	0.	0.
(6) JOCELYN ROMERO DEMIRBAG TRUSTEE	1.00 0.00	X						0.	0.	0.
(7) SIEGFRIED FINSER TRUSTEE	1.00 0.00	X						12,000.	0.	0.
(8) RACHAEL FLUG TRUSTEE	1.00 0.00	X						0.	0.	0.
(9) JOVIAL KING TRUSTEE	1.00 0.00	X						0.	0.	0.
(10) STEPHANIE RYNAS TRUSTEE	1.00 0.00	X						0.	0.	0.
(11) SCOTT WILLIAMS TRUSTEE	1.00 0.00	X						0.	0.	0.
(12) CHRIS COOK CFO AND TREASURER	24.00 2.00			X				179,670.	0.	0.
(13) TIM GREEN SECRETARY AND GENERAL COUNSEL	40.00 2.00			X				157,810.	0.	16,548.
(14) KATRINA STEFFEK CHIEF OPERATING OFFICER	40.00 2.00				X			229,040.	0.	12,856.
(15) JOHN BLOOM VP, ORGANIZATIONAL CULTURE	40.00 2.00				X			183,633.	0.	18,760.
(16) SUSIE LEE CHIEF INVESTMENT OFFICER	40.00 2.00				X			228,255.	0.	26,307.
(17) DEBORAH NELSON VP, CLIENT AND COMMUNITY ENGAGEMENT	40.00 0.00					X		159,955.	0.	23,663.

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) KATE DANAHER SR. MGR., SOCIAL ENT/INTEGRATED CAP	40.00 0.00					X	150,000.	0.	11,602.	
(19) LYNNE HOEY SR. DIRECTOR, CREDIT & LOAN ADMIN	40.00 0.00					X	139,480.	0.	17,408.	
(20) MELINDA CHEEL SENIOR DIRECTOR, MARKETING	40.00 0.00					X	137,346.	0.	12,708.	
(21) CARRIE STALLINGS SENIOR MANAGER, INFORMATION SYSTEMS	40.00 0.00					X	132,130.	0.	15,243.	
1b Sub-total							2,045,704.	220,129.	201,037.	
c Total from continuation sheets to Part VII, Section A							0.	0.	0.	
d Total (add lines 1b and 1c)							2,045,704.	220,129.	201,037.	

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 **18**

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		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? <i>If "Yes," complete Schedule J for such individual</i>	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? <i>If "Yes," complete Schedule J for such person</i>		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.

(A) Name and business address	(B) Description of services	(C) Compensation
RETIREMENT PLAN CONSULTANTS LLC P.O. BOX 1264, NORFOLK, NE 68702-1264	RETIREMENT PLAN SERVICES	300,759.
SCRUBBED.NET 657 SHARP PARK ROAD, PACIFICA, CA 94044	ACCOUNTING SERVICES	296,342.
NEGAR TAYYAR 3923 ELSTON AVENUE, OAKLAND, CA 94602	CONSULTING SERVICES	153,552.
MOSS ADAMS LLP P.O. BOX 101822, PASADENA, CA 91189-1882	ACCOUNTING AND TAX SERVICES	127,419.

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 **4**

Part VIII Statement of Revenue

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a				
	b Membership dues	1b				
	c Fundraising events	1c				
	d Related organizations	1d	65,172,231.			
	e Government grants (contributions)	1e				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	29,403,626.			
	g Noncash contributions included in lines 1a-1f: \$		39,230,225.			
	h Total. Add lines 1a-1f		94,575,857.			
Program Service Revenue	2 a INTEREST INCOME - BORROWER FUNDS	Business Code 525990	468,364.	332,748.	135,616.	
	b INTEGRATED CAPITAL INSTITUTE FEES	525990	215,848.	215,848.		
	c FEE INCOME	525990	80,739.	80,739.		
	d ADVISORY SERVICES	525990	10,000.	10,000.		
	e					
	f All other program service revenue					
	g Total. Add lines 2a-2f		774,951.			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		791,539.			791,539.
	4 Income from investment of tax-exempt bond proceeds					
	5 Royalties					
	6 a Gross rents	(i) Real				
		(ii) Personal				
		b Less: rental expenses				
		c Rental income or (loss)				
	d Net rental income or (loss)					
	7 a Gross amount from sales of assets other than inventory	(i) Securities				
		(ii) Other				
		b Less: cost or other basis and sales expenses				
		c Gain or (loss)				
	d Net gain or (loss)					
	8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	a				
		b Less: direct expenses	b			
c Net income or (loss) from fundraising events						
9 a Gross income from gaming activities. See Part IV, line 19	a					
	b Less: direct expenses	b				
	c Net income or (loss) from gaming activities					
10 a Gross sales of inventory, less returns and allowances	a					
	b Less: cost of goods sold	b				
	c Net income or (loss) from sales of inventory					
Miscellaneous Revenue		Business Code				
11 a UBI FROM PASSTHROUGHS	900099	200.		200.		
b						
c						
d All other revenue						
e Total. Add lines 11a-11d		200.				
12 Total revenue. See instructions		96,142,547.	639,335.	135,816.	791,539.	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	15,124,184.	15,124,184.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	166,258.	166,258.		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	6,280,479.	6,280,479.		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	1,422,855.	706,550.	686,311.	29,994.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	1,593,394.	890,490.	497,560.	205,344.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	44,611.	23,014.	17,083.	4,514.
9 Other employee benefits	194,273.	105,166.	68,547.	20,560.
10 Payroll taxes	150,173.	79,592.	58,567.	12,014.
11 Fees for services (non-employees):				
a Management				
b Legal	49,811.		49,811.	
c Accounting	312,951.		312,951.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	1,828,100.		1,828,100.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch. O.)	562,155.	366,377.	122,685.	73,093.
12 Advertising and promotion	48,219.			48,219.
13 Office expenses	83,023.	44,002.	32,379.	6,642.
14 Information technology	114,700.	60,791.	44,733.	9,176.
15 Royalties				
16 Occupancy	386,277.	204,727.	150,648.	30,902.
17 Travel	147,985.	78,432.	57,714.	11,839.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	78,154.	41,422.	30,480.	6,252.
20 Interest	70,200.	70,200.		
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	38,972.	20,655.	15,199.	3,118.
23 Insurance	48,971.		48,971.	
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a LOSS PROV-BORROWER FUND	415,387.	415,387.		
b FILING & REG FEES	18,974.		1,224.	17,750.
c STAFF EDUC & TRAINING	16,209.		16,209.	
d UBTI TAX EXPENSE	303.		303.	
e All other expenses	173,747.		173,747.	
25 Total functional expenses. Add lines 1 through 24e	29,370,365.	24,677,726.	4,213,222.	479,417.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

Check here if following SOP 98-2 (ASC 958-720)

Part X Balance Sheet

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

		(A)		(B)	
		Beginning of year		End of year	
Assets	1 Cash - non-interest-bearing	169.	1	169.	
	2 Savings and temporary cash investments	22,933,021.	2	26,985,279.	
	3 Pledges and grants receivable, net	1,015,120.	3	325,124.	
	4 Accounts receivable, net		4		
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5		
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L		6		
	7 Notes and loans receivable, net		7		
	8 Inventories for sale or use		8		
	9 Prepaid expenses and deferred charges	175,055.	9	270,101.	
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 1,358,555.			
	b Less: accumulated depreciation	10b 961,342.	308,553.	10c	397,213.
	11 Investments - publicly traded securities	3,622,675.	11	42,830,225.	
	12 Investments - other securities. See Part IV, line 11	71,791,336.	12	88,181,663.	
	13 Investments - program-related. See Part IV, line 11	8,067,789.	13	10,523,527.	
	14 Intangible assets		14		
	15 Other assets. See Part IV, line 11	29,551,422.	15	37,904,172.	
16 Total assets. Add lines 1 through 15 (must equal line 34)	137,465,140.	16	207,417,473.		
Liabilities	17 Accounts payable and accrued expenses	322,577.	17	573,859.	
	18 Grants payable		18		
	19 Deferred revenue	25,592.	19	22,292.	
	20 Tax-exempt bond liabilities		20		
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21		
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22		
	23 Secured mortgages and notes payable to unrelated third parties		23		
	24 Unsecured notes and loans payable to unrelated third parties	5,899,192.	24	9,434,296.	
	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	57,888,442.	25	56,827,863.	
	26 Total liabilities. Add lines 17 through 25	64,135,803.	26	66,858,310.	
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.				
	27 Unrestricted net assets	72,929,337.	27	140,409,163.	
	28 Temporarily restricted net assets	300,000.	28	50,000.	
	29 Permanently restricted net assets	100,000.	29	100,000.	
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.				
	30 Capital stock or trust principal, or current funds		30		
	31 Paid-in or capital surplus, or land, building, or equipment fund		31		
	32 Retained earnings, endowment, accumulated income, or other funds		32		
	33 Total net assets or fund balances	73,329,337.	33	140,559,163.	
34 Total liabilities and net assets/fund balances	137,465,140.	34	207,417,473.		

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	96,142,547.
2	Total expenses (must equal Part IX, column (A), line 25)	2	29,370,365.
3	Revenue less expenses. Subtract line 2 from line 1	3	66,772,182.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	73,329,337.
5	Net unrealized gains (losses) on investments	5	457,844.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	-200.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	140,559,163.

Part XII Financial Statements and Reporting

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

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
b	Were the organization's financial statements audited by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? _____ If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	X	
3a	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? _____		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits _____		

Form 990 (2018)

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
▶ Attach to Form 990 or Form 990-EZ.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2018

Open to Public Inspection

Name of the organization **RUDOLF STEINER FOUNDATION, INC.** Employer identification number **13-6082763**

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

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

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E (Form 990 or 990-EZ).)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 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: _____
- 5 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.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 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.)
- 8 A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 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: _____
- 10 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.)
- 11 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 12 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.
 - a **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.**
 - b **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.**
 - c **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.**
 - d **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.**
 - e 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.
- f Enter the number of supported organizations

g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	15849038.	20992023.	22326264.	35102858.	94575857.	188846040
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	15849038.	20992023.	22326264.	35102858.	94575857.	188846040
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)						92826901.
6 Public support. Subtract line 5 from line 4.						96019139.

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
7 Amounts from line 4	15849038.	20992023.	22326264.	35102858.	94575857.	188846040
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	15,086.	216,360.	205,042.	223,908.	791,539.	1451935.
9 Net income from unrelated business activities, whether or not the business is regularly carried on	55,755.			5,235.	69,694.	130,684.
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 Total support. Add lines 7 through 10						190428659
12 Gross receipts from related activities, etc. (see instructions)					12	3,196,562.
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f))	14	50.42 %
15 Public support percentage from 2017 Schedule A, Part II, line 14	15	69.28 %
16a 33 1/3% support test - 2018. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input checked="" type="checkbox"/>
b 33 1/3% support test - 2017. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2018. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 10% -facts-and-circumstances test - 2017. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		<input type="checkbox"/>

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

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

Section C. Computation of Public Support Percentage

15 Public support percentage for 2018 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2017 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2018 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2017 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2018. 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 ►

b 33 1/3% support tests - 2017. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ►

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ►

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>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.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>		
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>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.</i>		
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)? <i>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.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>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).</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
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))? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
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)? <i>If "Yes," answer 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

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

Section B. Type I Supporting Organizations

	Yes	No
1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? <i>If "No," 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.</i>		
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.</i>		

Section C. Type II Supporting Organizations

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

Section D. All Type III Supporting Organizations

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

Section E. Type III Functionally Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).		
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).		
2 Activities Test. Answer (a) and (b) below.		
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>		
b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>		
3 Parent of Supported Organizations. Answer (a) and (b) below.		
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>		
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		

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

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

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

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

Section C - Distributable Amount		(A) Prior Year	Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	
7	<input type="checkbox"/> 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 (continued)

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI). See instructions.	
7 Total annual distributions. Add lines 1 through 6.	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	
9 Distributable amount for 2018 from Section C, line 6	
10 Line 8 amount divided by line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
1 Distributable amount for 2018 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2018 (reasonable cause required- explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2018			
a From 2013			
b From 2014			
c From 2015			
d From 2016			
e From 2017			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2018 distributable amount			
i Carryover from 2013 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2018 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2018 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2018, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI . See instructions.			
6 Remaining underdistributions for 2018. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI . See instructions.			
7 Excess distributions carryover to 2019. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2014			
b Excess from 2015			
c Excess from 2016			
d Excess from 2017			
e Excess from 2018			

Schedule A (Form 990 or 990-EZ) 2018

Part VI

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

Multiple horizontal lines for supplemental information.

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2018

Name of the organization

RUDOLF STEINER FOUNDATION, INC.

Employer identification number

13-6082763

Organization type (check one):

Filers of:

Section:

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

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

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

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

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).

Name of organization RUDOLF STEINER FOUNDATION, INC.	Employer identification number 13-6082763
--	---

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	 <hr/> <hr/> <hr/>	\$ <u>3,356,440.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	 <hr/> <hr/> <hr/>	\$ <u>2,016,908.</u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
3	 <hr/> <hr/> <hr/>	\$ <u>2,892,172.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	 <hr/> <hr/> <hr/>	\$ <u>1,002,092.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	 <hr/> <hr/> <hr/>	\$ <u>2,061,585.</u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
6	 <hr/> <hr/> <hr/>	\$ <u>36,377,626.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization RUDOLF STEINER FOUNDATION, INC.	Employer identification number 13-6082763
--	---

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	<hr/> <hr/> <hr/>	\$ <u>25,730,928.</u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
<hr/>	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<hr/>	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<hr/>	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<hr/>	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<hr/>	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<hr/>	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization RUDOLF STEINER FOUNDATION, INC.	Employer identification number 13-6082763
--	---

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

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
2	STOCK _____ _____ _____	\$ <u>2,016,908.</u>	<u>12/13/18</u>
5	NET ASSET BALANCES (SECURITIES, LIABILITIES) _____ _____ _____	\$ <u>2,061,585.</u>	<u>01/01/18</u>
7	NET ASSET BALANCES (SECURITIES, LIABILITIES) _____ _____ _____	\$ <u>25,730,928.</u>	<u>01/01/18</u>
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____

Name of organization RUDOLF STEINER FOUNDATION, INC.	Employer identification number 13-6082763
--	---

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. (Enter this info. once.) ▶ \$ _____
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

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

OMB No. 1545-0047

2018

Open to Public Inspection

Name of the organization **RUDOLF STEINER FOUNDATION, INC.** Employer identification number **13-6082763**

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.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year	169	102
2 Aggregate value of contributions to (during year)	22,941,432.	6,104,031.
3 Aggregate value of grants from (during year)	17,545,359.	3,900,620.
4 Aggregate value at end of year	52,232,699.	25,943,339.

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Yes No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Yes No

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

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

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held 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 SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenue included on Form 990, Part VIII, line 1 ▶ \$ _____

(ii) Assets included in Form 990, Part X ▶ \$ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

a Revenue included on Form 990, Part VIII, line 1 ▶ \$ _____

b Assets included in Form 990, Part X ▶ \$ _____

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

Schedule D (Form 990) 2018

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

- 3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
- a Public exhibition
 - b Scholarly research
 - c Preservation for future generations
 - d Loan or exchange programs
 - e 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:
- | | Amount |
|---------------------------------|--------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 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.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	100,000.	100,000.	100,000.	100,000.	100,000.
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	100,000.	100,000.	100,000.	100,000.	100,000.

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a Board designated or quasi-endowment .00 %
- b Permanent endowment 100.00 %
- c Temporarily restricted endowment .00 %

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

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

- (i) unrelated organizations
- (ii) related organizations

	Yes	No
3a(i)		X
3a(ii)		X
3b		

b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?

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.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment		386,130.	322,948.	63,182.
e Other		972,425.	638,394.	334,031.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				397,213.

Part VII Investments - Other Securities.

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests	65,431,136.	END-OF-YEAR MARKET VALUE
(3) Other		
(A) PRIVATE EQUITY STOCK	4,140,691.	END-OF-YEAR MARKET VALUE
(B) PRIVATE EQUITY		
(C) STOCKS/WARRANTS	2,396,367.	COST
(D) OFFSHORE INVESTMENTS	10,241,842.	END-OF-YEAR MARKET VALUE
(E) DOMESTIC ALTERNATIVE		
(F) INVESTMENTS	3,456,002.	END-OF-YEAR MARKET VALUE
(G) CORPORATE BONDS/INVESTOR		
(H) NOTES	2,515,625.	END-OF-YEAR MARKET VALUE
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	88,181,663.	

Part VIII Investments - Program Related.

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

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) PROGRAM LOANS	8,523,527.	END-OF-YEAR MARKET VALUE
(2) INVESTMENT IN RSF SIF	2,000,000.	COST
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)	10,523,527.	

Part IX Other Assets.

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

(a) Description	(b) Book value
(1) RECEIVABLE FROM RSF GLOBAL COMMUNITY FUND	54,057.
(2) RECEIVABLE FROM RSF CAPITAL MANAGEMENT, PBC	3,058,681.
(3) RECEIVABLE FROM RSF SOCIAL INVESTMENT FUND	34,505,399.
(4) RECEIVABLE FROM RSF MEZZANINE MANAGEMENT, LLC	2,450.
(5) DEPOSITS	283,585.
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	37,904,172.

Part X Other Liabilities.

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) PAYABLE TO RSF GCF	99,422.
(3) PAYABLE TO RSF SIF	56,728,441.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	56,827,863.

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

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

1	Total revenue, gains, and other support per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b		4c
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)		5

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

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

1	Total expenses and losses per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b		4c
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)		5

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 V, LINE 4:

THE ENDOWMENT FUNDS ARE HELD FOR FUTURE USE TO ASSIST THE ORGANIZATION IN ACHIEVING ITS MISSION.

PART X, LINE 2:

ACCOUNTING PRINCIPLES GENERALLY ACCEPTED IN THE UNITED STATES OF AMERICA PRESCRIBES RECOGNITION THRESHOLDS AND MEASUREMENT ATTRIBUTES FOR THE FINANCIAL STATEMENT RECOGNITION AND MEASUREMENT OF A TAX POSITION TAKEN OR EXPECTED TO BE TAKEN IN A TAX RETURN. TAX BENEFITS WILL BE RECOGNIZED ONLY IF A TAX POSITION IS MORE-LIKELY-THAN-NOT SUSTAINED IN A TAX EXAMINATION, WITH A TAX EXAMINATION BEING PRESUMED TO OCCUR. THE AMOUNT RECOGNIZED WILL BE THE LARGEST AMOUNT OF TAX BENEFIT THAT IS GREATER THAN

Part XIII Supplemental Information *(continued)*

50% LIKELY BEING REALIZED ON EXAMINATION. FOR TAX POSITIONS NOT MEETING
 THE MORE-LIKELY-THAN-NOT TEST, NO TAX BENEFIT WILL BE RECORDED.
 MANAGEMENT HAS CONCLUDED THAT THERE ARE NO TAX BENEFITS OR LIABILITIES TO
 BE RECOGNIZED AT DECEMBER 31, 2018 AND 2017.

**SCHEDULE F
(Form 990)**

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

▶ Attach to Form 990.

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

OMB No. 1545-0047

2018

Open to Public Inspection

Name of the organization RUDOLF STEINER FOUNDATION, INC.	Employer identification number 13-6082763
--	---

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.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
CENTRAL AMERICA AND THE CARIBBEAN	0	0	GRANTS TO RECIPIENTS LOCATED IN REGION		567,305.
EAST ASIA AND THE PACIFIC	0	0	GRANTS TO RECIPIENTS LOCATED IN REGION		432,550.
EUROPE (INCLUDING ICELAND & GREENLAND)	0	0	GRANTS TO RECIPIENTS LOCATED IN REGION		2,711,534.
NORTH AMERICA	0	0	GRANTS TO RECIPIENTS LOCATED IN REGION		85,250.
RUSSIA AND NEIGHBORING STATES	0	0	GRANTS TO RECIPIENTS LOCATED IN REGION		148,700.
SOUTH AMERICA	0	0	GRANTS TO RECIPIENTS LOCATED IN REGION		316,600.
SOUTH ASIA	0	0	GRANTS TO RECIPIENTS LOCATED IN REGION		1,133,000.
SUB-SAHARAN AFRICA	0	0	GRANTS TO RECIPIENTS LOCATED IN REGION		885,540.
3 a Subtotal	0	0			6,280,479.
b Total from continuation sheets to Part I	0	0			10,366,084.
c Totals (add lines 3a and 3b)	0	0			16,646,563.

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

Schedule F (Form 990) 2018

Part I Continuation of Activities per Region. (Schedule F (Form 990), Part I, line 3)

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
CENTRAL AMERICA AND THE CARIBBEAN	0	0	INVESTMENTS		10,366,084.
Totals					10,366,084.

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

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	FOR PROEIB ANDES TO SUPPORT THE INTERNATIONAL SEMINAR ON LANGUAGE	30,000.	WIRE	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	FOR STRENGTHENING TERRITORIAL GOVERNANCE AND REVALUE ANCESTRAL	30,000.	WIRE	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	FOR SUPPORT OF MAYAN ANCESTRAL KNOWLEDGE IN PLANT AND SEED PRODUCTION	40,000.	WIRE	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	FOR SCHOOL OF ARTS: WEAVING POLITICAL ADVOCACY AND EMPOWERMENT OF IXIL	30,000.	WIRE	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	FOR INTERNATIONAL RE-GRANTING CAPACITY BUILDING	25,000.	WIRE	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	FOR REVITALIZATION OF TRADITIONAL INDIGENOUS MEDICINE IN THE INDIGENOUS	30,000.	WIRE	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	TO SUPPORT ADMINISTRATION OF THE INDIGENOUS WAYS OF KNOWING AND LEARNING	382,305.	WIRE	0.		
		EAST ASIA AND THE PACIFIC	TO SUPPORT "GENEROSITY ENTREPRENEURS", PURIFICATION RETREATS	35,000.	WIRE	0.		

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 **65**

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

SEE PART V FOR COLUMN (D) DESCRIPTIONS

Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)								
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EAST ASIA AND THE PACIFIC	FOR PROMOTION AND TRANSFORMATION OF TRADITIONAL HEALING PRACTICES OF	12,550.	WIRE	0.		
		EAST ASIA AND THE PACIFIC	FOR SCALING UP OF THE IMPLEMENTATION OF INDIGENOUS PEOPLES SUSTAINABLE,	325,000.	WIRE	0.		
		EAST ASIA AND THE PACIFIC	FOR A CULTURAL GATHERING FOR LAND RIGHTS AND SELF DETERMINATION	30,000.	WIRE	0.		
		EAST ASIA AND THE PACIFIC	FOR SUPPORT OF RESEARCH AND ADVOCACY ON INDIGENOUS LANGUAGE, CONCEPTS	30,000.	WIRE	0.		
		EUROPE (INCLUDING ICELAND AND GREENLAND)	FOR HOLISTIC HUMANITARIAN AND EMERGENCY SUPPORT FOR PEOPLE ON THE MOVE /	1204000.	WIRE	0.		
		EUROPE (INCLUDING ICELAND AND GREENLAND)	FOR THE LICORNE GARDEN PROJECT	18,778.	WIRE	0.		
		EUROPE (INCLUDING ICELAND AND GREENLAND)	TO SUPPORT THE BUILDING FOR THE NEW WALDORF INITIATIVE BODHI HILL IN PYIN OO	555,852.	WIRE	0.		
		EUROPE (INCLUDING ICELAND AND GREENLAND)	FOR THE CHAMPIONS PROGRAM	35,000.	WIRE	0.		
		EUROPE (INCLUDING ICELAND AND GREENLAND)	A SAFE AND CREATIVE SPACE FOR YOUTH ON THE MOVE	25,000.	WIRE	0.		

Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)								
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EUROPE (INCLUDING ICELAND AND GREENLAND)	TO SUPPORT "OPEN ART SHELTER", FOR HOLISTIC SUPPORT FOR PEOPLE ON THE MOVE	30,000.	WIRE	0.		
		EUROPE (INCLUDING ICELAND AND GREENLAND)	TO SUPPORT WALDORF EDUCATION FOR ROMA YOUTH IN HUNGARY	58,000.	WIRE	0.		
		EUROPE (INCLUDING ICELAND AND GREENLAND)	FOR RAPID AND PRACTICAL SUPPORT OF EHRDS	100,000.	WIRE	0.		
		EUROPE (INCLUDING ICELAND AND GREENLAND)	FOR THE ISAK SABA LANGUAGE CENTERS WORK TO EXPAND THE USE OF NORTH SAAMI PLACE	30,000.	WIRE	0.		
		EUROPE (INCLUDING ICELAND AND GREENLAND)	FOR SUPPORTING SAAMI LEADERSHIP AND CULTURAL LIFEWAYS	250,000.	WIRE	0.		
		EUROPE (INCLUDING ICELAND AND GREENLAND)	FOR SAFEGUARDING PEASANT SEEDS TO BRIDGE KNOWLEDGE, CULTURE AND	60,000.	WIRE	0.		
		EUROPE (INCLUDING ICELAND AND GREENLAND)	FOR YOUR WORK WITH SUPPORTERS FOR THE HEALTH AND RIGHTS OF PEOPLE IN THE	20,000.	WIRE	0.		
		EUROPE (INCLUDING ICELAND AND GREENLAND)	FOR SAMI FOOD - THREATS AND OPPORTUNITIES	29,820.	WIRE	0.		
		EUROPE (INCLUDING ICELAND AND GREENLAND)	SOLELY TO SUPPORT THE ASSOCIATION FOR CANCER RESEARCH	62,584.	WIRE	0.		

Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)								
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EUROPE (INCLUDING ICELAND AND GREENLAND)	FOR SUPPORT OF PEACEFUL BAMBOO FAMILY FOR THE OPERATING COSTS OF	15,000.	WIRE	0.		
		EUROPE (INCLUDING ICELAND AND GREENLAND)	FOR THE PRIMORDIAL WISDOM PROJECT	150,000.	WIRE	0.		
		EUROPE (INCLUDING ICELAND AND GREENLAND)	FOR TRANSLATION COSTS OF MATERIAL TAKEN FROM THE BOOKS AND LECTURES OF RUDOLF	7,500.	WIRE	0.		
		NORTH AMERICA (CANADA AND MEXICO)	TO SUPPORT THE MOHAWK SEEDKEEPER GARDENS IN ITS HAUDENOSAUNEE AGRICULTURAL SCHOOL -	50,000.	WIRE	0.		
		NORTH AMERICA (CANADA AND MEXICO)	TO SUPPORT THE LATIN AMERICA PROGRAM	25,000.	WIRE	0.		
		RUSSIA AND NEIGHBORING STATES	FOR IDENTIFICATION OF GLOBAL CLIMATE CHANGE INDICATORS USING COSMOGEO PREDICTION	20,000.	WIRE	0.		
		RUSSIA AND NEIGHBORING STATES	TO SUPPORT UNIFYING ALTAI GOVERNMENT EDUCATION POLICY BY ESTABLISHING A	111,000.	WIRE	0.		
		RUSSIA AND NEIGHBORING STATES	FOR THE AICHUS ETHNO WORKSHOP	17,700.	WIRE	0.		
		SOUTH AMERICA	FONDO PARA EL DESARROLLO DE LOS PUEBLOS INDIGENA DE AMERICA LATINA Y EL	30,000.	WIRE	0.		

Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)								
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH AMERICA	FOR STRENGTHENING OUR ANCESTRAL PRACTICES, THROUGH THE CONSOLIDATION OF THE	20,000.	WIRE	0.		
		SOUTH AMERICA	FOR URGENT SUPPORT FOR WOMEN ENVIRONMENTAL HUMAN RIGHTS DEFENDERS	75,000.	WIRE	0.		
		SOUTH AMERICA	TO SUPPORT A SERIES OF TRAINING WORKSHOP FOR YOUNG SOCIAL ACTIVISTS AND	16,600.	WIRE	0.		
		SOUTH AMERICA	FOR FEPROMUQ TO CONTRIBUTE TO THE IMPROVEMENT OF INDIGENOUS CHILD AND	30,000.	WIRE	0.		
		SOUTH AMERICA	FOR IPAF STRENGTHENING OF INDIGENOUS REGRANTING	25,000.	WIRE	0.		
		SOUTH AMERICA	FOR PLURAVERISTY AND BIOCULTURAL HERITAGE INNOVATIONS EXPERIMENTAL STATION	70,000.	WIRE	0.		
		SOUTH AMERICA	FOR "BIOCULTURAL HERITAGE FOR RESILIENT MOUNTAIN COMMUNITIES"	50,000.	WIRE	0.		
		SOUTH ASIA	FOR SUPPORTING KUI PEOPLES RIGHTS AND RESILIENCE	20,000.	WIRE	0.		
		SOUTH ASIA	FOR INDIGENOUS YOUTH RESEARCH ON THE STATE OF INDIGENOUS HEALTH IN INDONESIA / FOR	280,000.	WIRE	0.		

Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)								
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH ASIA	EDUCATING THE PACIFIC ON HEALTHY FOOD AND FARMING	24,000.	WIRE	0.		
		SOUTH ASIA	FOR URGENT REGRANTING FOR IPHRDS / FOR STRENGTHENING REGIONAL SUPPORT FOR	727,000.	WIRE	0.		
		SOUTH ASIA	FOR CONSERVATION AND PROMOTION OF LOCAL PLANTS SPECIES TO ENHANCE FOOD	30,000.	WIRE	0.		
		SOUTH ASIA	TO SUPPORT REGRANTING TO ENVIRONMENTAL DEFENDERS IN ASIA, AND AN INTENSIVE	50,000.	WIRE	0.		
		SUB-SAHARAN AFRICA	FOR URGENT REGRANTING TO SUPPORT WOMEN EHRDS	40,000.	WIRE	0.		
		SUB-SAHARAN AFRICA	FOR PROGRAM SUPPORT	100,000.	WIRE	0.		
		SUB-SAHARAN AFRICA	FOR STRENGTHENING INDIGENOUS BAKA TRADITIONAL MEDICINE, TRADITIONAL HEALING	21,740.	WIRE	0.		
		SUB-SAHARAN AFRICA	FOR NURTURING A TRADITIONAL SEED KEEPERS NETWORK IN UPPER WEST REGION,	71,000.	WIRE	0.		
		SUB-SAHARAN AFRICA	TO SUPPORT THE CULTURAL AND ECONOMIC VALUE OF HERITAGE YAMS IN KANKAN,	21,000.	WIRE	0.		

Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)								
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	FOR INDIGENOUS PEOPLES ASSISTANCE FACILITY INTERNATIONAL	25,000.	WIRE	0.		
		SUB-SAHARAN AFRICA	TO SUPPORT REVITALIZING SPIRITUAL TRADITIONAL HEALING AND	30,000.	WIRE	0.		
		SUB-SAHARAN AFRICA	TO SUPPORT DELIBAYA WOMEN, NGURO EBANG (I AM HEIBAN)	20,200.	WIRE	0.		
		SUB-SAHARAN AFRICA	TO SUPPORT BRIDGING INTER-GENERATIONAL KNOWLEDGE GAPS, FOSTERING EQUITY,	350,000.	WIRE	0.		
		SUB-SAHARAN AFRICA	FOR REVITALIZING & SYNERGIZING TRADITIONAL JUSTICE AND PEACE BUILDING	30,000.	WIRE	0.		
		SUB-SAHARAN AFRICA	FOR URGENT REGRANTING FOR WOMEN ENVIRONMENTAL HUMAN RIGHTS DEFENDERS	30,000.	WIRE	0.		
		SUB-SAHARAN AFRICA	FOR CHILDREN BUILD PEACE AMONG PASTORAL COMMUNITIES IN ISIOLO COUNTY	30,000.	WIRE	0.		
		SUB-SAHARAN AFRICA	INDIGENOUS PEOPLE OF AFRICA COORDINATING COMMITTEE (IPACC): FOR CONFLICT	26,600.	WIRE	0.		
		SUB-SAHARAN AFRICA	SUSTAINING THE WILD COAST: TO SUPPORT THE XOLOBENI "NO" MINE CAMPAIGN, AS PER YOUR	30,000.	WIRE	0.		

Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)								
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	ZIMBABWE SMALLHOLDER ORGANIC FARMERS FORUM: FOR SEEDS, SOIL, CULTURE AND	60,000.	WIRE	0.		
		EUROPE (INCLUDING ICELAND AND GREENLAND)	TO SUPPORT COMMUNICATIONS AND POLICY OUTREACH FOR THE 5TH HORIZONTAL	50,000.	WIRE	0.		
		NORTH AMERICA (CANADA AND MEXICO)	TO SUPPORT ARCTIC FUNDERS COLLABORATIVE IN ITS ARCTIC INDIGENOUS FUND FOR	10,250.		0.		

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.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)

Part IV Foreign Forms

- 1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* Yes 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 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 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 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 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 No

Part V Supplemental Information

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

PART I, LINE 2:

THE ORGANIZATION ONLY MAKES GRANTS TO FOREIGN CHARITABLE EQUIVALENT ORGANIZATIONS. RSF PRACTICES EQUIVALENCY DETERMINATION TO BE SURE THAT FOREIGN ORGANIZATIONS ARE SERVING A CHARITABLE PURPOSE OUTSIDE OF THE UNITED STATES. THE ORGANIZATION COLLECTS THEIR ORGANIZATIONAL BYLAWS AND ARTICLES OF INCORPORATION, AS WELL AS THEIR GOVERNMENTAL DECREE OR CERTIFICATE EVIDENCING THAT THEY ARE A CHARITABLE ENTITY IN THEIR COUNTRY. RSF ALSO REQUIRES THAT FOREIGN GRANTEEES SIGN A FOREIGN GRANT AGREEMENT THAT STATES THAT ALL GRANT FUNDS WILL BE USED FOR CHARITABLE PURPOSES AND MAY NOT BE USED TO INFLUENCE LEGISLATION OR A POLITICAL CAMPAIGN. FOREIGN GRANTEEES ARE REQUIRED TO REPORT TO RSF AFTER 6 MONTHS AND EVERY 6 MONTHS THEREAFTER UNTIL THE FULL GRANT HAS BEEN SPENT. RSF REQUIRES A NARRATIVE AS WELL AS FINANCIAL REPORT ON HOW THE GRANT FUNDS WERE USED.

PART I, LINE 3:

ACCRUAL METHOD

PART II, COLUMN (D):

REGION: CENTRAL AMERICA AND THE CARIBBEAN

(D) PURPOSE OF GRANT: FOR PROEIB ANDES TO SUPPORT THE INTERNATIONAL SEMINAR ON LANGUAGE REVITALIZATION IN LATIN AMERICA

REGION: CENTRAL AMERICA AND THE CARIBBEAN

(D) PURPOSE OF GRANT: FOR STRENGTHENING TERRITORIAL GOVERNANCE AND REVALUE ANCESTRAL KNOWLEDGE WITH EQUALITY AND EQUITY IN CH'ORTI'

Part V Supplemental Information

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

REGION: CENTRAL AMERICA AND THE CARIBBEAN

(D) PURPOSE OF GRANT: FOR SCHOOL OF ARTS: WEAVING POLITICAL ADVOCACY AND EMPOWERMENT OF IXIL WOMEN

REGION: CENTRAL AMERICA AND THE CARIBBEAN

(D) PURPOSE OF GRANT: FOR REVITALIZATION OF TRADITIONAL INDIGENOUS MEDICINE IN THE INDIGENOUS PEOPLES OF MONIMBO, NANCIMI OF THE DEPARTMENT OF MASAYA AND THE INDIGENOUS MISKITUS OF THE NORTH CARIBBEAN

REGION: CENTRAL AMERICA AND THE CARIBBEAN

(D) PURPOSE OF GRANT: TO SUPPORT ADMINISTRATION OF THE INDIGENOUS WAYS OF KNOWING AND LEARNING INITIATIVE

REGION: EAST ASIA AND THE PACIFIC

(D) PURPOSE OF GRANT: TO SUPPORT "GENEROSITY ENTREPRENEURS", PURIFICATION RETREATS AND TRANSFORMATION INTERNSHIPS

REGION: EAST ASIA AND THE PACIFIC

(D) PURPOSE OF GRANT: FOR PROMOTION AND TRANSFORMATION OF TRADITIONAL HEALING PRACTICES OF INDIGENOUS PEOPLES FOR GOOD HEALTH AND WELLBEING IN NEPAL

REGION: EAST ASIA AND THE PACIFIC

(D) PURPOSE OF GRANT: FOR SCALING UP OF THE IMPLEMENTATION OF INDIGENOUS PEOPLES SUSTAINABLE, SELF-DETERMINED DEVELOPMENT (IPSSDD) THROUGH COMMUNITY-BASED MANAGEMENT AND INFORMATION SYSTEMS (CBMIS) / INTERNATIONAL REGRANTING CAPACITY

Part V Supplemental Information

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

REGION: EAST ASIA AND THE PACIFIC

(D) PURPOSE OF GRANT: FOR SUPPORT OF RESEARCH AND ADVOCACY ON INDIGENOUS LANGUAGE, CONCEPTS AND VALUES ON SUSTAINABILITY

REGION: EUROPE (INCLUDING ICELAND AND GREENLAND)

(D) PURPOSE OF GRANT: FOR HOLISTIC HUMANITARIAN AND EMERGENCY SUPPORT FOR PEOPLE ON THE MOVE / FOR SETTING UP A US BASED 501(C)(3) ENTITY AND CHOOSE LOVE POP-UP STORE / TO PROVIDE HUMANITARIAN AID IN GREECE AND SYRIA

REGION: EUROPE (INCLUDING ICELAND AND GREENLAND)

(D) PURPOSE OF GRANT: TO SUPPORT THE BUILDING FOR THE NEW WALDORF INITIATIVE BODHI HILL IN PYIN OO LWIN/ MYANMAR AND PROJECT SUPPORT

REGION: EUROPE (INCLUDING ICELAND AND GREENLAND)

(D) PURPOSE OF GRANT: TO SUPPORT "OPEN ART SHELTER", FOR HOLISTIC SUPPORT FOR PEOPLE ON THE MOVE AND THEIR RECEIVING COMMUNITY

REGION: EUROPE (INCLUDING ICELAND AND GREENLAND)

(D) PURPOSE OF GRANT: FOR THE ISAK SABA LANGUAGE CENTERS WORK TO EXPAND THE USE OF NORTH SAAMI PLACE NAMES IN UNJARGA

REGION: EUROPE (INCLUDING ICELAND AND GREENLAND)

(D) PURPOSE OF GRANT: FOR SAFEGUARDING PEASANT SEEDS TO BRIDGE KNOWLEDGE, CULTURE AND AGROECOLOGY

Part V Supplemental Information

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

REGION: EUROPE (INCLUDING ICELAND AND GREENLAND)

(D) PURPOSE OF GRANT: FOR YOUR WORK WITH SUPPORTERS FOR THE HEALTH AND RIGHTS OF PEOPLE IN THE SEMICONDUCTOR INDUSTRY

REGION: EUROPE (INCLUDING ICELAND AND GREENLAND)

(D) PURPOSE OF GRANT: FOR SUPPORT OF PEACEFUL BAMBOO FAMILY FOR THE OPERATING COSTS OF THE ADOLESCENT PROGRAM

REGION: EUROPE (INCLUDING ICELAND AND GREENLAND)

(D) PURPOSE OF GRANT: FOR TRANSLATION COSTS OF MATERIAL TAKEN FROM THE BOOKS AND LECTURES OF RUDOLF STEINER

REGION: NORTH AMERICA (CANADA AND MEXICO)

(D) PURPOSE OF GRANT: TO SUPPORT THE MOHAWK SEEDKEEPER GARDENS IN ITS HAUDENOSAUNEE AGRICULTURAL SCHOOL - EARTHSHIP BUILD 2018

REGION: RUSSIA AND NEIGHBORING STATES

(D) PURPOSE OF GRANT: FOR IDENTIFICATION OF GLOBAL CLIMATE CHANGE INDICATORS USING COSMOGEO PREDICTION TECHNOLOGY TO COMPARE DATA ON SACRED SITES IN GREATER ALTAI AND NORTH AMERICA

REGION: RUSSIA AND NEIGHBORING STATES

(D) PURPOSE OF GRANT: TO SUPPORT UNIFYING ALTAI GOVERNMENT EDUCATION POLICY BY ESTABLISHING A UNIVERSAL LANGUAGE BELONGING TO ALTAI'S INDIGENOUS PEOPLES / TO RENEW THE TRADITION OF HOLISTIC EDUCATION AND IMPROVE NUTRITION BY ESTABLISHING A TRADITIONAL HEALING CENTER

Part V Supplemental Information

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

REGION: SOUTH AMERICA

(D) PURPOSE OF GRANT: FONDO PARA EL DESARROLLO DE LOS PUEBLOS INDIGENA DE AMERICA LATINA Y EL CARIBE (FILAC): FOR INDIGENOUS WOMEN OF ABYA YALA: CARRIERS OF ANCESTRAL KNOWLEDGE IN PROCESSES OF RECONCILIATION AND PEACE, AS DESCRIBED IN YOUR PROPOSAL

REGION: SOUTH AMERICA

(D) PURPOSE OF GRANT: FOR STRENGTHENING OUR ANCESTRAL PRACTICES, THROUGH THE CONSOLIDATION OF THE MANAGEMENT OF OUR COMMUNITY ASSETS

REGION: SOUTH AMERICA

(D) PURPOSE OF GRANT: TO SUPPORT A SERIES OF TRAINING WORKSHOP FOR YOUNG SOCIAL ACTIVISTS AND ECOLOGISTS, TEACHING ABOUT DIFFERENT COMMUNICATION TECHNIQUES, SOCIAL PARTICIPATION, AND NONVIOLENT DIRECT ACTION

REGION: SOUTH AMERICA

(D) PURPOSE OF GRANT: FOR FEPROMUQ TO CONTRIBUTE TO THE IMPROVEMENT OF INDIGENOUS CHILD AND MATERNAL HEALTH THROUGH THE RECOVERY OF KNOWLEDGE AND ANCESTRAL PRACTICES

REGION: SOUTH AMERICA

(D) PURPOSE OF GRANT: FOR PLURAVERISTY AND BIOCULTURAL HERITAGE INNOVATIONS EXPERIMENTAL STATION AND OFFICES, WITH \$60,000 FOR PURCHASE OF THE LAND AND \$10,000 FOR ARCHITECTURAL PLANS

REGION: SOUTH ASIA

(D) PURPOSE OF GRANT: FOR INDIGENOUS YOUTH RESEARCH ON THE STATE OF

Part V Supplemental Information

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

INDIGENOUS HEALTH IN INDONESIA / FOR STRENGTHENING INDONESIA'S INDIGENOUS RIGHTS AND CULTURE

REGION: SOUTH ASIA

(D) PURPOSE OF GRANT: FOR URGENT REGRANTING FOR IPHRDS / FOR STRENGTHENING REGIONAL SUPPORT FOR INDIGENOUS WOMEN, YOUTH AND ADVOCACY / TO SUPPORT ZO INDIGENOURS FORUM: PROMOTION AND PROTECTION OF ENDANGERED PANG AND RALTE LANGUAGE / FOR STRENGTHENING THE REGIONAL NETWORK OF INDIGENOUS PEOPLE'S IN ASIA / TO SUPPORT THE SECRETARIAT TEAM: GLOBAL COORDINATING COMMITTEE OF THE INDIGENOUS PEOPLES MAJOR GROUP

REGION: SOUTH ASIA

(D) PURPOSE OF GRANT: FOR CONSERVATION AND PROMOTION OF LOCAL PLANTS SPECIES TO ENHANCE FOOD SECURITY, HEALTH AND WELLBEING OF INDIGENOUS PEOPLES IN THAILAND

REGION: SOUTH ASIA

(D) PURPOSE OF GRANT: TO SUPPORT REGRANTING TO ENVIRONMENTAL DEFENDERS IN ASIA, AND AN INTENSIVE HOLISTIC SECURITY WORKSHOP FOR ENVIRONMENTAL DEFENDERS IN THE MEKONG REGION

REGION: SUB-SAHARAN AFRICA

(D) PURPOSE OF GRANT: FOR STRENGTHENING INDIGENOUS BAKA TRADITIONAL MEDICINE, TRADITIONAL HEALING AND HEALTH CARE SYSTEMS

REGION: SUB-SAHARAN AFRICA

(D) PURPOSE OF GRANT: FOR NURTURING A TRADITIONAL SEED KEEPERS NETWORK

Part V Supplemental Information

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

IN UPPER WEST REGION, GHANA

REGION: SUB-SAHARAN AFRICA

(D) PURPOSE OF GRANT: TO SUPPORT THE CULTURAL AND ECONOMIC VALUE OF
HERITAGE YAMS IN KANKAN, GUINEA

REGION: SUB-SAHARAN AFRICA

(D) PURPOSE OF GRANT: FOR INDIGENOUS PEOPLES ASSISTANCE FACILITY
INTERNATIONAL REGRANTING & CAPACITY-BUILDING

REGION: SUB-SAHARAN AFRICA

(D) PURPOSE OF GRANT: TO SUPPORT REVITALIZING SPIRITUAL TRADITIONAL
HEALING AND SUPPORTING THE HEALERS IN NORTHERN KENYA

REGION: SUB-SAHARAN AFRICA

(D) PURPOSE OF GRANT: TO SUPPORT BRIDGING INTER-GENERATIONAL KNOWLEDGE
GAPS, FOSTERING EQUITY, CONNECTING PEOPLE AND BUILDING COMMUNITY
RESILIENCE AND SOCIO-CULTURAL WELLBEING IN NORTHERN KENYA

REGION: SUB-SAHARAN AFRICA

(D) PURPOSE OF GRANT: FOR REVITALIZING & SYNERGIZING TRADITIONAL JUSTICE
AND PEACE BUILDING SYSTEMS OF MAASAI PASTORALIST INDIGENOUS COMMUNITY IN
KENYA

REGION: SUB-SAHARAN AFRICA

(D) PURPOSE OF GRANT: FOR URGENT REGRANTING FOR WOMEN ENVIRONMENTAL
HUMAN RIGHTS DEFENDERS UNDER THREAT

Part V Supplemental Information

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

REGION: SUB-SAHARAN AFRICA

(D) PURPOSE OF GRANT: INDIGENOUS PEOPLE OF AFRICA COORDINATING COMMITTEE (IPACC): FOR CONFLICT RESOLUTION AND INDIGENOUS PEOPLES, AS DESCRIBED IN YOUR PROPOSAL

REGION: SUB-SAHARAN AFRICA

(D) PURPOSE OF GRANT: SUSTAINING THE WILD COAST: TO SUPPORT THE XOLOBENI "NO" MINE CAMPAIGN, AS PER YOUR PROPOSAL

REGION: SUB-SAHARAN AFRICA

(D) PURPOSE OF GRANT: ZIMBABWE SMALLHOLDER ORGANIC FARMERS FORUM: FOR SEEDS, SOIL, CULTURE AND AGROECOLOGY FOR HEALTHY PEOPLE AND COMMUNITIES, AS DESCRIBED IN YOUR PROPOSAL

REGION: EUROPE (INCLUDING ICELAND AND GREENLAND)

(D) PURPOSE OF GRANT: TO SUPPORT COMMUNICATIONS AND POLICY OUTREACH FOR THE 5TH HORIZONTAL LEARNING EXCHANGE OF THE INTERNATIONAL NETWORK OF MOUNTAIN INDIGENOUS PEOPLES (INMIP) IN KYRGYZSTAN

REGION: NORTH AMERICA (CANADA AND MEXICO)

(D) PURPOSE OF GRANT: TO SUPPORT ARCTIC FUNDERS COLLABORATIVE IN ITS ARCTIC INDIGENOUS FUND FOR PROGRAMMING AND REGRANTING ACTIVITIES AND OTHER PROJECTS

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

▶ **Attach to Form 990.**

▶ **Go to www.irs.gov/Form990 for the latest information.**

OMB No. 1545-0047

2018

**Open to Public
Inspection**

Name of the organization **RUDOLF STEINER FOUNDATION, INC.** Employer identification number **13-6082763**

Part I General Information on Grants and Assistance

- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes** **No**
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
ACLU FOUNDATION 125 BROAD STREET, 18TH FLOOR NEW YORK, NY 10004	13-6213516	501(C)(3)	10,000.	0.			FOR SAFEGUARDING THE RIGHTS OF REFUGEES AND IMMIGRANTS
ACLU FOUNDATION OF GEORGIA INC P.O. BOX 77208 ATLANTA, GA 30357	23-7115937	501(C)(3)	10,000.	0.			TO SUPPORT VOTING RIGHTS EFFORTS
ACLU FOUNDATION OF KANSAS 6701 W. 64TH STREET, SUITE 210 OVERLAND PARK, KS 66202	43-0926406	501(C)(3)	10,000.	0.			FOR VOTING RIGHTS/FIGHTING VOTER SUPPRESSION SUPPORT
AFRICA SCHOOL ASSISTANCE PROJECT 191 UNIVERSITY BLVD, #285 DENVER, CO 80206	26-0784811	501(C)(3)	7,500.	0.			FOR GENERAL OPERATING SUPPORT
ALLIANCE FOR NUCLEAR ACCOUNTABILITY - ANA C/O NUCLEAR WATCH NM, 903 W. ALAMEDA #325 - SANTA FE, NM 87501	91-1816131	501(C)(3)	10,000.	0.			FOR SUPPORT OF DC DAYS
AMAZON WATCH 520 3RD STREET, SUITE 108 OAKLAND, CA 94607	95-4604782	501(C)(3)	50,000.	0.			FOR GENERAL OPERATING SUPPORT

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **▶ 279.**

3 Enter total number of other organizations listed in the line 1 table **▶ 2.**

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

Schedule I (Form 990) (2018)

SEE PART IV FOR COLUMN (H) DESCRIPTIONS

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMERICAN HIMALAYAN FOUNDATION 909 MONTGOMERY ST., SUITE 400 SAN FRANCISCO, CA 94133	94-2951480	501(C)(3)	10,000.	0.			FOR GENERAL OPERATING SUPPORT
AMERICAN SOCIETY FOR TECHNION 55 EAST 59TH ST NEW YORK, NY 10022	13-0434195	501(C)(3)	68,750.	0.			FOR THE KAPLAN FAMILY ENDOWED GRADUATE FELLOWSHIP FUND FOR EXCEPTIONAL WOMEN
ANIMAL CHARITY EVALUATORS P.O. BOX 628432 MIDDLETON, WI 53562	36-4684978	501(C)(3)	150,000.	0.			TO SUPPORT THE EFFECTIVE ANIMAL ADVOCACY FUND
ANIMAL EQUALITY 8581 SANTA MONICA BLVD., SUITE 350 LOS ANGELES, CA 90069	47-2420444	501(C)(3)	33,000.	0.			FOR GENERAL OPERATING SUPPORT
ANIMALS UNITED MOVEMENT P.O. BOX 6105 SANTA ROSA, CA 95406	45-3368884	501(C)(3)	25,000.	0.			FOR GENERAL OPERATING SUPPORT
ANTHROPOSOPHICAL SOCIETY IN AMERICA - 1923 GEDDES AVENUE - ANN ARBOR, MI 48104-1797	13-1628147	501(C)(3)	9,566.	0.			FOR GENERAL OPERATING SUPPORT FOR THE ANTHROPOSOPHICAL PRISON OUTREACH PROGRAM (APO)
ANTHROPOSOPHIC PRESS INC 610 MAIN ST. GREAT BARRINGTON, MA 01230	13-1790720	501(C)(3)	7,500.	0.			FOR PROJECT SUPPORT, AS DESCRIBED IN YOUR FUNDING PROPOSAL TO THE RUDOLF STEINER CHARITABLE TRUST
APPETITE FOR CHANGE INC. 1200 WEST BROADWAY STREET MINNEAPOLIS, MT 55411	27-5112040	501(C)(3)	8,500.	0.			FOR COMMERCIAL REAL ESTATE CONSULTING/BROKERAGE AND ARCHITECT FEES
ARKANSAS COMMUNITY FOUNDATION 1400 WEST MARKHAM, SUITE 206 LITTLE ROCK, AZ 72201	52-1055743	501(C)(3)	890,874.	0.			TO SUPPORT THE ANNE FUND

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AS YOU SOW 2150 KITTREDGE ST., SUITE 450 BERKELEY, CA 94704	94-3169008	501(C)(3)	6,500.	0.			TO SUPPORT INVOKING THE PAUSE GRANT PARTNER, AS YOU SOW
A WELL-FED WORLD 3936 S. SEMORAN BLVD. #271 ORLANDO, FL 32822	27-0865905	501(C)(3)	32,500.	0.			FOR GENERAL OPERATING SUPPORT
BAINBRIDGE WALDORF FOUNDATION P.O. BOX 11371 BAINBRIDGE ISLAND, WA 98110	91-1902966	501(C)(3)	8,121.	0.			TO SUPPORT THE PURCHASE OF THE SCHOOL PROPERTY, AS PER YOUR PROPOSAL
BALLE 2323 BROADWAY OAKLAND, CA 94612	20-1544255	501(C)(3)	32,500.	0.			FOR GENERAL OPERATING SUPPORT
BAY AREA CENTER FOR WALDORF TEACHER TRAINING - P.O. BOX 21265 - EL SOBRANTE, CA 94820	94-3399888	501(C)(3)	8,000.	0.			FOR PROJECT SUPPORT, AS DESCRIBED IN YOUR FUNDING PROPOSAL TO THE RUDOLF STEINER CHARITABLE TRUST
BAY AREA GIRLS ROCK CAMP PO BOX 72213 OAKLAND, CA 94612	26-0807690	501(C)(3)	16,534.	0.			TO SUPPORT BAGRC'S ACCESS FUND, AS DESCRIBED IN YOUR PROPOSAL
BEEHIVE COLLECTIVE 101 COURT ST MACHIAS, ME 04654	30-0325915	501(C)(3)	9,000.	0.			TO SUPPORT INVOKING THE PAUSE GRANT PARTNER, BEEHIVE COLLECTIVE
BEYOND CARNISM 16 HARCOURT STREET, SUITE 3J BOSTON, MA 02116	46-3038496	501(C)(3)	275,000.	0.			FOR GENERAL OPERATING SUPPORT
BIODYNAMIC FARMING & GARDENING ASSOCIATION - P.O. BOX 557 - EAST TROY, WI 53120	14-1377504	501(C)(3)	83,000.	0.			TO SUPPORT BRIDGING BIODYNAMIC, TRADITIONAL AND INDIGENOUS AGRICULTURAL COMMUNITIES

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BIONEERS 1014 TORNEY AVE SAN FRANCISCO, CA 94129	85-0432731	501(C)(3)	45,270.	0.			TO SUPPORT BIONEERS, NOMINATED BY NINA SIMONS, ITP ADVISORY COMMITTEE
BISHOP PAIUTE TRIBE - FOOD SOVEREIGNTY PROGRAM - 50 TU SU LANE - BISHOP, CA 93514		TRIBAL GOVERNMENT	100,000.	0.			TO SUPPORT MULTI-GENERATIONAL FOOD SYSTEMS AND NATIVE FOOD GARDENS
BLACK ALLIANCE FOR JUST IMMIGRATION (BAJI) - 660 NOSTRAND AVE - BROOKLYN, NY 11216	27-1911378	501(C)(3)	7,000.	0.			FOR GENERAL OPERATING SUPPORT
BLACK MOUNTAIN CIRCLE P.O. BOX 1472 POINT REYES STATION, CA 94956	46-5334121	501(C)(3)	15,000.	0.			FOR GENERAL OPERATING SUPPORT
BLUE DEER CENTER P.O. BOX 905, 1155 COUNTY ROUTE 6 MARGARETVILLE, NY 12455	22-3741704	501(C)(3)	202,500.	0.			FOR GENERAL OPERATING SUPPORT
BODY WISDOM, INC. 2273 TELEGRAPH AVE. OAKLAND, CA 94612	94-3153475	501(C)(3)	12,500.	0.			TO SUPPORT RACIAL EQUITY AND TRANSFORMATION PROGRAMS
BOSTON IMPACT INITIATIVE FUND P.O. BOX 300443 JAMAICA PLAIN, MA 02130	82-1543658	501(C)(3)	80,000.	0.			FOR GENERAL OPERATING SUPPORT
BRIGHTER GREEN 165 COURT STREET #171 BROOKLYN, NY 11201	26-1380608	501(C)(3)	75,000.	0.			FOR GENERAL OPERATING SUPPORT
BVM CAPACITY BUILDING INSTITUTE INC. - 3390 STONEWALL TELL RD - ATLANTA, GA 30349	82-3835203	501(C)(3)	8,000.	0.			FOR GENERAL OPERATING SUPPORT IN FLORIDA

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CALIFORNIA CONSORTIUM OF URBAN INDIAN HEALTH CENTERS - 1016 LINCOLN BLVD., SUITE 111 - SAN FRANCISCO, CA 94129	20-4878959	501(C)(3)	30,000.	0.			TO SUPPORT THE WEAVING GENERATIONS OF HEALING PROJECT
CALLISTO 1616 CASTRO STREET SAN FRANCISCO, CA 94114	45-4011283	501(C)(3)	25,000.	0.			TO SUPPORT THE CREATION AND MARKETING OF A SURVIVORS GUIDE FOR SEXUAL ASSAULT VICTIMS
CANAL ALLIANCE 91 LARKSPUR ST. SAN RAFAEL, CA 94901	94-2832648	501(C)(3)	50,000.	0.			FOR GENERAL OPERATING SUPPORT
CANTICLE FARM 1968 36TH AVE OAKLAND, CA 94601	46-1484633	501(C)(3)	10,000.	0.			FOR GENERAL OPERATING SUPPORT
CARBON CYCLE INSTITUTE 245 KENTUCKY STREET, SUITE A PETALUMA, CA 94952	46-2694752	501(C)(3)	15,000.	0.			FOR GENERAL OPERATING SUPPORT
CARNEGIE MELLON UNIVERSITY , 5000 FORBES AVENUE, NSH 4627 PITTSBURGH, PA 15213	25-0969449	501(C)(3)	50,000.	0.			FOR UNRESTRICTED SUPPORT OF THE CREATE LAB
CASA YOUTH ADVOCATES P.O. BOX 407 MEDIA, PA 19063	23-1901080	501(C)(3)	6,440.	0.			FOR GENERAL OPERATING SUPPORT
CENTER FOR ANTHROPOLOGY P.O. BOX 545 WILTON, NH 03086-0545	04-3341510	501(C)(3)	25,500.	0.			TO SUPPORT THE RENEWAL FUND
CENTER FOR ECONOMIC DEMOCRACY 434 MASSACHUSETTS AVE, SUITE 201 BOSTON, MA 02118	47-3589804	501(C)(3)	35,000.	0.			FOR THE BOSTON UJIMA PROJECT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CENTER FOR REGENERATIVE AGRICULTURE - P.O. BOX 973 - OJAI, CA 93024	03-0438828	501(C)(3)	10,000.	0.			FOR GENERAL OPERATING SUPPORT
CENTRE FOR EFFECTIVE ALTRUISM USA INC. - 2054 UNIVERSITY AVE., SUITE 300 - BERKELEY, CA 94704	47-1988398	501(C)(3)	7,500.	0.			FOR GENERAL OPERATING SUPPORT OF THE SENTIENCE INSTITUTE - 7WVPRZGK55ZK
CERES 99 CHAUNCY STREET, 6TH FLOOR BOSTON, MA 02111-1703	22-3053747	501(C)(3)	20,000.	0.			FOR GENERAL OPERATING SUPPORT
CERES COMMUNITY PROJECT 7351 BODEGA AVE SEBASTOPOL, CA 95472	26-2250997	501(C)(3)	30,000.	0.			TO SUPPORT FUNDING THE EQUITY, DIVERSITY AND INCLUSION INITIATIVE
CITY LIFE/VIDA URBANA P.O. BOX 300107 JAMAICA PLAIN, MA 02130	04-2660311	501(C)(3)	25,000.	0.			FOR GENERAL OPERATING SUPPORT
CLAREMONT LINCOLN UNIVERSITY 250 WEST FIRST STREET, SUITE 330 CLAREMONT, CA 91711	45-1171945	501(C)(3)	8,000.	0.			TO SUPPORT THE INITIAL STUDY FOR THE ONLINE MINDFULNESS AND EMPATHY COURSE
COMMON COUNSEL FOUNDATION 1624 FRANKLIN STREET, SUITE 1022 OAKLAND, CA 94612	94-3214166	501(C)(3)	35,000.	0.			FOR GENERAL OPERATING SUPPORT FOR KINDLE PROJECT
COMMONWEALTH FOUNDATION, INC. 1600 SHATTUCK, STE 226 BERKELEY, CA 94709	22-2543558	501(C)(3)	10,000.	0.			FOR THE SOLIDARITY ECONOMY INITIATIVE OF THE CENTER FOR ECONOMIC DEMOCRACY (CED)
COMMUNITY AGROECOLOGY NETWORK P.O. BOX 7653 SANTA CRUZ, CA 95061-7653	75-3003372	501(C)(3)	100,000.	0.			TO SUPPORT MAYA AGROECOLOGY, NATIVE SEEDS AND HOMELANDS

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
COMMUNITY FOUNDATION OF TETON VALLEY - P.O. BOX 1523 - DRIGGS, ID 83422	83-0308856	501(C)(3)	8,000.	0.			IN RESPONSE TO THE TIN CUP CHALLENGE GRANT AS A MATCHING AMOUNT TO SUPPORT EARTHFIRE
COMMUNITY FOUNDATION OF TOMPKINS COUNTY - 200 E. BUFFALO STREET, SUITE 202 - ITHACA, NY 14850	16-1587553	501(C)(3)	7,000.	0.			TO SUPPORT THE STREBEL FUND FOR COMMUNITY ENRICHMENT
COMMUNITY INVOLVED IN SUSTAINING AGRICULTURE - 1 SUGARLOAF ST. - SOUTH DEERFIELD, MA 01373	04-3416862	501(C)(3)	10,000.	0.			FOR THE 25TH ANNIVERSARY FUND
COMPASSION IN WORLD FARMING USA 125 EAST TRINITY PLACE, SUITE 206 DECATUR, GA 30030	46-1822635	501(C)(3)	137,500.	0.			FOR GENERAL OPERATING SUPPORT
COMPASSION OVER KILLING P.O. BOX 9773 WASHINGTON, DC 20016	52-2034417	501(C)(3)	32,500.	0.			FOR GENERAL OPERATING SUPPORT
CORPORATE ACCOUNTABILITY 10 MILK STREET, SUITE 610 BOSTON, MA 02108	41-1322686	501(C)(3)	11,175.	0.			FOR GENERAL OPERATING SUPPORT
CREATE PEACE PROJECT P.O. BOX 411253 SAN FRANCISCO, CA 94129	26-1169800	501(C)(3)	10,000.	0.			FOR GENERAL OPERATING SUPPORT
CRISIS TEXT LINE P.O. BOX 1144 NEW YORK, NY 10159	46-5039599	501(C)(3)	10,000.	0.			FOR GENERAL OPERATING SUPPORT
CULTIVATING COMMUNITY P.O. BOX 3792 PORTLAND, ME 04104	04-3607322	501(C)(3)	50,000.	0.			FOR GENERAL OPERATING SUPPORT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CULTURAL SURVIVAL P.O. BOX 381569 CAMBRIDGE, MA 02238	23-7182593	501(C)(3)	100,000.	0.			FOR PROMOTING INDIGENOUS COMMUNITY MEDIA AND YOUTH MEDIA FELLOWSHIPS
DEMETER ASSOCIATION, INC. P.O. BOX 1390 PHILOMATH, OR 97370	95-3972781		12,747.	0.			TO REIMBURSE FOR FARMER EDUCATION EXPENSES
DEMOCRACY NOW! 207 W. 25TH STREET, 11TH FLOOR NEW YORK, NY 10001	01-0708733	501(C)(3)	10,000.	0.			FOR GENERAL OPERATING SUPPORT
DEMOS 80 BROAD ST., SUITE 400 NEW YORK, NY 10004	13-4105066	501(C)(3)	15,000.	0.			FOR GENERAL OPERATING SUPPORT
DETROIT WALDORF SCHOOL 2555 BURNS AVENUE DETROIT, MI 48214	38-1790921	501(C)(3)	12,838.	0.			FOR PROJECT SUPPORT, AS DESCRIBED IN YOUR FUNDING PROPOSAL TO THE RUDOLF STEINER CHARITABLE TRUST
DHARMA VOICES FOR ANIMALS P.O. BOX 508 SOLANA BEACH, CA 92075	45-5372693	501(C)(3)	26,500.	0.			FOR GENERAL OPERATING SUPPORT
EARTH ISLAND INSTITUTE 2150 ALLSTON WAY, SUITE 460 BERKELEY, CA 94704-1302	94-2889684	501(C)(3)	16,250.	0.			FOR GENERAL OPERATING SUPPORT OF NUMI FOUNDATION
EARTHRIGHTS INTERNATIONAL 1612 K ST. NW, SUITE 401 WASHINGTON, DC 20006	04-3265555	501(C)(3)	25,000.	0.			TO SUPPORT THE AMAZON SEMINAR
ECO ED P.O. BOX 2492 LONGMONT, CO 80502	86-0966591	501(C)(3)	50,000.	0.			FOR GENERAL OPERATING SUPPORT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ECOLOGIC DEVELOPMENT FUND 186 ALEWIFE BROOK PARKWAY, SUITE 21 CAMBRIDGE, MA 02138	25-1704582	501(C)(3)	60,000.	0.			TO SUPPORT STRENGTHENING INDIGENOUS ENTERPRISE DEVELOPMENT, AS DESCRIBED IN YOUR PROPOSAL
ELM CITY MONTESORRI SCHOOL 375 QUINNIPIAC AVENUE NEW HAVEN, CT 06513	46-3592780	501(C)(3)	5,250.	0.			FOR GENERAL OPERATING SUPPORT
ENERGY EMPLOYEES CLAIMANT ASSISTANCE PROJECT - PO BOX 552 - YELLOW SPRINGS, OH 45387	26-1286663	501(C)(3)	15,000.	0.			FOR ROCKY FLATS GRAND JURY LEGAL RESEARCH
ENVIRONMENTAL LAW ALLIANCE WORLDWIDE - 1412 PEARL ST. - EUGENE, OR 97401	94-3116602	501(C)(3)	50,000.	0.			TO SUPPORT SECURITY TRAINING
ETHICAL CHOICES PROGRAM 1561 GREEN OAK CIRCLE LAWRENCEVILLE, GA 30043	47-5137685	501(C)(3)	35,000.	0.			FOR GENERAL OPERATING SUPPORT
EVERYDAY PEOPLE FOR CHANGE PO BOX 816 MOBILE, AL 36601	46-3468086	501(C)(3)	60,000.	0.			TO PROVIDE MARKETING AND WEBSITE SUPPORT TO THE RUNWAY PROJECT
FACTORY FARMING AWARENESS COALITION - 4048 NE 122ND AVE. #30252 - PORTLAND, OR 97294	82-4594246	501(C)(3)	12,500.	0.			FOR GENERAL OPERATING SUPPORT
FARM AND WILDERNESS FOUNDATION 401 FARM & WILDERNESS ROAD PLYMOUTH, VT 05056	03-0228965	501(C)(3)	85,000.	0.			WITH \$10,000 FOR THE ANNUAL FUND, AND \$50,000 FOR FRIENDS LODGE
FARMWORKER ASSOCIATION OF FLORIDA INC. - 1264 APOPKA BOULEVARD - APOPKA, FL 32703	59-2683978	501(C)(3)	15,000.	0.			FOR GENERAL OPERATING SUPPORT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FARMWORKER JUSTICE FUND, INC. 1126 16TH STREET NW, SUITE LL-101 WASHINGTON, DC 20036	52-1196708	501(C)(3)	10,000.	0.			FOR GENERAL OPERATING SUPPORT
FIBERSHED P.O. BOX 221 SAN GERONIMO, CA 94963	45-3055196	501(C)(3)	36,000.	0.			FOR GENERAL OPERATING SUPPORT
FLOWERING TREE PERMACULTURE INSTITUTE - 231 BELOW OBSIDIAN ROAD - ESPANOLA, NM 87532	85-0384777	TRIBAL GOVERNMENT	50,000.	0.			TO SUPPORT INCREASED ACCESS TO TRADITIONAL SEEDS AND FOODS IN PUEBLO SANTA CLARA
FOOD & ENVIRONMENT REPORTING NETWORK - 576 FIFTH AVE., STE. 903 - NEW YORK, NY 10036	27-4108978	501(C)(3)	23,350.	0.			TO SUPPORT AN ORAL HISTORY OF IA VONG: HMONG GRANDMOTHER AND RICE FARMER
FOOD AND WATER WATCH 1616 P STREET NW, SUITE 300 WASHINGTON, DC 20018	32-0160439	501(C)(3)	100,000.	0.			FOR GENERAL OPERATING SUPPORT
FORWARD TOGETHER 300 FRANK H. OGAWA PLAZA, SUITE 700 OAKLAND, CA 94612	94-3311784	501(C)(3)	6,200.	0.			FOR GENERAL OPERATING SUPPORT
FOUNDATION FOR NATIONAL PROGRESS MOTHER JONES - 222 SUTTER ST., SUITE 600 - SAN FRANCISCO, CA 94108	94-2282759	501(C)(3)	20,000.	0.			TO SUPPORT TRACKING AND COMBATTING DISINFORMATION CAMPAIGN
FOUNDATION FOR REGIONAL TRANSIT P.O. BOX 60938 PALO ALTO, CA 94306	94-3196927	501(C)(3)	40,000.	0.			FOR GENERAL OPERATING SUPPORT
FREEDOM, INC. 1810 SOUTH PARK STREET MADISON, WI 53713	43-2023570	501(C)(3)	10,000.	0.			FOR GENERAL OPERATING SUPPORT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FRIENDS INTERNATIONAL 1920 GLENHAVEN AVENUE WALNUT CREEK, CA 94595	38-3720253	501(C)(3)	200,000.	0.			FOR GENERAL OPERATING SUPPORT
FRIENDS OF DONGYU GATSAL LING INC P.O. BOX 230047 NEW YORK, NY 10023	80-0198191	501(C)(3)	30,000.	0.			FOR GENERAL OPERATING SUPPORT OF THE DGL NUNNERY
FRIENDS OF THE EARTH 1101 15TH ST. NW WASHINGTON, DC 20005	23-7420660	501(C)(3)	20,000.	0.			TO SUPPORT THE FOOD AND AGRICULTURE PROGRAM
FUTURES WITHOUT VIOLENCE 100 MONTGOMERY STREET, THE PRESIDIO SAN FRANCISCO, CA 94129	94-3110973	501(C)(3)	50,000.	0.			FOR GENERAL OPERATING SUPPORT
GINUNGAGAP FOUNDATION 1621 JUANITA LANE TIBURON, CA 94920	20-1402909	501(C)(3)	350,000.	0.			TO SUPPORT REHABILITATION OF A HOME THAT PROVIDES AGRICULTURAL WORKING HOUSING AT FILIGREEN FARM
GLOBAL CITIZEN YEAR 1625 CLAY STREET, SUITE 400 OAKLAND, CA 94612	26-3161342	501(C)(3)	54,000.	0.			TO SUPPORT THE SCHOLARSHIP PROGRAM AND GENERAL OPERATING SUPPORT
GLOBAL GREENGRANTS FUND 2840 WILDERNESS PL., SUITE A BOULDER, CO 80301	84-1612422	501(C)(3)	51,500.	0.			TO SUPPORT THE MARINE PROGRAM
GLOBAL WITNESS FOUNDATION 855 EL CAMINO REAL, SUITE 13A-410 PALO ALTO, CA 94301	94-3399599	501(C)(3)	10,000.	0.			TO SUPPORT DEFENDERS EVENTS IN BRAZIL
GRANTMAKERS CONCERNED WITH IMMIGRANTS AND REFUGEES - P.O. BOX 1100 - SEBASTOPOL, CA 95473	20-2559651	501(C)(3)	51,000.	0.			FOR PROMOTING HOLISTIC WELLBEING AS A FOCUS FOR GRANTMAKERS CONCERNED WITH 'PEOPLE ON THE MOVE'

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GUIDE DOGS OF AMERICA 13445 GLENOAKS BLVD. SYLMAR, CA 91342	95-1586088	501(C)(3)	10,000.	0.			FOR GENERAL OPERATING SUPPORT
HAMILTONIAN ARTISTS INC 1353 U STREET NW, SUITE 101 WASHINGTON, DC 20005	26-0564587	501(C)(3)	11,000.	0.			TO SUPPORT INVOKING THE PAUSE GRANTEE, DREAM AS ONE
HAMPSHIRE COLLEGE TRUSTEES COLLEGE ADVANCEMENT, 893 WEST STREE AMHERST, MA 01002	04-6130872	501(C)(3)	7,500.	0.			FOR THE ANNUAL FUND, FOR UNDOCUMENTED STUDENTS SCHOLARSHIP FUND, AND FOR THE CIVIL LIBERTIES AND
HAWTHORNE VALLEY ASSOCIATION DEVELOPMENT OFFICE, 327 COUNTY ROUT GHENT, NY 12075	13-2722428	501(C)(3)	305,748.	0.			TO SUPPORT, THROUGH THE HVA, THE PUBLICATION OF AND COMMUNITY PARTICIPATION AROUND
HEALTH IN HARMONY INC. 3804 SE BELMONT STREET PORTLAND, OR 97214	20-3741107	501(C)(3)	250,000.	0.			FOR GENERAL OPERATING SUPPORT
HIMALAYAN MEDICAL FOUNDATION 608 PORTSIDE CT. LAFAYETTE, CO 80026	84-1244003	501(C)(3)	10,000.	0.			FOR GENERAL OPERATING SUPPORT
HOLISTIC MANAGEMENT INTERNATIONAL 5941 JEFFERSON ST. NE, SUITE B ALBUQUERQUE, NM 87109	85-0324203	501(C)(3)	28,000.	0.			TO SUPPORT ADVANCING REGENERATIVE AGRICULTURAL PRACTICES IN COLORADO
HONOR THE EARTH P.O. BOX 63 CALLAWAY, NM 56521	45-4714238	501(C)(3)	210,000.	0.			FOR PROJECT SUPPORT FOR THE PINE POINT COMMUNITY ENTERPRISE CENTER-AKIING, INCLUDING START UP
HOUSATONIC VALLEY WALDORF SCHOOL 40 DODGINGTOWN ROAD NEWTOWN, CT 06470	06-1310057	501(C)(3)	13,069.	0.			TO PROVIDE SCHOLARSHIP SUPPORT FOR ONE QUALIFYING STUDENT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HUMAN IMPACTS INSTITUTE 312 SOUTH THIRD STREET, #7 BROOKLYN, NY 11211	45-2589652	501(C)(3)	10,500.	0.			FOR A BLOSSOMING POSSIBILITIES GRANT TO SUPPORT THE HUMAN IMPACTS HUB PROJECT IN NYC
IACT 1732 AVIATION BLVD, SUITE 138 REDONDO BEACH, CA 90278	27-0469436	501(C)(3)	40,000.	0.			TO SUPPORT HOLISTIC HUMANITARIAN SUPPORT FOR CHILDREN, WOMEN, AND COMMUNITIES ON THE MOVE
IGNITE 510 16TH STREET OAKLAND, CA 94612	38-3819049	501(C)(3)	25,000.	0.			FOR GENERAL OPERATING SUPPORT
INDIGENOUS ARTS INSTITUTE 8149 SANTA MONICA BLVD., #122 WEST HOLLYWOOD, CA 90046	27-3400701	501(C)(3)	7,500.	0.			TO SUPPORT A SEEDING POSSIBILITIES GRANT FOR DANCING EARTH CREATIONS SUMMER INSTITUTE
INDIGENOUS ENVIRONMENTAL NETWORK P.O. BOX 485 BEMIDJI, MN 56619	38-3653476	501(C)(3)	10,000.	0.			FOR GENERAL OPERATING SUPPORT
INDIVISIBLE CIVIC ENGAGEMENT INC PO BOX 43884 WASHINGTON, DC 20010	82-2355901	501(C)(3)	50,000.	0.			FOR GENERAL OPERATING SUPPORT
INNER FIRE INC. 26 PARKER ROAD BROOKLINE, VT 05345	46-1542395	501(C)(3)	8,000.	0.			FOR PROJECT SUPPORT, AS DESCRIBED IN YOUR FUNDING PROPOSAL TO THE RUDOLF STEINER CHARITABLE TRUST
INQUIRING SYSTEMS, INC. 101 BROOKWOOD AVE., SUITE 204 SANTA ROSA, CA 95404	94-2524840	501(C)(3)	71,750.	0.			TO SUPPORT THE INVOKING THE PAUSE FUND EXPENSES IN UPCOMING GATHERING IN OCTOBER
INSTITUTE FOR HUMANE EDUCATION P.O. BOX 260 SURRY, ME 04684	01-0530866	501(C)(3)	7,500.	0.			FOR GENERAL OPERATING SUPPORT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
INSTITUTE OF INTERNATIONAL EDUCATION INC. - 809 UNITED NATIONS PLAZA, 7TH FLOOR - NEW YORK, NY 10017	13-1624046	501(C)(3)	100,000.	0.			FOR THE THE TAMALPAIS TRUST TRAVEL AND LEARNING FUND, WITH \$80,000 SUPPORTING PROGRAM COSTS
INTERNATIONAL FUNDERS FOR INDIGENOUS PEOPLE - P.O. BOX 29184 - SAN FRANCISCO, CA 94129-0184	75-3217508	501(C)(3)	25,000.	0.			FOR IFIP GENERAL OPERATING SUPPORT
INTERNEWS NETWORK P.O. BOX 4448 ARCATA, CA 95518-4448	94-3027961	501(C)(3)	30,000.	0.			TO SUPPORT EARTH JOURNALISM NETWORK'S ASIA SECURITY PROJECT
INTERSECTION FOR THE ARTS 901 MISSION STREET, SUITE 306 SAN FRANCISCO, CA 94103	94-1593216	501(C)(3)	10,250.	0.			TO SUPPORT A BLOSSOMING POSSIBILITIES GRANT FOR SEEDS OF RESISTANCE THE FIGHT TO SAVE OUR FOOD
INTERTRIBAL AGRICULTURE COUNCIL 100 NORTH 27TH STREET, SUITE 500 BILLINGS, MT 59101	36-3886772	501(C)(3)	115,000.	0.			TO SUPPORT BRAIDING THE SACRED: REMATRIATION OF ANCESTRAL SEEDS
INVESTIGATIVE REPORTERS & EDITORS 141 NEFF ANNEX COLUMBIA, MO 65211	51-0166741	501(C)(3)	35,000.	0.			TO SUPPORT PROJECT WORD/FREELANCE INVESTIGATIVE REPORTERS & EDITORS (FIRE)
IUCN US 1630 CONNECTICUT AVE., NW, SUITE 30 WASHINGTON, DC 20009	52-1443147	501(C)(3)	15,000.	0.			TO SUPPORT VEHICLE SECURITY IN DRC
JEWISH COMMUNITY FEDERATION AND ENDOWMENT FUND - 121 STEUART STREET - SAN FRANCISCO, CA 94105	94-1156533	501(C)(3)	10,000.	0.			FOR GENERAL OPERATING SUPPORT OF THE WOMEN'S FUND
KEAUKAHA PANAWEA COMMUNITY ALLIANCE (KPCA) - P.O. BOX 6844 - HILO, HI 96720	46-1490067	501(C)(3)	28,900.	0.			TO SUPPORT KEAUKAHA PANAWEA FARMERS ASSOCIATION (KPPA) IN THE HOOLU INA COMMUNITY

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
KENNEBEC VALLEY COUNCIL OF GOVERNMENTS - 17 MAIN ST - FAIRFIELD, ME 04937	01-0488478	501(C)(3)	50,000.	0.			TO SUPPORT CROWN O'MAINE ORGANIC COOPERATIVE
KIPP PHILADELPHIA SCHOOLS 5070 PARKSIDE AVENUE, #3500D, MAILBOX 41 - PHILADELPHIA, PA 19131	05-0546103	501(C)(3)	33,000.	0.			FOR GENERAL OPERATING SUPPORT
KRISHNAMURTI FOUNDATION OF AMERICA P.O. BOX 1560 OJAI, CA 93024	23-7018406	501(C)(3)	6,000.	0.			FOR THE OAK GROVE SCHOOL TO SUPPORT THE ONCE UPON A WATERSHED PROJECT
KROKA EXPEDITIONS 767 FOREST ROAD MARLOW, NH 03456	04-3341632	501(C)(3)	6,000.	0.			FOR GENERAL OPERATING SUPPORT
LADDER TO THE MOON NETWORK P.O. BOX 10379, PORTLAND, ME 04104	81-4484652	501(C)(3)	10,000.	0.			FOR GENERAL OPERATING SUPPORT
LAND IS LIFE 495A HENRY ST., #1006 BROOKLYN, NY 11231	22-3101280	501(C)(3)	187,800.	0.			TO SUPPORT A SERIES OF INITIATIVES AND ACTIVITIES IN LATIN AMERICA RELATED TO THE
LEE PESKY LEARNING CENTER 3324 ELDER STREET BOISE, ID 83705	13-3878574	501(C)(3)	6,000.	0.			FOR GENERAL OPERATING SUPPORT
LEMNISCATE ARTS, INC. 117 DURHAM RD. FREEPORT, ME 04032	20-2307129	501(C)(3)	6,252.	0.			FOR PROJECT SUPPORT OF THE AMARANTH EURYTHMY THEATER, AS DESCRIBED IN YOUR FUNDING PROPOSAL TO
LOCAL ENTERPRISE ASSISTANCE FUND, INC. - 386 WESTERN AVENUE - BOSTON, MA 02135	04-2763724	501(C)(3)	10,000.	0.			TO SUPPORT DEMOCRACY BREWING IN ITS INITIAL DEVELOPMENT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LOCAL FUTURES/ INTERNATIONAL SOCIETY FOR ECOLOGY AND CULTURE - P.O. BOX 36 - EAST HARDWICK, VT 05836	94-3128274	501(C)(3)	31,250.	0.			TO SUPPORT ASOCIACIN AYMARASUMA YAPU IN ITS EFFORTS TO CONSERVE AYMARAS AGRICULTURAL
MAINE ORGANIC FARMERS AND GARDENERS ASSOCIATION - P.O. BOX 170 - UNITY, ME 04988	01-6048322	501(C)(3)	50,000.	0.			TO SUPPORT START UP GRANT CAPITAL FOR MAINE HARVEST CREDIT UNION, OR OTHER MOFGA PROGRAMS AS NEEDED
MAIN STREET PROJECT 105 EAST 4TH STREET, SUITE 213 NORTHFIELD, MN 55057	20-1788275	501(C)(3)	10,000.	0.			TO COVER A PORTION OF THE TECHNICAL ASSISTANCE MAIN STREET PROJECT WILL BE RECEIVING FROM FORCE FOR
MARIN ACADEMY HIGH SCHOOL 1600 MISSION AVE. SAN RAFAEL, CA 94901	94-1186189	501(C)(3)	8,000.	0.			FOR THE ANNUAL FUND
MARION INSTITUTE 202 SPRING STREET MARION, MA 02738	04-3206583	501(C)(3)	14,400.	0.			FOR THE ANNUAL APPEAL
MATTER OF TRUST 99 SAINT GERMAIN AVENUE SAN FRANCISCO, CA 94114	06-1530091	501(C)(3)	10,500.	0.			A "BLOSSOMING POSSIBILITIES" GRANT TO SUPPORT A SPEAKERS SERIES AT THE CLIMATE SUMMIT
MERCY FOR ANIMALS 8033 SUNSET BLVD, SUITE 864 LOS ANGELES, CA 90046	54-2076145	501(C)(3)	250,000.	0.			FOR GENERAL OPERATING SUPPORT
MESA REFUGE P.O. BOX 1389 POINT REYES STATION, CA 94956	46-2740651	501(C)(3)	21,250.	0.			TO SUPPORT THE INDIGENOUS WRITERS FELLOWSHIP
MICHAEL FIELDS AGRICULTURAL INSTITUTE - P.O. BOX 990 - EAST TROY, WI 53120-0990	39-1449246	501(C)(3)	156,186.	0.			FOR GENERAL OPERATING SUPPORT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MISSEY 424 JEFFERSON STREET OAKLAND, CA 94607	26-4513862	501(C)(3)	20,533.	0.			FOR GENERAL OPERATING SUPPORT
MORRIS FARM TRUST PO BOX 136 WISCASSET, ME 04578	01-0494687	501(C)(3)	10,000.	0.			FOR SHEEPSCOT GENERAL STORE IN WHITEFIELD, TO SUPPORT BEN & TARYN IN ENHANCING THEIR EXEMPLARY
MOVEMENT STRATEGY CENTER 436 14TH STREET, 5TH FLOOR OAKLAND, CA 94612	20-1037643	501(C)(3)	42,000.	0.			TO SUPPORT GAMECHANGER LABS AND GENERAL OPERATING SUPPORT OF MOVEMENT GENERATION
MUSIC IN THE VINEYARDS P.O. BOX 6297 NAPA, CA 94581	68-0358441	501(C)(3)	10,000.	0.			FOR GENERAL OPERATING SUPPORT
NAROPA UNIVERSITY OFFICE OF DEVELOPMENT, 2130 ARAPAHOE AVENUE - BOULDER, CO 80302	84-1029228	501(C)(3)	30,000.	0.			WITH \$25,000 FOR GENERAL OPERATING SUPPORT, AND \$5,000 FOR THE MACP (MASTERS OF ARTS
NATIONAL CENTER FOR APPROPRIATE TECHNOLOGY - P.O. BOX 3838, - BUTTE, MT 59702	81-0361047	501(C)(3)	7,500.	0.			TO PROVIDE FUNDS FOR VILICUS TRAINING INSTITUTE TO SUPPORT FARMER TO FARMER
NATIONAL DOMESTIC WORKERS ALLIANCE 45 BROADWAY SUITE 320 NEW YORK, NY 10016	35-2420942	501(C)(3)	5,986.	0.			FOR GENERAL OPERATING SUPPORT
NATIONAL IMMIGRATION LAW CENTER 3450 WILSHIRE BLVD, #108-62 LOS ANGELES, CA 90010	95-4539765	501(C)(3)	200,000.	0.			FOR GENERAL OPERATING SUPPORT
NATIONAL LGBTQ TASK FORCE FOUNDATION - 116 NASSAU STREET, 3RD FLOOR - NEW YORK, NY 10038	52-1624852	501(C)(3)	12,500.	0.			FOR GENERAL OPERATING SUPPORT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NATIONAL PEACE CORPS ASSOCIATION 1900 L ST., NW, SUITE 610 WASHINGTON, DC 20036	58-1431113	501(C)(3)	6,000.	0.			FOR THE CAPITAL CAMPAIGN
NATIONAL PHILANTHROPIC TRUST 165 TOWNSHIP LINE ROAD SUITE 1200 JENKINTOWN, PA 19046-3594	23-7825575	501(C)(3)	86,699.	0.			FOR GENERAL OPERATING SUPPORT
NATIONAL SAVE THE FAMILY FARM COALITION - 222 MAIN STREET STOREFRONT - GLOUCESTER, MA 01930	38-2652620	501(C)(3)	7,000.	0.			FOR GENERAL OPERATING SUPPORT OF LIFTING UP FAMILY FARMER AND FISHER VOICES
NATIONAL TROPICAL BOTANICAL GARDEN 3530 PAPALINA ROAD KALAHEO, HI 96741	52-6057064	501(C)(3)	30,000.	0.			FOR RESTORATION FUNDS AND OPERATING SUPPORT FOR LIMAHULI GARDEN PRESERVE, AS DESCRIBED IN YOUR
NATIVE AMERICAN RIGHTS FUND 1506 BROADWAY BOULDER, CO 80302	84-0611876	501(C)(3)	50,000.	0.			FOR GENERAL OPERATING SUPPORT
NATIVE MOVEMENT P.O. BOX 83467 FAIRBANKS, AR 99708	68-0535413	501(C)(3)	103,000.	0.			TO SUPPORT BLACK MESA WATER COALITION IN ITS JUST TRANSITION MEANS FOOD SOVEREIGNTY PROJECT
NATURAL RESOURCES DEFENSE COUNCIL 40 WEST 20TH ST., 11TH FLOOR NEW YORK, NY 10011	13-2654926	501(C)(3)	20,000.	0.			TO SUPPORT ENVIRONMENTAL ENTREPRENEURS (E2)
NEW HAVEN ECOLOGY PROJECT 358 SPRINGSIDE AVENUE NEW HAVEN, CT 06515	22-3171185	501(C)(3)	5,250.	0.			FOR GENERAL OPERATING SUPPORT
NEWSTORIES 924 EAST NINTH AVENUE SPOKANE, WA 99202	91-2038316	501(C)(3)	5,250.	0.			TO SUPPORT DREAMRIDER PRODUCTIONS

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NEW VENTURE FUND 1201 CONNECTICUT AVE., NW, SUITE 30 WASHINGTON, DC 20036	20-5806345	501(C)(3)	89,180.	0.			TO SUPPORT AGROECOLOGY IMPACT: SEEDS OF RESILIENCE AND BEACONS OF HOPE AND SUSTAINABLE
NOT AN ALTERNATIVE 9719 SW 180TH ST VASHON, WA 98070	20-4018630	501(C)(3)	10,250.	0.			TO SUPPORT A SEEDING POSSIBILITIES GRANT FOR THE NATURAL HISTORY MUSEUM
OAKLAND INSTITUTE P.O. BOX 18978 OAKLAND, CA 94619-0978	42-1626352	501(C)(3)	45,000.	0.			FOR GENERAL OPERATING SUPPORT
OAKLAND PUBLIC EDUCATION FUND P.O. BOX 71005 OAKLAND, CA 94612	43-2014630	501(C)(3)	19,666.	0.			TO SUPPORT THE RADICAL MONARCHS IN ITS HIRING OF A PROGRAM MANAGER, AS DESCRIBED IN YOUR
OCCIDENTAL ARTS & ECOLOGY CENTER 15290 COLEMAN VALLEY ROAD OCCIDENTAL, CA 95465	68-0359676	501(C)(3)	15,000.	0.			TO SUPPORT CALCAN
OCEAN CONSERVATION SOCIETY P.O. BOX 12860 MARINA DEL REY, CA 90295	95-4691853	501(C)(3)	25,000.	0.			TO SUPPORT THE ONGOING MONITORING OF BOTTLENOSE DOLPHINS AND OTHER MARINE MAMMALS PRESENT IN THE
OJAI FOUNDATION P.O. BOX 999 OJAI, CA 93024	51-0151116	501(C)(3)	36,000.	0.			TO SUPPORT RECOVER AND REIMAGINE
OJAI VALLEY GREEN COALITION 206 N. SIGNAL ST., SUITE S OJAI, CA 93023	26-2157890	501(C)(3)	10,000.	0.			FOR GENERAL OPERATING SUPPORT
OMPRAKASH 2311 N 45TH ST. SEATTLE, WA 98103	20-8655418	501(C)(3)	300,000.	0.			TO SUPPORT HUMANITY CREW IN THEIR WORK TO RECONNECT AND HEAL THE BODY AND SOUL, AS PER THE

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ONEMAMA ORGANIZATION ATTN: DONATIONS, 2261 MARKET ST., # SAN FRANCISCO, CA 94114	26-1753153	501(C)(3)	100,000.	0.			FOR GENERAL OPERATING SUPPORT
ON THE MOVE 780 LINCOLN AVE NAPA, CA 94558	75-3149095	501(C)(3)	14,200.	0.			TO SUPPORT THE ARTS EXPRESSION PROGRAM WITHIN THE LEADERSHIP ACADEMY YOUTH
OPEN SPACE INSTITUTE 1350 BROADWAY, SUITE 201 NEW YORK, NY 10018	52-1053406	501(C)(3)	77,250.	0.			TO SUPPORT SEEDSHED IN ITS "REDISCOVERING OUR SHARED SEED CULTURE" PROJECT
PARTNERSHIPS FOR TRAUMA RECOVERY 1936 UNIVERSITY AVENUE, SUITE 191 BERKELEY, CA 94704	47-3948973	501(C)(3)	25,000.	0.			TO PROVIDE A SAFE SPACE FOR HEALING AND CONNECTION: ELEVATING SUPPORT FOR 'PEOPLE ON
PEACE DEVELOPMENT FUND P.O. BOX 1280 AMHERST, MA 01004-1280	04-2738794	501(C)(3)	210,000.	0.			FOR GENERAL OPERATING SUPPORT OF THE MILPA ALLIANCE
PEACE IN SCHOOLS P.O. BOX 14351 PORTLAND, OR 97293	26-3664835	501(C)(3)	60,000.	0.			FOR GENERAL OPERATING SUPPORT
PERENNIAL FARMING INITIATIVE 373 CAPP ST. SAN FRANCISCO, CA 94110	47-3642630	501(C)(3)	10,000.	0.			TO SUPPORT ZERO FOOTPRINT IN ITS CREATION OF A CLIMATE NEUTRAL DINING GUIDE
PHYSICIANS ASSOC. FOR ANTHROPOSOPHICAL MEDICINE - 481 KINGSTOWN ROAD - WAKEFIELD, RI 02879	14-1643406	501(C)(3)	8,000.	0.			WITH \$5,000 TO SUPPORT TRANSLATION OF THE ONCOLOGY SECTION OF THE VADECUM ON MISTLETOE
PHYSICIANS COMMITTEE FOR RESPONSIBLE MEDICINE - 5100 WISCONSIN AVE., N.W., SUITE 400 - WASHINGTON, DC 20016	52-1394893	501(C)(3)	150,000.	0.			FOR GENERAL OPERATING SUPPORT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PLANNED PARENTHOOD MAR MONTE DEVELOPMENT DEPARTMENT, 1605 THE AL SAN JOSE, CA 95126	94-1583439	501(C)(3)	151,000.	0.			FOR GENERAL OPERATING SUPPORT AND SECOND CENTURY CAMPAIGN
PLANTING JUSTICE 319 105TH AVENUE OAKLAND, CA 94603	27-0334905	501(C)(3)	9,004.	0.			FOR GENERAL OPERATING SUPPORT
POINT BLUE CONSERVATION SCIENCE 3820 CYPRESS DRIVE, SUITE #11 PETALUMA, CA 94954	94-1594250	501(C)(3)	15,000.	0.			FOR GENERAL OPERATING SUPPORT
PORTLAND EURYTHMY 9570 SW CYPRESS ST. BEAVERTON, OR 97005	47-1774988	501(C)(3)	5,471.	0.			TO SUPPORT SCHOLARSHIP FUNDING FOR A PROFESSIONAL EURYTHMY AND WALDORF TEACHERS
POST GROWTH INSTITUTE 156 A UNION STREET ASHLAND, OR 97520	46-2878678	501(C)(3)	6,871.	0.			TO SUPPORT THE DEVELOPMENT OF THE OFFERS AND NEEDS MARKET FACILITATOR TRAINING AND
POST OIL SOLUTIONS P.O. BOX 431 TOWNSHEND, VT 05353	03-0575791	501(C)(3)	7,000.	0.			FOR GENERAL OPERATING SUPPORT TOWARD A POST-FOSSIL FUEL WORLD
PROTECT OUR WINTERS 311 MAPLETON AVENUE BOULDER, CO 80304	20-8474909	501(C)(3)	15,000.	0.			FOR GENERAL OPERATING SUPPORT
PUEBLO OF TESUQUE AGRICULTURAL INITIATIVE - ROUTE 42 BOX 360T - SANTA FE, NM 87506		TRIBAL GOVERNMENT	75,000.	0.			TO SUPPORT DEEPENING RESILIENCE AT THE TESUQUE PUEBLO SEED CENTER
QUIVIRA COALITION 1413 SECOND STREET, SUITE 1 SANTA FE, NM 87505	31-1551770	501(C)(3)	10,000.	0.			FOR GENERAL OPERATING SUPPORT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
RACHEL'S NETWORK 1200 18TH STREET, NW, SUITE 910 WASHINGTON, DC 20036	31-1644905	501(C)(3)	6,000.	0.			FOR GENERAL OPERATING SUPPORT
REDUCETARIAN FOUNDATION 303 E. 83RD STREET, APT 8C NEW YORK, NY 10028	47-2330450	501(C)(3)	45,000.	0.			FOR GENERAL OPERATING SUPPORT
REEL STORIES 838 MANDANA BLVD OAKLAND, CA 94610	46-1982296	501(C)(3)	18,867.	0.			TO SUPPORT AFTERSCHOOL FILMMAKING PROGRAM AND WORKSHOPS FOR GIRLS IN OAKLAND, AS DESCRIBED IN
REENTRY TASK FORCE COLUMBIA COUNTY 52 GREEN STREET HUDSON, NY 12534	46-2035643	501(C)(3)	10,000.	0.			FOR GENERAL OPERATING SUPPORT
RESEARCH INSTITUTE FOR WALDORF EDUCATION - P.O. BOX 307 - WILTON, NH 03086	04-3562886	501(C)(3)	10,000.	0.			FOR PROJECT SUPPORT, AS DESCRIBED IN YOUR FUNDING PROPOSAL TO THE RUDOLF STEINER CHARITABLE TRUST
RESOURCE GENERATION 1216 BROADWAY, 2ND FLOOR NEW YORK, NY 10001	27-1847561	501(C)(3)	21,000.	0.			FOR GENERAL OPERATING SUPPORT
ROCKY MOUNTAIN PEACE AND JUSTICE CENTER - P.O. BOX 1156 - BOULDER, CO 80306	74-2302470	501(C)(3)	110,000.	0.			FOR GENERAL OPERATING SUPPORT FOR NUCLEAR NEXUS
ROSS SCHOOL FOUNDATION P.O. BOX 582 ROSS, CA 94957	94-2838271	501(C)(3)	25,000.	0.			FOR GENERAL OPERATING SUPPORT
SACRED FIRE COMMUNITY CORPORATION PO BOX 6612 LONGMONT, CO 80501	46-1354781	501(C)(3)	100,000.	0.			FOR GENERAL OPERATING SUPPORT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SAGINAW CHIPPEWA INDIAN TRIBE OF MICHIGAN - 7070 EAST BROADWAY ROAD - MOUNT PLEASANT, MI 48858	38-6178758	TRIBAL GOVERNMENT	99,983.	0.			TO SUPPORT ANISHNAABEG OGITIGAANIWAA (THE PEOPLE'S GARDEN)
SANTA CRUZ WALDORF SCHOOL 2190 EMPIRE GRADE SANTA CRUZ, CA 95060	94-2365874	501(C)(3)	25,301.	0.			TO SUPPORT THE SCHOLARSHIP FUND, IN HONOR OF JESSICA AND BRUCE KING
SECURE BEGINNINGS AT THE NAN TOLBERT CENTER - P.O. BOX 285 - OJAI, CA 93024	77-0544181	501(C)(3)	10,000.	0.			FOR GENERAL OPERATING SUPPORT
SEED SAVERS EXCHANGE 3094 NORTH WINN RD. DECORAH, IA 52101	43-1214133	501(C)(3)	15,000.	0.			FOR GENERAL OPERATING SUPPORT OF THE REMEDIATION PROJECT
SHAMBHALA MOUNTAIN CENTER 151 SHAMBHALA WAY RED FEATHER LAKES, CO 80545	84-1535130	501(C)(3)	152,000.	0.			WITH \$50,000 FOR ENVIRONMENTAL REMEDIATION, \$50,000 FOR WASTE WATER COLLECTION
SHIPIBO CONIBO CENTER 427 WEST 146TH ST. NEW YORK, NY 10031	81-1809418	501(C)(3)	25,000.	0.			TO SUPPORT THE LEGAL PROGRAM
SIERRA CLUB FOUNDATION 2101 WEBSTER ST., SUITE 1250 OAKLAND, CA 94612	94-6069890	501(C)(3)	10,000.	0.			FOR GENERAL OPERATING SUPPORT
SIMAMA INTERNATIONAL 2025 O'FARRELL STREET, APARTMENT TW SAN FRANCISCO, CA 94115	46-2721078	501(C)(3)	165,000.	0.			FOR PROJECT SUPPORT FOR THE PURCHASE OF LAND PARCEL AND THE CREATION OF A CENTER ON THAT LAND
SOCIAL AND ENVIRONMENTAL ENTREPRENEURS - 23532 CALABASAS ROAD, SUITE A - CALABASAS, CA 91302	95-4116679	501(C)(3)	33,000.	0.			TO SUPPORT MANDLOVU AND THE WORK OF MS. DEENA METZGER

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SOCIAL GOOD FUND 12651 SAN PABLO AVENUE #5473 RICHMOND, CA 94805	46-1323531	501(C)(3)	57,460.	0.			FOR GENERAL OPERATING SUPPORT OF THE WILDFIRE PROJECT
SOCIAL JUSTICE FUND NORTHWEST 1904 THIRD AVE, SUITE 806 SEATTLE, WA 98101	91-1036971	501(C)(3)	10,000.	0.			FOR GENERAL OPERATING SUPPORT
SOIL CARBON COALITION 501 SOUTH STREET ENTERPRISE, OR 97828	26-1692060	501(C)(3)	15,000.	0.			FOR GENERAL OPERATING SUPPORT
SOUL FIRE FARM INSTITUTE INC. 1972 NY HWY 2 PETERSBURG, NY 12138	47-2549969	501(C)(3)	10,000.	0.			FOR GENERAL OPERATING SUPPORT
SOUTHERN POVERTY LAW CENTER 400 WASHINGTON AVE. MONTGOMERY, AL 36104	63-0598743	501(C)(3)	10,000.	0.			TO SUPPORT THE ECONOMIC JUSTICE PROGRAM
SOUTHWEST RESEARCH AND INFORMATION CENTER - P.O. BOX 4524 - ALBUQUERQUE, NM 87196	23-7159949	501(C)(3)	7,500.	0.			TO SUPPORT NUCLEAR WATCH NEW MEXICO
SPIKENARD FARM HONEYBEE SANCTUARY 445 FLOYD HIGHWAY NORTH FLOYD, VA 24091	20-5539746	501(C)(3)	5,500.	0.			FOR PROJECT SUPPORT, AS DESCRIBED IN YOUR FUNDING PROPOSAL TO THE RUDOLF STEINER CHARITABLE TRUST
SPIRIT ROCK MEDITATION CENTER P.O. BOX 169 WOODACRE, CA 94973	94-2971001	501(C)(3)	10,950.	0.			FOR \$8,750 TO SUPPORT RETREAT 368R18 THERIGATHA TEACHINGS; TEACHER DANA: \$8000; STAFF DANA: \$250;
SPOKANE WALDORF EDUCATION ASSOCIATION - 4225 W FREMONT RD - SPOKANE, WA 99224	45-1488860	501(C)(3)	6,896.	0.			FOR HOSTING A TWO-DAY PROFESSIONAL DEVELOPMENT WORKSHOP AT WINDSONG SCHOOL, AS DESCRIBED IN

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SRI SARVESHWARI SAMOOH P.O. BOX 950 SONOMA, CA 95476	94-3151595	501(C)(3)	10,000.	0.			FOR GENERAL OPERATING SUPPORT
STANDING ROCK COMMUNITY DEVELOPMENT CORPORATION - P.O. BOX 430 - FORT YATES, ND 58538	37-1845443	501(C)(3)	200,000.	0.			TO SUPPORT PURCHASE OF THE STANDING ROCK CDC'S COMMUNITY FACILITIES AND PROJECT BUILDING
SUNBRIDGE INSTITUTE 285 HUNGRY HOLLOW ROAD SPRING VALLEY, NY 10977	13-3800725	501(C)(3)	48,623.	0.			TO SUPPORT A TEACHER TRAINING SCHOLARSHIP FUND
SUNFIELD EDUCATION ASSOCIATION P.O. BOX 85 PORT HADLOCK, WA 98339	91-1953821	501(C)(3)	7,371.	0.			TO SUPPORT FUNDING FOR THREE INDIVIDUAL ADVANCEMENT PROJECTS IN THE THREE REALMS (WALDORF
SUSTAINABLE ORGANIC INTEGRATED LIVELIHOODS (SOIL) - 124 CHURCH ROAD - SHERBURNE, NY 13460	20-8195963	501(C)(3)	15,000.	0.			FOR GENERAL OPERATING SUPPORT
SUSTAINUS, INC. 2885 SANFORD AVE SW, #26379 GRANDVILLE, MI 49418	02-0710054	501(C)(3)	10,000.	0.			FOR GENERAL OPERATING SUPPORT
SWALLOWTAIL SCHOOL INC. 460 SOUTH HEATHER ST. CORNELIUS, OR 97113	93-1301833	501(C)(3)	7,771.	0.			FOR THE FARM EDUCATOR STAFF POSITION, AS REQUESTED IN YOUR PROPOSAL
TECHBRIDGE GIRLS 114 LINDEN STREET OAKLAND, CA 94607	27-4162514	501(C)(3)	15,667.	0.			FOR GENERAL OPERATING SUPPORT OF CALIFORNIA REGIONAL PROGRAMMING, AS DESCRIBED IN YOUR
THE ARCTIC CYCLE 19 SOUTH ROAD BLOOMINGDALE, NJ 07403	46-3408963	501(C)(3)	8,000.	0.			TO SUPPORT INVOKING THE PAUSE GRANT PARTNER, THE ARCTIC CYCLE

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE BOARD OF TRUSTEES OF THE LELAND STANFORD JUNIOR UNIVERSITY - STANFORD MEDICINE, 3172 PORTER DR., SUITE 210 - PALO ALTO, CA	94-1156365	501(C)(3)	15,000.	0.			TO SUPPORT THE STANFORD EARTH FUND
THE CENTER FOR POPULAR DEMOCRACY 449 TROUTMAN STREET, SUITE A BROOKLYN, NY 11237	45-3813436	501(C)(3)	10,000.	0.			FOR GENERAL OPERATING SUPPORT
THE CONSULTATIVE GROUP ON BIOLOGICAL DIVERSITY - PO BOX 29361, 1016 TORNEY AVENUE, 2ND FLOOR - SAN FRANCISCO, CA 94129	13-3431076	501(C)(3)	24,000.	0.			FOR ADMINISTRATIVE SUPPORT OF EDC
THE CULTURAL CONSERVANCY P.O. BOX 29044 SAN FRANCISCO, CA 94129-0044	94-3003900	501(C)(3)	350,000.	0.			FOR TE HA ALLIANCE FOR INDIGENOUS SOLIDARITY AND MINO-NIIBI FUND FOR INDIGENOUS CULTURES
THE ELIB, INC. P.O. BOX 1 FREMONT, MI 49412	20-0631312	501(C)(3)	15,000.	0.			FOR PROJECT SUPPORT, AS DESCRIBED IN YOUR FUNDING PROPOSAL TO THE RUDOLF STEINER CHARITABLE TRUST
THE EQUUS PROJECTS 121 WEST 17TH STREET, APT 4B NEW YORK, NY 10011	02-0708419	501(C)(3)	7,700.	0.			FOR GENERAL OPERATING SUPPORT
THE FARM SCHOOL 488 MOORE HILL RD ATHOL, MA 01331	22-2959081	501(C)(3)	33,000.	0.			TO SUPPORT THE PVS FELLOWSHIP
THE FIELD ACADEMY 1424 5TH STREET SW, APT. B ROANOKE, VA 24016	27-5438875	501(C)(3)	9,500.	0.			TO SUPPORT INVOKING THE PAUSE GRANT PARTNER, THE FIELD ACADEMY
THE FREE IRAQ FOUNDATION 1420 N STREET NW, SUITE 102 WASHINGTON, DC 20005	52-1750875	501(C)(3)	18,096.	0.			FOR IMPLEMENTING THE SUMMER REMEDIAL CLASSES FOR DEPRIVED CHILDREN IN BAGHDAD PROGRAM

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE GOOD FOOD INSTITUTE 1380 MONROE ST., NW #229 WASHINGTON, DC 20010	81-0840578	501(C)(3)	500,000.	0.			FOR GENERAL OPERATING SUPPORT
THE GRAMMAR SCHOOL 69 HICKORY RIDGE ROAD S. PUTNEY, VT 05346	03-0211036	501(C)(3)	20,000.	0.			TO SUPPORT STUDENT FINANCIAL AID
THE INTERNATIONAL FOCUSING INSTITUTE INC. - 15 N. MILL ST., SUITE 210 - NYACK, NY 10960	36-3425089	501(C)(3)	12,000.	0.			FOR GENERAL OPERATING SUPPORT
THE MOSAIC PROJECT 478 SANTA CLARA AVE, SUITE 200 OAKLAND, CA 94610	94-3367263	501(C)(3)	17,000.	0.			TO SUPPORT THE CAPITAL CAMPAIGN
THE NATURE CONSERVANCY - COLORADO CHAPTER - 5398 MANHATTAN CIRCLE - BOULDER, CO 80303	53-0242652	501(C)(3)	25,000.	0.			FOR GENERAL OPERATING SUPPORT OF THE WORK OF THE COLORADO CHAPTER
THE NATURE INSTITUTE 20 MAY HILL ROAD GHENT, NY 12075	14-1803390	501(C)(3)	19,996.	0.			FOR THE LIVING SOILS INITIATIVE
THE PABLOVE FOUNDATION 6607 WEST SUNSET BLVD. LOS ANGELES, CA 90028	26-3006100	501(C)(3)	15,000.	0.			FOR GENERAL OPERATING SUPPORT
THE PACHAMAMA ALLIANCE P.O. BOX 29191 SAN FRANCISCO, CA 94129	94-3249793	501(C)(3)	131,000.	0.			FOR GENERAL OPERATING SUPPORT
THE POLLINATION PROJECT 1569 SOLANO AVE, #643 BERKELEY, CA 94707	46-0675457	501(C)(3)	500,000.	0.			FOR GENERAL OPERATING SUPPORT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE PRAXIS PROJECT 1001 CONNECTICUT AVE., NW, SUITE 20 WASHINGTON, DC 20036	30-0044814	501(C)(3)	25,000.	0.			TO SUPPORT THE COMMUNITY-DRIVEN SODA STRATEGY RESEARCH PROJECT AND OTHER PROJECTS
THE REGENTS OF THE UNIVERSITY OF CALIFORNIA AT BERKELEY - 2195 HEARST AVENUE, ROOM 130F - BERKELEY, CA 94720-1103	94-6002123	501(C)(3)	50,000.	0.			TO SUPPORT THE INDIGENOUS COMMUNITIES PROJECT
THE SACRED FIRE FOUNDATION INC. P.O. BOX 11014 MARINA DEL REY, CA 90295	54-2189687	501(C)(3)	100,000.	0.			FOR GENERAL OPERATING SUPPORT
THE SNAKE RIVER ALLIANCE EDUCATION FUND INC. - P.O. BOX 1731 - BOISE, ID 83701	82-0386993	501(C)(3)	20,000.	0.			FOR THE DON'T WASTE IDAHO CAMPAIGN
THE SUSTAINABLE FOOD LAB 3 LINDEN ROAD HARTLAND, VT 05048	81-1854413	501(C)(3)	20,000.	0.			FOR GENERAL OPERATING SUPPORT OF THE CLIMATE COLLABORATIVE
THE TIBET FUND 241 EAST 32 STREET NEW YORK, NY 10016	13-3115145	501(C)(3)	60,000.	0.			FOR GENERAL OPERATING SUPPORT
THOUSAND CURRENTS 1330 BROADWAY ST., SUITE 301 OAKLAND, CA 94612	77-0071852	501(C)(3)	80,000.	0.			TO SUPPORT INDIGENOUS-LED SOLUTIONS IN PERU AND SOUTH AFRICA
THREEFOLD EDUCATIONAL FOUNDATION & SCHOOL - 260 HUNGRY HOLLOW ROAD - CHESTNUT RIDGE, NY 10977	13-6196291	501(C)(3)	47,950.	0.			FOR EURYTHMY SPRING VALLEY, FOR PROJECT SUPPORT, AS DESCRIBED IN YOUR FUNDING PROPOSAL TO
THRESHOLD FOUNDATION 2875 ROUTE 35, 6N-50B KATONAH, NY 10536	13-3028214	501(C)(3)	25,500.	0.			FOR GENERAL OPERATING SUPPORT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THUNDER VALLEY COMMUNITY DEVELOPMENT CORPORATION - P.O. BOX 290 - PORCUPINE, SD 57772	20-8090454	501(C)(3)	300,000.	0.			TO SUPPORT NDN COLLECTIVE IN BUILDING THE COLLECTIVE POWER OF INDIGENOUS PEOPLES
TIDES CENTER P.O. BOX 29229 SAN FRANCISCO, CA 94129	94-3213100	501(C)(3)	47,332.	0.			FOR LEADERSHIP COUNSEL FOR JUSTICE AND ACCOUNTABILITY, VOICES FOR PROGRESS ED FUND, AND
TIDES FOUNDATION 1012 TORNEY AVE. SAN FRANCISCO, CA 94129-1755	51-0198509	501(C)(3)	64,096.	0.			FOR GENERAL OPERATING SUPPORT OF THE FLORIDA RIGHTS RESTORATION COALITION
TRANSCENDENCE THEATRE COMPANY 19201 SONOMA HIGHWAY, #214 SONOMA, CA 95476	46-2182873	501(C)(3)	15,000.	0.			FOR GENERAL OPERATING SUPPORT
TRIANGLE LAKE CENTER PO BOX 51536 WILLAMETTE STREET EUGENE, OR 97405	46-1465316	501(C)(3)	50,000.	0.			FOR GENERAL OPERATING SUPPORT, TO BE USED AT THE BOARDS DISCRETION TO SUPPORT THE PROPERTY AND
TRUST FOR CONSERVATION INNOVATION 405 14TH STREET, SUITE 164 OAKLAND, CA 94612-2705	91-2166435	501(C)(3)	27,500.	0.			FOR KITCHEN TABLE ADVISORS
TSNE MISSIONWORKS 89 SOUTH STREET, SUITE 700 BOSTON, MA 02111-2679	04-2261109	501(C)(3)	6,500.	0.			FOR GENERAL OPERATING SUPPORT OF MA VOTER TABLE
UNION OF CONCERNED SCIENTISTS TWO BRATTLE SQ. CAMBRIDGE, MA 02138-3780	04-2535767	501(C)(3)	30,000.	0.			FOR GENERAL OPERATING SUPPORT
URBAN PRAIRIE WALDORF SCHOOL 1310 S ASHLAND AVE. CHICAGO, IL 60608	77-0719824	501(C)(3)	18,219.	0.			FOR SUPPORT AS OUTLINED IN YOUR PROPOSAL

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
US FRIENDS OF THE DAVID SHELDRIK WILDLIFE TRUST - 25283 CABOT ROAD, SUITE 101 - LAGUNA HILLS, CA 92653	30-0224549	501(C)(3)	15,000.	0.			WITH \$10,000 FOR THE VETERINARY UNIT AND \$5,000 FOR THE ADOPT A SCHOOL PROGRAM
UTAH DINE BIKEYAH 352 S. DENVER ST., #315 SALT LAKE CITY, UT 84111	61-1729917	501(C)(3)	83,500.	0.			TO SUPPORT TRADITIONAL FOODS: ASSESSMENT AND REPATRIATION OF BEARS EARS NATIVE POTATOES
VALUES ADVISOR C/O MEGAN MORRICE, 81 VERNON ST APT OAKLAND, CA 94610	81-4707650		20,900.	0.			TO FUND PILOT EXPENSES
VERDE 6899 NE COLUMBIA BLVD, SUITE A PORTLAND, OR 97218	20-3685723	501(C)(3)	15,000.	0.			TO BUILD CAPACITY OF COMMUNITIES-OF-COLOR-SERVING ORGANIZATIONS TO EFFECTIVELY ENGAGE IN
VERMONT CONFERENCE OF THE UNITED CHURCH OF CHRIST - 38 CHURCH DRIVE, - GUILFORD, VT 05301	03-0179604	501(C)(3)	10,000.	0.			TO SUPPORT A WATER CATCHMENT SYSTEM FOR THE PARTNER SCHOOL IN KAIGUCHU KENYA
VERMONT LAND TRUST, INC. 8 BAILEY AVE MONTPELIER, VT 05602	03-0264836	501(C)(3)	24,211.	0.			FOR GENERAL OPERATING SUPPORT
VETERANS FOR PEACE 5519 PLUMAS AVENUE RICHMOND, CA 94804	90-0034271	501(C)(3)	18,000.	0.			SUPPORT FOR JOURNALISM CONFERENCES FOCUSED ON GETTING RID OF NATIVE AMERICAN MASCOTS IN HIGH
WABANAKI CULTURAL PRESERVATION COALITION - P.O. BOX 387 - OLD TOWN, ME 04468	81-2298507	501(C)(3)	50,000.	0.			FOR LAND PURCHASE OF NIBEZUN AND RELATED OPERATING SUPPORT
WATERKEEPER ALLIANCE 180 MAIDEN LANE, SUITE 603 NEW YORK, NY 10038	13-4071318	501(C)(3)	15,000.	0.			TO SUPPORT SECURITY TRAINING

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WESTERN RESOURCE ADVOCATES 2260 BASELINE ROAD, SUITE 200 BOULDER, CO 80302	84-1113831	501(C)(3)	25,000.	0.			FOR GENERAL OPERATING SUPPORT
WHITE MOUNTAIN APACHE TRIBE: NDEE BIKIYAA (THE PEOPLE'S FARM) - P.O. BOX 816 - FORT APACHE, AZ 85926		TRIBAL GOVERNMENT	60,000.	0.			TO SUPPORT APACHE LAND HEALS
WILDLIFE CONSERVATION NETWORK 209 MISSISSIPPI STREET SAN FRANCISCO, CA 94107	30-0108469	501(C)(3)	30,000.	0.			FOR GENERAL OPERATING SUPPORT OF SAVE THE ELEPHANTS
WINDHAM WINDSOR HOUSING TRUST 68 BIRGE STREET BRATTLEBORO, VT 05301	22-2878487	501(C)(3)	53,000.	0.			TO SUPPORT THE TIE FUND
WOMEN'S VISIONARY COUNCIL P.O. BOX 5035 BERKELEY, CA 94705	26-2743089	501(C)(3)	25,000.	0.			FOR GENERAL OPERATING SUPPORT
WOMEN WITH A VISION 1226 N. BROAD STREET NEW ORLEANS, LA 70119	72-1202185	501(C)(3)	10,000.	0.			FOR GENERAL OPERATING SUPPORT
YES! 3240 KING ST BERKELEY, CA 94703	77-0467495	501(C)(3)	13,100.	0.			FOR GENERAL OPERATING SUPPORT
YGGDRASIL LAND FOUNDATION, INC. P.O. BOX 358 BURLINGTON, WI 53105	94-3372213	501(C)(3)	61,000.	0.			FOR SUPPORT OF THE YLF SOCIAL INVESTMENT FUND AND GENERAL OPERATING SUPPORT
YOUTH PASSAGEWAYS P.O. BOX 3324 KANSAS, KS 66103	47-4750095	501(C)(3)	18,000.	0.			FOR THE 2018 SUMMIT AND GENERAL OPERATING SUPPORT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
YOUTH WITH A MISSION - SAN FRANCISCO - 357 ELLIS ST - SAN FRANCISCO, CA 94102	94-3218675	501(C)(3)	15,067.	0.			FOR BECAUSE JUSTICE MATTERS TO SUPPORT THE DANCE PROGRAM
ZEBRIN FOUNDATION 777 CONCORD AVENUE, SUITE 301 CAMBRIDGE, MA 02138	45-1808601	501(C)(3)	50,000.	0.			FOR SEED MONEY TO DESIGN A RESEARCH STUDY OF THE EFFICACY OF THE AXIAL STABILITY
ZEN PEACEMAKERS P.O. BOX 294 MONTAGUE, MA 01351	13-3030252	501(C)(3)	9,000.	0.			FOR THE BEARING WITNESS AUSCHWITZ RETREAT
U.S. FOUNDATION FOR THE UNIVERSITY OF VICTORIA - PO BOX 1700, STATION CSC - VICTORIA, BC, CANADA V8W 2Y2	31-1576136	501(C)(3)	50,000.	0.			TO SUPPORT THE NCIED "SCIENTIA: WAYS OF KNOWING" CONFERENCE ON BRINGING TOGETHER WESTERN
RSF GLOBAL COMMUNITY FUND, INC. 1002A O'REILLY AVENUE SAN FRANCISCO, CA 94129	94-3396165	501(C)(3)	93,418.	0.			FOR GENERAL OPERATING SUPPORT

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
STIPENDS FOR VARIOUS RESEARCH PROJECTS AND PROGRAMS	6	166,258.	0.		

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

PART I, LINE 2:

EACH GRANT RECIPIENT RECEIVING MORE THAN \$25,000 IS REQUIRED TO SUBMIT A REPORT WITHIN ONE YEAR FROM WHEN THE GRANT WAS DISBURSED. EACH GRANT REQUIRES THE VERIFICATION OF ELIGIBILITY AND DUE DILIGENCE. THE ORGANIZATION OBTAINS A COPY OF THE GRANTEE'S 501(C)(3) DETERMINATION LETTER OR EQUIVALENT INFORMATION (IF APPLICABLE).

PART II, LINE 1, COLUMN (H):

(H) PURPOSE OF GRANT OR ASSISTANCE: IN RESPONSE TO THE TIN CUP CHALLENGE

Part IV Supplemental Information

GRANT AS A MATCHING AMOUNT TO SUPPORT EARTHFIRE INSTITUTE

(H) PURPOSE OF GRANT OR ASSISTANCE: FOR THE ANNUAL FUND, FOR UNDOCUMENTED STUDENTS SCHOLARSHIP FUND, AND FOR THE CIVIL LIBERTIES AND PUBLIC POLICY PROGRAM

(H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT, THROUGH THE HVA, THE PUBLICATION OF AND COMMUNITY PARTICIPATION AROUND WILLIAM WARD'S BOOK, STAR OF THE SEA AND FARMSCAPE ECOLOGY PROGRAM

(H) PURPOSE OF GRANT OR ASSISTANCE: FOR PROJECT SUPPORT FOR THE PINE POINT COMMUNITY ENTERPRISE CENTER-AKIING, INCLUDING START UP ENTERPRISE TRAINING, STAFFING, ETC. FOR SOLAR AND OTHER BUSINESSES, AS WELL AS SUPPORT FOR THE CENTER ITSELF

(H) PURPOSE OF GRANT OR ASSISTANCE: FOR THE THE TAMALPAIS TRUST TRAVEL AND LEARNING FUND, WITH \$80,000 SUPPORTING PROGRAM COSTS AND \$20,000 SUPPORTING ADMINISTRATIVE COSTS, FOR 1/15/18 - 1/14/19, AS PER YOUR PROPOSAL

(H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT A BLOSSOMING POSSIBILITIES GRANT FOR SEEDS OF RESISTANCE THE FIGHT TO SAVE OUR FOOD SUPPLY

(H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT KEAUKAHA PANAWEA FARMERS ASSOCIATION (KPFA) IN THE HOULU INA COMMUNITY PROJECT

(H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT A SERIES OF INITIATIVES

Part IV Supplemental Information

AND ACTIVITIES IN LATIN AMERICA RELATED TO THE PROTECTION OF HUMAN RIGHTS
FOR INDIGENOUS PEOPLES

(H) PURPOSE OF GRANT OR ASSISTANCE: FOR PROJECT SUPPORT OF THE AMARANTH
EURYTHMY THEATER, AS DESCRIBED IN YOUR FUNDING PROPOSAL TO THE RUDOLF
STEINER CHARITABLE TRUST

(H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT ASOCIACIN AYMARA SUMA
YAPU IN ITS EFFORTS TO CONSERVE AYMARA AGRICULTURAL HERITAGE, WISDOM AND
PRACTICES

(H) PURPOSE OF GRANT OR ASSISTANCE: TO COVER A PORTION OF THE TECHNICAL
ASSISTANCE MAIN STREET PROJECT WILL BE RECEIVING FROM FORCE FOR GOOD FUND

(H) PURPOSE OF GRANT OR ASSISTANCE: FOR SHEEPSCOT GENERAL STORE IN
WHITEFIELD, TO SUPPORT BEN & TARYN IN ENHANCING THEIR EXEMPLARY MODEL OF
ORGANIC FARMING, CONSUMER EDUCATION, AND COMMUNITY INVOLVEMENT IN
BUILDING A RELOCALIZED FOOD SYSTEM IN MAINE

(H) PURPOSE OF GRANT OR ASSISTANCE: WITH \$25,000 FOR GENERAL OPERATING
SUPPORT, AND \$5,000 FOR THE MACP (MASTERS OF ARTS CONTEMPLATIVE
PSYCHOTHERAPY) SCHOLARSHIP FUND

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE FUNDS FOR VILICUS
TRAINING INSTITUTE TO SUPPORT FARMER TO FARMER EDUCATION AROUND
BIODYNAMIC AND REGENERATIVE AGRICULTURAL PRACTICES AND ADVANCE
ASSOCIATIVE RELATIONSHIPS ACROSS THE SUPPLY CHAIN

Part IV Supplemental Information

(H) PURPOSE OF GRANT OR ASSISTANCE: FOR RESTORATION FUNDS AND OPERATING SUPPORT FOR LIMAHULI GARDEN PRESERVE, AS DESCRIBED IN YOUR PROPOSAL

(H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT AGROECOLOGY IMPACT: SEEDS OF RESILIENCE AND BEACONS OF HOPE AND SUSTAINABLE AGRICULTURE & FOOD SYSTEMS FUNDERS

(H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT THE RADICAL MONARCHS IN ITS HIRING OF A PROGRAM MANAGER, AS DESCRIBED IN YOUR PROPOSAL

(H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT THE ONGOING MONITORING OF BOTTLENOSE DOLPHINS AND OTHER MARINE MAMMALS PRESENT IN THE INSHORE WATERS OF SANTA MONICA BAY, CALIFORNIA, AS DESCRIBED IN THE PROJECT PROPOSAL

(H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT HUMANITY CREW IN THEIR WORK TO RECONNECT AND HEAL THE BODY AND SOUL, AS PER THE PROPOSAL

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE A SAFE SPACE FOR HEALING AND CONNECTION: ELEVATING SUPPORT FOR 'PEOPLE ON THE MOVE' TO A HOLISTIC LEVEL THROUGH CULTURALLY INFORMED AND TRAUMA-SENSITIVE HEALING

(H) PURPOSE OF GRANT OR ASSISTANCE: WITH \$5,000 TO SUPPORT TRANSLATION OF THE ONCOLOGY SECTION OF THE VADECUM ON MISTLETOE THERAPY, AND \$3,000 FOR PRODUCTION AND DISTRIBUTION TO WALDORF SCHOOLS AND YOUNG DOCTORS ABOUT ANTHROPOSOPHICAL HEALTH PROFESSIONS AND TRAINING

(H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT SCHOLARSHIP FUNDING FOR A

Part IV Supplemental Information

PROFESSIONAL EURYTHMY AND WALDORF TEACHERS CONFERENCE, AS PER YOUR PROPOSAL

(H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT THE DEVELOPMENT OF THE OFFERS AND NEEDS MARKET FACILITATOR TRAINING AND SCHOLARSHIPS FOR THE PROGRAM, AS PER YOUR PROPOSAL

(H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT AFTERSCHOOL FILMMAKING PROGRAM AND WORKSHOPS FOR GIRLS IN OAKLAND, AS DESCRIBED IN YOUR PROPOSAL

(H) PURPOSE OF GRANT OR ASSISTANCE: WITH \$50,000 FOR ENVIRONMENTAL REMEDIATION, \$50,000 FOR WASTE WATER COLLECTION SYSTEM, AND \$2,000 FOR GENERAL OPERATING SUPPORT

(H) PURPOSE OF GRANT OR ASSISTANCE: FOR \$8,750 TO SUPPORT RETREAT 368R18 THERIGATHA TEACHINGS; TEACHER DANA: \$8000; STAFF DANA: \$250; SRMC: \$500

(H) PURPOSE OF GRANT OR ASSISTANCE: FOR HOSTING A TWO-DAY PROFESSIONAL DEVELOPMENT WORKSHOP AT WINDSONG SCHOOL, AS DESCRIBED IN YOUR PROPOSAL

(H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT FUNDING FOR THREE INDIVIDUAL ADVANCEMENT PROJECTS IN THE THREE REALMS (WALDORF SCHOOL, BIODYNAMIC FARM, COMMUNITY EDUCATION), AS PER YOUR PROPOSAL

(H) PURPOSE OF GRANT OR ASSISTANCE: FOR GENERAL OPERATING SUPPORT OF CALIFORNIA REGIONAL PROGRAMMING, AS DESCRIBED IN YOUR PROPOSAL

(H) PURPOSE OF GRANT OR ASSISTANCE: FOR TE HA ALLIANCE FOR INDIGENOUS

Part IV Supplemental Information

SOLIDARITY AND MINO-NIIBI FUND FOR INDIGENOUS CULTURES REGRANTING FUND

(H) PURPOSE OF GRANT OR ASSISTANCE: FOR EURYTHMY SPRING VALLEY, FOR PROJECT SUPPORT, AS DESCRIBED IN YOUR FUNDING PROPOSAL TO THE RUDOLF STEINER CHARITABLE TRUST

(H) PURPOSE OF GRANT OR ASSISTANCE: FOR LEADERSHIP COUNSEL FOR JUSTICE AND ACCOUNTABILITY, VOICES FOR PROGRESS ED FUND, AND GENERAL OPERATING OF OTHER FUNDS

(H) PURPOSE OF GRANT OR ASSISTANCE: FOR GENERAL OPERATING SUPPORT, TO BE USED AT THE BOARDS DISCRETION TO SUPPORT THE PROPERTY AND ITS FUTURE USE

(H) PURPOSE OF GRANT OR ASSISTANCE: TO BUILD CAPACITY OF COMMUNITIES-OF-COLOR-SERVING ORGANIZATIONS TO EFFECTIVELY ENGAGE IN ENVIRONMENTAL PROTECTION CAMPAIGNS AND DELIVER NEW INVESTMENTS FROM SUCH CAMPAIGNS THROUGH SOCIAL ENTERPRISES

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPORT FOR JOURNALISM CONFERENCES FOCUSED ON GETTING RID OF NATIVE AMERICAN MASCOTS IN HIGH SCHOOLS

(H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT THE NCIED "SCIENTIA: WAYS OF KNOWING" CONFERENCE ON BRINGING TOGETHER WESTERN SCIENCE AND INDIGENOUS KNOWLEDGE

**SCHEDULE J
(Form 990)**

Compensation Information

OMB No. 1545-0047

2018

Open to Public Inspection

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
 ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
 ▶ Attach to Form 990.
 ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Department of the Treasury
Internal Revenue Service

Name of the organization: **RUDOLF STEINER FOUNDATION, INC.**
 Employer identification number: **13-6082763**

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.

- | | |
|--|--|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> 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 filing 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.

- | | |
|---|---|
| <input checked="" type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input checked="" type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input checked="" type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> 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:

- a** Receive a severance payment or change-of-control payment?
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?
- c** 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.

Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.

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:

- a** The organization?
- b** Any related 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:

- a** The organization?
- b** Any related 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)?

	Yes	No
1a		
1b		
2		
3		
4a		X
4b		X
4c		X
5a		X
5b		X
6a		X
6b		X
7		X
8		X
9		

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

Schedule J (Form 990) 2018

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) JASPER J. VAN BRAKEL CEO/TRUSTEE	(i)	268,265.	0.	68,120.	0.	21,590.	357,975.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) MARK FINSER CHAIR THROUGH 6/2018 / DIRECTOR	(i)	0.	0.	0.	0.	0.	0.	0.
	(ii)	149,653.	0.	70,476.	1,875.	22,477.	244,481.	0.
(3) CHRIS COOK CFO AND TREASURER	(i)	179,670.	0.	0.	0.	0.	179,670.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) TIM GREEN SECRETARY AND GENERAL COUNSEL	(i)	157,810.	0.	0.	3,500.	13,048.	174,358.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) KATRINA STEFFEK CHIEF OPERATING OFFICER	(i)	229,040.	0.	0.	3,500.	9,356.	241,896.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) JOHN BLOOM VP, ORGANIZATIONAL CULTURE	(i)	183,633.	0.	0.	3,500.	15,260.	202,393.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) SUSIE LEE CHIEF INVESTMENT OFFICER	(i)	228,255.	0.	0.	3,500.	22,807.	254,562.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) DEBORAH NELSON VP, CLIENT AND COMMUNITY ENGAGEMENT	(i)	159,955.	0.	0.	3,500.	20,163.	183,618.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(9) KATE DANAHER SR. MGR., SOCIAL ENT/INTEGRATED CAP	(i)	150,000.	0.	0.	3,500.	8,102.	161,602.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(10) LYNNE HOEY SR. DIRECTOR, CREDIT & LOAN ADMIN	(i)	139,480.	0.	0.	3,500.	13,908.	156,888.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(11) MELINDA CHEEL SENIOR DIRECTOR, MARKETING	(i)	137,346.	0.	0.	3,500.	9,208.	150,054.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

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.

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2018

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

- ▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
- ▶ Attach to Form 990.
- ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization **RUDOLF STEINER FOUNDATION, INC.** Employer identification number **13-6082763**

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded	X	40	11,437,712.	FAIR MARKET VALUE
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other (NET ASSET BAL)	X	2	27,792,513.	FAIR MARKET VALUE
26 Other ()				
27 Other ()				
28 Other ()				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement **29** **0**

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?	X	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		X
b If "Yes," describe in Part II.		
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule M (Form 990) 2018

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

SCHEDULE M, PART I, COLUMN (B):

THE NUMBER OF ITEMS CONTRIBUTED (DEFINED AS EACH SEPARATE GIFT, RATHER THAN EACH SHARE RECEIVED) IS BEING REPORTED IN SCHEDULE M, PART I, COLUMN (B).

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

2018

Open to Public
Inspection

Name of the organization

RUDOLF STEINER FOUNDATION, INC.

Employer identification number

13-6082763

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

ENTREPRENEURS WITH DIVERSE FORMS OF CAPITAL; AND (3) EMPOWERING LEADERS
AND ADVANCING INNOVATIONS IN THE FIELD OF SOCIAL FINANCE.

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

MARK A. FINSER (CHAIR PERSON) AND SIEGRIED E. FINSER (TRUSTEE) HAVE A
FAMILY RELATIONSHIP.

FORM 990, PART VI, SECTION A, LINE 3:

CHRIS COOK WAS HIRED TO FULFILL THE DUTIES OF CFO AS AN INDEPENDENT
CONTRACTOR DURING THE 2018 TAX YEAR. COMPENSATION PAID TO CHRIS COOK
DURING 2018 IN FULFILLMENT OF THESE SERVICES TOTALED \$179,670.

FORM 990, PART VI, SECTION B, LINE 11B:

THE FORM 990 WAS PREPARED BY AN INDEPENDENT TAX PREPARER IN CONJUNCTION
WITH THE ORGANIZATION'S FINANCE AND ACCOUNTING STAFF. THE CFO, GENERAL
COUNSEL, AND CONTROLLER THEN REVIEW A DRAFT OF THE FORM 990 AND ADJUSTMENTS
OR REVISIONS ARE MADE, AS NECESSARY. THE COMPLETED FORM 990 WAS THEN
DISTRIBUTED TO THE AUDIT COMMITTEE FOR REVIEW. THEREAFTER, A FINAL COPY OF
THE FORM 990 IS PROVIDED TO ALL BOARD MEMBERS PRIOR TO FILING WITH THE
INTERNAL REVENUE SERVICE.

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

ALL TRUSTEES AND SENIOR STAFF (INCLUDING OFFICERS AND KEY EMPLOYEES) ARE
REQUIRED TO COMPLETE AND SIGN ANNUAL CONFLICT OF INTEREST DISCLOSURE
STATEMENTS WHICH: (I) DISCLOSE ANY RELATIONSHIPS, POSITIONS, OR OTHER

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

Schedule O (Form 990 or 990-EZ) (2018)

Name of the organization RUDOLF STEINER FOUNDATION, INC.	Employer identification number 13-6082763
---	--

CIRCUMSTANCES THAT COULD POTENTIALLY CONSTITUTE A CONFLICT OF INTEREST;
 (II) ACKNOWLEDGE RECEIPT AND UNDERSTANDING OF THE FULL CONFLICT OF INTEREST
 POLICY; AND (III) AFFIRM THAT THEY WILL COMPLY WITH THE CONFLICT OF
 INTEREST POLICY. ANY ALLEGED BREACHES OF THE CONFLICT OF INTEREST POLICY
 ARE REPORTED TO THE AUDIT COMMITTEE, WHO DETERMINE WHETHER THERE IS A
 CONFLICT OF INTEREST, REVIEW AND INVESTIGATE, AND RECOMMEND COURSE OF
 ACTION. THE PERSON WITH WHICH A CONFLICT MIGHT EXIST IS NOT ALLOWED TO
 VOTE ON THE TRANSACTION OR OTHERWISE TRY TO INFLUENCE THE DECISION-MAKERS.
 THE AUDIT COMMITTEE'S DECISION IN REGARDS TO THE MATTER IS DOCUMENTED IN
 THE MINUTES OF COMMITTEE MEETING.

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

THE ORGANIZATION UTILIZES A BOARD COMPENSATION COMMITTEE; COMMITTEE MEMBERS
 DISCUSS THE COMPENSATION FOR THE CEO, OFFICERS, AND KEY EMPLOYEES IN THE
 COMMITTEE MEETING. THE COMMITTEE UTILIZES COMPARABILITY DATA FROM OTHER
 EXEMPT ORGANIZATIONS AND AN OUTSIDE CONSULTANT IN DETERMINING COMPENSATION.
 ALL MEETINGS OF THE COMPENSATION COMMITTEE ARE DOCUMENTED
 CONTEMPORANEOUSLY. THIS PROCESS IS PERFORMED ANNUALLY.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:

AL, AK, AZ, CA, CO, CT, DC, DE, FL, HI, ID, IN, KS, KY, LA, MA, MD, ME, MI, MN, MS, MT, NC, ND, NE
 NH, NJ, NM, NY, OK, OR, PA, RI, SC, SD, TN, TX, VA, VT, WA, WI, WV

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

THE ORGANIZATION'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND
 FINANCIAL STATEMENTS ARE MADE AVAILABLE TO THE GENERAL PUBLIC UPON REQUEST.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

**SCHEDULE R
(Form 990)**

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

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

▶ Attach to Form 990.

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

OMB No. 1545-0047

2018

Open to Public Inspection

Name of the organization **RUDOLF STEINER FOUNDATION, INC.** Employer identification number **13-6082763**

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

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

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
RSF SOCIAL INVESTMENT FUND - 36-4385559 1002A O'REILLY AVENUE SAN FRANCISCO, CA 94129	MISSION-RELATED LOANS ON BEHALF OF RSF	CALIFORNIA	501(C)(3)	LINE 12A, I	RUDOLF STEINER FOUNDATION	X	
RSF GLOBAL COMMUNITY FUND - 94-3396165 1002A O'REILLY AVENUE SAN FRANCISCO, CA 94129	GRANTMAKING ON BEHALF OF RSF	CALIFORNIA	501(C)(3)	LINE 12A, I	RUDOLF STEINER FOUNDATION	X	
YGGDRASIL LAND FOUNDATION, INC. - 94-3372213 1002A O'REILLY AVENUE SAN FRANCISCO, CA 94129	PROTECT FARMLAND, CREATE LAND ACCESS	CALIFORNIA	501(C)(3)	LINE 12A, I	N/A		X
GINUNGAGAP FOUNDATION - 20-1402909 235 MONTGOMERY STREET, 17TH FLOOR SAN FRANCISCO, CA 94104	SUPPORT AND OPERATE PROGRAMS OF RSF	CALIFORNIA	501(C)(3)	LINE 12A, I	RUDOLF STEINER FOUNDATION	X	

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

Schedule R (Form 990) 2018

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
RSF CHARITABLE ASSET MANAGEMENT, LLC - 20-2430499, 1002A O'REILLY AVENUE, SAN FRANCISCO, CA 94129	MANAGEMENT OF PHILANTHROPIC FUNDS / INVESTMENTS	CA	RUDOLF STEINER FOUNDATION, INC.	EXCLUDED	71,518.	0.		X	-14.		X	87.40%
RSF MEZZANINE FUND, LP - 26-3080457, 1002A O'REILLY AVENUE, SAN FRANCISCO, CA 94129	LOANS, INVESTMENTS, AND WARRANT POSITIONS	DE	RSF MEZZANINE MANAGEMENT, LLC	EXCLUDED	-49,505.	0.		X	N/A		X	9.91%

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
RSF SOCIAL ENTERPRISE, INC. - 26-0663311 1002A O'REILLY AVENUE SAN FRANCISCO, CA 94129	LOANS TO SOCIALLY BENEFICIAL FOR-PROFIT ENTITIES	CA	RSF CAPITAL MANAGEMENT, PBC	C CORP	0.	0.	100%	X	
RSF CAPITAL MANAGEMENT, PBC - 26-3080292 1002A O'REILLY AVENUE SAN FRANCISCO, CA 94129	MANAGING FOR-PROFIT ACTIVITIES ON BEHALF OF RSF	DE	RUDOLF STEINER FOUNDATION, INC.	C CORP	0.	3,984,879.	100%	X	

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?

	Yes	No
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity		X
b Gift, grant, or capital contribution to related organization(s)	X	
c Gift, grant, or capital contribution from related organization(s)		X
d Loans or loan guarantees to or for related organization(s)	X	
e Loans or loan guarantees by related organization(s)	X	
f Dividends from related organization(s)		X
g Sale of assets to related organization(s)		X
h Purchase of assets from related organization(s)		X
i Exchange of assets with related organization(s)		X
j Lease of facilities, equipment, or other assets to related organization(s)		X
k Lease of facilities, equipment, or other assets from related organization(s)		X
l Performance of services or membership or fundraising solicitations for related organization(s)		X
m Performance of services or membership or fundraising solicitations by related organization(s)		X
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	X	
o Sharing of paid employees with related organization(s)	X	
p Reimbursement paid to related organization(s) for expenses		X
q Reimbursement paid by related organization(s) for expenses		X
r Other transfer of cash or property to related organization(s)		X
s Other transfer of cash or property from related organization(s)	X	

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

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) RSF CAPITAL MANAGEMENT, PBC	D	3,058,681.	BOOK VALUE
(2) RSF CAPITAL MANAGEMENT, PBC	O	409,762.	BOOK VALUE
(3) RSF GLOBAL COMMUNITY FUND	B	93,418.	BOOK VALUE
(4) RSF GLOBAL COMMUNITY FUND	D	54,057.	BOOK VALUE
(5) RSF GLOBAL COMMUNITY FUND	E	99,422.	BOOK VALUE
(6) RSF GLOBAL COMMUNITY FUND	S	3,063,677.	BOOK VALUE OF NET ASSETS

Part V Continuation of Transactions With Related Organizations (Schedule R (Form 990), Part V, line 2)

(a) Name of other organization	(b) Transaction type (a-r)	(c) Amount involved	(d) Method of determining amount involved
(7) RSF SOCIAL INVESTMENT FUND	D	34,505,399.	BOOK VALUE
(8) RSF SOCIAL INVESTMENT FUND	E	56,728,441.	BOOK VALUE
(9) RSF SOCIAL INVESTMENT FUND	O	2,161,565.	BOOK VALUE
(10) RSF CHARITABLE ASSET MANAGEMENT, LLC	S	62,108,554.	BOOK VALUE OF NET ASSETS
(11) GINUNGAGAP FOUNDATION	B	350,000.	BOOK VALUE
(12)			
(13)			
(14)			
(15)			
(16)			
(17)			
(18)			
(19)			
(20)			
(21)			
(22)			
(23)			
(24)			

Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners sec. 501(c)(3) orgs.?		(f) Share of total income	(g) Share of end-of-year assets	(h) Dispropor- tionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	

Part VII Supplemental Information.

Provide additional information for responses to questions on Schedule R. See instructions.

Multiple horizontal lines for supplemental information.

Exempt Organization Business Income Tax Return
(and proxy tax under section 6033(e))

2018

For calendar year 2018 or other tax year beginning _____, and ending _____

▶ Go to www.irs.gov/Form990T for instructions and the latest information.

▶ Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

Open to Public Inspection for 501(c)(3) Organizations Only

Department of the Treasury
Internal Revenue Service

<p>A <input type="checkbox"/> Check box if address changed</p> <p>B Exempt under section <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 408(e) <input type="checkbox"/> 220(e) <input type="checkbox"/> 408A <input type="checkbox"/> 530(a) <input type="checkbox"/> 529(a)</p>	Print or Type	<p>Name of organization (<input type="checkbox"/> Check box if name changed and see instructions.) RUDOLF STEINER FOUNDATION, INC.</p> <p>Number, street, and room or suite no. If a P.O. box, see instructions. 1002A O'REILLY AVENUE</p> <p>City or town, state or province, country, and ZIP or foreign postal code SAN FRANCISCO, CA 94129-0915</p>	<p>D Employer identification number (Employees' trust, see instructions.) 13-6082763</p> <p>E Unrelated business activity code (See instructions.) 523000</p>
---	---------------------	--	---

C Book value of all assets at end of year **207,417,473.**

F Group exemption number (See instructions.) ▶ _____

G Check organization type ▶ 501(c) corporation 501(c) trust 401(a) trust Other trust

H Enter the number of the organization's unrelated trades or businesses. ▶ **3** Describe the only (or first) unrelated trade or business here ▶ **SEE STATEMENT 1**. If only one, complete Parts I-V. If more than one, describe the first in the blank space at the end of the previous sentence, complete Parts I and II, complete a Schedule M for each additional trade or business, then complete Parts III-V.

I During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? Yes No
If "Yes," enter the name and identifying number of the parent corporation. ▶ _____

J The books are in care of ▶ **APRIL HINES** Telephone number ▶ **(415) 561-3900**

Part I Unrelated Trade or Business Income	(A) Income	(B) Expenses	(C) Net
1a Gross receipts or sales			
b Less returns and allowances			
c Balance	1c		
2 Cost of goods sold (Schedule A, line 7)	2		
3 Gross profit. Subtract line 2 from line 1c	3		
4a Capital gain net income (attach Schedule D)	4a		
b Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	4b		
c Capital loss deduction for trusts	4c		
5 Income (loss) from a partnership or an S corporation (attach statement)	5		
6 Rent income (Schedule C)	6		
7 Unrelated debt-financed income (Schedule E)	7		
8 Interest, annuities, royalties, and rents from a controlled organization (Schedule F)	8		
9 Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G)	9		
10 Exploited exempt activity income (Schedule I)	10		
11 Advertising income (Schedule J)	11		
12 Other income (See instructions; attach schedule) STATEMENT 2	12 135,616.		135,616.
13 Total. Combine lines 3 through 12	13 135,616.		135,616.

Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions.)
(Except for contributions, deductions must be directly connected with the unrelated business income.)

14 Compensation of officers, directors, and trustees (Schedule K)	14	39,932.
15 Salaries and wages	15	
16 Repairs and maintenance	16	
17 Bad debts	17	
18 Interest (attach schedule) (see instructions)	18	
19 Taxes and licenses	19	3,160.
20 Charitable contributions (See instructions for limitation rules) STATEMENT 5 SEE STATEMENT 3	20	9,267.
21 Depreciation (attach Form 4562)	21	
22 Less depreciation claimed on Schedule A and elsewhere on return	22a	
23 Depletion	23	
24 Contributions to deferred compensation plans	24	
25 Employee benefit programs	25	6,626.
26 Excess exempt expenses (Schedule I)	26	
27 Excess readership costs (Schedule J)	27	
28 Other deductions (attach schedule) SEE STATEMENT 4	28	8,405.
29 Total deductions. Add lines 14 through 28	29	67,390.
30 Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13	30	68,226.
31 Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see instructions)	31	
32 Unrelated business taxable income. Subtract line 31 from line 30	32	68,226.

Part III Total Unrelated Business Taxable Income			
33	Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions)	33	68,226.
34	Amounts paid for disallowed fringes	34	16,176.
35	Deduction for net operating loss arising in tax years beginning before January 1, 2018 (see instructions)	35	
36	Total of unrelated business taxable income before specific deduction. Subtract line 35 from the sum of lines 33 and 34	36	84,402.
37	Specific deduction (Generally \$1,000, but see line 37 instructions for exceptions)	37	1,000.
38	Unrelated business taxable income. Subtract line 37 from line 36. If line 37 is greater than line 36, enter the smaller of zero or line 36	38	83,402.

Part IV Tax Computation			
39	Organizations Taxable as Corporations. Multiply line 38 by 21% (0.21)	39	17,514.
40	Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount on line 38 from: <input type="checkbox"/> Tax rate schedule or <input type="checkbox"/> Schedule D (Form 1041)	40	
41	Proxy tax. See instructions	41	
42	Alternative minimum tax (trusts only)	42	
43	Tax on Noncompliant Facility Income. See instructions	43	
44	Total. Add lines 41, 42, and 43 to line 39 or 40, whichever applies	44	17,514.

Part V Tax and Payments			
45a	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)	45a	
b	Other credits (see instructions)	45b	
c	General business credit. Attach Form 3800	45c	
d	Credit for prior year minimum tax (attach Form 8801 or 8827)	45d	
e	Total credits. Add lines 45a through 45d	45e	
46	Subtract line 45e from line 44	46	17,514.
47	Other taxes. Check if from: <input type="checkbox"/> Form 4255 <input type="checkbox"/> Form 8611 <input type="checkbox"/> Form 8697 <input type="checkbox"/> Form 8866 <input type="checkbox"/> Other (attach schedule)	47	
48	Total tax. Add lines 46 and 47 (see instructions)	48	17,514.
49	2018 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 2	49	0.
50a	Payments: A 2017 overpayment credited to 2018	50a	
b	2018 estimated tax payments	50b	
c	Tax deposited with Form 8868	50c	6,000.
d	Foreign organizations: Tax paid or withheld at source (see instructions)	50d	
e	Backup withholding (see instructions)	50e	
f	Credit for small employer health insurance premiums (attach Form 8941)	50f	
g	Other credits, adjustments, and payments: <input type="checkbox"/> Form 2439 <input type="checkbox"/> Form 4136 <input type="checkbox"/> Other Total	50g	
51	Total payments. Add lines 50a through 50g	51	6,000.
52	Estimated tax penalty (see instructions). Check if Form 2220 is attached <input checked="" type="checkbox"/>	52	14.
53	Tax due. If line 51 is less than the total of lines 48, 49, and 52, enter amount owed STATEMENT 6	53	11,528.
54	Overpayment. If line 51 is larger than the total of lines 48, 49, and 52, enter amount overpaid	54	
55	Enter the amount of line 54 you want: Credited to 2019 estimated tax <input type="checkbox"/> Refunded <input type="checkbox"/>	55	

Part VI Statements Regarding Certain Activities and Other Information (see instructions)		Yes	No
56	At any time during the 2018 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country here		X
57	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If "Yes," see instructions for other forms the organization may have to file.		X
58	Enter the amount of tax-exempt interest received or accrued during the tax year \$		

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

Signature of officer	Date	CFO	Title	May the IRS discuss this return with the preparer shown below (see instructions)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				
				Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
Paid Preparer Use Only		TRACY S. PAGLIA		TRACY S. PAGLIA	11/14/19	<input type="checkbox"/>		P00366884
Firm's name MOSS ADAMS LLP				Firm's EIN 91-0189318				
Firm's address 101 SECOND STREET SUITE 900				Firm's EIN 91-0189318				
Firm's address SAN FRANCISCO, CA 94105				Phone no. 415-956-1500				

Schedule A - Cost of Goods Sold. Enter method of inventory valuation **N/A**

1	Inventory at beginning of year	1		6	Inventory at end of year	6			
2	Purchases	2		7	Cost of goods sold. Subtract line 6 from line 5. Enter here and in Part I, line 2	7			
3	Cost of labor	3		8	Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization?		Yes	No	
4a	Additional section 263A costs (attach schedule)	4a							
b	Other costs (attach schedule)	4b							
5	Total. Add lines 1 through 4b	5							

Schedule C - Rent Income (From Real Property and Personal Property Leased With Real Property)

(see instructions)

1. Description of property

(1)	
(2)	
(3)	
(4)	

2. Rent received or accrued

(a) From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)	(b) From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income)	3(a) Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule)
(1)		
(2)		
(3)		
(4)		
Total	0.	Total 0.

(c) Total income. Add totals of columns 2(a) and 2(b). Enter here and on page 1, Part I, line 6, column (A) **0.**

(b) Total deductions. Enter here and on page 1, Part I, line 6, column (B) **0.**

Schedule E - Unrelated Debt-Financed Income (see instructions)

1. Description of debt-financed property	2. Gross income from or allocable to debt-financed property	3. Deductions directly connected with or allocable to debt-financed property		
		(a) Straight line depreciation (attach schedule)	(b) Other deductions (attach schedule)	
(1)				
(2)				
(3)				
(4)				
4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	5. Average adjusted basis of or allocable to debt-financed property (attach schedule)	6. Column 4 divided by column 5	7. Gross income reportable (column 2 x column 6)	8. Allocable deductions (column 6 x total of columns 3(a) and 3(b))
(1)		%		
(2)		%		
(3)		%		
(4)		%		
Totals			Enter here and on page 1, Part I, line 7, column (A). 0.	Enter here and on page 1, Part I, line 7, column (B). 0.
Total dividends-received deductions included in column 8			0.	0.

Schedule F - Interest, Annuities, Royalties, and Rents From Controlled Organizations (see instructions)

1. Name of controlled organization	2. Employer identification number	Exempt Controlled Organizations			
		3. Net unrelated income (loss) (see instructions)	4. Total of specified payments made	5. Part of column 4 that is included in the controlling organization's gross income	6. Deductions directly connected with income in column 5
(1)					
(2)					
(3)					
(4)					

Nonexempt Controlled Organizations

7. Taxable income	8. Net unrelated income (loss) (see instructions)	9. Total of specified payments made	10. Part of column 9 that is included in the controlling organization's gross income	11. Deductions directly connected with income in column 10
(1)				
(2)				
(3)				
(4)				
			Add columns 5 and 10. Enter here and on page 1, Part I, line 8, column (A).	Add columns 6 and 11. Enter here and on page 1, Part I, line 8, column (B).
Totals			0.	0.

Schedule G - Investment Income of a Section 501(c)(7), (9), or (17) Organization (see instructions)

1. Description of income	2. Amount of income	3. Deductions directly connected (attach schedule)	4. Set-asides (attach schedule)	5. Total deductions and set-asides (col. 3 plus col. 4)
(1)				
(2)				
(3)				
(4)				
		Enter here and on page 1, Part I, line 9, column (A).		Enter here and on page 1, Part I, line 9, column (B).
Totals		0.		0.

Schedule I - Exploited Exempt Activity Income, Other Than Advertising Income (see instructions)

1. Description of exploited activity	2. Gross unrelated business income from trade or business	3. Expenses directly connected with production of unrelated business income	4. Net income (loss) from unrelated trade or business (column 2 minus column 3). If a gain, compute cols. 5 through 7.	5. Gross income from activity that is not unrelated business income	6. Expenses attributable to column 5	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						
	Enter here and on page 1, Part I, line 10, col. (A).	Enter here and on page 1, Part I, line 10, col. (B).				Enter here and on page 1, Part II, line 26.
Totals	0.	0.				0.

Schedule J - Advertising Income (see instructions)

Part I Income From Periodicals Reported on a Consolidated Basis

1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						
Totals (carry to Part II, line (5))	0.	0.				0.

Part II **Income From Periodicals Reported on a Separate Basis** (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis.)

1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						
Totals from Part I	0.	0.				0.
Totals, Part II (lines 1-5)	Enter here and on page 1, Part I, line 11, col. (A). 0.	Enter here and on page 1, Part I, line 11, col. (B). 0.				Enter here and on page 1, Part II, line 27. 0.

Schedule K - Compensation of Officers, Directors, and Trustees (see instructions)

1. Name	2. Title	3. Percent of time devoted to business	4. Compensation attributable to unrelated business
(1)		%	
(2)		%	
(3)		%	
(4)		%	
Total. Enter here and on page 1, Part II, line 14			0.

FORM 990-T DESCRIPTION OF ORGANIZATION'S PRIMARY UNRELATED BUSINESS ACTIVITY STATEMENT 1

INTEREST INCOME - NON-PROGRAM LOANS

TO FORM 990-T, PAGE 1

FORM 990-T OTHER INCOME STATEMENT 2

DESCRIPTION	AMOUNT
INTEREST INCOME FROM NON-PROGRAM LOANS	135,616.
TOTAL TO FORM 990-T, PAGE 1, LINE 12	135,616.

FORM 990-T CONTRIBUTIONS STATEMENT 3

DESCRIPTION/KIND OF PROPERTY	METHOD USED TO DETERMINE FMV	AMOUNT
CHARITABLE CONTRIBUTIONS FROM 501(C)(3)S IN 2018	N/A	13,949,238.
TOTAL TO FORM 990-T, PAGE 1, LINE 20		13,949,238.

FORM 990-T OTHER DEDUCTIONS STATEMENT 4

DESCRIPTION	AMOUNT
TAX PREPARATION FEES	500.
TEMPORARY SERVICES	1,213.
STAFF EDUCATION, TRAINING, SEMINARS	358.
CONFERENCE FEES	278.
TRAVEL	1,872.
EVENTS & MEETINGS	19.
MEMBERSHIP EXPENSES	746.
INFORMATION TECHNOLOGY EXPENSES	1,168.
OFFICE EXPENSES	35.
DUES AND SUBSCRIPTIONS	398.
COLLATERAL EXAMINATION FEES	2.
PROGRAM CONSULTANTS	1,816.
TOTAL TO FORM 990-T, PAGE 1, LINE 28	8,405.

FORM 990-T	CONTRIBUTIONS SUMMARY	STATEMENT 5
QUALIFIED CONTRIBUTIONS SUBJECT TO 100% LIMIT		
CARRYOVER OF PRIOR YEARS UNUSED CONTRIBUTIONS		
	11,244,760	
TOTAL CARRYOVER		11,244,760
TOTAL CURRENT YEAR 10% CONTRIBUTIONS		13,949,238
TOTAL CONTRIBUTIONS AVAILABLE		25,193,998
TAXABLE INCOME LIMITATION AS ADJUSTED		9,267
EXCESS 10% CONTRIBUTIONS		25,184,731
EXCESS 100% CONTRIBUTIONS		0
TOTAL EXCESS CONTRIBUTIONS		25,184,731
ALLOWABLE CONTRIBUTIONS DEDUCTION		9,267
TOTAL CONTRIBUTION DEDUCTION		9,267

FORM 990-T	INTEREST AND PENALTIES	STATEMENT 6
TAX FROM FORM 990-T, PART IV		11,514.
UNDERPAYMENT PENALTY		14.
LATE PAYMENT INTEREST		308.
LATE PAYMENT PENALTY		345.
TOTAL AMOUNT DUE		12,181.

FORM 990-T	LATE PAYMENT INTEREST				STATEMENT 7
DESCRIPTION	DATE	AMOUNT	BALANCE	RATE	DAYS INTEREST
TAX DUE	05/15/19	17,514.	17,514.	.0600	
EXTENSION PAYMENT	05/15/19	-6,000.	11,514.	.0600	46 87.
INTEREST RATE CHANGE	06/30/19	0.	11,601.	.0500	138 221.
DATE FILED	11/15/19		11,822.		
TOTAL LATE PAYMENT INTEREST					308.

FORM 990-T

LATE PAYMENT PENALTY

STATEMENT 8

DESCRIPTION	DATE	AMOUNT	BALANCE	MONTHS	PENALTY
TAX DUE	05/15/19	11,514.	11,514.	6	345.
DATE FILED	11/15/19		11,514.		
TOTAL LATE PAYMENT PENALTY					345.

**SCHEDULE M
(Form 990-T)**

**Unrelated Business Taxable Income for
Unrelated Trade or Business**

ENTITY 1

OMB No. 1545-0687

2018

Department of the Treasury
Internal Revenue Service (99)

For calendar year 2018 or other tax year beginning _____, and ending _____.

▶ Go to www.irs.gov/Form990T for instructions and the latest information.

▶ Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

Open to Public Inspection for
501(c)(3) Organizations Only

Name of the organization **RUDOLF STEINER FOUNDATION, INC.** Employer identification number **13-6082763**

Unrelated business activity code (see instructions) ▶ **523000**

Describe the unrelated trade or business ▶ **UBI FROM INV NOT MEETING DE MINIMIS / CONTROL**

Part I Unrelated Trade or Business Income		(A) Income	(B) Expenses	(C) Net
1 a Gross receipts or sales				
b Less returns and allowances	c Balance ▶	1c		
2 Cost of goods sold (Schedule A, line 7)		2		
3 Gross profit. Subtract line 2 from line 1c		3		
4 a Capital gain net income (attach Schedule D)		4a		
b Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)		4b		
c Capital loss deduction for trusts		4c		
5 Income (loss) from a partnership or an S corporation (attach statement) STATEMENT 9		5	-14.	-14.
6 Rent income (Schedule C)		6		
7 Unrelated debt-financed income (Schedule E)		7		
8 Interest, annuities, royalties, and rents from a controlled organization (Schedule F)		8		
9 Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G)		9		
10 Exploited exempt activity income (Schedule I)		10		
11 Advertising income (Schedule J)		11		
12 Other income (See instructions; attach schedule)		12		
13 Total. Combine lines 3 through 12		13	-14.	-14.

Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions.) (Except for contributions, deductions must be directly connected with the unrelated business income.)

14 Compensation of officers, directors, and trustees (Schedule K)		14		
15 Salaries and wages		15		
16 Repairs and maintenance		16		
17 Bad debts		17		
18 Interest (attach schedule) (see instructions)		18		
19 Taxes and licenses		19		
20 Charitable contributions (See instructions for limitation rules)		20		
21 Depreciation (attach Form 4562)	21			
22 Less depreciation claimed on Schedule A and elsewhere on return	22a		22b	
23 Depletion		23		
24 Contributions to deferred compensation plans		24		
25 Employee benefit programs		25		
26 Excess exempt expenses (Schedule I)		26		
27 Excess readership costs (Schedule J)		27		
28 Other deductions (attach schedule) SEE STATEMENT 10		28		500.
29 Total deductions. Add lines 14 through 28		29		500.
30 Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13		30		-514.
31 Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see instructions)		31		
32 Unrelated business taxable income. Subtract line 31 from line 30		32		-514.

LHA For Paperwork Reduction Act Notice, see instructions.

Schedule M (Form 990-T) 2018

FORM 990-T (M)	INCOME (LOSS) FROM PARTNERSHIPS	STATEMENT 9
DESCRIPTION		NET INCOME OR (LOSS)
RSF CHARITABLE ASSET MANAGEMENT, LLC - ORDINARY BUSINESS INCOME (LOSS)		-14.
TOTAL INCLUDED ON SCHEDULE M, PART I, LINE 5		-14.

FORM 990-T (M)	OTHER DEDUCTIONS	STATEMENT 10
DESCRIPTION		AMOUNT
TAX PREPARATION FEES		500.
TOTAL TO SCHEDULE M, PART II, LINE 28		500.

**SCHEDULE M
(Form 990-T)**

**Unrelated Business Taxable Income for
Unrelated Trade or Business**

ENTITY 2

OMB No. 1545-0687

2018

Department of the Treasury
Internal Revenue Service (99)

For calendar year 2018 or other tax year beginning _____, and ending _____.

▶ Go to www.irs.gov/Form990T for instructions and the latest information.

▶ Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

Open to Public Inspection for
501(c)(3) Organizations Only

Name of the organization **RUDOLF STEINER FOUNDATION, INC.** Employer identification number **13-6082763**

Unrelated business activity code (see instructions) ▶ **523000**

Describe the unrelated trade or business ▶ **UBI FROM INV MEETING DEMINIMIS / CONTROL TEST**

Part I Unrelated Trade or Business Income		(A) Income	(B) Expenses	(C) Net
1 a Gross receipts or sales				
b Less returns and allowances	c Balance ▶	1c		
2 Cost of goods sold (Schedule A, line 7)		2		
3 Gross profit. Subtract line 2 from line 1c		3		
4 a Capital gain net income (attach Schedule D)		4a 215.		215.
b Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)		4b		
c Capital loss deduction for trusts		4c		
5 Income (loss) from a partnership or an S corporation (attach statement) STATEMENT 11		5 -1.		-1.
6 Rent income (Schedule C)		6		
7 Unrelated debt-financed income (Schedule E)		7		
8 Interest, annuities, royalties, and rents from a controlled organization (Schedule F)		8		
9 Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G)		9		
10 Exploited exempt activity income (Schedule I)		10		
11 Advertising income (Schedule J)		11		
12 Other income (See instructions; attach schedule)		12		
13 Total. Combine lines 3 through 12		13 214.		214.

Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions.) (Except for contributions, deductions must be directly connected with the unrelated business income.)

14 Compensation of officers, directors, and trustees (Schedule K)		14		
15 Salaries and wages		15		
16 Repairs and maintenance		16		
17 Bad debts		17		
18 Interest (attach schedule) (see instructions)		18		
19 Taxes and licenses		19		
20 Charitable contributions (See instructions for limitation rules)		20		
21 Depreciation (attach Form 4562)	21			
22 Less depreciation claimed on Schedule A and elsewhere on return	22a		22b	
23 Depletion		23		
24 Contributions to deferred compensation plans		24		
25 Employee benefit programs		25		
26 Excess exempt expenses (Schedule I)		26		
27 Excess readership costs (Schedule J)		27		
28 Other deductions (attach schedule) SEE STATEMENT 12		28		500.
29 Total deductions. Add lines 14 through 28		29		500.
30 Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13		30		-286.
31 Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see instructions)		31		
32 Unrelated business taxable income. Subtract line 31 from line 30		32		-286.

LHA For Paperwork Reduction Act Notice, see instructions.

Schedule M (Form 990-T) 2018

FORM 990-T (M)	INCOME (LOSS) FROM PARTNERSHIPS	STATEMENT 11
DESCRIPTION		NET INCOME OR (LOSS)
NORTH SKY CLEANTECH VENTURES, LP - ORDINARY BUSINESS INCOME (LOSS)		-1.
TOTAL INCLUDED ON SCHEDULE M, PART I, LINE 5		-1.

FORM 990-T (M)	OTHER DEDUCTIONS	STATEMENT 12
DESCRIPTION		AMOUNT
TAX PREPARATION FEES		500.
TOTAL TO SCHEDULE M, PART II, LINE 28		500.

**SCHEDULE O
(Form 1120)**

(Rev. December 2018)
Department of the Treasury
Internal Revenue Service

**Consent Plan and Apportionment Schedule
for a Controlled Group**

▶ Attach to Form 1120, 1120-C, 1120-F, 1120-FSC, 1120-L, 1120-PC, 1120-REIT, or 1120-RIC.
▶ Go to www.irs.gov/Form1120 for instructions and the latest information.

OMB No. 1545-0123

Name RUDOLF STEINER FOUNDATION, INC.	Employer identification number 13-6082763
--	---

Part I Apportionment Plan Information

1 Type of controlled group:

- a Parent-subsidiary group
- b Brother-sister group
- c Combined group
- d Life insurance companies only

2 This corporation has been a member of this group:

- a For the entire year.
- b From _____, until _____.

3 This corporation consents and represents to:

- a Adopt an apportionment plan. All the other members of this group are adopting an apportionment plan effective for the current tax year which ends on _____, and for all succeeding tax years.
- b Amend the current apportionment plan. All the other members of this group are currently amending a previously adopted plan, which was in effect for the tax year ending _____, and for all succeeding tax years.
- c Terminate the current apportionment plan and not adopt a new plan. All the other members of this group are not adopting an apportionment plan.
- d Terminate the current apportionment plan and adopt a new plan. All the other members of this group are adopting an apportionment plan effective for the current tax year which ends on _____, and for all succeeding tax years.

4 If you checked box 3c or 3d above, check the applicable box below to indicate if the termination of the current apportionment plan was:

- a Elected by the component members of the group.
- b Required for the component members of the group.

5 If you did not check a box on line 3 above, check the applicable box below concerning the status of the group's apportionment plan (see instructions).

- a No apportionment plan is in effect and none is being adopted.
- b An apportionment plan is already in effect. It was adopted for the tax year ending _____, and for all succeeding tax years.

6 If all the members of this group are adopting a plan or amending the current plan for a tax year after the due date (including extensions) of the tax return for this corporation, is there at least one year remaining on the statute of limitations from the date this corporation filed its amended return for such tax year for assessing any resulting deficiency? See instructions. **N/A**

- a Yes.
 - (i) The statute of limitations for this year will expire on _____.
 - (ii) On _____, this corporation entered into an agreement with the Internal Revenue Service to extend the statute of limitations for purposes of assessment until _____.
- b No. The members may not adopt or amend an apportionment plan.

7 If the corporation has a short tax year that does not include December 31, check the box. See instructions.

Part II Apportionment (See instructions)

(a) Group member's name and employer identification number		(b) Tax year end (Yr-Mo)	Apportionment			
			(c) Accumulated earnings credit	(d) Penalty for failure to pay estimated tax	(e) Other	
1	RUDOLF STEINER FOUNDATION, INC.	13-6082763	18-12	0.	14.	0.
2	RSF SOCIAL INVESTMENT FUND, INC.	36-4385559	18-12	0.	0.	0.
3	RSF CAPITAL MANAGEMENT, PBC	26-3080292	18-12	0.	0.	0.
4	RSF SOCIAL ENTERPRISE, INC.	26-0663311	18-01	0.	0.	0.
5						
6						
7						
8						
9						
10						
Total					14.	

Capital Gains and Losses
▶ Attach to Form 1120, 1120-C, 1120-F, 1120-FSC, 1120-H, 1120-IC-DISC, 1120-L, 1120-ND, 1120-PC, 1120-POL, 1120-REIT, 1120-RIC, 1120-SF, or certain Forms 990-T.
▶ Go to www.irs.gov/Form1120 for instructions and the latest information.

2018

Name **RUDOLF STEINER FOUNDATION, INC.** Employer identification number **13-6082763**

Part I Short-Term Capital Gains and Losses (See instructions.)				
See instructions for how to figure the amounts to enter on the lines below. This form may be easier to complete if you round off cents to whole dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part I, line 2, column (g)	(h) Gain or (loss). Subtract column (e) from column (d) and combine the result with column (g)
1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b				
1b Totals for all transactions reported on Form(s) 8949 with Box A checked				
2 Totals for all transactions reported on Form(s) 8949 with Box B checked				
3 Totals for all transactions reported on Form(s) 8949 with Box C checked				
4 Short-term capital gain from installment sales from Form 6252, line 26 or 37				4
5 Short-term capital gain or (loss) from like-kind exchanges from Form 8824				5
6 Unused capital loss carryover (attach computation)				6 ()
7 Net short-term capital gain or (loss). Combine lines 1a through 6 in column h				7

Part II Long-Term Capital Gains and Losses (See instructions.)				
See instructions for how to figure the amounts to enter on the lines below. This form may be easier to complete if you round off cents to whole dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part II, line 2, column (g)	(h) Gain or (loss). Subtract column (e) from column (d) and combine the result with column (g)
8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b				
8b Totals for all transactions reported on Form(s) 8949 with Box D checked				
9 Totals for all transactions reported on Form(s) 8949 with Box E checked				
10 Totals for all transactions reported on Form(s) 8949 with Box F checked				215.
11 Enter gain from Form 4797, line 7 or 9				11
12 Long-term capital gain from installment sales from Form 6252, line 26 or 37				12
13 Long-term capital gain or (loss) from like-kind exchanges from Form 8824				13
14 Capital gain distributions				14
15 Net long-term capital gain or (loss). Combine lines 8a through 14 in column h				15 215.

Part III Summary of Parts I and II				
16 Enter excess of net short-term capital gain (line 7) over net long-term capital loss (line 15)				16
17 Net capital gain. Enter excess of net long-term capital gain (line 15) over net short-term capital loss (line 7)				17 215.
18 Add lines 16 and 17. Enter here and on Form 1120, page 1, line 8, or the proper line on other returns.				18 215.

Note: If losses exceed gains, see **Capital losses** in the instructions.

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on page 1

Social security number or taxpayer identification no.

RUDOLF STEINER FOUNDATION, INC.

13-6082763

Before you check Box D, E, or F below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

Part II Long-Term. Transactions involving capital assets you held more than 1 year are generally long-term (see instructions). For short-term transactions, see page 1.

Note: You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 8a; you aren't required to report these transactions on Form 8949 (see instructions).

You must check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

- (D)** Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see **Note** above)
- (E)** Long-term transactions reported on Form(s) 1099-B showing basis **wasn't** reported to the IRS
- (F)** Long-term transactions not reported to you on Form 1099-B

1	(a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold or disposed of (Mo., day, yr.)	(d) Proceeds (sales price)	(e) Cost or other basis. See the Note below and see <i>Column (e)</i> in the instructions	Adjustment, if any, to gain or loss. If you enter an amount in column (g), enter a code in column (f). See instructions.		(h) Gain or (loss). Subtract column (e) from column (d) & combine the result with column (g)
						(f) Code(s)	(g) Amount of adjustment	
	NORTH SKY CLEANTECH VENTURES, LP							215.
2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 8b (if Box D above is checked), line 9 (if Box E above is checked), or line 10 (if Box F above is checked)								215.

Note: If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See *Column (g)* in the separate instructions for how to figure the amount of the adjustment.

Name **RUDOLF STEINER FOUNDATION, INC.** Employer identification number **13-6082763**

Note: Generally, the corporation is not required to file Form 2220 (see Part II below for exceptions) because the IRS will figure any penalty owed and bill the corporation. However, the corporation may still use Form 2220 to figure the penalty. If so, enter the amount from page 2, line 38, on the estimated tax penalty line of the corporation's income tax return, but **do not** attach Form 2220.

Part I Required Annual Payment

1	Total tax (see instructions)		1	17,514.
2a	Personal holding company tax (Schedule PH (Form 1120), line 26) included on line 1	2a		
2b	Look-back interest included on line 1 under section 460(b)(2) for completed long-term contracts or section 167(g) for depreciation under the income forecast method	2b		
2c	Credit for federal tax paid on fuels (see instructions)	2c		
2d	Total. Add lines 2a through 2c	2d		
3	Subtract line 2d from line 1. If the result is less than \$500, do not complete or file this form. The corporation does not owe the penalty	3		17,514.
4	Enter the tax shown on the corporation's 2017 income tax return. See instructions. Caution: If the tax is zero or the tax year was for less than 12 months, skip this line and enter the amount from line 3 on line 5	4		303.
5	Required annual payment. Enter the smaller of line 3 or line 4. If the corporation is required to skip line 4, enter the amount from line 3	5		303.

Part II Reasons for Filing - Check the boxes below that apply. If any boxes are checked, the corporation **must** file Form 2220 even if it does not owe a penalty. See instructions.

- 6 The corporation is using the adjusted seasonal installment method.
- 7 The corporation is using the annualized income installment method.
- 8 The corporation is a "large corporation" figuring its first required installment based on the prior year's tax.

Part III Figuring the Underpayment

	(a)	(b)	(c)	(d)	
9 Installment due dates. Enter in columns (a) through (d) the 15th day of the 4th (Form 990-PF filers: Use 5th month), 6th, 9th, and 12th months of the corporation's tax year	9	04/15/18	06/15/18	09/15/18	12/15/18
10 Required installments. If the box on line 6 and/or line 7 above is checked, enter the amounts from Sch A, line 38. If the box on line 8 (but not 6 or 7) is checked, see instructions for the amounts to enter. If none of these boxes are checked, enter 25% (0.25) of line 5 above in each column	10	76.	76.	75.	76.
11 Estimated tax paid or credited for each period. For column (a) only, enter the amount from line 11 on line 15. See instructions	11				
Complete lines 12 through 18 of one column before going to the next column.					
12 Enter amount, if any, from line 18 of the preceding column	12				
13 Add lines 11 and 12	13				
14 Add amounts on lines 16 and 17 of the preceding column	14		76.	152.	227.
15 Subtract line 14 from line 13. If zero or less, enter -0-	15	0.	0.	0.	0.
16 If the amount on line 15 is zero, subtract line 13 from line 14. Otherwise, enter -0-	16		76.	152.	
17 Underpayment. If line 15 is less than or equal to line 10, subtract line 15 from line 10. Then go to line 12 of the next column. Otherwise, go to line 18	17	76.	76.	75.	76.
18 Overpayment. If line 10 is less than line 15, subtract line 10 from line 15. Then go to line 12 of the next column	18				

Go to Part IV on page 2 to figure the penalty. Do not go to Part IV if there are no entries on line 17 - no penalty is owed.

Part IV Figuring the Penalty

	(a)	(b)	(c)	(d)
19 Enter the date of payment or the 15th day of the 4th month after the close of the tax year, whichever is earlier. (C corporations with tax years ending June 30 and S corporations: Use 3rd month instead of 4th month. Form 990-PF and Form 990-T filers: Use 5th month instead of 4th month.) See instructions	19			
20 Number of days from due date of installment on line 9 to the date shown on line 19	20			
21 Number of days on line 20 after 4/15/2018 and before 7/1/2018	21			
22 Underpayment on line 17 x $\frac{\text{Number of days on line 21} \times 5\% (0.05)}{365}$...	22 \$	\$	\$	\$
23 Number of days on line 20 after 06/30/2018 and before 10/1/2018	23			
24 Underpayment on line 17 x $\frac{\text{Number of days on line 23} \times 5\% (0.05)}{365}$...	24 \$	\$	\$	\$
25 Number of days on line 20 after 9/30/2018 and before 1/1/2019	25			
26 Underpayment on line 17 x $\frac{\text{Number of days on line 25} \times 5\% (0.05)}{365}$...	26 \$	\$	\$	\$
27 Number of days on line 20 after 12/31/2018 and before 4/1/2019	27	SEE ATTACHED WORKSHEET		
28 Underpayment on line 17 x $\frac{\text{Number of days on line 27} \times 6\% (0.06)}{365}$...	28 \$	\$	\$	\$
29 Number of days on line 20 after 3/31/2019 and before 7/1/2019	29			
30 Underpayment on line 17 x $\frac{\text{Number of days on line 29} \times \%}{365}$	30 \$	\$	\$	\$
31 Number of days on line 20 after 6/30/2019 and before 10/1/2019	31			
32 Underpayment on line 17 x $\frac{\text{Number of days on line 31} \times \%}{365}$	32 \$	\$	\$	\$
33 Number of days on line 20 after 9/30/2019 and before 1/1/2020	33			
34 Underpayment on line 17 x $\frac{\text{Number of days on line 33} \times \%}{365}$	34 \$	\$	\$	\$
35 Number of days on line 20 after 12/31/2019 and before 3/16/2020	35			
36 Underpayment on line 17 x $\frac{\text{Number of days on line 35} \times \%}{366}$	36 \$	\$	\$	\$
37 Add lines 22, 24, 26, 28, 30, 32, 34, and 36	37 \$	\$	\$	\$
38 Penalty. Add columns (a) through (d) of line 37. Enter the total here and on Form 1120, line 34; or the comparable line for other income tax returns	38 \$			14.

* Use the penalty interest rate for each calendar quarter, which the IRS will determine during the first month in the preceding quarter. These rates are published quarterly in an IRS News Release and in a revenue ruling in the Internal Revenue Bulletin. To obtain this information on the Internet, access the IRS website at www.irs.gov. You can also call 1-800-829-4933 to get interest rate information.

**FORM 990-T
UNDERPAYMENT OF ESTIMATED TAX WORKSHEET**

Name(s)					Identifying Number
RUDOLF STEINER FOUNDATION, INC.					13-6082763
(A) *Date	(B) Amount	(C) Adjusted Balance Due	(D) Number Days Balance Due	(E) Daily Penalty Rate	(F) Penalty
		-0-			
04/15/18	76.	76.	61	.000136986	1.
06/15/18	76.	152.	92	.000136986	2.
09/15/18	75.	227.	91	.000136986	3.
12/15/18	76.	303.	16	.000136986	1.
12/31/18	0.	303.	135	.000164384	7.
Penalty Due (Sum of Column F)					14.

* Date of estimated tax payment, withholding credit date or installment due date.