

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 **JUL 1, 2018** and ending **JUN 30, 2019**

B Check if applicable:	C Name of organization ROCKY MOUNTAIN INSTITUTE Doing business as	D Employer identification number 74-2244146
Address change	Number and street (or P.O. box if mail is not delivered to street address) Room/suite	E Telephone number 303-245-1003
Name change	2490 JUNCTION PLACE, SUITE 200	G Gross receipts \$ 53,538,245.
Initial return	City or town, state or province, country, and ZIP or foreign postal code	H(a) Is this a group return for subordinates? Yes <input checked="" type="checkbox"/> No
Final return/terminated	BOULDER, CO 80301	H(b) Are all subordinates included? Yes No
Amended return	F Name and address of principal officer: JULES KORTENHORST SAME AS C ABOVE	If "No," attach a list. (see instructions)
Application pending	I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or 527	H(c) Group exemption number ▶
J Website: ▶ WWW.RMI.ORG		L Year of formation: 1982 M State of legal domicile: CO
K Form of organization: <input checked="" type="checkbox"/> Corporation Trust Association Other ▶		

Part I Summary

1	Briefly describe the organization's mission or most significant activities: OUR MISSION IS TO TRANSFORM GLOBAL ENERGY USE TO CREATE A CLEAN, PROSPEROUS, AND SECURE		
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	19
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	16
5	Total number of individuals employed in calendar year 2018 (Part V, line 2a)	5	221
6	Total number of volunteers (estimate if necessary)	6	16
7 a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
b	Net unrelated business taxable income from Form 990-T, line 38	7b	0.
		Prior Year	Current Year
8	Contributions and grants (Part VIII, line 1h)	33,898,510.	44,756,600.
9	Program service revenue (Part VIII, line 2g)	8,330,801.	8,711,812.
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	45,146.	-17,570.
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	41,527.	51,239.
12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	42,315,984.	53,502,081.
13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	75,340.	0.
14	Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	22,973,306.	26,176,572.
16a	Professional fundraising fees (Part IX, column (A), line 11e)	135,302.	75,000.
b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 2,220,036.		
17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	16,663,106.	18,693,443.
18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	39,847,054.	44,945,015.
19	Revenue less expenses. Subtract line 18 from line 12	2,468,930.	8,557,066.
		Beginning of Current Year	End of Year
20	Total assets (Part X, line 16)	38,235,339.	47,374,815.
21	Total liabilities (Part X, line 26)	11,462,260.	12,131,611.
22	Net assets or fund balances. Subtract line 21 from line 20	26,773,079.	35,243,204.

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 *  JULES KORTENHORST, CEO Type or print name and title	Date May 11, 2020
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Paid Preparer Use Only	Print/Type preparer's name LU ANN TRAPP	Preparer's signature LU ANN TRAPP	Date 05/07/20	Check if self-employed <input type="checkbox"/>	PTIN P01506476
	Firm's name ▶ PLANTE & MORAN, PLLC	Firm's EIN ▶ 38-1357951		Phone no. (312) 207-1040	
	Firm's address ▶ 10 S. RIVERSIDE PLAZA, 9TH FLOOR CHICAGO, IL 60606				

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: OUR MISSION IS TO TRANSFORM GLOBAL ENERGY USE TO CREATE A CLEAN, PROSPEROUS, AND SECURE LOW-CARBON FUTURE.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [X] Yes No

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [X] Yes No

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

4a (Code:) (Expenses \$ 5,424,920. including grants of \$) (Revenue \$ 714,867.) EMPOWERING CLEAN ECONOMIES - SUPPORTING LOW- AND MIDDLE-INCOME COUNTRIES CAN HELP MEET AMBITIOUS CLIMATE TARGETS ESTABLISHED AS PART OF THE PARIS AGREEMENT WHILE ALSO PROVIDING RELIABLE, AFFORDABLE ENERGY ACCESS TO PEOPLE WHOSE HEALTH AND LIVELIHOODS DEPEND ON IT BY EMBRACING AND MAXIMIZING THE CONTRIBUTIONS OF CLEAN ENERGY SOLUTIONS IN THEIR NATIONAL SETTINGS. SUPPORTING INITIATIVES INCLUDE: 1) SUSTAINABLE ENERGY FOR ECONOMIC DEVELOPMENT ACCELERATING ACCESS TO CLEAN ELECTRICITY IN SUB-SAHARAN AFRICA AS A MEANS TO IMPROVE QUALITY OF LIFE AND UNDERPIN ECONOMIC DEVELOPMENT. 2) ISLANDS ENERGY PROGRAM ACCELERATING THE TRANSITION OF ISLAND ECONOMIES FROM FOSSIL FUEL DEPENDENCE TO A MORE RESILIENT AND AFFORDABLE ENERGY FUTURE POWERED BY EFFICIENCY AND RENEWABLES.

4b (Code:) (Expenses \$ 5,199,266. including grants of \$) (Revenue \$ 1,968,124.) ELECTRICITY - CREATING A CLEAN, RESILIENT, AND AFFORDABLE ELECTRICITY SYSTEM THAT PRODUCES LESS POLLUTION AND CLIMATE-ALTERING CO2. SUPPORTING INITIATIVES INCLUDE: 1) REGULATORY AND BUSINESS MODEL REFORM WORKING WITH UTILITIES AND STATE REGULATORY COMMISSIONS TO EVOLVE BUSINESS AND REGULATORY MODELS AND ADVANCE MORE SOPHISTICATED ELECTRICITY RATE STRUCTURES. WE AIM TO SUPPORT THREE TO FIVE STATES THAT ARE COMMITTED TO COMPREHENSIVE REGULATORY AND BUSINESS MODEL REFORM TO DRIVE A RENEWABLY POWERED ELECTRICITY SYSTEM BY 2020. 2) ELECTRICITY INNOVATION LAB (E-LAB) CONVENING CRITICAL INDUSTRY PLAYERS TO IDENTIFY PROMISING REFORM APPROACHES AND STRATEGIZE ON HOW TO SCALE THEM EFFECTIVELY TO TRANSFORM THE ELECTRICITY SYSTEM FROM THE INSIDE OUT. WE PROVIDE A GROUNDBREAKING CHANGE LAB TO SUPPORT

4c (Code:) (Expenses \$ 3,939,107. including grants of \$) (Revenue \$ 1,379,986.) BUILDINGS - CATALYZING MASSIVE MARKET GROWTH FOR BUILDINGS THAT ARE MORE PRODUCTIVE, VALUABLE, HEALTHY, AND SAFE FOR THE PEOPLE WHO OCCUPY THEM, SOCIETY, AND THE PLANET. SUPPORTING INITIATIVES INCLUDE: 1) PORTFOLIO ENERGY OPTIMIZATION DEVELOPING AND SCALING A NEW, INNOVATIVE, AND COST-EFFECTIVE RETROFIT APPROACH TO REDUCE ENERGY USE IN COMMERCIAL BUILDINGS. 2) PATHWAYS TO ZERO DRIVING THE ADOPTION OF SUPEREFFICIENT AND NET-ZERO ENERGY BUILDINGS IN NEW AND EXISTING BUILDING PORTFOLIOS AND AT THE DISTRICT LEVEL. WE AIM TO CATALYZE THE MARKET FOR SUPEREFFICIENT AND NET-ZERO ENERGY BUILDINGS AND DISTRICTS TO SAVE 50 MILLION TONS OF CARBON OVER FIVE YEARS. 3) RESIDENTIAL ENERGY+ UNLOCKING U.S. HOMEOWNER INVESTMENTS IN ENERGY

4d Other program services (Describe in Schedule O.) (Expenses \$ 21,221,439. including grants of \$) (Revenue \$ 5,950,617.)

4e Total program service expenses 35,784,732.

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>	1 X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ?	2 X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>	3	X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	4	X
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>	5	X
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>	6	X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7	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>	8	X
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>	9	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>	10 X	
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	11a X	
b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>	11b	X
c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>	11c	X
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>	11d	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>	11e X	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	11f 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>	12a	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>	12b X	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>	13	X
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a X	
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>	14b X	
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>	15	X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>	16	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>	17 X	
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18	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>	19	X
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20a	X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	21	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>		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>	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>		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
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?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
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>		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>		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>		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>		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>		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>		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>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	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>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		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>		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>	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>	X	
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	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>	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>		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>		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	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		
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	

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

Table with columns for question number, question text, and Yes/No response boxes. Includes questions 2a through 16 regarding employee counts, tax returns, business 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 (19), 1b (16), 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.

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed AL, AK, AR, CA, CO, CT, FL, GA, HI, IL, KS, KY
18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. [X] Own website [] Another's website [X] Upon request [] Other (explain in Schedule O)
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 HEATHER MCCREERY - 303-245-1003 2490 JUNCTION PLACE SUITE 200, BOULDER, CO 80301

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) EDWARD WHITE CHAIR OF THE BOARD	1.00	X		X				50,000.	0.	0.
(2) JEAN OELWANG LEAD INDEPENDENT TRUSTEE	1.00	X		X				0.	0.	0.
(3) TOM DINWOODIE TRUSTEE	1.00	X						0.	0.	0.
(4) DAVID ALLEN TRUSTEE	1.00	X						0.	0.	0.
(5) ROY BEDLOW TRUSTEE	1.00	X						0.	0.	0.
(6) PETER BOYER TRUSTEE	1.00	X						0.	0.	0.
(7) MARK FERRON TRUSTEE	1.00	X						0.	0.	0.
(8) MICHAEL HAAS TRUSTEE	1.00	X						0.	0.	0.
(9) JOSE MARIA FIGUERES TRUSTEE	1.00	X						0.	0.	0.
(10) RACHEL KYTE TRUSTEE	1.00	X						0.	0.	0.
(11) DENNIS V. MCGINN TRUSTEE	1.00	X						0.	0.	0.
(12) KANDEH YUMKELLA TRUSTEE	1.00	X						0.	0.	0.
(13) GEORGE POLK TRUSTEE	1.00	X						0.	0.	0.
(14) MARY GRACE POWELL TRUSTEE	1.00	X						0.	0.	0.
(15) ELIZABETH ANN SALL TRUSTEE	1.00	X						0.	0.	0.
(16) TODD STERN TRUSTEE	1.00	X						0.	0.	0.
(17) MARIA VAN DER HOEVEN TRUSTEE	1.00	X						0.	0.	0.

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) JULES KORTENHORST CHIEF EXECUTIVE OFFICER	40.00 1.00	X		X				549,600.	0.	41,748.
(19) AMORY LOVINS CHIEF SCIENTIST	40.00 1.00	X		X				384,369.	0.	29,636.
(20) MARTHA PICKETT GENERAL COUNSEL - SECRETARY	40.00 1.00	X		X				348,747.	0.	28,907.
(21) HEATHER MCCREERY CFO	40.00 1.00	X		X				218,412.	0.	31,344.
(22) PAUL BODNAR MANAGING DIRECTOR	40.00 1.00				X			305,140.	0.	35,762.
(23) IAIN CAMPBELL MANAGING DIRECTOR	40.00 1.00				X			263,166.	0.	34,156.
(24) JON CREYTS MANAGING DIRECTOR	40.00 1.00				X			344,195.	0.	38,187.
(25) STEPHEN DOIG MANAGING DIRECTOR (THRU 9/2018)	40.00 1.00				X			263,766.	0.	28,859.
(26) MARK GRUNDY MANAGING DIRECTOR	40.00 1.00				X			223,110.	0.	18,628.
1b Sub-total								2,950,505.	0.	287,227.
c Total from continuation sheets to Part VII, Section A								3,112,991.	0.	303,719.
d Total (add lines 1b and 1c)								6,063,496.	0.	590,946.

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 **49**

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual	3	X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4	X
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person	5	X

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
BROSS GROUP LLC, 200 UNION BLVD., SUITE 200, LAKEWOOD, CO 80228	IT SERVICES	526,684.
REOS, US INC, ONE BROADWAY 14TH FLOOR, CAMBRIDGE, MA 02142	CONTRACTOR	449,148.
REDSTONE STRATEGY GROUP, LLC, 3223 ARAPAHOE AVE SUITE 210, BOULDER, CO 80303	FUNDRAISING STRATEGY	300,761.
IZULUMOYA CONSULTING (PTY) LTD., 845 WATERFALL COUNTRY ESTATE, 34 SEMONGKONG	CONTRACTOR	235,918.
TRILLIUM SOLUTIONS, INC. 6106 NE MALLORY AVE, PORTLAND, OR 97211	MOBILITY DATA CONSULTING	207,015.

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 **25**

SEE PART VII, SECTION A CONTINUATION SHEETS

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					
	e Government grants (contributions)	1e	1,488,200.				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	43,268,400.				
	g Noncash contributions included in lines 1a-1f: \$		1,869,446.				
	h Total. Add lines 1a-1f		44,756,600.				
Program Service Revenue	2 a CONSULTING FEES	Business Code 541610	6,145,749.	6,145,749.			
	b PROGRAM MEMBERSHIP FEES	541900	1,284,426.	1,284,426.			
	c PROJECT REVENUE	541900	723,514.	723,514.			
	d PROGRAM EVENT REVENUE	541900	361,527.	361,527.			
	e CARBON OFFSETS	900099	156,625.	156,625.			
	f All other program service revenue	900099	39,971.	39,971.			
	g Total. Add lines 2a-2f		8,711,812.				
	Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		18,594.			18,594.
4 Income from investment of tax-exempt bond proceeds							
5 Royalties			1,394.			1,394.	
6 a Gross rents		(i) Real	40,091.				
		(ii) Personal					
		b Less: rental expenses	0.				
		c Rental income or (loss)	40,091.				
d Net rental income or (loss)			40,091.			40,091.	
7 a Gross amount from sales of assets other than inventory		(i) Securities					
		(ii) Other					
		b Less: cost or other basis and sales expenses	36,164.				
		c Gain or (loss)	-36,164.				
d Net gain or (loss)			-36,164.			-36,164.	
8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18		a	7,650.				
		b Less: direct expenses	0.				
	c Net income or (loss) from fundraising events		7,650.			7,650.	
9 a Gross income from gaming activities. See Part IV, line 19	a						
	b Less: direct expenses						
	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						
	c Net income or (loss) from sales of inventory						
Miscellaneous Revenue		Business Code					
11 a RELATED RENTAL		531120	2,104.	2,104.			
	b						
	c						
	d All other revenue						
	e Total. Add lines 11a-11d			2,104.			
12 Total revenue. See instructions			53,502,081.	8,713,916.	0.	31,565.	

Part IX Statement of Functional Expenses

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

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

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 ...				
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	6,013,496.	4,522,121.	752,102.	739,273.
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	15,512,480.	12,878,995.	1,997,651.	635,834.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	787,559.	630,047.	118,134.	39,378.
9 Other employee benefits	2,614,085.	2,091,268.	392,113.	130,704.
10 Payroll taxes	1,248,952.	999,162.	187,342.	62,448.
11 Fees for services (non-employees):				
a Management				
b Legal	562,573.	247,136.	315,437.	
c Accounting	84,873.		84,873.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17	75,000.			75,000.
f Investment management fees	5,007.		5,007.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch. O.)	6,902,938.	5,964,678.	892,912.	45,348.
12 Advertising and promotion	382,226.	376,028.	1,075.	5,123.
13 Office expenses	1,209,879.	822,800.	279,338.	107,741.
14 Information technology	1,823,903.	1,338,472.	371,581.	113,850.
15 Royalties				
16 Occupancy	2,167,131.	1,733,704.	325,070.	108,357.
17 Travel	2,891,272.	2,507,064.	300,734.	83,474.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials ...				
19 Conferences, conventions, and meetings	1,022,444.	946,996.	53,080.	22,368.
20 Interest	324,217.		324,217.	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	820,902.	630,780.	144,367.	45,755.
23 Insurance	123,267.	5,086.	118,181.	
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 RECRUITING EXPENSE	331,668.	2,446.	329,222.	
b MEALS AND MEETINGS	221,638.	87,949.	128,306.	5,383.
c PROPERTY TAXES	-180,495.		-180,495.	
d _____				
e All other expenses _____				
25 Total functional expenses. Add lines 1 through 24e	44,945,015.	35,784,732.	6,940,247.	2,220,036.
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 <input type="checkbox"/> 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) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	7,702,222.	1	9,595,372.
	2 Savings and temporary cash investments		2	
	3 Pledges and grants receivable, net	7,414,920.	3	13,372,784.
	4 Accounts receivable, net	3,644,758.	4	4,987,659.
	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	315,834.	9	821,396.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 19,327,443.		
	b Less: accumulated depreciation	10b 3,389,878.		
	11 Investments - publicly traded securities		11	
	12 Investments - other securities. See Part IV, line 11	544,238.	12	548,401.
	13 Investments - program-related. See Part IV, line 11	720,220.	13	720,220.
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	1,445,601.	15	1,391,418.
16 Total assets. Add lines 1 through 15 (must equal line 34)	38,235,339.	16	47,374,815.	
Liabilities	17 Accounts payable and accrued expenses	4,438,311.	17	4,928,544.
	18 Grants payable		18	
	19 Deferred revenue	643,645.	19	782,672.
	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	6,112,254.	23	5,969,068.
	24 Unsecured notes and loans payable to unrelated third parties		24	
	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	268,050.	25	451,327.
	26 Total liabilities. Add lines 17 through 25	11,462,260.	26	12,131,611.
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	12,172,869.	27	12,314,363.
	28 Temporarily restricted net assets	13,705,415.	28	22,899,244.
	29 Permanently restricted net assets	894,795.	29	29,597.
	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	26,773,079.	33	35,243,204.	
34 Total liabilities and net assets/fund balances	38,235,339.	34	47,374,815.	

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	53,502,081.
2	Total expenses (must equal Part IX, column (A), line 25)	2	44,945,015.
3	Revenue less expenses. Subtract line 2 from line 1	3	8,557,066.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	26,773,079.
5	Net unrealized gains (losses) on investments	5	5,190.
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	-92,131.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	35,243,204.

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
2b	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	
2c	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
3b	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)

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.")	23324546.	25775229.	30681267.	34404403.	46041026.	160226471
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	23324546.	25775229.	30681267.	34404403.	46041026.	160226471
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)						47466142.
6 Public support. Subtract line 5 from line 4.						112760329

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	23324546.	25775229.	30681267.	34404403.	46041026.	160226471
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	60,609.	43,879.	87,981.	85,061.	60,079.	337,609.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)		246.	8,374.	10,143.	9,754.	28,517.
11 Total support. Add lines 7 through 10						160592597
12 Gross receipts from related activities, etc. (see instructions)					12	26,489,854.
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	70.22	%
15 Public support percentage from 2017 Schedule A, Part II, line 14	15	60.08	%
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			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.)

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

OTHER INCOME

2015 AMOUNT: \$ 246.

2016 AMOUNT: \$ 8,374.

2017 AMOUNT: \$ 10,143.

2018 AMOUNT: \$ 9,754.

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

ROCKY MOUNTAIN INSTITUTE

Employer identification number

74-2244146

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 ROCKY MOUNTAIN INSTITUTE	Employer identification number 74-2244146
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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	_____ _____ _____	\$ <u>997,607.</u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
2	_____ _____ _____	\$ <u>6,000,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	_____ _____ _____	\$ <u>4,685,520.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	_____ _____ _____	\$ <u>1,000,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	_____ _____ _____	\$ <u>1,850,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	_____ _____ _____	\$ <u>1,875,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization ROCKY MOUNTAIN INSTITUTE	Employer identification number 74-2244146
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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>3,517,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
8	 <hr/> <hr/> <hr/>	\$ <u>1,000,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
9	 <hr/> <hr/> <hr/>	\$ <u>950,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
10	 <hr/> <hr/> <hr/>	\$ <u>990,639.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
11	 <hr/> <hr/> <hr/>	\$ <u>2,000,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
12	 <hr/> <hr/> <hr/>	\$ <u>1,522,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization ROCKY MOUNTAIN INSTITUTE	Employer identification number 74-2244146
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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
13	<hr/> <hr/> <hr/>	\$ <u>2,500,000.</u>	Person <input checked="" 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.)
<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 ROCKY MOUNTAIN INSTITUTE	Employer identification number 74-2244146
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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
1	STOCK _____ _____ _____	\$ 997,607.	12/12/18
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____

Name of organization ROCKY MOUNTAIN INSTITUTE	Employer identification number 74-2244146
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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	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(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 ROCKY MOUNTAIN INSTITUTE **Employer identification number** 74-2244146

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		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?	<input type="checkbox"/> Yes	<input type="checkbox"/> 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?	<input type="checkbox"/> Yes	<input type="checkbox"/> 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?

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

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

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

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	971,159.	922,691.	884,692.	986,528.	980,930.
b Contributions	29,597.	14,575.	6,650.	8,000.	35,890.
c Net investment earnings, gains, and losses	37,165.	65,521.	78,141.	-9,811.	-30,291.
d Grants or scholarships					
e Other expenditures for facilities and programs	19,422.	19,388.	35,926.	100,025.	609,285.
f Administrative expenses	12,098.	12,240.	10,866.		
g End of year balance	1,006,401.	971,159.	922,691.	884,692.	377,244.

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment _____ %
 - b Permanent endowment 91.85 %
 - c Temporarily restricted endowment 8.15 %
- 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:
- | | Yes | No |
|---|-----|----|
| (i) unrelated organizations | X | |
| (ii) related organizations | | X |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? <input type="checkbox"/> | 3b | |

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		16,098,876.	1,392,686.	14,706,190.
c Leasehold improvements		353,627.	162,838.	190,789.
d Equipment		1,601,471.	1,258,532.	342,939.
e Other		1,273,469.	575,822.	697,647.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				15,937,565.

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		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶		

Part VIII Investments - Program Related.

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

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶		

Part IX Other Assets.

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

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	

Part X Other Liabilities.

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) CAPITAL LEASE OBLIGATIONS	21,417.
(3) DEFERRED RENT	429,910.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	451,327.

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	53,787,709.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	5,190.
b	Donated services and use of facilities	2b	267,810.
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	17,635.
e	Add lines 2a through 2d	2e	290,635.
3	Subtract line 2e from line 1	3	53,497,074.
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	5,007.
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	5,007.
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	53,502,081.

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	45,317,584.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	267,810.
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	109,766.
e	Add lines 2a through 2d	2e	377,576.
3	Subtract line 2e from line 1	3	44,940,008.
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	5,007.
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	5,007.
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5	44,945,015.

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:

ENDOWMENT FUNDS ARE USED TO PROVIDE RMI INTERNSHIPS.

PART X, LINE 2:

RMI APPLIES A MORE-LIKELY-THAN-NOT MEASUREMENT METHODOLOGY TO REFLECT THE FINANCIAL STATEMENT IMPACT OF UNCERTAIN TAX POSITIONS TAKEN OR EXPECTED TO BE TAKEN IN A TAX RETURN. AFTER EVALUATING THE TAX POSITIONS TAKEN, NONE ARE CONSIDERED TO BE UNCERTAIN; THEREFORE, NO AMOUNTS HAVE BEEN RECOGNIZED AS OF JUNE 30, 2019 AND 2018. IF INCURRED, INTEREST AND PENALTIES ASSOCIATED WITH TAX POSITIONS ARE RECORDED IN THE PERIOD ASSESSED AS GENERAL AND ADMINISTRATIVE EXPENSE. NO INTEREST OR PENALTIES HAVE BEEN ASSESSED AS OF JUNE 30, 2019 AND 2018.

Part XIII Supplemental Information (continued)

PART XI, LINE 2D - OTHER ADJUSTMENTS:

CHANGE IN NET ASSETS HELD AT THE DENVER FOUNDATION 17,635.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

WRITE-OFF OF PLEDGES RECEIVABLE 109,766.

**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: **ROCKY MOUNTAIN INSTITUTE**
Employer identification number: **74-2244146**

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
EAST ASIA AND THE PACIFIC	1	15	PROGRAM SERVICES	CHINA	2,458,000.
EUROPE	0	5	PROGRAM SERVICES	BUILDINGS, INDUSTRY, EMPOWERING CLEAN ECONOMIES	833,000.
CENTRAL AMERICA AND THE CARIBBEAN	0	10	PROGRAM SERVICES	EMPOWERING CLEAN ECONOMIES	981,000.
SOUTH AMERICA	0	2	PROGRAM SERVICES	EMPOWERING CLEAN ECONOMIES	21,200.
SUB-SAHARAN AFRICA	0	3	PROGRAM SERVICES	EMPOWERING CLEAN ECONOMIES AND MINING	462,000.
NORTH AMERICA	0	8	PROGRAM SERVICES	EMPOWERING CLEAN ECONOMIES AND BUILDINGS PROGRAMS	282,000.
SOUTH ASIA	0	10	PROGRAM SERVICES	INDIA	1,080,000.
EAST ASIA AND THE PACIFIC	0	0	PROGRAM SERVICES	EMPOWERING CLEAN ECONOMIES	20,000.
3 a Subtotal	1	53			6,137,200.
b Total from continuation sheets to Part I	0	0			0.
c Totals (add lines 3a and 3b)	1	53			6,137,200.

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

Schedule F (Form 990) 2018

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 II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
		(event type)	(event type)	(total number)	(add col. (a) through col. (c))
Revenue	1 Gross receipts				
	2 Less: Contributions				
	3 Gross income (line 1 minus line 2)				
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses				
	10 Direct expense summary. Add lines 4 through 9 in column (d)				
11 Net income summary. Subtract line 10 from line 3, column (d)					

Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
		1 Gross revenue			
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No		
7 Direct expense summary. Add lines 2 through 5 in column (d)					
8 Net gaming income summary. Subtract line 7 from line 1, column (d)					

9 Enter the state(s) in which the organization conducts gaming activities: _____

a Is the organization licensed to conduct gaming activities in each of these states? Yes No

b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? Yes No

b If "Yes," explain: _____

- 11 Does the organization conduct gaming activities with nonmembers? Yes No
- 12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming? Yes No
- 13 Indicate the percentage of gaming activity conducted in:

a The organization's facility	13a	%
b An outside facility	13b	%
- 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ _____

Address ▶ _____

- 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No
- b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____
- c If "Yes," enter name and address of the third party:

Name ▶ _____

Address ▶ _____

16 Gaming manager information:

Name ▶ _____

Gaming manager compensation ▶ \$ _____

Description of services provided ▶ _____

- Director/officer
- Employee
- Independent contractor

17 Mandatory distributions:

- a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No
- b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.

SCHEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISERS:

(I) NAME OF FUNDRAISER: REDSTONE STRATEGY GROUP, LLC

(I) ADDRESS OF FUNDRAISER: 3223 ARAPAHOE AVE, BOULDER, CO 80303

**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

ROCKY MOUNTAIN INSTITUTE

Employer identification number

74-2244146

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 checked="" type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input checked="" 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 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
1b	X	
2	X	
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) JULES KORTENHORST CHIEF EXECUTIVE OFFICER	(i)	299,600.	200,000.	50,000.	11,438.	30,310.	591,348.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) AMORY LOVINS CHIEF SCIENTIST	(i)	284,369.	100,000.	0.	10,950.	18,686.	414,005.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) MARTHA PICKETT GENERAL COUNSEL - SECRETARY	(i)	268,747.	80,000.	0.	10,195.	18,712.	377,654.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) HEATHER MCCREERY CFO	(i)	184,162.	34,250.	0.	9,417.	21,927.	249,756.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) PAUL BODNAR MANAGING DIRECTOR	(i)	250,140.	55,000.	0.	12,896.	22,866.	340,902.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) IAIN CAMPBELL MANAGING DIRECTOR	(i)	184,166.	79,000.	0.	9,302.	24,854.	297,322.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) JON CREYTS MANAGING DIRECTOR	(i)	264,195.	80,000.	0.	13,490.	24,697.	382,382.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) STEPHEN DOIG MANAGING DIRECTOR (THRU 9/2018)	(i)	263,766.	0.	0.	9,698.	19,161.	292,625.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(9) MARK GRUNDY MANAGING DIRECTOR	(i)	179,610.	43,500.	0.	8,948.	9,680.	241,738.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(10) LENA HANSEN MANAGING DIRECTOR	(i)	413,437.	50,000.	0.	9,375.	9,476.	482,288.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(11) EDWARD HARVEY MANAGING DIRECTOR	(i)	257,015.	62,500.	0.	12,698.	4,813.	337,026.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(12) BRAD MUSHOVIC MANAGING DIRECTOR	(i)	170,853.	43,750.	0.	8,775.	22,552.	245,930.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(13) CAROL NASTA MANAGING DIRECTOR (THRU 5/2018)	(i)	94,044.	0.	90,000.	3,873.	14,409.	202,326.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(14) JAMES NEWCOMB MANAGING DIRECTOR	(i)	271,476.	80,000.	0.	10,552.	20,950.	382,978.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(15) JENNIFER STOKES MANAGING DIRECTOR	(i)	180,590.	40,000.	0.	9,604.	21,794.	251,988.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(16) JERULD WEILAND MANAGING DIRECTOR (THRU 9/2018)	(i)	228,185.	0.	62,500.	9,562.	12,396.	312,643.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.

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				
(17) JAMES MANDEL MANAGING DIRECTOR	(i)	179,790.	0.	0.	9,188.	21,712.	210,690.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(18) RUSHAD NANAVATTY PRINCIPAL	(i)	138,356.	27,400.	0.	6,850.	434.	173,040.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(19) JUSTIN LOCKE SENIOR PRINCIPAL	(i)	158,892.	34,025.	0.	7,881.	8,490.	209,288.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(20) VICTOR OLGAY PRINCIPAL	(i)	147,932.	24,346.	0.	5,894.	22,265.	200,437.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(21) LARS THOMAS KOCH BLANK PRINCIPAL	(i)	133,658.	39,096.	0.	6,961.	21,346.	201,061.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(22) LILY DONGE PRINCIPAL	(i)	145,582.	39,564.	0.	7,676.	14,193.	207,015.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(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.

PART I, LINE 1A:

BUSINESS USE OF PERSONAL RESIDENCE - AMORY LOVINS RENTS APPROXIMATELY 1200 SQ FT OF HIS HOUSE, PLUS SHARED SPACE TO RMI AS OFFICE SPACE UNDER A 1-YEAR WRITTEN LEASE ENDING DECEMBER 31, 2019. THE RENT IS \$1,000 PER MONTH.

BUSINESS CLASS IS ALLOWED FOR INTERNATIONAL TRAVEL.

PART I, LINE 4A:

AS REPORTED ON SCHEDULE J, PART II, TWO FORMER MANAGING DIRECTORS RECEIVED A SEVERANCE/CHANGE OF CONTROL PAYMENT.

PART I, LINE 7:

NON-FIXED PAYMENTS - SOME EMPLOYEES WERE PAID PERFORMANCE BONUSES AT THE DISCRETION OF MANAGEMENT.

**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: **ROCKY MOUNTAIN INSTITUTE** Employer identification number: **74-2244146**

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	26	1,869,446.	FMV
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 ()				
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**

	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

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

ROCKY MOUNTAIN INSTITUTE

Employer identification number

74-2244146

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

LOW-CARBON FUTURE.

FORM 990, PART III, LINE 2, NEW PROGRAM SERVICES:

REBA WAS ORIGINALLY FOUNDED AS A PARTNERSHIP BETWEEN FOUR NGOS - ROCKY MOUNTAIN INSTITUTE (FORMERLY THE BUSINESS RENEWABLES CENTER OR BRC PROGRAM), WORLD WILDLIFE FUND, WORLD RESOURCES INSTITUTE, AND BUSINESS FOR SOCIAL RESPONSIBILITY TO ADDRESS MAJOR OBSTACLES LARGE CORPORATE BUYERS FACED IN PROCURING AND INSTALLING RENEWABLE ENERGY. THIS SUCCESSFUL COLLABORATION HAS ALLOWED THE REBA COMMUNITY TO GROW TO MORE THAN 200 LARGE ENERGY BUYERS AND MORE THAN 150 CLEAN ENERGY DEVELOPERS AND SERVICE PROVIDERS. BUILDING ON THE BUYERS PRINCIPLES AND FUTURE OF INTERNET POWER PROGRAMS, PARTICIPANTS IN THE REBA COMMUNITY HAVE BEEN A PART OF 98 PERCENT OF ALL LARGE-SCALE US CORPORATE RENEWABLE ENERGY DEALS TO DATE.

FORM 990, PART III, LINE 3, CHANGES IN PROGRAM SERVICES:

THE BUSINESS RENEWABLES CENTER (BRC PROGRAM) CEASED AND TURNED INTO REBA SUBSIDIARY AS DESCRIBED ABOVE.

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:

INNOVATION, COLLABORATION, AND THE ACCELERATION OF THE IDEAS THAT WILL TRANSFORM THE ELECTRICITY SYSTEM FROM THE INSIDE OUT.

FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS:

EFFICIENCY AND RENEWABLE ENERGY TO CREATE BETTER HOMES FOR OUR

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

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

832211 10-10-18

Name of the organization ROCKY MOUNTAIN INSTITUTE	Employer identification number 74-2244146
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FAMILIES, OUR POCKETBOOKS, AND THE ENVIRONMENT. 4) REALIZE CATALYZING THE ZERO CARBON RESIDENTIAL REVOLUTION. TOGETHER, WE'LL MAKE BETTER PERFORMING, SAFER, AND MORE COMFORTABLE HOMES FOR ALL AMERICAN FAMILIES WHILE SPURRING WEALTH AND JOB CREATION IN COMMUNITIES ACROSS THE COUNTRY, ESPECIALLY THOSE THAT HAVE BEEN ECONOMICALLY LEFT BEHIND. 5) THE GLOBAL COOLING PRIZE - AN INNOVATION COMPETITION TO DEVELOP A CLIMATE-FRIENDLY RESIDENTIAL COOLING SOLUTION THAT CAN PROVIDE ACCESS TO COOLING TO PEOPLE AROUND THE WORLD WITHOUT WARMING THE PLANET.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

BUILDING ELECTRIFICATION - DEVELOPING INTEGRATED SOLUTIONS TO SWIFTLY ELIMINATE FOSSIL FUELS FROM BUILDINGS.

EXPENSES \$ 1,042,019. INCLUDING GRANTS OF \$ 0. REVENUE \$ 1,262.

CITIES AND STATES - DEVELOPING STRATEGIC, COST-EFFECTIVE SOLUTIONS AND THE TECHNICAL ASSISTANCE TO BRING CITIES AND STATES AMBITIOUS CLIMATE GOALS TO REALITY AND STAND UP CREDIBLE, ECONOMICALLY VIABLE PATH TO FULL CLIMATE-NEUTRALITY. SUPPORTING INITIATIVES INCLUDE:

1) AMERICAS PLEDGE - ANALYZE, CATALYZE, AND SHOWCASE HOW CLIMATE ACTION LED BY STATES, CITIES, AND BUSINESSES IS DRIVING THE UNITED STATES TOGETHER TOWARD A LOW-CARBON FUTURE.

2) CITIES RENEWABLES ACCELERATOR - ACCELERATING OPPORTUNITIES FOR WINNERS OF THE AMERICAN CITIES CLIMATE CHALLENGE, AN INITIATIVE SPONSORED BY BLOOMBERG PHILANTHROPIES, URBAN SUSTAINABILITY DIRECTORS NETWORK MEMBERS, AND OTHER U.S. CITIES TO IMPLEMENT HIGH-IMPACT, NEAR-TERM RENEWABLE ENERGY PROJECTS.

EXPENSES \$ 959,966. INCLUDING GRANTS OF \$ 0. REVENUE \$ 871.

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CHINA - HELPING CHINA TO SLASH CARBON EMISSIONS AND CHART A CLEAN ENERGY PATHWAY SO THE WORLD'S LARGEST ECONOMY AND CARBON EMITTER CAN ACHIEVE GREATER HEALTH AND VITALITY AND HELP CURB GLOBAL CLIMATE CHANGE. SUPPORTING INITIATIVES INCLUDE:

1) REFORMING CHINA'S POWER MARKET: TO INTEGRATE MORE RENEWABLES OVER COAL.

2) ELECTRIFYING TRANSPORTATION: TO SHIFT FREIGHT OFF OIL AND ONTO ELECTRICITY.

3) ESTABLISHING NEAR-ZERO CARBON ZONES: TO SUPPORT CONTINUED URBANIZATION WITHOUT INCREASING EMISSIONS.

4) SUPPORTING CITIES IN PEAKING CARBON EMISSIONS: TO PROVE REDUCING CARBON EMISSIONS IS POSSIBLE AND ECONOMIC AT THE CITY LEVEL.

EXPENSES \$ 3,509,358. INCLUDING GRANTS OF \$ 0. REVENUE \$ 389,821.

EMERGING SOLUTIONS - IDENTIFYING AND SCALING NEW PATHWAYS TO SPEED THE GLOBAL ENERGY TRANSITION. SUPPORTING INITIATIVES INCLUDE:

1) SEVEN CHALLENGES TO GLOBAL ENERGY TRANSITION: RESEARCH HIGHLIGHTING THE OPPORTUNITIES FOR COORDINATED ACTION ACROSS PUBLIC, PRIVATE, AND COMMUNITY ACTORS TO RAPIDLY DECARBONIZE THE GLOBAL ECONOMY.

2) EMERGING INNOVATION SUMMIT - CONVENING KEY US AND GLOBAL INFLUENCERS TO SOLVE BIG, INTEGRATED ENERGY CHALLENGES AND SET PRIORITIES ON AREAS OF FOCUS.

3) THE GLOBAL ENERGY SOLUTIONS LAB - A COLLABORATIVE PLATFORM FOR PRIVATE, PUBLIC, AND PHILANTHROPIC ORGANIZATIONS TO APPLY WHOLE-SYSTEMS DESIGN AND ANALYSIS TO GENERATE AND TEST NEW INITIATIVES - FOCUSING ON THE TOUGHEST PROBLEMS AND EMERGING OPPORTUNITIES IN THE ENERGY TRANSITION AS BY THE SEVEN CHALLENGES RESEARCH.

EXPENSES \$ 1,664,801. INCLUDING GRANTS OF \$ 0. REVENUE \$ 148,733.

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GLOBAL CLIMATE FINANCE - ALIGNING GLOBAL INVESTMENT WITH CLEAN ENERGY GOALS, AND ENGAGE FINANCIAL INSTITUTIONS AND POLICY-MAKERS TO SUPPORT A LOW-CARBON FUTURE. SUPPORTING INITIATIVES INCLUDE:

1) REINVENTING CLIMATE FINANCE - PROVIDING A HOLISTIC VIEW OF CLIMATE FINANCE TO DRIVE DECARBONIZATION.

2) GREEN INVESTMENT BANKS - INCREASING THE AVAILABILITY OF AND EASE OF ACCESS TO FINANCE FOR LOW-CARBON DEVELOPMENT IN EMERGING COUNTRIES.

3) CLIMATE FINANCE ACCESS NETWORK - SUBSTANTIALLY IMPROVING THE CAPACITY OF LOW-INCOME COUNTRIES TO UNLOCK FUNDING FOR GREEN INVESTMENT.

4) MANAGING THE COAL CAPITAL TRANSITION - EASING CAPITAL DESTRUCTION FOR ASSET OWNERS AND THEIR SHAREHOLDERS WHILE OFFERING POLICYMAKERS A CLEARER PATH TOWARD TRANSITIONING THE POWER SECTOR ONTO A WELL BELOW 2C PATHWAY.

EXPENSES \$ 2,362,745. INCLUDING GRANTS OF \$ 0. REVENUE \$ 421,497.

INDIA MOBILITY - HELPING INDIA CAPTURE ITS LEAPFROG OPPORTUNITY TO CREATE A SHARED, ELECTRIC, AND CONNECTED MOBILITY FUTURE THAT PROMISES TO PROVIDE INDIANS WITH CLEAN, AFFORDABLE, EFFICIENT, AND RELIABLE TRANSPORTATION OPTIONS TO SUPPORT THE MOVEMENT OF GOODS AND PEOPLE AND ENHANCE THEIR DAILY LIVES.

EXPENSES \$ 2,104,791. INCLUDING GRANTS OF \$ 0. REVENUE \$ 13,993.

INDUSTRY AND HEAVY TRANSPORT - WORKING ON A CRITICAL PIECE OF THE CLIMATE PUZZLE: DECARBONIZING THE WORLD'S GOODS AND SERVICES, INCLUDING HOW THEY ARE DESIGNED, SOURCED, PRODUCED, AND DELIVERED. SUPPORTING INITIATIVES INCLUDE: 1) MATERIALS VALUE CHAIN - DECARBONIZING THE

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MATERIALS THAT GO INTO OUR EVERYDAY GOODS, INCLUDING METALS AND MINERALS, STEEL, AND CEMENT. 2) ENERGY INPUTS - REDUCING THE CARBON INTENSITY OF THE FUELS USED TO PRODUCE AND TRANSPORT GOODS. 3) HEAVY TRANSPORT - DECARBONIZING THE TRUCKS, TRAINS, AIRPLANES, AND SHIPS THAT MOVE PEOPLE AND GOODS AROUND THE WORLD EVERY DAY.

EXPENSES \$ 3,483,730. INCLUDING GRANTS OF \$ 0. REVENUE \$ 1,612,857.

MOBILITY - ACCELERATING THE CHANGE TO A LOW-CARBON TRANSPORTATION SYSTEM ON AN AMBITIOUS SCALE. SUPPORTING INITIATIVES INCLUDE:

1) EV-GRID - WORKING WITH UTILITIES, POLICYMAKERS, AND BUSINESSES TO MAKE ELECTRIC VEHICLE (EV) CHARGING EFFECTIVE AND SCALABLE, FOCUSING ON PERSONAL VEHICLES AND FLEETS.

2) E-BUSES - ENSURING RAPID LEARNING AND ACCELERATING THE ECONOMIC SUSTAINABILITY OF ELECTRIC TRANSIT BUSES AROUND THE WORLD.

3) MOBILITY INNOVATION LAB - PROVIDING A GROUNDBREAKING CHANGE LAB THAT SUPPORTS INNOVATION, COLLABORATION, AND THE ACCELERATION OF THE BOTTOMS-UP IDEAS THAT WILL TRANSFORM THE TRANSPORTATION SYSTEM.

4) MOBILITY DATA - FOCUSING ON WAYS IN WHICH BETTER DATA AND BETTER ANALYSIS CAN BOTH CHANGE BEHAVIOR AND IMPROVE TRANSPORTATION SYSTEMS.

EXPENSES \$ 2,072,286. INCLUDING GRANTS OF \$ 0. REVENUE \$ 1,260,478.

RMI VENTURES AND THE ENERGY COLLABORATIVE - HELPING TO SUPERCHARGE INVESTMENT IN CLEANTECH WHILE FOSTERING RMI MARKET AFFILIATES WHICH CURRENTLY INCLUDE:

1) BLACK BEAR ENERGY - A FOR-PROFIT ENTITY THAT WORKS WITH CLIENTS TO IDENTIFY, PROCURE, AND EXECUTE NEW RENEWABLE ENERGY, STORAGE, AND EFFICIENCY PROJECTS.

2) WATTTIME - CREATES TECHNOLOGY SOLUTIONS THAT MAKE IT EASY FOR

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ANYONE TO ACHIEVE EMISSIONS REDUCTIONS WITHOUT COMPROMISING COST,
COMFORT, OR FUNCTION.

3) THE ENERGY WEB FOUNDATION - A GLOBAL NON-PROFIT FOCUSED ON
ACCELERATING BLOCKCHAIN TECHNOLOGY ACROSS THE ENERGY SECTOR TO REDUCE
ENERGY TRANSACTION COSTS, ENABLE GREATER CUSTOMER PARTICIPATION, AND
ACCELERATE THE TRANSITION TOWARD A CLEANER, MORE RESILIENT, AND MORE
COST-EFFECTIVE SYSTEM.

4) RENEWABLE ENERGY BUYERS ALLIANCE - FOCUSED ON TURBOCHARGING
CORPORATE RENEWABLE ENERGY PROCUREMENT. ITS 300 MEMBERS REPRESENT THE
LARGEST GROUP OF CORPORATE RENEWABLE ENERGY BUYERS IN THE UNITED STATES
AND AIM TO BRING MORE THAN 60 GIGAWATTS (GW) OF NEW RENEWABLES ONLINE
IN THE UNITED STATES BY 2025.

EXPENSES \$ 1,157,810. INCLUDING GRANTS OF \$ 0. REVENUE \$ 727,417.

MARKETING AND COMMUNICATIONS -

THE COMMS TEAM UTILIZES PURPOSEFUL AND COMPELLING COMMUNICATIONS TO
AMPLIFY RMI'S WORK AND IMPACT. OUR OBJECTIVES ARE TO PROVIDE A
STRATEGIC COMMUNICATIONS LENS TO PROGRAMS IN ORDER TO SET PROGRAM
DIRECTION, AND REACH SHORT- AND LONG-TERM IMPACTS, OUTCOMES, AND
OUTPUTS THAT ACHIEVE THE DESIRED IMPACT; AND TO PROVIDE COORDINATED
TACTICAL SUPPORT TO PROGRAMS WITH HIGH QUALITY MEDIA, SOCIAL MEDIA,
EDITORIAL, AND DESIGN SUPPORT.

EXPENSES \$ 1,755,967. INCLUDING GRANTS OF \$ 0. REVENUE \$ 179,949.

BUSINESS RENEWABLES CENTER (BRC) - STREAMLINING AND ACCELERATING
CORPORATE PURCHASING OF LARGE-SCALE WIND AND SOLAR ENERGY. WE AIM TO
HELP CORPORATIONS PROCURE 60 GIGAWATTS OF RENEWABLE ENERGY BY 2030.

EXPENSES \$ 1,107,966. INCLUDING GRANTS OF \$ 0. REVENUE \$ 1,193,739.

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

JULES KORTENHORST AND JON CREYTS HAVE A BUSINESS RELATIONSHIP AS THEY SERVE TOGETHER ON A SEPARATE BOARD.

FORM 990, PART VI, SECTION A, LINE 4:

THE ARTICLES OF INCORPORATION WERE AMENDED IN MAY 2019 TO ALLOW LONGER TERMS OF SERVICE BY TRUSTEES IN UNIQUE CIRCUMSTANCES TO CREATE STAGGERED TERMS AND MAINTAIN CONTINUITY AND AVOID LOSING NEEDED SKILL SETS.

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

RMI'S REVIEW PROCESS FOR THE 990 FORM BEGINS WITH A FORMAL REVIEW BY MANAGEMENT. AFTER MANAGEMENT REVIEW, THE 990 WILL BE DISTRIBUTED TO THE FULL BOARD PRIOR TO FILLING.

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

TRUSTEES AND KEY PERSONNEL ARE PROVIDED A CONFLICT OF INTEREST POLICY ON AN ANNUAL BASIS TO DISCLOSE OF ANY INTERESTS. THE POLICY IS DISTRIBUTED ANNUALLY AND SIGNED BY ALL TRUSTEES AND KEY PERSONNEL.

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

RMI HAS ENGAGED AN OUTSIDE COMPENSATION FIRM TO REVIEW COMPENSATION AT ALL LEVELS AND HELP THE ORGANIZATION TO ENSURE COMPENSATION LEVELS ARE APPROPRIATELY COMPETITIVE WITHIN THE MARKET. THIS REVIEW IS COMPLETED EVERY COUPLE OF YEARS.

RMI REGULARLY ENSURES NEW AND MODIFIED POSITIONS OF ALL LEVELS ARE APPROPRIATELY PRICED WITH REGARD TO SALARY AND BONUS, INCLUDING SENIOR

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LEVEL POSITIONS. ADDITIONALLY, THE BOARD OF TRUSTEES FORMED A RENUMERATION COMMITTEE IN 2013 TO ENSURE APPROPRIATE COMPENSATION PRACTICES ARE IN PLACE FOR THE ENTIRE INSTITUTE, INCLUSIVE OF THE EXECUTIVE LEVEL. THIS RENUMERATION COMMITTEE ALSO APPROVES COMPENSATION ACTIONS REGARDING SENIOR TEAM MEMBERS AND RMI'S CEO.

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

AL, AK, AR, CA, CO, CT, FL, GA, HI, IL, KS, KY, ME, MD, MA, MI, MN, MS, NV, NH, NJ, NM, NY, NC, ND
OH, OK, OR, PA, RI, SC, TN, UT, VA, WA, WV, WI

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

RMI'S ARTICLES OF INCORPORATION ARE OF PUBLIC RECORD WITH THE COLORADO SECRETARY OF STATE. ANNUAL REPORTS, IRS FORM 990, AND AUDITED FINANCIAL STATEMENTS ARE AVAILABLE ON THE RMI WEBSITE (WWW.RMI.ORG). COPIES OF ANY POLICY, INCLUDING BYLAWS, ARE AVAILABLE UPON REQUEST.

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

CONSULTING FEES:

PROGRAM SERVICE EXPENSES	5,867,604.
MANAGEMENT AND GENERAL EXPENSES	755,015.
FUNDRAISING EXPENSES	45,348.
TOTAL EXPENSES	6,667,967.

PAYROLL FEES:

PROGRAM SERVICE EXPENSES	0.
MANAGEMENT AND GENERAL EXPENSES	137,897.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	137,897.

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WEBSITE:

PROGRAM SERVICE EXPENSES	97,074.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	97,074.
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	6,902,938.

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

WRITE-OFF OF PLEDGES RECEIVABLE	-109,766.
CHANGE IN NET ASSETS HELD AT THE DENVER FOUNDATION	17,635.
TOTAL TO FORM 990, PART XI, LINE 9	-92,131.

**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 **ROCKY MOUNTAIN INSTITUTE** Employer identification number **74-2244146**

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
RMI INNOVATION CENTER LLC - 74-2244146 2490 JUNCTION PLACE SUITE 200 BOULDER, CO 80302	OWNERSHIP & MGMT OF ROCKY MOUNTAIN INSTITUTE INNOVATION CENTER IN	COLORADO		14,706,189.	ROCKY MOUNTAIN INSTITUTE

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
ROCKY MOUNTAIN INSTITUTE-INTERNATIONAL - 47-3919461, 2490 JUNCTION PLACE SUITE 200, BOULDER, CO 80302	QIAHAI RMI RESEARCH CENTER	COLORADO	501(C)(3)	LINE 12A, I	ROCKY MOUNTAIN INSTITUTE	X	
WATTTIME CORPORATION - 47-1444637 1111 BROADWAY OAKLAND, CA 94607	RAISE AWARENESS ABOUT SHIFTING ELECTRICITY USE TIMES	CALIFORNIA	501(C)(3)	LINE 12A, I	ROCKY MOUNTAIN INSTITUTE	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) ROCKY MOUNTAIN INSTITUTE INTERNATIONAL	D	362,206.	FMV
(2)			
(3)			
(4)			
(5)			
(6)			

Part VII Supplemental Information.

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

PART I, IDENTIFICATION OF DISREGARDED ENTITIES:

NAME OF DISREGARDED ENTITY:

RMI INNOVATION CENTER LLC

PRIMARY ACTIVITY: OWNERSHIP & MGMT OF ROCKY MOUNTAIN INSTITUTE INNOVATION CENTER IN BASALT, CO

PART III, IDENTIFICATION OF RELATED ORGANIZATIONS TAXABLE AS PARTNERSHIP:

NAME AND ADDRESS OF RELATED ORGANIZATION:

QIANHAI RMI RESEARCH CENTER (SHENZHEN) (LIMITED PARTNERSHIP).

UNIT 201, TOWER 1, NO. 1 QIANWAN ROAD,

QIANHAI, SHENZHEN, CHINA