# Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

| AF                                    | or the                     | 2023 calendar year, or tax year beginning and  | enaing        |                             |   |  |
|---------------------------------------|----------------------------|--|---------------|-----------------------------|---|--|
| <b>B</b> c                            | heck if<br>pplicable       | C Name of organization   |               | D Employer identifi         | cation number                               |  |
|                                       | Addres                     | * MULTIPLIER   |               |                             |   |  |
|                                       | Name<br>change             | Doing business as  |               | 91-21664                    | 35  |  |
|                                       | Initial<br>return<br>Final | ,  | Room/suite    | E Telephone numbe           |   |  |
|                                       | return/<br>termin-<br>ated | 548 MARKET STREET, PMB 81178   |               | 415-421-                    |   |  |
|                                       | ated                       |  |               | G Gross receipts \$         | 131,691,340.                                |  |
|                                       | ∐return<br>∏Applica        | SAN FRANCISCO, CA 94104  F Name and address of principal officer: LAURA DEATON   |               | H(a) Is this a group r      |   |  |
|                                       | ⊥tion<br>pendin            |  | 4104          | for subordinates            | —   |  |
|                                       | -0., 0.,                   |  |               | H(b) Are all subordinates i |   |  |
|                                       | Vebsit                     |  | 01 327        | H(c) Group exemption        | list. See instructions                      |  |
|                                       |                            | organization: X Corporation Trust Association Other  | I Vear        | <del></del>                 | <b>M</b> State of legal domicile: <b>CA</b> |  |
|                                       |                            | Summary  | <b>L</b> 10ai | or formation: 2002 1        | VI Otato or logar dominono, O22             |  |
|                                       |                            | Briefly describe the organization's mission or most significant activities: ${	t TO}$ ${	t PI}$                                  | ROTECT        | AND FOSTER                  | A HEALTHY,                                  |  |
| ce                                    |                            | SUSTAINABLE, RESILIENT, AND EQUITABLE WOR  |               |                             | ,   |  |
| nar                                   | Ι .                        | Check this box if the organization discontinued its operations or dispos   |               | than 25% of its net as      | sets.                                       |  |
| ver                                   | 3                          |  |               | 3                           | 7   |  |
| ၓ                                     | 4                          | Number of independent voting members of the governing body (Part VI, line 1b)  |               |                             | 7   |  |
| Š                                     |                            | Total number of individuals employed in calendar year 2023 (Part V, line 2a)   |               |                             | 245   |  |
| /itie                                 |                            | Total number of volunteers (estimate if necessary)   |               |                             | 550   |  |
| Activities & Governance               | 7 a                        | Total unrelated business revenue from Part VIII, column (C), line 12   |               |                             |   |  |
| _                                     | b                          | Net unrelated business taxable income from Form 990-T, Part I, line 11   |               |                             | 0.  |  |
|                                       |                            |  |               | Prior Year                  | Current Year                                |  |
| Revenue                               | 8                          | Contributions and grants (Part VIII, line 1h)  |               | 54,265,863.                 | 70,561,848.                                 |  |
|                                       | l                          | Program service revenue (Part VIII, line 2g)   |               | 1,941,007.                  | 2,357,568.                                  |  |
| 3eV                                   |                            | nvestment income (Part VIII, column (A), lines 3, 4, and 7d)   |               | -11,062.                    | 1,918,831.                                  |  |
| _                                     | ı                          | Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)   |               | 247,510.                    | 137,897.                                    |  |
|                                       |                            | Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)   |               | 56,443,318.                 | 74,976,144.                                 |  |
|                                       | l                          | Grants and similar amounts paid (Part IX, column (A), lines 1-3)   |               | 4,163,333.                  | 24,491,966.                                 |  |
|                                       | ı                          | Benefits paid to or for members (Part IX, column (A), line 4)  |               | 0.<br>18,132,816.           | 0.  |  |
| ses                                   | 15                         | Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)  |               | 0.                          | 20,588,539.                                 |  |
| Expenses                              | 16a                        | Professional fundraising fees (Part IX, column (A), line 11e)  Total fundraising expenses (Part IX, column (D), line 25)  856,87 | 73            | 0.                          | 0.  |  |
| Exp                                   | 17                         | Total fundraising expenses (Part IX, column (D), line 25) 856,8  Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)    |               | 13,490,013.                 | 17,040,180.                                 |  |
|                                       | ''                         | Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)  |               | 35,786,162.                 |   |  |
|                                       | ı                          | Revenue less expenses. Subtract line 18 from line 12   |               | 20,657,156.                 |   |  |
| -Se                                   | 13                         | Teveride less expenses. Oubtract line to from line 12  |               | ginning of Current Year     | End of Year                                 |  |
| Net Assets or<br>Fund Balances        | 20                         | Total assets (Part X, line 16)   |               | 65,327,961.                 | 76,819,430.                                 |  |
| Ass<br>Bal                            | 21                         | Total liabilities (Part X, line 26)  |               | 6,955,923.                  | 7,563,485.                                  |  |
| Net                                   | 22                         | Net assets or fund balances. Subtract line 21 from line 20   |               | 58,372,038.                 | 69,255,945.                                 |  |
| Pa                                    | rt II                      | Signature Block  |               |                             |   |  |
| Unde                                  | er pena                    | ties of perjury, I declare that I have examined this return, including accompanying schedules                                    | and stateme   | ents, and to the best of m  | y knowledge and belief, it is               |  |
| true,                                 | correc                     | t, and complete. Declaration of preparer (other than officer) is based on all information of wh                                  | ich preparer  | has any knowledge.          |   |  |
|                                       |                            |  |               |                             |   |  |
| Sigr                                  | า                          | Signature of officer   |               | Date                        |   |  |
| Here LAURA DEATON, EXECUTIVE DIRECTOR |                            |  |               |                             |   |  |
|                                       |                            | Type or print name and title   |               |                             |   |  |
|                                       |                            | Print/Type preparer's name Preparer's signature  |               | Date Check [                | PTIN  |  |
| Paid                                  |                            | NICHOLE REILLY, CPA NICHOLE REILLY,  | CPA 1         | .1/04/24 self-emplo         |   |  |
| -                                     | arer                       | Firm's name AAFCPAS, INC.  |               | Firm's EIN 0                | 4-2571780                                   |  |
| Use                                   | Only                       | Firm's address 50 WASHINGTON STREET  |               |                             | 0 266 0100                                  |  |
|                                       |                            | WESTBOROUGH, MA 01581  |               | Phone no. 5 0               | 8-366-9100                                  |  |
| May                                   | the IF                     | S discuss this return with the preparer shown above? See instructions  |               |                             | X Yes No                                    |  |

| Form      | 1 990 (2023) MULTIPLIER   | 91-2166435                 | Page 2              |
|-----------|---|----------------------------|---------------------|
|           | rt III Statement of Program Service Accomplishments   |                            |                     |
|           | Check if Schedule O contains a response or note to any line in this Part III  |                            | X                   |
| 1         | Briefly describe the organization's mission:  |                            |                     |
|           | TO ACCELERATE IMPACT FOR INITIATIVES FOCUSED ON PROTECTION  | NG AND                     |                     |
|           | FOSTERING A HEALTHY, SUSTAINABLE, RESILIENT, AND EQUITAB  |                            |                     |
|           | · · · · · · · · · · · · · · · · · · ·   |                            |                     |
|           |   |                            |                     |
| 2         | Did the organization undertake any significant program services during the year which were not listed on the                        |                            |                     |
| _         | prior Form 990 or 990-EZ?   | Yes                        | X No                |
|           | If "Yes," describe these new services on Schedule O.  |                            |                     |
| 3         | Did the organization cease conducting, or make significant changes in how it conducts, any program services?                        | Yes                        | X No                |
| Ū         | If "Yes," describe these changes on Schedule O.   |                            |                     |
| 4         | Describe the organization's program service accomplishments for each of its three largest program services, as                      | magaired by expenses       |                     |
| 4         | Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other                  |                            | ı.                  |
|           |   | s, the total expenses, and | ı                   |
| _         | revenue, if any, for each program service reported.  (Code:) (Expenses \$25,703,878 . including grants of \$22,263,506 . ) (Reven   | 10 2                       | 65.)                |
| 4a        | (Code:) (Expenses \$25,703,878. including grants of \$22,263,506. ) (Reven RESILIENT COMMUNITIES: COMMUNITIES ARE PREPARED TO ANTIC | ue\$ 47,3                  |                     |
|           |   |                            | <u>T</u>            |
|           | AND MINIMIZE THREATS TO THEIR CITIZENS, BUSINESSES, INFR.   |                            |                     |
|           | ENVIRONMENT, AND ECONOMIES. COMMUNITY-BASED APPROACHES P  |                            |                     |
|           | ADDRESS RESILIENCE TO THE IMPACTS OF CLIMATE CHANGE AND   | OTHER NATURAL              | <u>'</u>            |
|           | DISASTERS, ECONOMIC STABILITY AND SOCIAL EQUITY.  |                            |                     |
|           |   |                            |                     |
|           |   |                            |                     |
|           |   |                            |                     |
|           |   |                            |                     |
|           |   |                            |                     |
|           |   |                            |                     |
|           |   |                            |                     |
| 4b        |   | ue\$1,626,0                | <u>11.</u> )        |
|           | SUSTAINABLE, EQUITABLE ECONOMIES: WORKERS, THEIR FAMILIE  |                            |                     |
|           | COMMUNITIES IN WHICH THEY LIVE ARE SUSTAINED BY ECONOMIC.   |                            |                     |
|           | LOCAL AND REGIONAL BUSINESSES. INDUSTRIES WITH CORE VALUE   |                            | CT                  |
|           | MINIMAL ENVIRONMENTAL IMPACT ARE FOSTERED, SUSTAINED AND  | ENABLED TO                 |                     |
|           | THRIVE.   |                            |                     |
|           |   |                            |                     |
|           |   |                            |                     |
|           |   |                            |                     |
|           |   |                            |                     |
|           |   |                            |                     |
|           |   |                            |                     |
|           |   |                            |                     |
| 4c        | (Code:) (Expenses \$11,602,766 • including grants of \$633,617 • ) (Reven   | ue\$ 614,9                 | 39.)                |
|           | SECURE NATURAL RESOURCES: NATURAL RESOURCES ACHIEVE SUST.   |                            |                     |
|           | KEEP HUMANS AND OTHER SPECIES ALIVE, AND SUPPORT THE WOR  | LD'S ECONOMIE              | S.                  |
|           | POLICIES AND PRACTICES ARE IN PLACE TO ENSURE THAT NATUR.   |                            |                     |
|           | ARE NOT DEGRADED OR DEPLETED. AFTER PERIODIC DISTURBANCE  |                            |                     |
|           | ECOSYSTEMS, RESOURCES ARE ABLE TO QUICKLY RECOVER OR RET  |                            |                     |
|           | EQUILIBRIUM.  | <u></u>                    |                     |
|           | <u> </u>  |                            |                     |
|           |   |                            |                     |
|           |   |                            |                     |
|           |   |                            |                     |
|           |   |                            |                     |
|           |   |                            |                     |
|           |   |                            |                     |
| 4d        | Other program services (Describe on Schedule O.)  | 00 400                     |                     |
|           | (Expenses \$ 5,295,815 · including grants of \$ 160,236 · ) (Revenue \$   | 80,428.)                   |                     |
| <u>4e</u> | Total program service expenses 57,212,431.  |                            | <b>Ω</b> (a = = : : |
|           |   | Form <b>99</b>             | (2023) 🕶            |

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## Form 990 (2023) MULTIPLIER Part IV Checklist of Required Schedules

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

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| Eorm | 990 (2023) MULTIPLIER 91-216   | 6435    | D   | age <sup>4</sup> |
|------|--|---------|-----|------------------|
| Pa   | rt IV Checklist of Required Schedules (continued)  | 0 1 3 3 |     | aye              |
|      | Terrina de la company  |         | Yes | No               |
| 22   | Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on  |         |     |                  |
|      | Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III  | 22      |     | X                |
| 23   | Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current  |         |     |                  |
|      | and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete   |         |     |                  |
|      | Schedule J   | 23      | Х   |                  |
| 24a  | Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the  |         |     |                  |
|      | last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete   |         |     | ,,               |
|      | Schedule K. If "No," go to line 25a  | 24a     |     | X                |
|      | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?  | . 24b   |     |                  |
| С    | Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?   | 24c     |     |                  |
| d    | Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  | 24d     |     |                  |
| 25a  | Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit   |         |     | l                |
|      | transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I  | 25a     |     | X                |
| b    | Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and   |         |     |                  |
|      | that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete  |         |     | ,,               |
|      | Schedule L, Part I   | 25b     |     | X                |
| 26   | Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current  |         |     |                  |
|      | or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%  | 26      |     | x                |
| 27   | controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II  Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,  | . 20    |     |                  |
| 21   | creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled  |         |     |                  |
|      | entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III   | 27      |     | x                |
| 28   | Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV,  |         |     |                  |
|      | instructions for applicable filing thresholds, conditions, and exceptions):  |         |     |                  |
| а    | A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i>  |         |     |                  |
|      | "Yes," complete Schedule L, Part IV  | 28a     |     | x                |
| b    | A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV  | 28b     |     | Х                |
| С    | A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If   |         |     |                  |
|      | "Yes," complete Schedule L, Part IV  | 28c     |     | X                |
| 29   | Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M  | . 29    | Х   |                  |
| 30   | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation  |         |     |                  |
|      | contributions? If "Yes," complete Schedule M   |         |     | X                |
| 31   | Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I   | . 31    |     | X                |
| 32   | Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete   |         |     | ,,               |
|      | Schedule N, Part II  | 32      |     | X                |
| 33   | Did the organization own 100% of an entity disregarded as separate from the organization under Regulations   |         |     | , .              |
| 0.4  | sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I  | 33      |     | X                |
| 34   | Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1   | 34      |     | х                |
|      | Did the organization have a controlled entity within the meaning of section 512(b)(13)?  | 35a     |     | X                |
| b    | If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity  |         |     |                  |
|      | within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2  | 35b     |     |                  |
| 36   | Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?   |         |     | ,,               |
|      | If "Yes," complete Schedule R, Part V, line 2  | 36      |     | X                |
| 37   | Did the organization conduct more than 5% of its activities through an entity that is not a related organization   |         |     | _ v              |
| 20   | and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI   | . 37    |     | X                |
| 38   | Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?  Note: All Form 990 filers are required to complete Schedule O  | 38      | Х   |                  |
|      | Treser / III / Citin God Illord and required to delitable Collegials Collegia | 1 30    |     |                  |

## Note: All Form 990 filers are required to complete Schedule O Part V Statements Regarding Other IRS Filings and Tax Compliance

|    | Check if Schedule O contains a response or note to any line in this Part V                          |        |            |    |     |    |
|----|---|--------|------------|----|-----|----|
|    |   |        |            |    | Yes | No |
| 1a | Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable                        | 1a     | 255        |    |     |    |
| b  | Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable                     | 1b     | 0          |    |     |    |
| С  | Did the organization comply with backup withholding rules for reportable payments to vendors and re | portab | ole gaming |    |     |    |
|    | (gambling) winnings to prize winners?   |        |            | 10 | X   |    |

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Form 990 (2023) MULTIPLIER

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

|     |  |                              |          | Yes | No |
|-----|--|------------------------------|----------|-----|----|
| 2a  | Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,  |                              |          |     |    |
|     | filed for the calendar year ending with or within the year covered by this return  | 2a 245                       |          |     |    |
| b   | If at least one is reported on line 2a, did the organization file all required federal employment tax return   | ns?                          | 2b       | Х   |    |
| За  | Did the organization have unrelated business gross income of \$1,000 or more during the year?  |                              | 3a       |     | Х  |
| b   | If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule  | 0                            | 3b       |     |    |
| 4a  | At any time during the calendar year, did the organization have an interest in, or a signature or other a  |                              |          |     |    |
|     | financial account in a foreign country (such as a bank account, securities account, or other financial a   | ccount)?                     | 4a       |     | Х  |
| b   | If "Yes," enter the name of the foreign country  |                              |          |     |    |
|     | See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Advanced in the Financi | counts (FBAR).               |          |     |    |
| 5a  | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  |                              | 5a       |     | X  |
| b   | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction  |                              | 5b       |     | X  |
| С   | If "Yes" to line 5a or 5b, did the organization file Form 8886-T?  |                              | 5c       |     |    |
| 6a  | Does the organization have annual gross receipts that are normally greater than \$100,000, and did the   | e organization solicit       |          |     |    |
|     | any contributions that were not tax deductible as charitable contributions?  |                              | 6a       |     | X  |
| b   | If "Yes," did the organization include with every solicitation an express statement that such contribution   |                              |          |     |    |
|     | were not tax deductible?   |                              | 6b       |     |    |
| 7   | Organizations that may receive deductible contributions under section 170(c).  |                              |          |     |    |
| а   | Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and ser  | vices provided to the payor? | 7a       | X   |    |
| b   |  |                              | 7b       | Х   |    |
| С   | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was   | s required                   |          |     |    |
|     | to file Form 8282?   | 1                            | 7c       |     | X  |
| d   | If "Yes," indicate the number of Forms 8282 filed during the year  | 7d                           |          |     | 37 |
| е   | Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit co   |                              | 7e       |     | X  |
| f   | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra  |                              | 7f       |     | X  |
| g   | If the organization received a contribution of qualified intellectual property, did the organization file Fo   |                              | 7g       |     |    |
| h   | If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organiza   |                              | 7h       |     |    |
| 8   | Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained  |                              |          |     |    |
| ^   |  |                              | 8        |     |    |
| 9   | Sponsoring organizations maintaining donor advised funds.  |                              | 0-       |     |    |
| a   |  |                              | 9a<br>9b |     |    |
| 10  | Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?  Section 501(c)(7) organizations. Enter:   |                              | 90       |     |    |
| а   | Initiation fees and capital contributions included on Part VIII, line 12   | 10a                          |          |     |    |
| b   | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  | 10b                          | 1        |     |    |
| 11  | Section 501(c)(12) organizations. Enter:   | 100                          | 1        |     |    |
|     | Gross income from members or shareholders  | 11a                          |          |     |    |
|     | Gross income from other sources. (Do not net amounts due or paid to other sources against  |                              |          |     |    |
| _   | amounts due or received from them.)  | 11b                          |          |     |    |
| 12a | Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form   |                              | 12a      |     |    |
|     | If "Yes," enter the amount of tax-exempt interest received or accrued during the year  | 12b                          |          |     |    |
| 13  | Section 501(c)(29) qualified nonprofit health insurance issuers.   |                              |          |     |    |
| а   | Is the organization licensed to issue qualified health plans in more than one state?   |                              | 13a      |     |    |
|     | <b>Note:</b> See the instructions for additional information the organization must report on Schedule O.   |                              |          |     |    |
| b   | Enter the amount of reserves the organization is required to maintain by the states in which the   |                              |          |     |    |
|     | organization is licensed to issue qualified health plans   | 13b                          | _        |     |    |
| С   | Enter the amount of reserves on hand   | 13c                          |          |     |    |
| 14a | Did the organization receive any payments for indoor tanning services during the tax year?   |                              | 14a      |     | X  |
| b   | If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedul   |                              | 14b      |     |    |
| 15  | Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuner  |                              |          |     |    |
|     | excess parachute payment(s) during the year?   |                              | 15       |     | X  |
|     | If "Yes," see the instructions and file Form 4720, Schedule N.   |                              |          |     |    |
| 16  | Is the organization an educational institution subject to the section 4968 excise tax on net investment  | income?                      | 16       |     | X  |
|     | If "Yes," complete Form 4720, Schedule O.  |                              |          |     |    |
| 17  | Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any ac  |                              |          |     |    |
|     | that would result in the imposition of an excise tax under section 4951, 4952 or 4953?   |                              | 17       |     |    |
|     | If "Yes," complete Form 6069.  |                              |          |     |    |

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

|       | Check if Schedule O contains a response or note to any line in this Part VI   |          |         | X   |  |  |  |  |
|-------|---|----------|---------|-----|--|--|--|--|
| Sec   | tion A. Governing Body and Management   |          |         |     |  |  |  |  |
|       |   |          | Yes     | No  |  |  |  |  |
| 1a    | Enter the number of voting members of the governing body at the end of the tax year 1a 7  |          |         |     |  |  |  |  |
|       | If there are material differences in voting rights among members of the governing body, or if the governing                                 |          |         |     |  |  |  |  |
|       | body delegated broad authority to an executive committee or similar committee, explain on Schedule O.                                       |          |         |     |  |  |  |  |
| b     | Enter the number of voting members included on line 1a, above, who are independent 1b   |          |         |     |  |  |  |  |
| 2     | Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other                    |          |         |     |  |  |  |  |
|       | officer, director, trustee, or key employee?  |          |         |     |  |  |  |  |
| 3     | Did the organization delegate control over management duties customarily performed by or under the direct supervision                       |          |         |     |  |  |  |  |
|       | of officers, directors, trustees, or key employees to a management company or other person?   | 3        | Х       |     |  |  |  |  |
| 4     | Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?                            | 4        |         | Х   |  |  |  |  |
| 5     | Did the organization become aware during the year of a significant diversion of the organization's assets?                                  | 5        |         | Х   |  |  |  |  |
| 6     | Did the organization have members or stockholders?  | 6        |         | Х   |  |  |  |  |
| 7a    | Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or                              |          |         |     |  |  |  |  |
|       | more members of the governing body?   | 7a       |         | Х   |  |  |  |  |
| b     | Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or                          |          |         |     |  |  |  |  |
|       | persons other than the governing body?  | 7b       |         | Х   |  |  |  |  |
| 8     | Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:           |          |         |     |  |  |  |  |
| а     | The governing body?   | 8a       | X       |     |  |  |  |  |
| b     | Each committee with authority to act on behalf of the governing body?   | 8b       | Х       |     |  |  |  |  |
| 9     | Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the                        |          |         |     |  |  |  |  |
|       | organization's mailing address? If "Yes," provide the names and addresses on Schedule O   | 9        |         | Х   |  |  |  |  |
| Sec   | tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)                            |          |         |     |  |  |  |  |
|       |   |          | Yes     | No  |  |  |  |  |
| 10a   | Did the organization have local chapters, branches, or affiliates?  | 10a      |         | X   |  |  |  |  |
| b     | If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,                  |          |         |     |  |  |  |  |
|       | and branches to ensure their operations are consistent with the organization's exempt purposes?   | 10b      |         |     |  |  |  |  |
| 11a   | Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?                 | 11a      | Х       |     |  |  |  |  |
| b     | Describe on Schedule O the process, if any, used by the organization to review this Form 990.   |          |         |     |  |  |  |  |
| 12a   | Did the organization have a written conflict of interest policy? If "No," go to line 13   | 12a      | Х       |     |  |  |  |  |
| b     | Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?         | 12b      | Х       |     |  |  |  |  |
| С     | Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe                          |          |         |     |  |  |  |  |
|       | on Schedule O how this was done   | 12c      | Х       |     |  |  |  |  |
| 13    | Did the organization have a written whistleblower policy?   | 13       | Х       |     |  |  |  |  |
| 14    | Did the organization have a written document retention and destruction policy?  | 14       | Х       |     |  |  |  |  |
| 15    | Did the process for determining compensation of the following persons include a review and approval by independent                          |          |         |     |  |  |  |  |
|       | persons, comparability data, and contemporaneous substantiation of the deliberation and decision?   |          |         |     |  |  |  |  |
| а     | The organization's CEO, Executive Director, or top management official  | 15a      | Х       |     |  |  |  |  |
| b     | Other officers or key employees of the organization   | 15b      |         | X   |  |  |  |  |
|       | If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.  |          |         |     |  |  |  |  |
| 16a   | Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a                       |          |         |     |  |  |  |  |
|       | taxable entity during the year?   | 16a      |         | X   |  |  |  |  |
| b     | If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation                |          |         |     |  |  |  |  |
|       | in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's                              |          |         |     |  |  |  |  |
| C a a | exempt status with respect to such arrangements?  | 16b      |         |     |  |  |  |  |
| Sec   | tion C. Disclosure  |          |         |     |  |  |  |  |
| 17    | List the states with which a copy of this Form 990 is required to be filed CA   |          |         |     |  |  |  |  |
| 18    | Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)             | s only)  | availal | ole |  |  |  |  |
|       | for public inspection. Indicate how you made these available. Check all that apply.   |          |         |     |  |  |  |  |
|       | X Own website Another's website X Upon request Other (explain on Schedule O)  |          |         |     |  |  |  |  |
| 19    | Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, an              | d financ | cial    |     |  |  |  |  |
|       | 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  LAURA DEATON - 415-421-3774 |          |         |     |  |  |  |  |
|       | 548 MARKET STREET, PMB 81178, SAN FRANCISCO, CA 94104-5401  |          |         |     |  |  |  |  |

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

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

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

- 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 the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

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

- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See the instructions for the order in which to list the persons above.

| (A)                                | (B)                  | Ju                            |                           | ((<br>Pos | C)<br>ition  | )                               | -      | (D)                             | (E)                          | (F)                                     |
|------------------------------------|----------------------|-------------------------------|---------------------------|-----------|--------------|---------------------------------|--------|---------------------------------|------------------------------|---|
| Name and title                     | Average<br>hours per |                               | not c                     | heck      | more         | than o                          |        | Reportable compensation         | Reportable compensation      | Estimated<br>amount of                  |
|                                    | week                 | offi                          |                           |           |              | r/trus                          |        | from                            | from related                 | other                                   |
|                                    | (list any            | ndividual trustee or director |                           |           |              |                                 |        | the                             | organizations                | compensation                            |
|                                    | hours for related    | e or di                       | tee                       |           |              | sated                           |        | organization<br>(W-2/1099-MISC/ | (W-2/1099-MISC/<br>1099-NEC) | from the<br>organization                |
|                                    | organizations        | truste                        | al trus                   |           | yee          | m pen                           |        | 1099-NEC)                       | 1000 NEO)                    | and related                             |
|                                    | below                | idual                         | In stit utio nal tru stee | ia.       | Key employee | Highest compensated<br>employee | her    |                                 |                              | organizations                           |
|                                    | line)                | Indi                          | Insti                     | Officer   | Key          | High                            | Former |                                 |                              |   |
| (1) LAURA DEATON                   | 40.00                |                               |                           |           |              |                                 |        |                                 | _                            |   |
| EXECUTIVE DIRECTOR                 |                      |                               | 4                         | X         |              |                                 |        | 257,753.                        | 0.                           | 17,832.                                 |
| (2) STEPHANIE MCCLELLAN            | 40.00                | 1                             |                           |           |              |                                 |        |                                 |                              |   |
| PROJECT DIRECTOR                   |                      |                               |                           |           |              | X                               |        | 242,899.                        | 0.                           | 14,889.                                 |
| (3) GREGORY BROWN                  | 40.00                |                               |                           |           |              |                                 |        |                                 |                              |   |
| PROJECT DIRECTOR                   | 10.00                |                               |                           |           |              | X                               |        | 211,584.                        | 0.                           | 19,799.                                 |
| (4) EVAN EDWARDS                   | 40.00                | -                             |                           |           |              | l                               |        | 000 001                         |                              | 16 601                                  |
| PROJECT DIRECTOR                   | 40.00                |                               | _                         |           |              | X                               |        | 209,381.                        | 0.                           | 16,601.                                 |
| (5) LARA CROUSHORE                 | 40.00                |                               |                           |           |              | ,,                              |        | 104 006                         | _                            | 12 404                                  |
| MANAGING DIRECTOR                  | 40.00                |                               |                           |           |              | Х                               |        | 194,986.                        | 0.                           | 13,494.                                 |
| (6) ALISON KOBBAN                  | 40.00                |                               |                           |           |              | ٦,                              |        | 106 200                         | 0                            | 01 005                                  |
| PROGRAM DIRECTOR                   | 40.00                |                               | _                         |           |              | X                               |        | 186,200.                        | 0.                           | 21,805.                                 |
| (7) CONSTANCE DE BRUN              | 40.00                | -                             |                           |           | ٠,,          |                                 |        | 175 770                         | 0                            | 14 400                                  |
| HEAD OF FINANCE  (8) PHILLIP GOVER | 1.50                 |                               | _                         |           | Х            |                                 |        | 175,770.                        | 0.                           | 14,406.                                 |
| (8) PHILLIP GOVER BOARD CHAIR      | 1.50                 | Х                             |                           | х         |              |                                 |        | 0.                              | 0.                           | 0                                       |
| (9) MIRIAM BILLINGER               | 1.50                 | Λ                             |                           | ^         |              |                                 |        | 0.                              | 0.                           | 0.                                      |
| BOARD TREASURER                    | 1.30                 | Х                             |                           | х         |              |                                 |        | 0.                              | 0.                           | 0.                                      |
| (10) BERND CORDES                  | 1.50                 | Λ                             | $\vdash$                  | ^         |              |                                 |        | · ·                             | 0.                           | <u> </u>                                |
| BOARD SECRETARY                    | 1.50                 | Х                             |                           | х         |              |                                 |        | 0.                              | 0.                           | 0.                                      |
| (11) JONATHAN BRACK                | 1.00                 | 77                            |                           |           |              |                                 |        |                                 | 0.                           | <u>_                               </u> |
| BOARD DIRECTOR                     | 1.00                 | Х                             |                           |           |              |                                 |        | 0.                              | 0.                           | 0.                                      |
| (12) ASHLEY AHEARN                 | 1.00                 |                               |                           |           |              |                                 |        | •                               | •                            | •                                       |
| BOARD DIRECTOR                     |                      | х                             |                           |           |              |                                 |        | 0.                              | 0.                           | 0.                                      |
| (13) PAULINA LOPEZ                 | 1.00                 |                               |                           |           |              |                                 |        |                                 |                              |   |
| BOARD DIRECTOR                     |                      | Х                             |                           |           |              |                                 |        | 0.                              | 0.                           | 0.                                      |
| (14) KAYLA GEBECK                  | 1.00                 |                               |                           |           |              |                                 |        | -                               | -                            |   |
| BOARD DIRECTOR                     |                      | Х                             |                           |           |              |                                 |        | 0.                              | 0.                           | 0.                                      |
| (15) RYAN CABINTE                  | 1.00                 |                               |                           |           |              |                                 |        |                                 |                              |   |
| BOARD DIRECTOR                     |                      | Х                             |                           |           |              |                                 |        | 0.                              | 0.                           | 0.                                      |
| (16) GIULIA SICCARDO               | 1.00                 |                               |                           |           |              |                                 |        |                                 |                              |   |
| BOARD DIRECTOR                     |                      | Х                             | L                         |           | L            |                                 |        | 0.                              | 0.                           | 0.                                      |
|                                    |                      |                               |                           |           |              |                                 |        |                                 |                              |   |
|                                    |                      |                               |                           |           |              |                                 |        |                                 |                              |   |
|                                    |                      |                               |                           |           |              |                                 |        |                                 |                              | Form 990 (2022)                         |

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|     | t VII Section A. Officers, Directors, Trus   | tees. Kev Emr    | olove                          | ees.                  | and         | Hic          | ahes                         | t C    | ompensated Employee     | S (continued)     |      |          |          |
|-----|--|------------------|--------------------------------|-----------------------|-------------|--------------|------------------------------|--------|-------------------------|-------------------|------|----------|----------|
|     | (A)  | (B)              | (C) (D) (E)                    |                       |             |              |                              |        | ,                       |                   | (F)  |          |          |
|     | Name and title   | Average          |                                | Position              |             | Reportable   | Reportable                   | Fo     | timate                  | М                 |      |          |          |
|     | Name and title   | hours per        |                                |                       |             |              | than o                       |        | compensation            | compensation      |      | nount (  |          |
|     |  | week             |                                |                       |             |              | r/trust                      |        | from                    | from related      | a.   | other    | <b>.</b> |
|     |  | (list any        | ctor                           |                       |             |              |                              |        | the                     | organizations     | com  | pensa    | tion     |
|     |  | hours for        | r dire                         |                       |             |              | pa                           |        | organization            | (W-2/1099-MISC/   | fr   | om the   | Э        |
|     |  | related          | tee o                          | ustee                 |             |              | ensat                        |        | (W-2/1099-MISC/         | 1099-NEC)         | org  | anizati  | on       |
|     |  | organizations    | ıl trus                        | nal tr                |             | oyee         | omp                          |        | 1099-NEC)               |                   | and  | d relate | ed       |
|     |  | below            | Individual trustee or director | Institutional trustee | Officer     | key employee | Highest compensated employee | Former |                         |                   | orga | anizatio | ons      |
|     |  | line)            | pul                            | Inst                  | 0#ii        | Key          | Hig<br>em                    | For    |                         |                   |      |          |          |
|     |  |                  |                                |                       |             |              |                              |        |                         |                   |      |          |          |
|     |  |                  |                                |                       |             |              |                              |        |                         |                   |      |          |          |
|     |  |                  |                                |                       |             |              |                              |        |                         |                   |      |          |          |
|     |  |                  |                                |                       |             |              |                              |        |                         |                   |      |          |          |
|     |  |                  |                                |                       |             |              |                              |        |                         |                   |      |          |          |
|     |  |                  |                                |                       |             |              |                              |        |                         |                   |      |          |          |
|     |  |                  |                                |                       |             |              |                              |        |                         |                   |      |          |          |
|     |  |                  |                                |                       |             |              |                              |        | 4                       |                   |      |          |          |
|     |  |                  |                                |                       |             |              |                              |        |                         |                   |      |          |          |
|     |  |                  |                                |                       |             |              |                              |        |                         |                   |      |          |          |
|     |  |                  |                                |                       |             |              |                              |        |                         |                   |      |          |          |
|     |  |                  |                                |                       |             |              |                              |        |                         |                   |      |          |          |
|     |  |                  |                                |                       |             |              |                              |        |                         |                   |      |          |          |
|     |  |                  |                                |                       |             | 4            |                              |        |                         |                   |      |          |          |
|     |  |                  |                                |                       |             |              |                              |        | · ·                     |                   |      |          |          |
|     |  |                  |                                | 4                     | $\subseteq$ |              |                              | 4      |                         |                   |      |          |          |
|     |  |                  |                                |                       |             |              |                              |        |                         |                   |      |          |          |
|     |  |                  |                                |                       |             |              |                              |        | 1 1 - 2 - 2 - 2         |                   |      |          |          |
|     | Subtotal   |                  |                                |                       |             |              |                              |        | 1,478,573.              | 0.                | 11   | 8,82     |          |
|     | Total from continuation sheets to Part VI  |                  |                                |                       |             |              |                              |        | 0.                      | 0.                |      |          | 0.       |
| d   | Total (add lines 1b and 1c)  |                  |                                |                       |             |              |                              |        | 1,478,573.              | 0.                | 11   | 8,82     | 26.      |
| 2   | Total number of individuals (including but n   | ot limited to th | ose                            | liste                 | d ab        | ove          | ) wh                         | o re   | ceived more than \$100, | 000 of reportable |      |          |          |
|     | compensation from the organization   |                  |                                |                       |             | 7            |                              |        |                         |                   |      |          | 50       |
|     |  |                  |                                |                       |             |              |                              |        |                         | ı                 |      | Yes      | No       |
| 3   | Did the organization list any former officer,  | director, truste | ee, k                          | ey e                  | mpl         | oye          | e, or                        | hig    | hest compensated empl   | oyee on           |      |          |          |
|     | line 1a? If "Yes," complete Schedule J for se  | uch individual   |                                |                       |             |              |                              |        |                         |                   | 3    |          | <u> </u> |
| 4   | For any individual listed on line 1a, is the su  |                  |                                |                       |             |              |                              |        | •                       | •                 |      |          |          |
|     | and related organizations greater than \$150   | ),000? If "Yes,  | " co                           | mple                  | ete S       | Sche         | dule                         | Jf     | or such individual      |                   | 4    | Х        |          |
| 5   | Did any person listed on line 1a receive or a  |                  |                                |                       |             |              |                              |        |                         |                   |      |          |          |
|     | rendered to the organization? If "Yes." com  | plete Schedule   | J fo                           | or su                 | ich r       | ers          | on .                         |        |                         |                   | 5    |          | Х        |
| 800 | 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)<br>Compensation |
|--|------------------------------------|---------------------|
| ANDREW ZIMMERN PRODUCTIONS DBA INTUITIVE C                                       | O DOCUMENTARY FILM                 |                     |
| 4931 W. 35TH ST., STE 200, ST. LOUIS PARK,                                       | DESIGN & PRODUCTION                | 1,538,942.          |
| ORLATTE LLC  |                                    |                     |
| 1027 4TH STREET SE, WASHINGTON, DC 20003   | DIGITAL CAMPAIGN                   | 473,597.            |
| BE BOLD MEDIA, AGRI-EPI CENTRE, EDGMOND,   |                                    |                     |
| NEWPORT TF10 8JZ, UNITED KINGDOM   | PROJECT ADVISORY                   | 410,334.            |
| COUNCIL FIRE LLC   |                                    |                     |
| 125 CHESTER AVE., ANNAPOLIS, MD 21403  | PROJECT MANAGEMENT                 | 359,313.            |
| SPRINGBOARD PARTNERS LLC, 9143 SLIGO CREEK                                       | ζ                                  |                     |
| PKWY, SILVER SPRING, MD 20901  | PROJECT ADVISORY                   | 279,372.            |
| 2 Total number of independent contractors (including but not limited to those li | sted above) who received more than |                     |
| \$100,000 of compensation from the organization 23                               |                                    |                     |
|  |                                    | 200                 |

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|  |      | Check if Schedule O contains a response of      | or note to any lin  | e in this Part VIII                     |                                    |                            |                                 |
|--|------|---|---------------------|---|------------------------------------|----------------------------|---------------------------------|
|  |      |   |                     | (A)                                     | (B)                                | (C)                        | (D)                             |
|  |      |   |                     | Total revenue                           | Related or exempt function revenue | Unrelated business revenue | Revenue excluded from tax under |
|  |      |   |                     |   | Turiction revenue                  | business revenue           | sections 512 - 514              |
| S S  | 1 a  | Federated campaigns 1a                          |                     |   |                                    |                            |                                 |
| Contributions, Gifts, Grants and Other Similar Amounts |      | Membership dues 1b                              | 186,536.            |   |                                    |                            |                                 |
| جَ ۾   |      | Fundraising events 1c                           | 77,590.             |   |                                    |                            |                                 |
| fts,<br>r A  |      | Related organizations 1d                        | , -                 |   |                                    |                            |                                 |
| igi<br>Gila  |      | Government grants (contributions)               | 2,430,219.          |   |                                    |                            |                                 |
| Sin  |      | All other contributions, gifts, grants, and     |                     |   |                                    |                            |                                 |
| e ţi   | •    | similar amounts not included above              | 67,867,503.         |   |                                    |                            |                                 |
| 흕  |      | Noncash contributions included in lines 1a-1f   | 2,151,072.          |   |                                    |                            |                                 |
| Ν  |      | Total. Add lines 1a-1f                          | _ / = : = / : : = ₹ | 70,561,848.                             |                                    |                            |                                 |
| 0 %  |      | Total: Add lines 1a-11                          | Business Code       | , |                                    |                            |                                 |
|  | 2 a  | FEES FOR SERVICES                               | 541900              | 1,628,739.                              | 1,628,739.                         |                            |                                 |
| Ìς   | 2 6  | PROGRAM PARTICIPATION FEES                      | 900099              | 371,177.                                | 371,177.                           |                            |                                 |
| ser.   |      | REGISTRATION FEES                               | 900099              | 357,652.                                | 357,652.                           |                            |                                 |
| m S  |      |   | 300033              | 337,032.                                | 337,032.                           |                            |                                 |
| gra<br>Re  |      |   |                     |   |                                    |                            |                                 |
| Program Service<br>Revenue                             | •    |   |                     |   |                                    |                            |                                 |
| _  |      | All other program service revenue               |                     | 2,357,568.                              |                                    |                            |                                 |
| -  |      | Total. Add lines 2a-2f                          |                     | 2,337,300.                              |                                    |                            |                                 |
|  | 3    | Investment income (including dividends, interes |                     | 1,864,133.                              |                                    |                            | 1864133.                        |
|  |      | other similar amounts)                          |                     | 1,004,133.                              |                                    |                            | 1004133.                        |
|  | 4    | Income from investment of tax-exempt bond pr    | roceeds             | F2 052                                  |                                    |                            | E2 0E2                          |
|  | 5    | Royalties(i) Real                               | (ii) Doroopol       | 53,052.                                 |                                    |                            | 53,052.                         |
|  | _    | 50.000  | (ii) Personal       |   |                                    |                            |                                 |
|  |      | Gross rents 6a 58,980.                          |                     |   |                                    |                            |                                 |
|  |      | Less: rental expenses 6b 0.                     |                     |   |                                    |                            |                                 |
|  |      | Rental income or (loss) 6c 58,980.              |                     | F0 000                                  |                                    |                            | F0.000                          |
|  |      | Net rental income or (loss)                     | (::) Oth a::        | 58,980.                                 |                                    |                            | 58,980.                         |
|  | 7 a  | Gross amount from sales of (i) Securities       | (ii) Other          |   |                                    |                            |                                 |
|  |      | assets other than inventory 7a 56,701,283.      |                     |   |                                    |                            |                                 |
|  | k    | Less: cost or other basis                       |                     |   |                                    |                            |                                 |
| nue  |      | and sales expenses 7b 56,646,585.               |                     |   |                                    |                            |                                 |
| ther Revenue   |      | Gain or (loss) 7c 54,698.                       |                     | F.4. 600                                |                                    |                            | 54.600                          |
| æ  |      | Net gain or (loss)                              |                     | 54,698.                                 |                                    |                            | 54,698.                         |
| Ţ.   | 8 8  | Gross income from fundraising events (not       |                     |   |                                    |                            |                                 |
| Ò  |      | including \$ of                                 |                     |   |                                    |                            |                                 |
|  |      | contributions reported on line 1c). See         | 10 -00              |   |                                    |                            |                                 |
|  |      | Part IV, line 18                                | 12,720.             |   |                                    |                            |                                 |
|  |      | Less: direct expenses 8b                        | 68,170.             | 55 450                                  |                                    |                            | 55 450                          |
|  |      | Net income or (loss) from fundraising events    |                     | -55,450.                                |                                    |                            | -55,450.                        |
|  | 9 a  | Gross income from gaming activities. See        |                     |   |                                    |                            |                                 |
|  |      | Part IV, line 199a                              |                     |   |                                    |                            |                                 |
|  |      | Less: direct expenses 9b                        |                     |   |                                    |                            |                                 |
|  |      | Net income or (loss) from gaming activities     |                     |   |                                    |                            |                                 |
|  | 10 a | Gross sales of inventory, less returns          |                     |   |                                    |                            |                                 |
|  |      | and allowances10a                               |                     |   |                                    |                            |                                 |
|  |      | Less: cost of goods sold10b                     | 441.                |   |                                    |                            |                                 |
| $\dashv$   | C    | Net income or (loss) from sales of inventory    |                     | 1,024.                                  | 1,024.                             |                            |                                 |
| <u>0</u>   |      |   | Business Code       |   |                                    |                            |                                 |
| eon<br>Ie  |      | REIMBURSEMENT                                   | 900099              | 48,865.                                 |                                    |                            | 48,865.                         |
| Miscellaneous<br>Revenue                               |      | OTHER   | 900099              | 20,051.                                 | 776.                               |                            | 19,275.                         |
| 3eV  |      | HONORARIA                                       | 900099              | 11,375.                                 | 11,375.                            |                            |                                 |
| Mis  |      | All other revenue                               |                     | 00 001                                  |                                    |                            |                                 |
|  |      | Total. Add lines 11a-11d                        |                     | 80,291.                                 | 0.000 = 10                         |                            | 2010                            |
|  | 12   | Total revenue. See instructions                 |                     | 74,976,144.                             | 2,370,743.                         | 0.                         | 2043553.                        |

332009 12-21-23

## Form 990 (2023) MULTIPLIER Part IX Statement of Functional Expenses

| Secti   | on 501(c)(3) and 501(c)(4) organizations must comp  | olete all columns. All othe              | er organizations must con          | nplete column (A).                  |                                       |
|---------|---|--|------------------------------------|-------------------------------------|---------------------------------------|
|         | Check if Schedule O contains a respor   |  |                                    |                                     | X                                     |
|         | not include amounts reported on lines 6b,<br>8b, 9b, and 10b of Part VIII.  | (A)<br>Total expenses                    | (B)<br>Program service<br>expenses | (C) Management and general expenses | <b>(D)</b><br>Fundraising<br>expenses |
| 1       | Grants and other assistance to domestic organizations   |  |                                    |                                     |                                       |
|         | and domestic governments. See Part IV, line 21  | 23,273,600.                              | 23,273,600.                        |                                     |                                       |
| 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   | 1 010 266                                | 1 010 266                          |                                     |                                       |
|         | individuals. See Part IV, lines 15 and 16   | 1,218,366.                               | 1,218,366.                         |                                     |                                       |
| 4       | Benefits paid to or for members   |  |                                    |                                     |                                       |
| 5       | Compensation of current officers, directors,  | 401 E00                                  |                                    | 401 500                             |                                       |
|         | trustees, and key employees   | 491,598.                                 |                                    | 491,598.                            |                                       |
| 6       | Compensation not included above to disqualified   |  |                                    |                                     |                                       |
|         | persons (as defined under section 4958(f)(1)) and   |  | 4                                  |                                     |                                       |
| 7       | persons described in section 4958(c)(3)(B)  | 16 724 451                               | 13,793,593.                        | 2,409,126.                          | 521,732.                              |
| 7<br>8  | Other salaries and wages  | ±0,/4±,4J±•                              | ±3,193,393•                        | 4,409,140.                          | J41,1J4•                              |
| đ       | Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)  | 516,892.                                 | 427,214.                           | 73,519.                             | 16,159.                               |
| 0       |   | 1,533,287.                               |                                    | 240,533.                            | 47,115.                               |
| 9<br>10 | Other employee benefits   | 1,322,311.                               |                                    | 220,642.                            | 40,151.                               |
| 11      | Payroll taxes Fees for services (nonemployees):   | -, -, -, -, -, -, -, -, -, -, -, -, -, - | 1,001,510.                         | 220,042.                            | ±0,151.                               |
|         | Management  | 540,977.                                 | 540,977.                           |                                     |                                       |
| a<br>b  | Legal   | 246,173.                                 |                                    |                                     |                                       |
|         | Accounting  | 76,000.                                  |                                    | 76,000.                             |                                       |
| d       | Lobbying  | 9,978.                                   |                                    | 9,978.                              |                                       |
| e       | Professional fundraising services. See Part IV, line 17   |  |                                    | 2 / 2 . 2 .                         |                                       |
| f       | Investment management fees  |  |                                    |                                     |                                       |
| g       | Other. (If line 11g amount exceeds 10% of line 25,  |  |                                    |                                     |                                       |
| Ū       | column (A), amount, list line 11g expenses on Sch O.)   | 10,624,252.                              | 10,334,109.                        | 69,070.                             | 221,073.                              |
| 12      | Advertising and promotion   | 235,506.                                 |                                    |                                     |                                       |
| 13      | Office expenses   |  |                                    |                                     |                                       |
| 14      | Information technology  |  |                                    |                                     |                                       |
| 15      | Royalties   |  |                                    |                                     |                                       |
| 16      | Occupancy   | 304,897.                                 |                                    | 17,537.                             |                                       |
| 17      | Travel  | 1,455,190.                               | 1,381,417.                         | 63,130.                             | 10,643.                               |
| 18      | Payments of travel or entertainment expenses  |  |                                    |                                     |                                       |
|         | for any federal, state, or local public officials $\dots$   |  |                                    |                                     |                                       |
| 19      | Conferences, conventions, and meetings  | 1,349,078.                               |                                    | 44,258.                             |                                       |
| 20      | Interest  | 69,513.                                  | 69,513.                            |                                     |                                       |
| 21      | Payments to affiliates  |  |                                    |                                     |                                       |
| 22      | Depreciation, depletion, and amortization   |  |                                    |                                     |                                       |
| 23      | Insurance   |  |                                    |                                     |                                       |
| 24      | Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.) |  |                                    |                                     |                                       |
| а       | SUPPLIES AND EQUIPMENT  | 1,611,081.                               | 1,401,598.                         | 209,483.                            |                                       |
| a<br>b  | OTHER EXPENSE   | 517,535.                                 | 391,028.                           | 126,507.                            |                                       |
| c       |   | 327,73331                                | 332,0201                           | 220/3070                            |                                       |
| d       |   |  |                                    |                                     |                                       |
| e       | All other expenses  |  |                                    |                                     |                                       |
| 25      | Total functional expenses. Add lines 1 through 24e  | 62,120,685.                              | 57,212,431.                        | 4,051,381.                          | 856,873.                              |
| 26      | Joint costs. Complete this line only if the organization  |  | , , , , ,                          | ,                                   | •                                     |
| •       | reported in column (B) joint costs from a combined  |  |                                    |                                     |                                       |
|         | educational campaign and fundraising solicitation.  |  |                                    |                                     |                                       |
|         | Check here if following SOP 98-2 (ASC 958-720)  |  |                                    |                                     |                                       |
|         | <del></del>   |  |                                    |                                     | Form <b>990</b> (2022)                |

91-2166435 Page 11 Form 990 (2023)
Part X Balance Sheet MULTIPLIER

| Pa                          | rt X | Balance Sneet  |                       |     |                           |
|-----------------------------|------|--|-----------------------|-----|---------------------------|
|                             |      | Check if Schedule O contains a response or note to any line in this Part     | ·                     |     |                           |
|                             |      |  | (A) Beginning of year |     | <b>(B)</b><br>End of year |
|                             | 1    | Cash - non-interest-bearing  | 734,577.              | 1   | 3,068,971                 |
|                             | 2    | Savings and temporary cash investments                                       |                       | 2   | 6,422,288                 |
|                             | 3    | Pledges and grants receivable, net   | 10,336,262.           | 3   | 24,367,941                |
|                             | 4    | Accounts receivable, net   |                       | 4   | 1,286,768                 |
|                             | 5    | Loans and other receivables from any current or former officer, director,    |                       |     |                           |
|                             |      | trustee, key employee, creator or founder, substantial contributor, or 359   | 6                     |     |                           |
|                             |      | controlled entity or family member of any of these persons                   |                       | 5   |                           |
| হ                           | 6    | Loans and other receivables from other disqualified persons (as defined      |                       |     |                           |
|                             |      | under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)    |                       | 6   |                           |
|                             | 7    | Notes and loans receivable, net  | 5,285,999.            | 7   | 240,195                   |
| Assets                      | 8    | Inventories for sale or use  |                       | 8   | 180,926                   |
| As                          | 9    | Prepaid expenses and deferred charges  | 1 222 070 1           | 9   | 202,648                   |
|                             | 10a  | Land, buildings, and equipment: cost or other                                |                       |     |                           |
|                             |      | basis. Complete Part VI of Schedule D 10a                                    |                       |     |                           |
|                             | b    | Less: accumulated depreciation 10b   |                       | 10c |                           |
|                             | 11   | Investments - publicly traded securities                                     | 47,350,218.           | 11  | 41,049,693                |
|                             | 12   | Investments - other securities. See Part IV, line 11                         |                       | 12  |                           |
|                             | 13   | Investments - program-related. See Part IV, line 11                          |                       | 13  |                           |
|                             | 14   | Intangible assets  |                       | 14  |                           |
|                             | 15   | Other assets. See Part IV, line 11   | 12,716.               | 15  | (                         |
|                             | 16   | Total assets. Add lines 1 through 15 (must equal line 33)                    | 65,327,961.           | 16  | 76,819,430                |
|                             | 17   | Accounts payable and accrued expenses  | 2,604,681.            | 17  | 6,708,856                 |
|                             | 18   | Grants payable   |                       | 18  |                           |
|                             | 19   | Deferred revenue   |                       | 19  | 854,629                   |
|                             | 20   | Tax-exempt bond liabilities  |                       | 20  |                           |
|                             | 21   | Escrow or custodial account liability. Complete Part IV of Schedule D .      |                       | 21  |                           |
| Ş                           | 22   | Loans and other payables to any current or former officer, director,         |                       |     |                           |
| ≝                           |      | trustee, key employee, creator or founder, substantial contributor, or 35%   | 6                     |     |                           |
| Liabilities                 |      | controlled entity or family member of any of these persons                   |                       | 22  |                           |
| _                           | 23   | Secured mortgages and notes payable to unrelated third parties               |                       | 23  |                           |
|                             | 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  |                       | 25  | 0                         |
|                             | 26   | Total liabilities. Add lines 17 through 25                                   | 6,955,923.            | 26  | 7,563,485                 |
|                             |      | Organizations that follow FASB ASC 958, check here                           |                       |     |                           |
| ces                         |      | and complete lines 27, 28, 32, and 33.                                       |                       |     |                           |
| a                           | 27   | Net assets without donor restrictions  |                       | 27  | 9,626,961                 |
| Ba                          | 28   | Net assets with donor restrictions   | 50,038,992.           | 28  | 59,628,984                |
| ဋ                           |      | Organizations that do not follow FASB ASC 958, check here                    |                       |     |                           |
| Ę                           |      | and complete lines 29 through 33.  |                       |     |                           |
| S                           | 29   | Capital stock or trust principal, or current funds                           |                       | 29  |                           |
| set                         | 30   | Paid-in or capital surplus, or land, building, or equipment fund             |                       | 30  |                           |
| As                          | 31   |  |                       | 31  |                           |
| Net Assets or Fund Balances | 32   | Total net assets or fund balances  | 58,372,038.           | 32  | 69,255,945                |
|                             | 33   | Total liabilities and net assets/fund balances                               |                       | 33  | 76,819,430                |

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| Pa | rt XI Reconciliation of Net Assets  |          |       |            |             |
|----|---|----------|-------|------------|-------------|
|    | Check if Schedule O contains a response or note to any line in this Part XI   |          |       |            | X           |
|    |   |          |       |            |             |
| 1  | Total revenue (must equal Part VIII, column (A), line 12)   | 1        | 74,97 |            |             |
| 2  | Total expenses (must equal Part IX, column (A), line 25)  | 2        | 62,12 | 0,6        | <u>85.</u>  |
| 3  | Revenue less expenses. Subtract line 2 from line 1  | 3        | 12,85 | <u>5,4</u> | <u>59.</u>  |
| 4  | Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))                             | 4        | 58,37 | 2,0        | <u> 38.</u> |
| 5  | Net unrealized gains (losses) on investments  | 5        | 53    | 3,4        | <u>48.</u>  |
| 6  | Donated services and use of facilities  | 6        |       |            |             |
| 7  | Investment expenses   | 7        |       |            |             |
| 8  | Prior period adjustments  | 8        |       |            |             |
| 9  | Other changes in net assets or fund balances (explain on Schedule O)  | 9        | -2,50 | 5,0        | 00.         |
| 10 | Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,                    |          |       |            |             |
|    | column (B))   | 10       | 69,25 | 5,9        | <u>45.</u>  |
| Pa | rt XII Financial Statements and Reporting   |          |       |            |             |
|    | Check if Schedule O contains a response or note to any line in this Part XII  |          |       |            | X           |
|    |   |          |       | Yes        | No          |
| 1  | Accounting method used to prepare the Form 990: Cash X Accrual Other  |          |       |            |             |
|    | If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule        | Ο.       |       |            |             |
| 2a | Were the organization's financial statements compiled or reviewed by an independent accountant?                       |          | 2a    |            | X           |
|    | If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed       | on a     |       |            |             |
|    | separate basis, consolidated basis, or both:  |          |       |            |             |
|    | Separate basis Consolidated basis Both consolidated and separate basis  |          |       |            |             |
| b  | Were the organization's financial statements audited by an independent accountant?                                    |          | 2b    | Х          |             |
|    | 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:  |          |       |            |             |
|    | X Separate basis Consolidated basis Both consolidated and separate basis  |          |       |            |             |
| С  | If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the    | audit,   |       |            |             |
|    | review, or compilation of its financial statements and selection of an independent accountant?                        |          | 2c    | Х          |             |
|    | If the organization changed either its oversight process or selection process during the tax year, explain on Scho    | edule O. |       |            |             |
| За | As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the       |          |       |            |             |
|    | Uniform Guidance, 2 C.F.R. Part 200, Subpart F?   |          | 3a    | Х          |             |
| b  | If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required |          |       |            |             |
|    | or audits, explain why on Schedule O and describe any steps taken to undergo such audits                              |          | 3b    | Х          |             |

#### SCHEDULE A

(Form 990)

Total

Department of the Treasury Internal Revenue Service

Name of the organization

#### **Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Inspection

**Employer identification number** 

MULTIPLIER 91-2166435 Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) Is the organization listed (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other in your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) Yes above (see instructions))

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

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

| Sec  | ction A. Public Support                      |                        |                     |                       |                       |                    |                 |
|------|--|------------------------|---------------------|-----------------------|-----------------------|--------------------|-----------------|
| Cale | ndar year (or fiscal year beginning in)      | (a) 2019               | <b>(b)</b> 2020     | (c) 2021              | (d) 2022              | (e) 2023           | (f) Total       |
| 1    | Gifts, grants, contributions, and            |                        |                     |                       |                       |                    |                 |
|      | membership fees received. (Do not            |                        |                     |                       |                       |                    |                 |
|      | include any "unusual grants.")               | 20782920.              | 32680192.           | 37303721.             | 54265863.             | 70561848.          | 215594544       |
| 2    | Tax revenues levied for the organ-           |                        |                     |                       |                       |                    |                 |
|      | ization'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                 | 20782920.              | 32680192.           | 37303721.             | 54265863.             | 70561848.          | 215594544       |
| 5    | The portion of total contributions           |                        |                     |                       |                       |                    |                 |
|      | by each person (other than a                 |                        |                     |                       |                       |                    |                 |
|      | governmental unit or publicly                |                        |                     |                       | 1                     |                    |                 |
|      | supported organization) included             |                        |                     |                       |                       |                    |                 |
|      | on line 1 that exceeds 2% of the             |                        |                     |                       |                       |                    |                 |
|      | amount shown on line 11,                     |                        |                     |                       |                       |                    |                 |
|      | column (f)                                   |                        |                     |                       |                       |                    | 36527284.       |
|      | Public support. Subtract line 5 from line 4. |                        |                     |                       |                       |                    | 179067260       |
|      | ction B. Total Support                       | 1                      |                     |                       |                       | I                  | T               |
|      | ndar year (or fiscal year beginning in)      | (a) 2019               | (b) 2020            | (c) 2021              | (d) 2022<br>54265863. | (e) 2023           | (f) Total       |
|      | Amounts from line 4                          | 20/82920.              | 32080192.           | 3/303/21.             | D4203003.             | 70301848.          | 215594544       |
| 8    | Gross income from interest,                  |                        |                     |                       |                       |                    |                 |
|      | dividends, payments received on              |                        |                     |                       |                       |                    |                 |
|      | securities loans, rents, royalties,          | 244 742                | 49,664.             | 145 244               | 450 544               | 1076165            | 2075450         |
| _    | and income from similar sources              | 244,742.               | 49,004.             | 145,344.              | 459,544.              | 1976165.           | 2875459.        |
| 9    | Net income from unrelated business           |                        |                     |                       |                       |                    |                 |
|      | activities, whether or not the               |                        |                     | 200.                  |                       |                    | 200.            |
| 40   | business is regularly carried on             |                        |                     | 200.                  |                       |                    | 200.            |
| 10   | Other income. Do not include gain            |                        |                     |                       |                       |                    |                 |
|      | or loss from the sale of capital             | 82,438.                | 53,976.             | 92,451.               | 165,461.              | 80 291             | 474,617.        |
| 44   | assets (Explain in Part VI.)                 | 02,430.                | 33,370.             | J2, <del>1</del> J1.  | 103,401.              | 00,251.            | 218944820       |
|      | Gross receipts from related activities,      | etc (see instruction   | nne)                |                       |                       |                    | ,222,418.       |
|      | First 5 years. If the Form 990 is for the    |                        |                     | fourth or fifth tax y | vear as a section 5   |                    | ,,              |
|      | organization, check this box and <b>sto</b>  | -                      |                     | •                     |                       |                    |                 |
| Sed  | ction C. Computation of Publi                |                        |                     |                       |                       |                    |                 |
|      | Public support percentage for 2023 (l        |                        |                     | column (f))           |                       | 14                 | 81.79 %         |
|      | Public support percentage from 2022          |                        |                     |                       |                       | 15                 | 74.70 %         |
| 16a  | 33 1/3% support test - 2023. If the          | organization did no    | t check the box o   | n line 13, and line   | 14 is 33 1/3% or m    | ore, check this bo | x and           |
|      | stop here. The organization qualifies        |                        |                     |                       |                       |                    | T               |
| b    | 33 1/3% support test - 2022. If the          | organization did no    | t check a box on I  | ine 13 or 16a, and    | line 15 is 33 1/3%    | or more, check th  | is box          |
|      | and stop here. The organization qual         | lifies as a publicly s | supported organiza  | ation                 |                       |                    |                 |
| 17a  | 10% -facts-and-circumstances test            | t - 2023. If the org   | anization did not d | check a box on line   | e 13, 16a, or 16b, a  | and line 14 is 10% | or more,        |
|      | and if the organization meets the fact       | s-and-circumstance     | es test, check this | box and stop he       | re. Explain in Part   | VI how the organiz | zation          |
|      | meets the facts-and-circumstances to         | -                      |                     | *                     |                       |                    |                 |
| b    | 10% -facts-and-circumstances test            |                        |                     |                       |                       |                    | 10% or          |
|      | more, and if the organization meets the      |                        |                     |                       | -                     |                    |                 |
|      | organization meets the facts-and-circle      |                        | -                   |                       |                       |                    |                 |
| 18   | Private foundation. If the organization      | on did not check a     | box on line 13, 16  | a, 16b, 17a, or 17b   | o, check this box a   |                    |                 |
|      |  |                        |                     |                       |                       | Schedule A         | (Form 990) 2023 |

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

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

| Sec      | tion A. Public Support   |                             | •                          |                    |                      |                     |  |
|----------|--|-----------------------------|----------------------------|--------------------|----------------------|---------------------|--|
| Cale     | ndar year (or fiscal year beginning in)  | (a) 2019                    | <b>(b)</b> 2020            | (c) 2021           | (d) 2022             | (e) 2023            | (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 per-  |                             |                            |                    |                      |                     |  |
|          | formed, 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 bus-   |                             |                            |                    |                      |                     |  |
|          | iness under section 513  |                             |                            |                    |                      |                     |  |
| 4        | Tax revenues levied for the organ-   |                             |                            |                    |                      |                     |  |
|          | ization'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   |                             |                            |                    |                      |                     | _  |
|          | Add lines 7a and 7b  |                             |                            |                    |                      |                     |  |
| <u>8</u> | Public support. (Subtract line 7c from line 6.)                                      |                             |                            |                    |                      |                     |  |
|          |  |                             |                            |                    | T                    | T                   | T  |
|          | ndar year (or fiscal year beginning in)  | (a) 2019                    | <b>(b)</b> 2020            | (c) 2021           | (d) 2022             | (e) 2023            | (f) Total  |
|          | Amounts from line 6 Gross income from interest,                                      |                             |                            |                    | +                    |                     | <del>                                     </del> |
| iua      | dividends, payments received on  |                             |                            |                    |                      |                     |  |
|          | securities loans, rents, royalties,  |                             |                            |                    |                      |                     |  |
|          | and income from similar sources  | -                           |                            |                    | +                    |                     | <del>                                     </del> |
| b        | Unrelated business taxable income  |                             |                            |                    |                      |                     |  |
|          | (less section 511 taxes) from businesses   |                             |                            |                    |                      |                     |  |
|          | acquired after June 30, 1975   |                             |                            |                    | +                    |                     | <del>                                     </del> |
|          | Add lines 10a and 10b  Net income from unrelated business                            |                             |                            |                    | +                    |                     | <del>                                     </del> |
| ••       | activities not included on line 10b,   |                             |                            |                    |                      |                     |  |
|          | whether or not the business is   |                             |                            |                    |                      |                     |  |
| 12       | regularly carried on Other income. Do not include gain                               |                             |                            |                    | +                    |                     | _  |
|          | or loss from the sale of capital   |                             |                            |                    |                      |                     |  |
| 12       | assets (Explain in Part VI.)   |                             |                            |                    | +                    |                     | <del>                                     </del> |
|          | Total support. (Add lines 9, 10c, 11, and 12.)                                       | o organizationis f          | rot opposed thind t        | iousth or fifth to | Voor oo o oostisis 5 | 01(0)(2) 2========  | <u> </u>   |
| 14       | First 5 years. If the Form 990 is for the  | •                           |                            | •                  | •                    | . , . , .           | · —  |
| Sec      | check this box and stop here   |                             |                            |                    |                      |                     | ·····  |
|          | Public support percentage for 2023 (I  |                             |                            | column (f))        |                      | 15                  | %  |
|          | Public support percentage from 2022  | , (,,                       | ,                          |                    |                      | 16                  | %  |
|          | tion D. Computation of Inves   |                             |                            |                    |                      |                     |  |
| 17       | Investment income percentage for 20  | <b>D23</b> (line 10c, colur | mn (f), divided by li      | ne 13, column (f)) |                      | 17                  | %  |
|          | Investment income percentage from  |                             |                            |                    |                      | 18                  | %  |
|          | 33 1/3% support tests - 2023. If the   |                             |                            |                    |                      | 33 1/3%, and line 1 | 7 is not   |
|          | more than 33 1/3%, check this box ar   |                             |                            |                    |                      |                     |  |
| b        | 33 1/3% support tests - 2022. If the   | organization did n          | not check a box on         | line 14 or line 19 | a, and line 16 is mo | ore than 33 1/3%, a | and  |
|          | line 18 is not more than 33 1/3%, che  | ck this box and st          | t <b>op here.</b> The orga | nization qualifies | as a publicly suppo  | orted organization  |  |
| 20       | Private foundation If the organization   | n did not obook o           | hay an line 14 10          | or 10h abaak t     | hic hay and see inc  | structions          |  |

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Schedule A (Form 990) 2023

#### MULTIPLIER

#### Part IV | Supporting Organizations

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

#### Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- **b** Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes." provide detail in Part VI.
- c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.
  - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

|       |      | Yes    | No   |
|-------|------|--------|------|
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|       | 10a  |        |      |
|       | 10b  |        |      |
| ۱۱۵ Δ |      | n 990) | 2022 |

|     | Supporting Organizations (continued)  |           |     |    |
|-----|---|-----------|-----|----|
|     |   |           | Yes | No |
| 11  | Has the organization accepted a gift or contribution from any of the following persons?   |           |     |    |
| а   | A person who directly or indirectly controls, either alone or together with persons described on lines 11b and  |           |     |    |
|     | 11c below, the governing body of a supported organization?  | 11a       |     |    |
| b   | A family member of a person described on line 11a above?  | 11b       |     |    |
| С   | A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide  |           |     |    |
|     | detail in Part VI.  | 11c       |     |    |
| Sec | tion B. Type I Supporting Organizations   |           |     |    |
|     |   |           | Yes | No |
| 1   | Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or  |           |     |    |
|     | more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) |           |     |    |
|     | effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported  |           |     |    |
|     | organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the  |           |     |    |
| _   | supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.  | 1         |     |    |
| 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? If "Yes," explain in  |           |     |    |
|     | Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,   |           |     |    |
| Sec | supervised, or controlled the supporting organization. etion C. Type II Supporting Organizations  | 2         |     |    |
|     | tion of Type in 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  |           | 162 | NO |
| •   | or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control   |           |     |    |
|     | or management of the supporting organization was vested in the same persons that controlled or managed  |           |     |    |
|     | the supported organization(s).  | 1         |     |    |
| Sec | the supported 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?  | 1         |     |    |
| 2   | Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported  |           |     |    |
|     | organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how  |           |     |    |
|     | the organization maintained a close and continuous working relationship with the supported organization(s).   | 2         |     |    |
| 3   | By reason of the relationship described on line 2, above, did the organization's supported organizations have a   |           |     |    |
|     | significant voice in the organization's investment policies and in directing the use of the organization's  |           |     |    |
|     | income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's  |           |     |    |
|     | supported organizations played in this regard.  | 3         |     |    |
| Sec | tion 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)  | )-        |     |    |
| а   | The organization satisfied the Activities Test. Complete line 2 below.  |           |     |    |
| b   | The organization is the parent of each of its supported organizations. Complete line 3 below.   |           |     |    |
| С   | The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see in   | struction |     |    |
| 2   | Activities Test. Answer lines 2a and 2b below.  |           | Yes | No |
| а   | Did substantially all of the organization's activities during the tax year directly further the exempt purposes of  |           |     |    |
|     | the supported organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI identify</b>   |           |     |    |
|     | 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   | 20        |     |    |
| h   | that these activities constituted substantially all of its activities.  Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement,   | 2a        |     |    |
| b   | one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in  |           |     |    |
|     | Part VI the reasons for the organization's position that its supported organization(s) would have engaged in  |           |     |    |
|     |   | 2b        |     |    |
| 3   | these activities but for the organization's involvement.  Parent of Supported Organizations. Answer lines 3a and 3b below.  | 20        |     |    |
| а   |   |           |     |    |
| u   | trustees of each of the supported organizations? If "Yes" or "No" provide details in <b>Part VI.</b>  | 3a        |     |    |
| b   | Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each   |           |     |    |
|     | of its supported organizations? If "Ves." describe in <b>Part VI</b> the role played by the organization in this regard   | 3b        |     |    |

| Pai  | t V Type III Non-Functionally Integrated 509(a)(3) Supporting                    | ) Orga    | nizations                     | <u></u>                        |
|------|--|-----------|-------------------------------|--------------------------------|
| 1    | Check here if the organization satisfied the Integral Part Test as a qualifying  | trust or  | n Nov. 20, 1970 ( explain in  | Part VI). See instructions.    |
|      | All other Type III non-functionally integrated supporting organizations must of  |           |                               |                                |
| Sect | ion A - Adjusted Net Income  |           | (A) Prior Year                | (B) Current Year<br>(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         |                               |                                |
| Sect | ion B - Minimum Asset Amount   |           | (A) Prior Year                | (B) Current Year<br>(optional) |
| 1    | Aggregate fair market value of all non-exempt-use assets (see                    |           | A                             |                                |
|      | instructions for short tax year or assets held for part of year):                |           |                               |                                |
| а    | Average monthly value of securities  | 1a        |                               |                                |
| b    | Average monthly cash balances  | 1b        |                               |                                |
| С    | Fair market value of other non-exempt-use assets                                 | 1c        |                               |                                |
| d    | Total (add lines 1a, 1b, and 1c)   | 1d        |                               |                                |
| е    | Discount claimed for blockage or other factors                                   |           |                               |                                |
|      | (explain in detail in Part VI):  |           |                               |                                |
| 2    | Acquisition indebtedness applicable to non-exempt-use assets                     | 2         |                               |                                |
| 3    | Subtract line 2 from line 1d.  | 3         |                               |                                |
| 4    | Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,      |           |                               |                                |
|      | see instructions).   | 4         |                               |                                |
| 5    | Net value of non-exempt-use assets (subtract line 4 from line 3)                 | 5         |                               |                                |
| 6    | Multiply line 5 by 0.035.  | 6         |                               |                                |
| _7_  | Recoveries of prior-year distributions   | 7         |                               |                                |
| 8    | Minimum Asset Amount (add line 7 to line 6)                                      | 8         |                               |                                |
| Sect | ion C - Distributable Amount   |           |                               | Current Year                   |
| 1    | Adjusted net income for prior year (from Section A, line 8, column A)            | 1         |                               |                                |
| 2    | Enter 0.85 of line 1.  | 2         |                               |                                |
| 3    | Minimum asset amount for prior year (from Section B, line 8, column A)           | 3         |                               |                                |
| 4    | Enter greater of line 2 or line 3.   | 4         |                               |                                |
| 5    | Income tax imposed in prior year   | 5         |                               |                                |
| 6    | Distributable Amount. Subtract line 5 from line 4, unless subject to             |           |                               |                                |
|      | emergency temporary reduction (see instructions).                                | 6         |                               |                                |
| 7    | Check here if the current year is the organization's first as a non-functionally | / integra | ated Type III supporting orga | nization (see                  |

Schedule A (Form 990) 2023

instructions).

| Par          | t V Type III Non-Functionally Integrated 509(                  | a)(3) Supporting Orga        | inizations (continued          | d) |                                  |
|--------------|--|------------------------------|--------------------------------|----|----------------------------------|
| Secti        | on D - Distributions   |                              | •                              | ĺ  | Current Year                     |
| 1            | Amounts paid to supported organizations to accomplish exer     | mpt purposes                 |                                | 1  |                                  |
| 2            | Amounts paid to perform activity that directly furthers exemp  | t purposes of supported      |                                |    |                                  |
|              | organizations, in excess of income from activity               |                              | :                              | 2  |                                  |
| 3            | Administrative expenses paid to accomplish exempt purpose      | s of supported organizations | s                              | 3  |                                  |
| 4            | Amounts paid to acquire exempt-use assets                      |                              | 4                              |    |                                  |
| 5            | Qualified set-aside amounts (prior IRS approval required - pro | ovide details in Part VI)    | Į.                             | 5  |                                  |
| 6            | Other distributions (describe in Part VI). See instructions.   |                              |                                | 6  |                                  |
| 7            | Total annual distributions. Add lines 1 through 6.             |                              |                                | 7  |                                  |
| 8            | Distributions to attentive supported organizations to which th | e organization is responsive | 1                              |    |                                  |
|              | (provide details in Part VI). See instructions.                |                              |                                | 8  |                                  |
| 9            | Distributable amount for 2023 from Section C, line 6           |                              |                                | 9  |                                  |
| 10           | Line 8 amount divided by line 9 amount                         |                              | 10                             | 0  |                                  |
|              |  | (i)                          | (ii)                           |    | (iii)                            |
| Secti        | on E - Distribution Allocations (see instructions)             | Excess Distributions         | Underdistributions<br>Pre-2023 |    | Distributable<br>Amount for 2023 |
| 1            | Distributable amount for 2023 from Section C, line 6           |                              |                                |    |                                  |
| 2            | Underdistributions, if any, for years prior to 2023 (reason-   |                              |                                |    |                                  |
|              | able cause required - explain in Part VI). See instructions.   |                              |                                |    |                                  |
| 3            | Excess distributions carryover, if any, to 2023                |                              |                                |    |                                  |
| a            | From 2018  |                              |                                |    |                                  |
| b            | From 2019  |                              |                                |    |                                  |
| с            | From 2020  |                              |                                |    |                                  |
| <u>d</u>     | From 2021  |                              | · ·                            |    |                                  |
| <u>e</u>     | From 2022  |                              |                                |    |                                  |
| f            | Total of lines 3a through 3e                                   |                              |                                |    |                                  |
| g            | Applied to underdistributions of prior years                   |                              |                                | _  |                                  |
| <u>h</u>     | Applied to 2023 distributable amount                           |                              |                                |    |                                  |
| <u>i_</u>    | Carryover from 2018 not applied (see instructions)             |                              |                                |    |                                  |
| _ <u>i</u> _ | Remainder. Subtract lines 3g, 3h, and 3i from line 3f.         |                              |                                |    |                                  |
| 4            | Distributions for 2023 from Section D,                         |                              |                                |    |                                  |
|              | line 7: \$   |                              |                                |    |                                  |
| a            | Applied to underdistributions of prior years                   |                              |                                | _  |                                  |
| b            | Applied to 2023 distributable amount                           |                              |                                |    |                                  |
| c            | Remainder. Subtract lines 4a and 4b from line 4.               |                              |                                |    |                                  |
| 5            | Remaining underdistributions for years prior to 2023, 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 2023. Subtract lines 3h       |                              |                                |    |                                  |
|              | and 4b from line 1. For result greater than zero, explain in   |                              |                                |    |                                  |
|              | Part VI. See instructions.                                     |                              |                                |    |                                  |
| 7            | Excess distributions carryover to 2024. Add lines 3j           |                              |                                |    |                                  |
|              | and 4c.  |                              |                                |    |                                  |
| 8_           | Breakdown of line 7:   |                              |                                |    |                                  |
| <u>a</u>     | Excess from 2019   |                              |                                |    |                                  |
| <u>b</u>     | Excess from 2020   |                              |                                |    |                                  |
|              | Excess from 2021   |                              |                                |    |                                  |
| <u>d</u>     | Excess from 2022   |                              |                                |    |                                  |
| _            | Evenes from 2023   |                              |                                |    |                                  |

Schedule A (Form 990) 2023

### SCHEDULE C

(Form 990)

## Political Campaign and Lobbying Activities

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

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2023

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

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

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

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

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

• Section 501(c)(4), (5), or (6) organizations: Complete Part III. Name of organization **Employer identification number** MULTIPLIER 91-2166435 Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization. 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV. 2 Political campaign activity expenditures Volunteer hours for political campaign activities Complete if the organization is exempt under section 501(c)(3). 1 Enter the amount of any excise tax incurred by the organization under section 4955 2 Enter the amount of any excise tax incurred by organization managers under section 4955 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? No 4a Was a correction made? Yes Nο b If "Yes," describe in Part IV. Complete if the organization is exempt under section 501(c), except section 501(c)(3). Part I-C 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b Did the filing organization file Form 1120-POL for this year? Enter the names, addresses, and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV. (a) Name (b) Address (c) EIN (d) Amount paid from (e) Amount of political contributions received and filing organization's promptly and directly funds. If none, enter -0-. delivered to a separate political organization. If none, enter -0-.

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

Schedule C (Form 990) 2023

| Schedule C (Form 990) 2023                    | MOPITE                | ξ                                      |                           |  | 166435 Page 2               |
|---|-----------------------|--|---------------------------|--|-----------------------------|
| Part II-A Complete if the org                 | janization is ex      | empt under sectio                      | ո 501(c)(3) and file      | ed Form 5768 (ele                      | ction under                 |
| section 501(h)).                              |                       |  |                           |  |                             |
| A Check if the filing organiza                | ation belongs to an   | affiliated group (and list ir          | n Part IV each affiliated | group member's name                    | e, address, EIN,            |
| expenses, and share                           | re of excess lobbyir  | g expenditures).                       |                           |  |                             |
| <b>B</b> Check if the filing organiza         | ation checked box A   | and "limited control" pro              | ovisions apply.           |  |                             |
|   | ts on Lobbying Ex     | penditures<br>lounts paid or incurred. | 1                         | (a) Filing<br>organization's<br>totals | (b) Affiliated group totals |
|   |                       | •                                      | ,                         |  |                             |
| 1a Total lobbying expenditures to influ       | uence public opinio   | n (grassroots lobbying)                |                           | 942.                                   |                             |
| <b>b</b> Total lobbying expenditures to influ | uence a legislative l | oody (direct lobbying)                 |                           | 9,036.                                 |                             |
| c Total lobbying expenditures (add li         | nes 1a and 1b)        |  |                           | 9,978.                                 |                             |
| d Other exempt purpose expenditure            | es                    |  |                           | 62,178,877.                            |                             |
| e Total exempt purpose expenditure            | s (add lines 1c and   | 1d)                                    |                           | 62,188,855.                            |                             |
| f Lobbying nontaxable amount. Ente            | er the amount from    | the following table in bot             | h columns.                | 1,000,000.                             |                             |
| If the amount on line 1e, column (a) o        | or (b) is: The        | obbying nontaxable am                  | ount is:                  |  |                             |
| not over \$500,000,                           | 20%                   | of the amount on line 1e.              |                           |  |                             |
| over \$500,000 but not over \$1,000           | ),000, \$100          | ,000 plus 15% of the exc               | ess over \$500,000.       |  |                             |
| over \$1,000,000 but not over \$1,50          | 00,000, \$175         | ,000 plus 10% of the exc               | ess over \$1,000,000.     |  |                             |
| over \$1,500,000 but not over \$17,0          | 000,000, \$225        | ,000 plus 5% of the exce               | ss over \$1,500,000.      |  |                             |
| over \$17,000,000,                            | \$1,0                 | 00,000.                                |                           |  |                             |
| g Grassroots nontaxable amount (en            | iter 25% of line 1f)  |  |                           | 250,000.                               |                             |
| h Subtract line 1g from line 1a. If zer       | o or less, enter -0-  |  |                           | 0.                                     |                             |
| i Subtract line 1f from line 1c. If zero      | o or less, enter -0-  |  |                           | 0.                                     |                             |
| j If there is an amount other than ze         | ro on either line 1h  |  |                           |  |                             |
| reporting section 4911 tax for this           |                       |  |                           |  | Yes No                      |
|   |                       | Averaging Period Under                 |                           |  |                             |
| (Some organizations t                         |                       | 501(h) election do not                 | •                         | of the five columns be                 | low.                        |
|   | See the sep           | parate instructions for li             | nes 2a through 2f.)       |  |                             |
|   | Lobbying Ex           | penditures During 4-Ye                 | ar Averaging Period       |  |                             |
| Calendar year                                 |                       |  |                           |  |                             |
| (or fiscal year beginning in)                 | (a) 2020              | <b>(b)</b> 2021                        | (c) 2022                  | (d) 2023                               | (e) Total                   |
|   |                       |  |                           |  |                             |
|   | 1 000 000             | 1 000 000                              | 1 000 000                 | 1 000 000                              | 4 000 000                   |
| 2a Lobbying nontaxable amount                 | 1,000,000             | 1,000,000.                             | 1,000,000.                | 1,000,000.                             | 4,000,000.                  |
| <b>b</b> Lobbying ceiling amount              |                       |  |                           |  |                             |
| (150% of line 2a, column(e))                  |                       |  |                           |  | 6,000,000.                  |
|   | 20 56                 | 50.664                                 | 45 604                    | 0 000                                  | 110 000                     |
| c Total lobbying expenditures                 | 39,763                | 52,664.                                | 15,634.                   | 9,978.                                 | 118,039.                    |
|   | 050.00                | 050 000                                | 050 000                   | 050 000                                | 1 000 000                   |
| d Grassroots nontaxable amount                | 250,000               | 250,000.                               | 250,000.                  | 250,000.                               | 1,000,000.                  |
| e Grassroots ceiling amount                   |                       |  |                           |  | 4 500 000                   |
| (150% of line 2d, column (e))                 |                       |  |                           |  | 1,500,000.                  |
|   |                       | 44 22                                  |                           | 2.45                                   | 00 -01                      |
| f Grassroots lobbying expenditures            | 4,974                 | 11,300.                                | 3,380.                    | 942.                                   | 20,596.                     |

Schedule C (Form 990) 2023

## Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

| 1 During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:  a Volunteers?  b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?  | Yes              |                       |       |         |
|--|------------------|-----------------------|-------|---------|
| local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:  a Volunteers?   |                  | No                    | Am    | ount    |
| or referendum, through the use of:  a Volunteers?  |                  |                       |       |         |
| a Volunteers?  |                  |                       |       |         |
|  |                  |                       |       |         |
|  |                  |                       |       |         |
|  |                  |                       |       |         |
| c Media advertisements?  |                  |                       |       |         |
| d Mailings to members, legislators, or the public?   |                  |                       |       |         |
| e Publications, or published or broadcast statements?  |                  | 1                     |       |         |
| f Grants to other organizations for lobbying purposes?   |                  |                       |       |         |
| g Direct contact with legislators, their staffs, government officials, or a legislative body?  |                  |                       |       |         |
| h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?  |                  |                       |       |         |
| i Other activities?  |                  | _                     |       |         |
| j Total. Add lines 1c through 1i   |                  |                       |       |         |
| 2a Did the activities in line 1 cause the organization to not be described in section 501(c)(3)?   |                  |                       |       |         |
| <b>b</b> If "Yes," enter the amount of any tax incurred under section 4912   |                  |                       |       |         |
| c If "Yes," enter the amount of any tax incurred by organization managers under section 4912   |                  |                       |       |         |
| d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?  Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(4).  | <br>tion 501/o\/ | (E) or oo             | otion |         |
| Part III-A Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6).   | 11011 50 1(0)    | (5), Or Se            | Cuon  |         |
|  |                  |                       | Yes   | No      |
| 1 Were substantially all (90% or more) dues received nondeductible by members?   |                  | 1                     |       |         |
| 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?  |                  |                       |       |         |
| 3 Did the organization agree to carry over lobbying and political campaign activity expenditures from  |                  |                       |       |         |
|  | tion 501(c)(     | (5) or se             |       |         |
| Part III-B Complete if the organization is exempt under section 501(c)(4), sect  |                  |                       |       |         |
| Part III-B Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answere  |                  |                       |       | 3, is   |
| Part III-B Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answere answered "Yes."  | d "No" OR        | (b) Part              |       | 3, is   |
| Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answere answered "Yes."  1 Dues, assessments and similar amounts from members   | d "No" OR        | (b) Part              |       | 3, is   |
| Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answere answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of po   | d "No" OR        | (b) Part              |       | 3, is   |
| Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of poexpenses for which the section 527(f) tax was paid).   | d "No" OR        | (b) Part              |       | 3, is   |
| Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of poexpenses for which the section 527(f) tax was paid).  a Current year   | d "No" OR        | (b) Part              |       | 3, is   |
| Part III-B Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answere answered "Yes."  1 Dues, assessments and similar amounts from members  2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of po expenses for which the section 527(f) tax was paid).   | d "No" OR        | (b) Part              |       | 3, is   |
| Part III-B Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answere answered "Yes."  1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of poexpenses for which the section 527(f) tax was paid).  a Current year b Carryover from last year c Total  | d "No" OR        | (b) Part  1  2a 2b 2c |       | 93, is  |
| Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answere answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of poexpenses for which the section 527(f) tax was paid).  a Current year  b Carryover from last year  c Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues   | d "No" OR        | (b) Part  2a 2b 2c    |       | 9 3, is |
| Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answere answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of poexpenses for which the section 527(f) tax was paid).  a Current year  b Carryover from last year  c Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the expenses for the section 501(c)(4), | d "No" OR        | (b) Part  2a 2b 2c    |       | 93, is  |
| Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answere answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of poexpenses for which the section 527(f) tax was paid).  a Current year  b Carryover from last year  c Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the eddoes the organization agree to carryover to the reasonable estimate of nondeductible lobbying and   | d "No" OR        | (b) Part  2a 2b 2c 3  |       | 3, is   |
| Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answere answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of poexpenses for which the section 527(f) tax was paid).  a Current year  b Carryover from last year  c Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the eddoes the organization agree to carryover to the reasonable estimate of nondeductible lobbying and expenditures next year?   | d "No" OR        | (b) Part  2a 2b 2c 3  |       | 3, is   |
| Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answere answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of poexpenses for which the section 527(f) tax was paid).  a Current year  b Carryover from last year  c Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the eddes the organization agree to carryover to the reasonable estimate of nondeductible lobbying and  | d "No" OR        | (b) Part  2a 2b 2c 3  |       | 3, is   |

#### **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 Inspection

Name of the organization

MULTIPLIER

**Employer identification number** 91-2166435

| Pai | Organizations Maintaining Donor Advised<br>organization answered "Yes" on Form 990, Part IV, line |                         | r Similar Funds       | or Accour                               | ts. Complete if the             |
|-----|---|-------------------------|-----------------------|---|---------------------------------|
|     |   | (a) Donor ad            | vised funds           | <b>(b)</b> Fun                          | ds 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 w                                    | riting that the assets  | held in donor advi    | sed funds                               |                                 |
|     | are the organization's property, subject to the organization's e                                  | exclusive legal contro  | ol?                   |   | Yes No                          |
| 6   | Did the organization inform all grantees, donors, and donor ad                                    | lvisors in writing that | grant funds can be    | used only                               |                                 |
|     | for charitable purposes and not for the benefit of the donor or                                   | donor advisor, or fo    | r any other purpose   | conferring                              |                                 |
|     | impermissible private benefit?  |                         |                       |   |                                 |
| Pai | T II Conservation Easements. Complete if the organization   | anization answered      | 'Yes" on Form 990,    | Part IV, line 7.                        |                                 |
| 1   | Purpose(s) of conservation easements held by the organization                                     | n (check all that app   | ly).                  |   |                                 |
|     | Preservation of land for public use (for example, recreati  | ion or education)       | Preservation of       | of a historically                       | important land area             |
|     | Protection of natural habitat   |                         | Preservation of       | of a certified his                      | storic structure                |
|     | Preservation of open space  |                         |                       |   |                                 |
| 2   | Complete lines 2a through 2d if the organization held a qualifie                                  | ed conservation con     | tribution in the form | of a conserva                           | tion easement on the last       |
|     | day of the tax year.  |                         |                       |   | Held at the End of the Tax Year |
| а   | Total number of conservation easements  |                         |                       | 2a                                      |                                 |
| b   |   |                         |                       | l                                       |                                 |
| С   | Number of conservation easements on a certified historic structure                                | cture included on lin   | e 2a                  | 2c                                      |                                 |
| d   | Number of conservation easements included on line 2c acquir                                       | red after July 25, 200  | 06, and not           |   |                                 |
|     | on a historic structure listed in the National Register   |                         |                       | 2d                                      |                                 |
| 3   | Number of conservation easements modified, transferred, rele                                      | eased, extinguished,    | or terminated by the  | e organization                          | during the tax                  |
|     | year  |                         |                       |   |                                 |
| 4   | Number of states where property subject to conservation ease                                      | ement is located        |                       | _                                       |                                 |
| 5   | Does the organization have a written policy regarding the period                                  | odic monitoring, insp   | ection, handling of   |   |                                 |
|     | violations, and enforcement of the conservation easements it I                                    | holds?                  |                       |   | Yes No                          |
| 6   | Staff and volunteer hours devoted to monitoring, inspecting, h                                    | nandling of violations  | , and enforcing con   | servation ease                          | ments during the year           |
| _   | <del></del>   |                         |                       |   |                                 |
| 7   | Amount of expenses incurred in monitoring, inspecting, handli                                     | ing of violations, and  | enforcing conserva    | ation easemen                           | ts during the year              |
| 8   | Does each conservation easement reported on line 2d above s                                       | eatiefy the requireme   | ents of section 170/  | h\(4\(D\(i\                             |                                 |
| 0   | •   | •                       | •                     | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | Yes No                          |
| 9   | and section 170(h)(4)(B)(ii)?  In Part XIII, describe how the organization reports conservation   |                         |                       |   |                                 |
| 3   | balance sheet, and include, if applicable, the text of the footnot                                |                         | •                     |   |                                 |
|     | organization's accounting for conservation easements.   | ote to the organization | n 3 iii anciai staten | ichts that desc                         | indes tric                      |
| Pai | t III Organizations Maintaining Collections of  | Art, Historical T       | reasures, or O        | ther Simila                             | r Assets.                       |
|     | Complete if the organization answered "Yes" on Form 9   |                         | ,                     |   |                                 |
| 1a  | If the organization elected, as permitted under FASB ASC 958                                      |                         | revenue statement     | and balance st                          | neet works                      |
|     | of art, historical treasures, or other similar assets held for publ                               | •                       |                       |   |                                 |
|     | service, provide in Part XIII the text of the footnote to its finance                             | ŕ                       | •                     | •                                       |                                 |
| b   | If the organization elected, as permitted under FASB ASC 958                                      |                         |                       |   | works of                        |
|     | art, historical treasures, or other similar assets held for public                                | •                       |                       |   |                                 |
|     | provide the following amounts relating to these items.  | <b>,</b>                | .,                    |   |                                 |
|     | (i) Revenue included on Form 990, Part VIII, line 1   |                         |                       |   | \$                              |
|     | (m)   |                         |                       |   | \$                              |
| 2   | If the organization received or held works of art, historical trea-                               |                         |                       | al gain, provide                        | ·                               |
| _   | the following amounts required to be reported under FASB AS                                       |                         |                       | J. , p                                  |                                 |
| а   | Revenue included on Form 990, Part VIII, line 1   | -                       |                       |   | \$                              |
|     | Assets included in Form 990, Part X   |                         |                       |   | \$                              |
|     | For Paperwork Reduction Act Notice, see the Instructions  |                         |                       |   | Schedule D (Form 990) 2023      |

#### 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>b</b> Buildings                                   |                                      |                                 |                              |                |
| c Leasehold improvements                             |                                      |                                 |                              |                |
| d Equipment  |                                      |                                 |                              |                |
| e Other  |                                      |                                 |                              |                |
| Total. Add lines 1a through 1e. (Column (d) must eau | al Form 990 Part X line 1            | 0c column (B))                  |                              | 0              |

Schedule D (Form 990) 2023

| Part VII Investments - Other Securities   |  |   |                          |
|---|--|---|--------------------------|
| Complete if the organization answered "Yes"  (a) Description of security or category (including name of security) | on Form 990, Part IV, line <b>(b)</b> Book value | e 11b. See Form 990, Part X, line 12.  (c) Method of valuation: Cost or | and of year market value |
| (A) en la   | (b) book value                                   | (c) Method of Valuation. Cost of  | end-or-year market value |
| 1) Financial derivatives  |  | +   |                          |
| 2) Closely held equity interests  |  | +   |                          |
| 3) Other  |  | +   |                          |
| (A)   |  | +   |                          |
| (B)   |  | +   |                          |
| (C)   |  |   |                          |
| (D)   |  | +   |                          |
| (E)   |  | +   |                          |
| (F)<br>(G)  |  | <u> </u>  |                          |
| (H)   |  |   |                          |
| Fotal. (Col. (b) must equal Form 990, Part X, line 12, col. (B))  |  |   |                          |
| Part VIII Investments - Program Related.  |  |   |                          |
| Complete if the organization answered "Yes"   | on Form 990 Part IV line                         | e 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)   | 1-, 200 74.40                                    | (-,   |                          |
| (1)   |  |   |                          |
| (3)   |  |   |                          |
| (4)   |  |   |                          |
| (5)   |  |   |                          |
| (6)   |  |   |                          |
| (7)   |  |   |                          |
| (8)   |  |   |                          |
| (9)   |  |   |                          |
| Total. (Col. (b) must equal Form 990, Part X, line 13, col. (B))  Part IX Other Assets                            |  |   |                          |
| Complete if the organization answered "Yes"   | on Form 990, Part IV, line Description           | e 116. See Form 990, Part X, line 15.                                   | (b) Book value           |
|   | Description                                      |   | (b) Book value           |
| (1)   |  |   |                          |
| (2)   |  |   |                          |
| (3)   |  |   |                          |
| (4)   |  |   |                          |
| (6)   |  |   |                          |
|   |  |   |                          |
| (7)   |  |   |                          |
| (9)   |  |   |                          |
| Fotal. (Column (b) must equal Form 990, Part X, line 15, col<br>Part X Other Liabilities                          | <i>I. (B))</i>                                   |   |                          |
| Complete if the organization answered "Yes"   | on Form 990, Part IV, line                       | e 11e or 11f. See Form 990, Part X, line                                | 25.                      |
| (a) Description of liability  |  |   | (b) Book value           |
| · · · · · · · · · · · · · · · · · · ·   |  |   |                          |
| (1) Federal income taxes  |  |   |                          |
| ·   |  |   |                          |
| (1) Federal income taxes  |  |   |                          |
| (1) Federal income taxes (2)  |  |   |                          |
| (1) Federal income taxes (2) (3)  |  |   |                          |
| (1) Federal income taxes (2) (3) (4)  |  |   |                          |
| (1) Federal income taxes (2) (3) (4) (5)  |  |   |                          |
| (1) Federal income taxes (2) (3) (4) (5)  |  |   |                          |
| (1) Federal income taxes (2) (3) (4) (5) (6)  |  |   |                          |
| (1) Federal income taxes (2) (3) (4) (5) (6) (7) (8)  | /. (B))  |   |                          |

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Schedule D (Form 990) 2023

|    | dule D (Form 990) 2023 MODITI DIEK  |        |                  |       | ZIUUIJJ Page |
|----|---|--------|------------------|-------|--------------|
| Pa | t XI Reconciliation of Revenue per Audited Financial Statement  | s With | Revenue per Re   | turn  |              |
|    | 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_   | 74,461,143.  |
| 2  | Amounts included on line 1 but not on Form 990, Part VIII, line 12:   |        |                  |       |              |
| а  | Net unrealized gains (losses) on investments  | 2a     | 533,448.         |       |              |
| b  | Donated services and use of facilities  | 2b     | 108,381.         |       |              |
| С  | Recoveries of prior year grants   | 2c     |                  |       |              |
| d  | Other (Describe in Part XIII.)  | 2d     |                  |       |              |
| е  | Add lines 2a through 2d   |        |                  | 2e    | 641,829.     |
| 3  | Subtract line 2e from line 1  |        |                  | 3     | 73,819,314.  |
| 4  | Amounts included on Form 990, Part VIII, line 12, but not on line 1:  |        |                  |       |              |
| а  | Investment expenses not included on Form 990, Part VIII, line 7b  | 4a     |                  |       |              |
| b  | Other (Describe in Part XIII.)  | 4b     | 1,156,830.       |       |              |
| С  | Add lines 4a and 4b   |        |                  | 4c    | 1,156,830.   |
| 5  | Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)  TXII Reconciliation of Expenses per Audited Financial Statemen |        |                  | 5     | 74,976,144.  |
| Pa | T XII Reconciliation of Expenses per Audited Financial Statemen   | ts Wit | h Expenses per F | Retur | n            |
|    | Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.   |        |                  |       | -            |
| 1  | Total expenses and losses per audited financial statements  |        |                  | 1     | 62,297,236.  |
| 2  | Amounts included on line 1 but not on Form 990, Part IX, line 25:   | . \    |                  |       |              |
| а  | Donated services and use of facilities  | 2a     | 108,381.         |       |              |
| b  | Prior year adjustments  | 2b     |                  |       |              |
| С  | Other losses  | 2c     |                  |       |              |
| d  | Other (Describe in Part XIII.)  | 2d     | 68,170.          |       |              |
| е  | Add lines 2a through 2d   |        |                  | 2e    | 176,551.     |
| 3  | Subtract line 2e from line 1  |        |                  | 3     | 62,120,685.  |
| 4  | Amounts included on Form 990, Part IX, line 25, but not on line 1:  |        |                  |       |              |
| а  | Investment expenses not included on Form 990, Part VIII, line 7b  | 4a     |                  |       |              |
| b  | Other (Describe in Part XIII.)  | 4b     |                  |       |              |
| _  | Add lines 42 and 4b   |        |                  | 40    | 0.           |

Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) 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 X, LINE 2:

MULTIPLIER ACCOUNTS FOR UNCERTAINTY IN INCOME TAXES IN ACCORDANCE WITH ASC TOPIC 740. THIS STANDARD CLARIFIES THE ACCOUNTING FOR UNCERTAINTY IN TAX POSITIONS AND PRESCRIBES A RECOGNITION THRESHOLD AND MEASUREMENT ATTRIBUTE FOR THE FINANCIAL STATEMENTS REGARDING A TAX POSITION TAKEN OR EXPECTED TO BE TAKEN IN A TAX RETURN. MULTIPLIER HAS DETERMINED THAT THERE ARE NO UNCERTAIN TAX POSITIONS WHICH QUALIFY FOR EITHER RECOGNITION OR DISCLOSURE IN THE FINANCIAL STATEMENTS AT DECEMBER 31, 2023 AND 2022. MULTIPLIER'S INFORMATION AND TAX RETURNS ARE SUBJECT TO EXAMINATION BY THE FEDERAL AND STATE JURISDICTIONS.

#### PART XI, LINE 4B - OTHER ADJUSTMENTS:

| Schedule D (Form 990) 2023 MULTIPLIER Part XIII Supplemental Information (continued) | 91-2166435 Page 5 |
|--|-------------------|
| Part XIII   Supplemental Information (continued)                                     |                   |
| PROVISION FOR CREDIT LOSSES  | 1,225,000.        |
| FUNDRAISING EXPENSES   | -68,170.          |
| TOTAL TO SCHEDULE D, PART XI, LINE 4B  | 1,156,830.        |
|  |                   |
| PART XII, LINE 2D - OTHER ADJUSTMENTS:   |                   |
|  | 60 170            |
| FUNDRAISING EXPENSES   | 68,170.           |
|  |                   |
|  |                   |
|  |                   |
|  |                   |
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#### SCHEDULE F (Form 990)

#### 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.

Open to Public

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

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

Inspection

**Employer identification number** 

MULTIPLIER 91-2166435 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, X Yes the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 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.) (e) If activity listed in (d) (a) Region (b) Number of (c) Number of (d) Activities conducted in the region (f) Total employees, agents, and expenditures offices (by type) (such as, fundraising, prois a program service, for and in the region gram services, investments, grants to describe specific type independent investments contractors recipients located in the region) of service(s) in the region in the region in the region EAST ASIA/SOUTH PACIFIC PROGRAM SERVICES GLOBAL SUSTAINABILITY 1,035,406. 0 0 GRANTS 342,050. EUROPE PROGRAM SERVICES 0 EUROPE 0 GLOBAL SUSTAINABILITY 761,560. 0 GRANTS SOUTH AMERICA 754,212. GLOBAL SUSTAINABILITY SOUTH AMERICA PROGRAM SERVICES 834,767. CENTRAL AMERICA & THE CARIBBEAN 0 0 GRANTS 102,420. CENTRAL AMERICA & THE CARIBBEAN 0 PROGRAM SERVICES GLOBAL SUSTAINABILITY 266,347. SOUTH ASIA 0 0 PROGRAM SERVICES GLOBAL SUSTAINABILITY 186,380. 1 6 4,283,142. 3 a Subtotal **b** Total from continuation 0 559,140. sheets to Part I ...... Totals (add lines 3a 4,842,282. and 3b)

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

Schedule F (Form 990) 2023

Schedule F (Form 990) MULTIPLIER 91-2166435 Page 1

| Schedule F (Form 990) | MULTIPLI                            | ER   |   | 91-216643!   | 5 Page 1                                |
|-----------------------|-------------------------------------|--|---|--|---|
| Part I Continuatio    | n of Activitie                      | s per Regior   | 1. (Schedule F (Form 990), Part I, line 3   | 3)   |   |
| (a) Region            | (b) Number of offices in the region | (c) Number of<br>employees or<br>agents in<br>region | (d) Activities conducted in region<br>(by type) (i.e., fundraising,<br>program services, grants to<br>recipients located in the region) | (e) If activity listed in (d) is a program service, describe specific type of service(s) in region | (f) Total<br>expenditures<br>for region |
| NORTH AMERICA (NOT    |                                     |  |   |  |   |
| U.S.)                 | 0                                   | 0  | PROGRAM SERVICES  | GLOBAL SUSTAINABILITY  | 186,380.                                |
| RUSSIA                | 0                                   | 0  | PROGRAM SERVICES  | GLOBAL SUSTAINABILITY  | 186,380.                                |
|                       |                                     |  |   |  |   |
| SUB-SAHARAN ARICA     | 0                                   | 0  | PROGRAM SERVICES  | GLOBAL SUSTAINABILITY  | 186,380.                                |
|                       |                                     |  |   |  |   |
|                       |                                     |  |   |  |   |
|                       |                                     |  |   |  |   |
|                       |                                     |  |   |  |   |
|                       |                                     |  |   |  |   |
|                       |                                     |  |   |  |   |
|                       |                                     |  |   |  |   |
|                       |                                     |  |   |  |   |
| Totals                |                                     |  |   |  | 559,140.                                |

MULTIPLIER

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

| ) Name of organization (b) IRS code section and EIN (if applicable) (c) Region |  | (d) Purpose of grant | (e) Amount of cash grant | (f) Manner of cash disbursement | (g) Amount of noncash assistance | (h) Description of noncash assistance | (i) Method of valuation (book, FMV appraisal, other) |  |
|--|--|----------------------|--------------------------|---------------------------------|----------------------------------|---------------------------------------|--|--|
|  |  |                      |                          |                                 |                                  |                                       |  |  |
|  |  |                      | RESILIENT OCEAN          |                                 |                                  |                                       |  |  |
|  |  | SOUTH AMERICA        | COMMUNITIES              | 350,084.                        | WIRE                             | 0.                                    |  |  |
|  |  |                      |                          |                                 |                                  |                                       |  |  |
|  |  |                      | TRANSITION TO            |                                 |                                  |                                       |  |  |
|  |  |                      | REGENERATIVE             |                                 |                                  |                                       |  |  |
|  |  | SOUTH AMERICA        | AGROFORESTRY             | 172,464.                        | WIRE                             | 0.                                    |  |  |
|  |  |                      | PROMOTE CONSERVATION     |                                 |                                  |                                       |  |  |
|  |  |                      | AND SUSTAINABLE          |                                 |                                  |                                       |  |  |
|  |  |                      | DEVELOPMENT IN THE       |                                 |                                  |                                       |  |  |
|  |  | SOUTH AMERICA        | PERUVIAN AMAZON.         | 160,900.                        | WIRE                             | 0.                                    |  |  |
|  |  |                      | CONSERVE THREATENED      |                                 |                                  |                                       |  |  |
|  |  |                      | HABITAT IN THE MADRE     |                                 |                                  |                                       |  |  |
|  |  |                      | DE DIOS REGION OF THE    |                                 |                                  |                                       |  |  |
|  |  | SOUTH AMERICA        | PERUVIAN AMAZON.         | 20,490.                         | WIRE                             | 0.                                    |  |  |
|  |  |                      |                          |                                 |                                  |                                       |  |  |
|  |  |                      | TRANSITION TO            |                                 |                                  |                                       |  |  |
|  |  |                      | REGENERATIVE             |                                 |                                  |                                       |  |  |
|  |  | SOUTH AMERICA        | AGROFORESTRY             | 10,300.                         | WIRE                             | 0.                                    |  |  |
|  |  |                      |                          |                                 |                                  |                                       |  |  |
|  |  |                      | TRANSITION TO            |                                 |                                  |                                       |  |  |
|  |  |                      | REGENERATIVE             |                                 |                                  |                                       |  |  |
|  |  | EUROPE               | AGROFORESTRY             | 39,974.                         | WIRE                             | 0.                                    |  |  |
|  |  |                      |                          |                                 |                                  |                                       |  |  |
|  |  |                      | DIGITAL TRACEABILITY     |                                 |                                  |                                       |  |  |
|  |  |                      | OF GLOBAL SEAFOOD        |                                 |                                  |                                       |  |  |
|  |  | EUROPE               | SUPPLY                   | 203,300.                        | WIRE                             | 0.                                    |  |  |
|  |  |                      | SUSTAINABLE              | -                               |                                  |                                       |  |  |
|  |  |                      | MANAGEMENT OF THE SEA    |                                 |                                  |                                       |  |  |
|  |  | CENTRAL AMERICA      | IN THE EASTERN           |                                 |                                  |                                       |  |  |
|  |  | AND THE CARIBBEAN    | TROPICAL PACIFIC         | 102,420.                        | WIRE                             | 0.                                    |  |  |

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

Schedule F (Form 990) 2023

Page 2

| Part II (              | Continuation of | Grants and Other                                    | Assistance to Organiza | tions or Entities Outside the | United States.           | (Schedule F (Form 9             | 90), Part II, line                      | 1)                                     |   |
|------------------------|-----------------|---|------------------------|-------------------------------|--------------------------|---------------------------------|---|--|---|
| <b>1</b><br>(a) Name o | of organization | <b>(b)</b> IRS code section and EIN (if applicable) | (c) Region             | (d) Purpose of grant          | (e) Amount of cash grant | (f) Manner of cash disbursement | (g) Amount of<br>non-cash<br>assistance | (h) Description of non-cash assistance | (i) Method of valuation (book, FMV, appraisal, other) |
|                        |                 |   |                        |                               |                          |                                 |   |  |   |
|                        |                 |   |                        | GLOBAL SEAFOOD                |                          |                                 |   |  |   |
|                        |                 |   | EUROPE                 | CERTIFICATION                 | 45,000.                  | WIRE                            | 0.                                      |  |   |
|                        |                 |   |                        |                               |                          |                                 |   |  |   |
|                        |                 |   |                        | DECARBONIZATION OF            |                          |                                 |   |  |   |
|                        |                 |   | EUROPE                 | THE BANKING SECTOR            | 48,750.                  | WIRE                            | 0.                                      |  |   |
|                        |                 |   |                        |                               |                          |                                 |   |  |   |
|                        |                 |   |                        | GLOBAL SEAFOOD                | 45,000                   |                                 |   |  |   |
|                        |                 |   | EUROPE                 | CERTIFICATION                 | 45,000.                  | WIRE                            | 0.                                      |  | <del> </del>  |
|                        |                 |   |                        |                               |                          | · ·                             |   |  |   |
|                        |                 |   |                        |                               |                          |                                 |   |  |   |
|                        |                 |   |                        | - \                           |                          |                                 |   |  |   |
|                        |                 |   |                        |                               |                          |                                 |   |  |   |
|                        |                 |   |                        |                               |                          |                                 |   |  |   |
|                        |                 |   |                        |                               |                          |                                 |   |  |   |

| Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.  Part III can be duplicated if additional space is needed. |            |                          |                          |                                 |                                  |                                       |  |  |
|--|------------|--------------------------|--------------------------|---------------------------------|----------------------------------|---------------------------------------|--|--|
| (a) Type of grant or assistance  | (b) Region | (c) Number of recipients | (d) Amount of cash grant | (e) Manner of cash disbursement | (f) Amount of noncash assistance | (g) Description of noncash assistance | (h) Method of<br>valuation<br>(book, FMV,<br>appraisal, other) |  |
|  |            |                          |                          |                                 |                                  |                                       |  |  |
|  |            |                          |                          |                                 |                                  |                                       |  |  |
|  |            |                          |                          |                                 |                                  |                                       |  |  |
|  |            |                          |                          |                                 |                                  |                                       |  |  |
|  |            |                          |                          |                                 |                                  |                                       |  |  |
|  |            |                          |                          |                                 |                                  |                                       |  |  |
|  |            |                          |                          |                                 |                                  |                                       |  |  |
|  |            |                          |                          |                                 |                                  |                                       |  |  |
|  |            |                          |                          |                                 |                                  |                                       |  |  |

Schedule F (Form 990) 2023 MULTIPLIER 91-2166435 Page 4

#### Part IV Foreign Forms Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes." 1 the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Yes X No Corporation (see the Instructions for Form 926) 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 Yes X No U.S. Owner (see the Instructions for Forms 3520 and 3520-A; don't file with Form 990) 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 the Instructions for Form 5471) 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 Yes X No Fund (see the Instructions for Form 8621) 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 the Instructions for Form 8865)

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

the Instructions for Form 5713; don't file with Form 990)

Schedule F (Form 990) 2023

Yes X No

6

# Part V | Supplemental Information Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions. PART I, LINE 2: MULTIPLIER ENTERS INTO AGREEMENTS WITH ORGANIZATIONS LOCATED INTERNATIONALLY. THE AGREEMENTS DOCUMENT SPECIFIC RESPONSIBILITIES RELATED TO THE INDIVIDUAL FIELD PROJECTS AND PROGRESS RELATED TO THE GOALS AND RESPONSIBILITIES IS REPORTED REGULARLY. THE ORGANIZATION VERIFIES THAT THE PROGRESS ON THE GOALS HAS BEEN ACHIEVED IN COMPLIANCE WITH THE AGREEMENTS.

## SCHEDULE G (Form 990)

Department of the Treasury

Internal Revenue Service

#### **Supplemental Information Regarding Fundraising or Gaming Activities**

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2023

Open to Public Inspection

| vame of the organization MULTIPL   | IER   |  |  | 91-2166  | 435   |
|--|---|--|--|--|---|
|  | Complete if the organization answe  | red "Yes" o  | n Form 990, Part IV,                         |  |   |
| required to complete this par  |   |  |  |  |   |
| <ul> <li>Indicate whether the organization rais</li> <li>a Mail solicitations</li> <li>b Internet and email solicitations</li> <li>c Phone solicitations</li> <li>d In-person solicitations</li> <li>2 a Did the organization have a written or</li> </ul> | e Solicitat f Solicitat g Special   | tion of non-q<br>tion of gove<br>fundraising                               | government grants<br>rnment grants<br>events |  |   |
| key employees listed in Form 990, P  b If "Yes," list the 10 highest paid individual compensated at least \$5,000 by the   | art VII) or entity in connection with providuals or entities (fundraisers) pursua | ofessional f   | undraising services?                         | Yes  |   |
| (i) Name and address of individual or entity (fundraiser)  | (ii) Activity   | (iii) Did<br>fundraiser<br>have custody<br>or control of<br>contributions? | (iv) Gross receipts from activity            | (v) Amount paid<br>to (or retained by)<br>fundraiser<br>listed in col. (i) | (vi) Amount paid<br>to (or retained by)<br>organization |
|  |   | Yes No   |  |  |   |
|  |   |  |  |  |   |
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|  |   |  |  |  |   |
| 3 List all states in which the organization or licensing.  | on is registered or licensed to solicit o   | ontributions   | s or has been notified                       | I it is exempt from re   | gistration  |
|  |   |  |  |  |   |
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For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

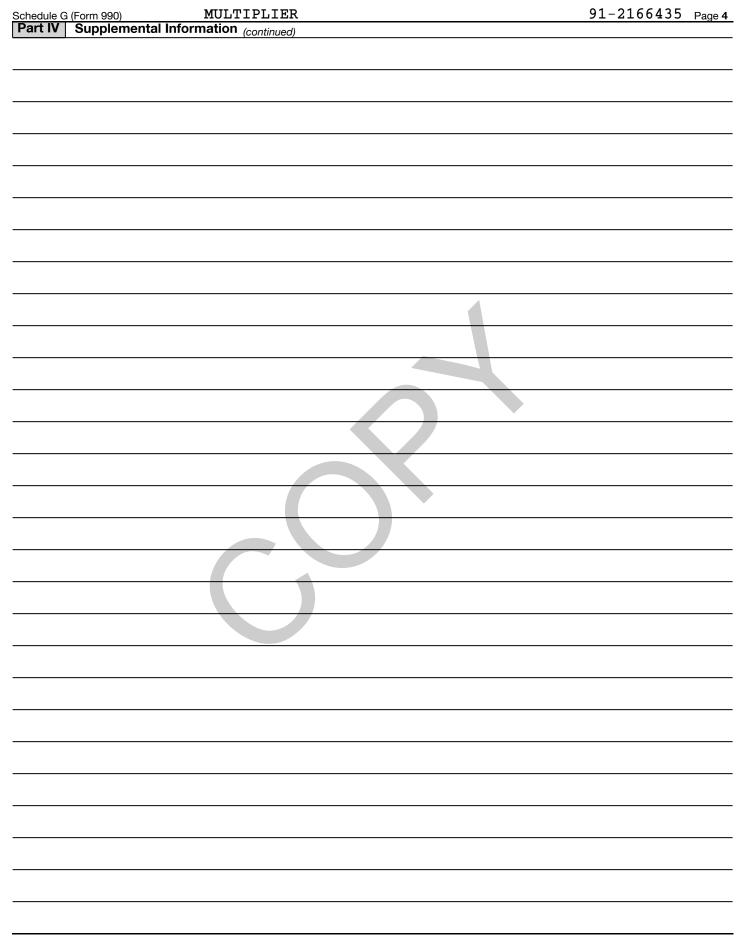
Schedule G (Form 990) 2023

|                 |             | e G (Form 990) 2023 MUL'I'I PL   |   |                            |                    | 2166435 Page 2             |
|-----------------|-------------|--|---|----------------------------|--------------------|----------------------------|
| Pa              | ırt I       |  |   |                            |                    |                            |
|                 |             | of fundraising event contributions and gr  |   | ·                          |                    | s greater than \$5,000.    |
|                 |             |  | (a) Event #1  | <b>(b)</b> Event #2        | (c) Other events   | (d) Total events           |
|                 |             |  | ANNIVERSARY   |                            | NONE               | (add col. (a) through      |
|                 |             |  | CELEBRATION   |                            |                    |                            |
|                 |             |  | (event type)  | (event type)               | (total number)     | col. <b>(c)</b> )          |
| e               |             |  | (0.0  | (813.111) (83              | (1010.1110.1120.)  |                            |
| Revenue         |             |  | 00 210  |                            |                    | 00 210                     |
| è               | 1           | Gross receipts   | 90,310.   |                            |                    | 90,310.                    |
| _               |             |  |   |                            |                    |                            |
|                 | 2           | Less: Contributions  | 77,590.   |                            |                    | 77,590.                    |
|                 |             |  |   |                            |                    |                            |
|                 | 3           | Gross income (line 1 minus line 2)   | 12,720.   |                            |                    | 12,720.                    |
|                 |             | ·  |   |                            |                    |                            |
|                 | 4           | Cash prizes  |   |                            |                    |                            |
|                 | •           | Caon prizes  |   |                            |                    |                            |
|                 | _           | Namaaala miinaa  |   |                            |                    |                            |
| "               |             | Noncash prizes   |   |                            |                    |                            |
| Ses             |             |  | 1 200   |                            |                    | 1 200                      |
| Sen             | 6           | Rent/facility costs  | 1,380.  | 4                          |                    | 1,380.                     |
| Direct Expenses |             |  |   |                            |                    |                            |
| 섫               | 7           | Food and beverages   | 31,886.   |                            |                    | 31,886.                    |
| Ë               |             |  |   |                            |                    |                            |
|                 | 8           | Entertainment  |   |                            |                    |                            |
|                 | 9           | Other direct expenses  | 1   |                            |                    | 34,904.                    |
|                 | 10          | Direct expense summary. Add lines 4 through  |   |                            |                    | 68,170.                    |
|                 |             |  |   |                            |                    | -55,450.                   |
| Da              | ırt I       |  |   | 000 Dart IV line 10 au     |                    | 33, 430 •                  |
| 1 6             |             |  | answered tes on Form                                | 1990, Part IV, line 19, or | reported more than |                            |
| _               |             | \$15,000 on Form 990-EZ, line 6a.  |   |                            | Г                  |                            |
| Φ               |             |  | (a) Bingo   | (b) Pull tabs/instant      | (c) Other gaming   | (d) Total gaming (add      |
| Revenue         |             |  |   | bingo/progressive bingo    | ,, ,               | col. (a) through col. (c)) |
| ě               |             |  |   |                            |                    |                            |
| ш.              | 1           | Gross revenue  |   |                            |                    |                            |
|                 |             |  |   |                            |                    |                            |
|                 | 2           | Cash prizes  |   |                            |                    |                            |
| ect Expenses    |             |  |   |                            |                    |                            |
| Sen             | 3           | Noncash prizes   |   |                            |                    |                            |
| Ä               | ľ           | Tronodori prizod   |   |                            |                    |                            |
| ಸ್ಥ             |             | Dept/facility agets  |   |                            |                    |                            |
| Dire            | 4           | Rent/facility costs  |   |                            |                    |                            |
| _               |             |  |   |                            |                    |                            |
|                 | 5           | Other direct expenses  |   |                            |                    |                            |
|                 |             |  | Yes %   | Yes %                      | Yes %              |                            |
|                 | 6           | Volunteer labor  | No No   | No No                      | No No              |                            |
|                 |             |  |   |                            |                    |                            |
|                 | 7           | Direct expense summary. Add lines 2 through  | h 5 in column (d)                                   |                            |                    |                            |
|                 |             | , , ,  | ( /   |                            |                    |                            |
|                 |             |  | 7 from line 1 column (d)                            |                            |                    |                            |
|                 | Q           | Net gaming income summary Subtract line 7  |   |                            |                    |                            |
|                 | 8           | Net gaming income summary. Subtract line 7   | rom line i, column (a)                              |                            |                    |                            |
| _               |             |  |   |                            |                    |                            |
|                 | Ent         | ter the state(s) in which the organization condu   | ucts gaming activities:                             |                            |                    |                            |
| а               | Ent         | ter the state(s) in which the organization condu   | ucts gaming activities:ctivities in each of these s | states?                    |                    | Yes No                     |
| а               | Ent         | ter the state(s) in which the organization condu   | ucts gaming activities:ctivities in each of these s | states?                    |                    | Yes No                     |
| а               | Ent         | ter the state(s) in which the organization condu   | ucts gaming activities:ctivities in each of these s | states?                    |                    | Yes No                     |
| a<br>b          | Ent<br>Is t | ter the state(s) in which the organization condu<br>he organization licensed to conduct gaming a<br>No," explain:  | ucts gaming activities:ctivities in each of these s | states?                    |                    |                            |
| a<br>b          | Ent<br>Is t | ter the state(s) in which the organization condu   | ucts gaming activities:ctivities in each of these s | states?                    |                    |                            |
| 10a             | Ent<br>Is t | ter the state(s) in which the organization condu<br>he organization licensed to conduct gaming a<br>No," explain:  | ucts gaming activities:ctivities in each of these s | rminated during the tax    |                    |                            |
| 10a             | Ent<br>Is t | ter the state(s) in which the organization condu-<br>he organization licensed to conduct gaming a<br>No," explain: | ucts gaming activities:ctivities in each of these s | rminated during the tax    |                    |                            |
| 10a             | Ent<br>Is t | ter the state(s) in which the organization condu-<br>he organization licensed to conduct gaming a<br>No," explain: | ucts gaming activities:ctivities in each of these s | rminated during the tax    |                    |                            |

Schedule G (Form 990) 2023

332082 09-13-23

| Sch | edule G (Form 990) 2023 MULTIPLIER 91  | -2166        | <u> 435</u> | Page 3   |
|-----|--|--------------|-------------|----------|
| 11  | Does the organization conduct gaming activities with nonmembers?   | $\square$    | Yes         | ☐ No     |
|     | 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:   |              |             |          |
|     | The organization's facility  | 13a          | .           | %        |
|     | An outside facility  |              |             | %        |
|     | Enter the name and address of the person who prepares the organization's gaming/special events books and records:  |              |             |          |
| •   |  |              |             |          |
|     | Name   |              |             |          |
|     |  |              |             |          |
|     | Address  |              |             |          |
|     | Address  |              |             |          |
| 150 | Does the organization have a contract with a third party from whom the organization receives gaming revenue?   |              | Yes         | No       |
| ıJa | boes the organization have a contract with a tillid party from whom the organization receives gaming revenue:  |              | , 100       |          |
| h   | If "Yes," enter the amount of gaming revenue received by the organization \$ and the amount  |              |             |          |
| J   |  |              |             |          |
| _   | of gaming revenue retained by the third party \$   |              |             |          |
| C   | If "Yes," enter name and address of the third party:   |              |             |          |
|     | Nama   |              |             |          |
|     | Name   |              |             |          |
|     | Addison  |              |             |          |
|     | Address  |              |             |          |
| 40  | Our transport of the state of t |              |             |          |
| 16  | Gaming manager information:  |              |             |          |
|     |  |              |             |          |
|     | Name   |              |             |          |
|     |  |              |             |          |
|     | Gaming manager compensation \$   |              |             |          |
|     | Description of continuous state d  |              |             |          |
|     | Description of services provided   |              |             |          |
|     |  |              |             |          |
|     |  |              |             |          |
|     |  |              |             |          |
|     | Director/officer Employee Independent contractor   |              |             |          |
|     |  |              |             |          |
|     | Mandatory distributions:   |              |             |          |
| а   | Is the organization required under state law to make charitable distributions from the gaming proceeds to  |              | 1           |          |
|     | 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   |              |             |          |
| Da  | organization's own exempt activities during the tax year \$ rt IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and   | Dart III I   | 0           | 0h 10h   |
| ıa  |  | Part III, II | nes 9,      | 96, 106, |
|     | 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.   |              |             |          |
|     |  |              |             |          |
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|     |  |              |             |          |



#### SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

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

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

| Name of the organization  |   |                                    |                          |                                  |  |                                       | Employer identification number                      |  |  |  |  |
|---|---|------------------------------------|--------------------------|----------------------------------|--|---------------------------------------|---|--|--|--|--|
| MULTIPLIE   |   |                                    |                          |                                  |  |                                       | 91-2166435  |  |  |  |  |
| Part I General Information on Grants ar   |   |                                    |                          |                                  |  |                                       |   |  |  |  |  |
| 1 Does the organization maintain records to   |   |                                    |                          |                                  | -  |                                       |   |  |  |  |  |
| criteria used to award the grants or assis  | tance?  |                                    |                          |                                  |  |                                       | X Yes No  |  |  |  |  |
|   | 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.  Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any |                                    |                          |                                  |  |                                       |   |  |  |  |  |
| recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. |   |                                    |                          |                                  |  |                                       |   |  |  |  |  |
| (a) Name and address of organization or government  | (b) EIN   | (c) IRC section<br>(if applicable) | (d) Amount of cash grant | (e) Amount of noncash assistance | (f) Method of<br>valuation (book,<br>FMV, appraisal,<br>other) | (g) Description of noncash assistance | (h) Purpose of grant or assistance                  |  |  |  |  |
| ACADIA CENTER   |   |                                    |                          |                                  |  |                                       |   |  |  |  |  |
| 8 SUMMER STREET POB 583   |   |                                    |                          |                                  |  |                                       | TRANSMISSION SOLUTIONS                              |  |  |  |  |
| ROCKPORT, ME 04856  | 01-0518193  | 501(C)(3)                          | 500,000.                 | 0.                               |  |                                       | FOR A CLEAN ENERGY FUTURE                           |  |  |  |  |
| NOCKIOKI, ME 01030  | 01 0310133  | 301(0)(3)                          | 300,000.                 | 0.                               |  |                                       | TON IT CEEDING ENDINGT TOTONIE                      |  |  |  |  |
| ADVANCED ENERGY INSTITUTE  1801 PENNSYLVANIA AVENUE NW SUITE 4 WASHINGTON, DC 20006                 | 80-0373801  | 501(C)(3)                          | 750,000.                 | 0.                               |  |                                       | TRANSMISSION SOLUTIONS FOR A CLEAN ENERGY FUTURE    |  |  |  |  |
| ·   |   |                                    |                          |                                  |  |                                       |   |  |  |  |  |
| AINA MOMONA   |   |                                    |                          |                                  |  |                                       | CLIMATE AND OCEAN                                   |  |  |  |  |
| 4348 WAIALAE AVENUE   |   |                                    |                          |                                  |  |                                       | SOLUTIONS FOR COASTAL                               |  |  |  |  |
| HONOLULU, HI 96816  | 82-1366588  | 501(C)(3)                          | 9,000.                   | 0.                               |  |                                       | CITIES.   |  |  |  |  |
| AMERICAN COUNCIL ON RENEWABLE<br>ENERGY - 1150 CONNECTICUT AVE NW,<br>#401 - WASHINGTON, DC 20036   | 52-2353661  | 501(C)(3)                          | 781,000.                 | 0.                               |  |                                       | TRANSMISSION SOLUTIONS<br>FOR A CLEAN ENERGY FUTURE |  |  |  |  |
| AMERICAN COUNCIL ON RENEWABLE<br>ENERGY - 1150 CONNECTICUT AVE NW,<br>#401 - WASHINGTON, DC 20036   | 52-2353661  | 501(C)(3)                          | 1,179,200.               | 0.                               |  |                                       | TRANSMISSION SOLUTIONS FOR A CLEAN ENERGY FUTURE    |  |  |  |  |
| AMERICAN COUNCIL ON RENEWABLE ENERGY - 1150 CONNECTICUT AVE NW, #401 - WASHINGTON, DC 20036         | 52-2353661  |                                    | 450,000.                 | 0.                               |  |                                       | TRANSMISSION SOLUTIONS FOR A CLEAN ENERGY FUTURE    |  |  |  |  |
| 2 Enter total number of section 501(c)(3) ar  | -   |                                    |                          |                                  |  |                                       | 81.   |  |  |  |  |
| 3 Enter total number of other organizations   | listed in the line 1  | table                              |                          |                                  |  |                                       |   |  |  |  |  |

| Part II Continuation of Grants and Other  | Assistance to Doi | nestic Organizations          | and Domestic Go          | vernments (Sch                   | edule I (Form 990), Pa   | rt II.)                                |   |
|---|-------------------|-------------------------------|--------------------------|----------------------------------|--|--|---|
| (a) Name and address of organization or government  | (b) EIN           | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of noncash assistance | (f) Method of<br>valuation<br>(book, FMV,<br>appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance                                |
| AMERICAN SUSTAINABLE BUSINESS<br>INSTITUTE - 712 H STREET NE PMB 42<br>- WASHINGTON, DC 20002 | 45-2384297        | 501(C)(3)                     | 7,500.                   | 0.                               |  | 1                                      | TRANSITION TO A CLEAN<br>ENERY ECONOMY IN NEW YORK                |
| AMERICAN UNIVERSITY<br>4400 MASSACHUSETTS AVE NW<br>WASHINGTON, DC 20016                      | 53-0196549        | 501(C)(3)                     | 135,000.                 | 0.                               |  |  | IMPROVED FISHERIES GOVERNANCE AND ADVANCEMENTS IN LABOR RIGHTS    |
| AMERICANS FOR A CLEAN ENERGY GRID<br>10 G STREET NE, SUITE 440<br>WASHINGTON, DC 20002        | 82-1765854        | 501(C)(3)                     | 588,600.                 | 0.                               |  |  | TRANSMISSION SOLUTIONS<br>FOR A CLEAN ENERGY FUTURE               |
| BINGHAMTON REGIONAL SUSTAINABILITY<br>COALITION - 30 MAIN STREET -<br>BINGHAMTON, NY 13905    | 27-0709023        | 501(C)(3)                     | 37,600.                  | 0.                               |  |  | TRANSITION TO A CLEAN ENERY ECONOMY IN NEW YORK                   |
| BLUEGREEN ALLIANCE FOUNDATION 2701 UNIVERSITY AVENUE, SE, #209 MINNEAPOLIS, MN 55414          | 26-4086284        | 501(C)(3)                     | 630,415.                 | 0.                               |  |  | TRANSMISSION SOLUTIONS FOR A CLEAN ENERGY FUTURE                  |
| CANOPY COLLECTIVE 200 MASSACHUSETTS AVE NW SUITE 700 WASHINGTON, DC 20001                     |                   | WASH. DC NON-PRO              | 27,500.                  | 0.                               |  |  | WONDER, WHOLENESS, AND<br>JOY ACROSS GENERATIONS OF<br>BLACK LIFE |
| CITIZENS FOR LOCAL POWER 702 BROADWAY KINGSTON, NY 12401                                      | 47-3531432        | 501(C)(3)                     | 47,039.                  | 0.                               |  |  | TRANSITION TO A CLEAN ENERY ECONOMY IN NEW YORK                   |
| CLEAN AIR TASK FORCE<br>114 STATE STREET 6TH FLOOR<br>BOSTON, MA 02109                        | 04-3512550        | 501(C)(3)                     | 199,960.                 | 0.                               |  |  | TRANSMISSION SOLUTIONS<br>FOR A CLEAN ENERGY FUTURE               |
| CLEAN GRID ALLIANCE<br>570 ASBURY STREET SUITE 201<br>ST. PAUL, MN 55104                      | 06-1670689        | 501(C)(3)                     | 43,000.                  | 0.                               |  |  | TRANSMISSION SOLUTIONS<br>FOR A CLEAN ENERGY FUTURE               |

MULTIPLIER

Schedule I (Form 990)

Page 1

| Part II Continuation of Grants and Other              | Assistance to Dor | mestic Organizations          | and Domestic Go                       | overnments (Sch                  | edule I (Form 990), Pa   | rt II.)                                   |  |
|---|-------------------|-------------------------------|---------------------------------------|----------------------------------|--|---|--|
| (a) Name and address of organization or government    | (b) EIN           | (c) IRC section if applicable | (d) Amount of cash grant              | (e) Amount of noncash assistance | (f) Method of<br>valuation<br>(book, FMV,<br>appraisal, other) | (g) Description of<br>non-cash assistance | (h) Purpose of grant or assistance               |
| CLIMATE RESOLVE                                       |                   |                               |                                       |                                  |  |   | RESILIENCE TO RISING                             |
| 525 S HEWITT ST                                       |                   |                               |                                       |                                  |  |   | TEMPERATURES WITH SOLAR                          |
| LOS ANGELES, CA 90013                                 | 46-4736278        | 501(C)(3)                     | 6,000.                                | 0.                               |  |   | REFLECTIVE URBAN SURFACES                        |
|   |                   |                               |                                       |                                  |  |   |  |
| CONSERVATIVE ENERGY NETWORK                           |                   |                               |                                       |                                  |  |   | L  |
| 101 N WASHINGTON SQUARE, STE 400A                     |                   |                               |                                       |                                  |  |   | TRANSMISSION SOLUTIONS                           |
| LANSING, MI 48933                                     | 81-3459199        | 501(C)(3)                     | 50,000.                               | 0.                               |  |   | FOR A CLEAN ENERGY FUTURE                        |
| CONSERVATIVE ENERGY NETWORK                           |                   |                               |                                       |                                  |  |   |  |
| 101 N WASHINGTON SQUARE, STE 400A                     |                   |                               |                                       |                                  |  |   | TRANSMISSION SOLUTIONS                           |
| LANSING, MI 48933                                     | 81-3459199        | 501(C)(3)                     | 977,000.                              | 0.                               |  |   | FOR A CLEAN ENERGY FUTURE                        |
|   |                   |                               |                                       |                                  |  |   |  |
| CUB CONSUMER EDUCATION & RESERACH                     |                   |                               |                                       |                                  |  |   |  |
| FUND - 309 W WASHINGTON STREET                        |                   |                               |                                       |                                  |  |   | TRANSMISSION SOLUTIONS                           |
| SUITE 800 - CHICAGO, IL 60606                         | 20-4904719        | 501(C)(3)                     | 40,000.                               | 0.                               |  |   | FOR A CLEAN ENERGY FUTURE                        |
|   |                   |                               |                                       |                                  |  |   |  |
| DIGITAL HARBOR FOUNDATION                             |                   |                               |                                       |                                  |  |   |  |
| 1045 LIGHT ST   | 45 0506550        | 504 (5) (0)                   |                                       |                                  |  |   |  |
| BALTIMORE, MD 21230                                   | 45-2536579        | 501(C)(3)                     | 9,900.                                | 0.                               |  |   | ADOLESCENT EDUCATION                             |
| EARTHECHO INTERNATIONAL                               |                   |                               |                                       |                                  |  |   | CLIMATE AND OCEAN                                |
| 2107 L ST NW SUITE 300                                |                   |                               |                                       |                                  |  |   | SOLUTIONS FOR COASTAL                            |
| WASHINGTON, DC 20037                                  | 95-4789334        | 501(C)(3)                     | 9,000.                                | 0.                               |  |   | CITIES.  |
| ,   |                   |                               | , , , , , , , , , , , , , , , , , , , |                                  |  |   |  |
| EARTHJUSTICE  |                   |                               |                                       |                                  |  |   |  |
| 50 CALIFORNIA STREET SUITE 500                        |                   |                               |                                       |                                  |  |   | TRANSMISSION SOLUTIONS                           |
| SAN FRANCISCO, CA 94111                               | 94-1730465        | 501(C)(3)                     | 350,000.                              | 0.                               |  |   | FOR A CLEAN ENERGY FUTURE                        |
|   |                   |                               |                                       |                                  |  |   | EQUITABLE CLIMATE                                |
| ECOADAPT  |                   |                               |                                       |                                  |  |   | RESILIENCE AND                                   |
| PO BOX #11195   |                   |                               |                                       |                                  |  |   | SUSTAINABILITY OUTCOMES                          |
| BAINBRIDGE ISLAND, WA 98110                           | 26-3303629        | 501(C)(3)                     | 20,000.                               | 0.                               |  |   | FOR COMMUNITIES                                  |
| EET BOUNDAMION  |                   |                               |                                       |                                  |  |   |  |
| EFI FOUNDATION  |                   |                               |                                       |                                  |  |   | TID ANGMICCION COLUTIONS                         |
| 900 17TH STREET NW SUITE 1100<br>WASHINGTON, DC 20006 | 87-3398574        | 501(C)(3)                     | 250,000.                              | 0.                               |  |   | TRANSMISSION SOLUTIONS FOR A CLEAN ENERGY FUTURE |
| MADITINGTON, DC 20000                                 | 07-3336374        | Por(c)(3)                     | 250,000.                              | ı                                | l  |   | FOR A CLEAN ENERGY FOTORE                        |

MULTIPLIER

| Part II Continuation of Grants and Other           | Assistance to Dor | nestic Organizations          | and Domestic Go          | vernments (Sch                   | edule I (Form 990), Pa   | rt II.)                                |  |
|--|-------------------|-------------------------------|--------------------------|----------------------------------|--|--|--|
| (a) Name and address of organization or government | <b>(b)</b> EIN    | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of noncash assistance | (f) Method of<br>valuation<br>(book, FMV,<br>appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant<br>or assistance                |
| ENERGY ALABAMA                                     |                   |                               |                          |                                  |  |  |  |
| PO BOX 1381  |                   |                               |                          |                                  |  |  | TRANSMISSION SOLUTIONS                               |
| HUNTSVILLE, AL 35807                               | 47-1066687        | 501(C)(3)                     | 35,000.                  | 0.                               |  |  | FOR A CLEAN ENERGY FUTURE                            |
|  | 17 2000007        |                               |                          | •                                |  |  |  |
| ENERGY SYSTEMS INTEGRATION GROUP                   |                   |                               |                          |                                  |  |  |  |
| PO BOX 2787  |                   |                               |                          |                                  |  |  | TRANSMISSION SOLUTIONS                               |
| RESTON, VA 20195                                   | 54-1733337        | 501(C)(3)                     | 275,000.                 | 0.                               |  |  | FOR A CLEAN ENERGY FUTURE                            |
|  |                   |                               |                          |                                  |  |  |  |
| ENERGY SYSTEMS INTEGRATION GROUP                   |                   |                               |                          |                                  |  |  |  |
| PO BOX 2787  |                   |                               |                          |                                  |  |  | TRANSMISSION SOLUTIONS                               |
| RESTON, VA 20195                                   | 54-1733337        | 501(C)(3)                     | 550,000.                 | 0.                               |  |  | FOR A CLEAN ENERGY FUTURE                            |
|  |                   |                               |                          |                                  |  |  |  |
| FAIR TRADE USA                                     |                   |                               |                          |                                  |  |  |  |
| 1901 HARRISON ST SUITE 1700                        |                   |                               |                          |                                  |  |  | GLOBAL SEAFOOD                                       |
| OAKLAND, CA 94612                                  | 41-1848081        | 501(C)(3)                     | 45,000.                  | 0.                               |  |  | CERTIFICATION  |
| ETDOMI THE GOLIOOI O                               |                   |                               |                          |                                  |  |  |  |
| FIRSTLINE SCHOOLS 300 N. BROAD ST SUITE 207        |                   |                               |                          |                                  |  |  | MEALS FOR LOW INCOME AND                             |
|  | 72-1409800        | 501(C)(3)                     | 18,871.                  | 0.                               |  |  | MEALS FOR LOW-INCOME AND<br>FOOD-INSECURE HOUSEHOLDS |
| NEW ORLEANS, LA 70119                              | 72-1403800        | 301(C/(3/                     | 10,071.                  | 0.                               |  |  | FOOD-INSECORE HOUSEHOLDS                             |
| FRIENDS OF THE FUTURE                              |                   |                               |                          |                                  |  |  |  |
| 64-1032 MAMALAHOA HIGHWAY                          |                   |                               |                          |                                  |  |  | CONNECT PARENTS IN HAWAII                            |
| KAMUELA, HI 96743                                  | 99-0296604        | 501(C)(3)                     | 45,692.                  | 0.                               |  |  | WITH ACCESSIBLE SUPPORT                              |
| •  |                   |                               | ,                        |                                  |  |  | EQUITABLE CLIMATE                                    |
| GEOS INSTITUTE                                     |                   |                               |                          |                                  |  |  | RESILIENCE AND                                       |
| 84 FOURTH STREET                                   |                   |                               |                          |                                  |  |  | SUSTAINABILITY OUTCOMES                              |
| ASHLAND, OR 97520                                  | 93-0880205        | 501(C)(3)                     | 20,000.                  | 0.                               |  |  | FOR COMMUNITIES                                      |
|  |                   |                               |                          |                                  |  |  | EQUITABLE CLIMATE                                    |
| GREAT PLAINS TRIBAL WATER ALLIANCE                 |                   |                               |                          |                                  |  |  | RESILIENCE AND                                       |
| PO BOX 271   |                   |                               |                          |                                  |  |  | SUSTAINABILITY OUTCOMES                              |
| PINE RIDGE, SD 57770                               | 46-0420063        | 501(C)(3)                     | 10,000.                  | 0.                               |  |  | FOR COMMUNITIES                                      |
|  |                   |                               |                          |                                  |  |  |  |
| GREEN 2.0  |                   |                               |                          |                                  |  |  | CLIMATE AND OCEAN                                    |
| 1730 RHODE ISLAND AVE NW SUITE 610                 |                   |                               |                          |                                  |  |  | SOLUTIONS FOR COASTAL                                |
| WASHINGTON, DC 20036                               | 46-5220283        | 501(C)(3)                     | 9,000.                   | 0.                               |  |  | CITIES.  |

<u>91-216</u>6435

MULTIPLIER

Schedule I (Form 990)

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| Part II Continuation of Grants and Other             | Assistance to Dor | nestic Organizations          | and Domestic Go          | overnments (Scho                 | edule I (Form 990), Pa   | rt II.)                                | rago r                                |
|--|-------------------|-------------------------------|--------------------------|----------------------------------|--|--|---------------------------------------|
| (a) Name and address of organization or government   | (b) EIN           | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of noncash assistance | (f) Method of<br>valuation<br>(book, FMV,<br>appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant<br>or assistance |
| GRIDLAB  |                   |                               |                          |                                  |  |  |                                       |
| 2150 ALLSTON WAY, STE 420                            |                   |                               |                          |                                  |  |  | TRANSMISSION SOLUTIONS                |
| BERKELEY, CA 94704                                   | 82-4198360        | 501(C)(3)                     | 750,000.                 | 0.                               |  |  | FOR A CLEAN ENERGY FUTURE             |
| ·  |                   |                               | ,                        |                                  |  |  |                                       |
| GRIDWORKS ORGANIATION                                |                   |                               |                          |                                  |  |  |                                       |
| PO BOX 5013  |                   |                               |                          |                                  |  |  | TRANSMISSION SOLUTIONS                |
| BERKELEY, CA 94705                                   | 27-4910811        | 501(C)(3)                     | 300,000.                 | 0.                               |  |  | FOR A CLEAN ENERGY FUTURE             |
|  |                   |                               |                          |                                  |  |  |                                       |
| GRIDWORKS ORGANIATION                                |                   |                               |                          |                                  |  |  |                                       |
| PO BOX 5013  | 05 4010011        | F01 (@) (3)                   | 400 000                  |                                  |  |  | TRANSMISSION SOLUTIONS                |
| BERKELEY, CA 94705                                   | 27-4910811        | 501(C)(3)                     | 400,000.                 | 0.                               |  |  | FOR A CLEAN ENERGY FUTURE             |
| HEALTHY GULF   |                   |                               |                          |                                  |  |  | CLIMATE AND OCEAN                     |
| 935 GRAVIER ST #700                                  |                   |                               |                          |                                  |  |  | SOLUTIONS FOR COASTAL                 |
| NEW ORLEANS, LA 70112                                | 72-1447742        | 501(C)(3)                     | 9,000.                   | 0.                               |  |  | CITIES.                               |
|  |                   |                               |                          |                                  |  |  |                                       |
| INQUIRING SYSTEMS INC                                |                   |                               |                          |                                  |  |  | SUSTAINABLE FOOD SYSTEM               |
| 887 SONOMA AVE, #23                                  |                   |                               |                          |                                  |  |  | FROM PERSPECTIVE OF                   |
| SANTA ROSA, CA 95404                                 | 94-2524840        | 501(C)(3)                     | 72,674.                  | 0.                               |  |  | RELIGIOUS VALUES                      |
|  |                   |                               |                          |                                  |  |  |                                       |
| INSTITUTE OF FOOD TECHNOLOGIS                        |                   |                               |                          |                                  |  |  |                                       |
| 525 W VAN BUREN STREET, SUITE 1000                   |                   |                               |                          |                                  |  |  | DIGITAL TRACEABILITY OF               |
| CHICAGO, IL 60607                                    | 36-2136957        | 501(C)(3)                     | 178,125.                 | 0.                               |  |  | GLOBAL SEAFOOD SUPPLY                 |
| TNOTESTED OF TOOR TEGUNOLOGISTS                      |                   |                               | ľ                        |                                  |  |  |                                       |
| INSTITUTE OF FOOD TECHNOLOGISTS                      |                   |                               |                          |                                  |  |  | DIGITAL TRACEABILITY OF               |
| 525 W VAN BUREN STREET, SUITE 1000 CHICAGO, IL 60607 | 36-2136957        | 501/C\/3\                     | 34,125.                  | 0.                               |  |  | GLOBAL SEAFOOD SUPPLY                 |
| CHICAGO, IL 00007                                    | 30-2130337        | 301(C/(3/                     | 34,123.                  | 0.                               |  |  | GLOBAL SEAFOOD SUFFLI                 |
| INSTITUTE OF FOOD TECHNOLOGISTS                      |                   |                               |                          |                                  |  |  |                                       |
| 525 W VAN BUREN STREET, SUITE 1000                   |                   |                               |                          |                                  |  |  | DIGITAL TRACEABILITY OF               |
| CHICAGO, IL 60607                                    | 36-2136957        | 501(C)(3)                     | 147,750.                 | 0.                               |  |  | GLOBAL SEAFOOD SUPPLY                 |
| ·  |                   |                               | , , ,                    |                                  |  |  |                                       |
| KISKEYA INTERNATIONAL INC                            |                   |                               |                          |                                  |  |  |                                       |
| 6360 UPLANDS BLVD APT N                              |                   |                               |                          |                                  |  |  | TRANSITION TO                         |
| SARASOTA, FL 34243                                   | 82-4863569        | 501(C)(3)                     | 30,000.                  | 0.                               |  |  | REGENERATIVE AGROFORESTRY             |

| Part II Continuation of Grants and Other           | Assistance to Don | nestic Organizations          | and Domestic Go          | vernments (Sch                   | edule I (Form 990), Pa   | rt II.)                                |                                       |
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| KISS THE GROUND                                    |                   |                               |                          |                                  |  |  |                                       |
| PO BOX 515381 PMB 63508                            |                   |                               |                          |                                  |  |  | TRANSITION TO                         |
| LOS ANGELES, CA 90051                              | 46-4507696        | 501(C)(3)                     | 40,000.                  | 0.                               |  |  | REGENERATIVE AGROFORESTRY             |
| •  |                   |                               | ,                        |                                  |  |  |                                       |
| LONG ISLAND PROGRESSIVE COALITION                  |                   |                               |                          |                                  |  |  |                                       |
| 90 PENNSYLVANIA AVENUE                             |                   |                               |                          |                                  |  |  | TRANSITION TO A CLEAN                 |
| MASSAPEQUA, NY 11758                               | 11-2725213        | 501(C)(4)                     | 20,000.                  | 0.                               |  |  | ENERY ECONOMY IN NEW YORK             |
|  |                   |                               |                          |                                  |  |  |                                       |
| METRO JUSTICE OF ROCHESTER INC                     |                   |                               |                          |                                  |  |  |                                       |
| 389 GREGORY ST UNIT A                              | 16-1016916        | E01/C)/2)                     | 22 000                   | 0.                               |  |  | TRANSITION TO A CLEAN                 |
| ROCHESTER, NY 14620                                | 16-1016916        | 501(C)(3)                     | 22,000.                  | 0.                               |  |  | ENERY ECONOMY IN NEW YORK             |
| MONTEREY BAY AQUARIUM/SEAFOOD                      |                   |                               |                          |                                  |  |  |                                       |
| WATCH PROGRAM - 886 CANNERY ROW -                  |                   |                               |                          |                                  |  |  | GLOBAL SEAFOOD                        |
| MONTEREY, CA 93940                                 | 94-2487469        | 501(C)(3)                     | 120,900.                 | 0.                               |  |  | CERTIFICATION                         |
|  |                   |                               |                          |                                  |  |  |                                       |
| MOONSHOT MISSIONS INC                              |                   |                               |                          |                                  |  |  |                                       |
| 5207 PORTSMOUTH RD                                 |                   |                               |                          |                                  |  |  | DEVELOP PROJECTS TO                   |
| BETHESDA, MD 20816                                 | 87-2485211        | 501(C)(3)                     | 48,250.                  | 0.                               |  |  | TRANSFORM UTILITIES                   |
|  |                   |                               |                          |                                  |  |  |                                       |
| NATIONAL AUDUBON SOCIETY                           |                   |                               |                          |                                  |  |  |                                       |
| 225 VARICK ST                                      | 12 1624102        | E01/(0)/(3)                   | 1 012 202                |                                  |  |  | TRANSMISSION SOLUTIONS                |
| NEW YORK, NY 10014                                 | 13-1624102        | 501(C)(3)                     | 1,013,292.               | 0.                               |  |  | FOR A CLEAN ENERGY FUTURE             |
| NATIONAL AUDUBON SOCIETY                           |                   |                               |                          |                                  |  |  |                                       |
| 225 VARICK ST                                      |                   |                               |                          |                                  |  |  | TRANSMISSION SOLUTIONS                |
| NEW YORK, NY 10014                                 | 13-1624102        | 501(C)(3)                     | 500,000.                 | 0.                               |  |  | FOR A CLEAN ENERGY FUTURE             |
|  |                   |                               | ,                        |                                  |  |  |                                       |
| NATIONAL CAUCUS OF ENVIRONMENTAL                   |                   |                               |                          |                                  |  |  |                                       |
| LEGISLATORS - 1100 H ST NW, SUITE                  |                   |                               |                          |                                  |  |  | TRANSMISSION SOLUTIONS                |
| 600 - WASHINGTON, DC 20005                         | 68-0633254        | 501(C)(3)                     | 60,000.                  | 0.                               |  |  | FOR A CLEAN ENERGY FUTURE             |
|  |                   |                               |                          |                                  |  |  |                                       |
| NATIONAL WILDLIFE FEDERATION                       |                   |                               |                          |                                  |  |  | TRANSPIRATION COLUMNIA                |
| 1200 G ST NW, SUITE 900                            | F2 0204616        | E01/C)/2)                     | E00 000                  | _                                |  |  | TRANSMISSION SOLUTIONS                |
| WASHINGTON, DC 20005                               | 53-0204616        | 201(C)(2)                     | 500,000.                 | 0.                               |  |  | FOR A CLEAN ENERGY FUTURE             |

| Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) |                |                               |                          |                                  |  |   |   |  |
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| NATIVE CONSERVANCY<br>711 FIRST STREET<br>CORDOVA, AK 99574  | 30-0131766     | 501(C)(3)                     | 9,000.                   | 0.                               |  |   | CLIMATE AND OCEAN SOLUTIONS FOR COASTAL CITIES.       |  |
| NATURAL RESOURCES DEFENSE COUNCIL<br>40 WEST 20TH STREET, 11TH FLOOR<br>NEW YORK, NY 10011   | 13-2654926     | 501(C)(3)                     | 500,000.                 | 0.                               |  |   | TRANSMISSION SOLUTIONS FOR A CLEAN ENERGY FUTURE      |  |
| NORTH AMERICAN MARINE ALLIANCE<br>222 MAIN STREET STOREFRONT<br>GLOUCESTER, MA 01930   | 01-0516646     | 501(c)(3)                     | 9,000.                   | 0.                               |  |   | CLIMATE AND OCEAN<br>SOLUTIONS FOR COASTAL<br>CITIES. |  |
| REGULATORY ASSISTANCE PROJECT<br>50 STATE STREET SUITE 3<br>MONTPELIER, VT 05620   | 01-0471151     | 501(C)(3)                     | 100,000.                 | 0.                               |  |   | TRANSMISSION SOLUTIONS FOR A CLEAN ENERGY FUTURE      |  |
| RESOURCES LEGACY FUND<br>400 CAPITOL MALL, SUITE 2150<br>SACRAMENTO, CA 95814  | 95-4703838     | 501(C)(3)                     | 500,040.                 | 0.                               |  |   | TRANSMISSION SOLUTIONS FOR A CLEAN ENERGY FUTURE      |  |
| ROCKEFELLER PHILANTHROPY ADVISORS<br>90 CHURCH STREET, FL 1, #7082<br>NEW YORK, NY 10008   | 13-3615533     | 501(C)(3)                     | 753,000.                 | 0.                               |  |   | TRANSMISSION SOLUTIONS<br>FOR A CLEAN ENERGY FUTURE   |  |
| ROCKY MOUNTAIN INSTITUTE 2490 JUNCTION PLACE, SUITE 200 BOULDER, CO 80301  | 74-2244146     | 501(C)(3)                     | 1,670,000.               | 0.                               |  |   | TRANSMISSION SOLUTIONS<br>FOR A CLEAN ENERGY FUTURE   |  |
| ROCKY MOUNTAIN INSTITUTE 2490 JUNCTION PLACE, SUITE 200 BOULDER, CO 80301  | 74-2244146     | 501(C)(3)                     | 1,200,000.               | 0.                               |  |   | TRANSMISSION SOLUTIONS FOR A CLEAN ENERGY FUTURE      |  |
| SECURING AMERICA'S FUTURE ENERGY SAFE FOUNDATION - 1111 19TH STREET NW, SUITE 406 - WASHINGTON, DC 20006                                 | 20-1727977     | 501(C)(3)                     | 600,610.                 | 0.                               |  |   | TRANSMISSION SOLUTIONS<br>FOR A CLEAN ENERGY FUTURE   |  |

| Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) |                |                               |                          |                                  |  |  |                                       |  |
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| SIERRA CLUB FOUNDATION   |                |                               |                          |                                  |  |  |                                       |  |
| 2101 WEBSTER STREET, STE.1250  | 04 1152207     | F01/G)/3)                     | 260 000                  | _                                |  |  | TRANSMISSION SOLUTIONS                |  |
| OAKLAND, CA 94612  | 94-1153307     | 501(C)(3)                     | 360,000.                 | 0.                               |  |  | FOR A CLEAN ENERGY FUTURE             |  |
| SOLSTICE INITIATIVE DBA ENERGY   |                |                               |                          |                                  |  |  |                                       |  |
| ALLIES - 160 ALEWIFE BROOK PKWY  |                |                               |                          |                                  |  |  | TRANSITION TO A CLEAN                 |  |
| #1051 - CAMBRIDGE, MA 02138  | 47-1608923     | 501(C)(3)                     | 20,000.                  | 0.                               |  |  | ENERY ECONOMY IN NEW YORK             |  |
| ·  |                |                               |                          |                                  |  |  |                                       |  |
| SOUTHERN DOOR COMMUNITY LAND TRUST   |                |                               |                          |                                  |  |  |                                       |  |
| 133 MAIN STREET  |                |                               |                          |                                  |  |  | TRANSITION TO A CLEAN                 |  |
| BINGHAMTON, NY 13905   | 87-3535149     | 501(C)(3)                     | 25,000.                  | 0.                               |  |  | ENERY ECONOMY IN NEW YORK             |  |
| SOUTHERN RENEWABLE ENERGY  |                |                               |                          |                                  |  |  |                                       |  |
| ASSOCIATION - 11610 PLEASANT RIDGE   |                |                               |                          |                                  |  |  |                                       |  |
| RD SUITE 103#176 - LITTLE ROCK, AR   |                |                               |                          |                                  |  |  | TRANSMISSION SOLUTIONS                |  |
| 72223  | 83-1399468     | 501(C)(6)                     | 200,000.                 | 0.                               |  |  | FOR A CLEAN ENERGY FUTURE             |  |
|  |                |                               |                          |                                  |  |  |                                       |  |
| SUSTAINABLE FISHERIES PARTNERSHIP  |                |                               |                          |                                  |  |  |                                       |  |
| FOUNDATION - 4348 WAIALAE AVE #692   |                |                               |                          |                                  |  |  | GLOBAL SEAFOOD                        |  |
| - HONOLULU, HI 96816   | 27-3091938     | 501(C)(3)                     | 45,657.                  | 0.                               |  |  | CERTIFICATION                         |  |
| #12220#################################  |                |                               |                          |                                  |  |  |                                       |  |
| TAPROOT EARTH  |                |                               |                          |                                  |  |  | CLIMATE AND OCEAN                     |  |
| PO BOX 521217  | 07.4064040     |                               |                          |                                  |  |  | SOLUTIONS FOR COASTAL                 |  |
| TULSA, OK 74152  | 87-1961840     | 501(C)(3)                     | 9,000.                   | 0.                               |  |  | CITIES.                               |  |
| THE GREAT PLAINS INSTITUTE FOR   |                |                               |                          |                                  |  |  |                                       |  |
| SUSTAINABLE DEVELOPMENT - 2801   |                |                               |                          |                                  |  |  | EDANGMIGGION GOLUETONG                |  |
| 21ST AVE S, SUITE 220 -  | 41 1021126     | E01/G\/2\                     | 750 000                  |                                  |  |  | TRANSMISSION SOLUTIONS                |  |
| MINNEAPOLIS, MN 55407 THE GREAT PLAINS INSTITUTE FOR   | 41-1921126     | 501(C)(3)                     | 750,000.                 | 0.                               |  |  | FOR A CLEAN ENERGY FUTURE             |  |
| SUSTAINABLE DEVELOPMENT - 2801   |                |                               |                          |                                  |  |  |                                       |  |
|  |                |                               |                          |                                  |  |  | TRANSMISSION SOLUTIONS                |  |
| 21ST AVE S, SUITE 220 -  | 41-1921126     | 501/C\/3\                     | 500,000.                 | 0.                               |  |  |                                       |  |
| MINNEAPOLIS, MN 55407 THE GREAT PLAINS INSTITUTE FOR   | 41-1921120     | 301(0)(3)                     | 300,000.                 | 0.                               |  |  | FOR A CLEAN ENERGY FUTURE             |  |
| SUSTAINABLE DEVELOPMENT - 2801   |                |                               |                          |                                  |  |  |                                       |  |
| 21ST AVE S, SUITE 220 -  |                |                               |                          |                                  |  |  | TRANSMISSION SOLUTIONS                |  |
| MINNEAPOLIS, MN 55407  | 41-1921126     | 501(C)(3)                     | 575,500.                 | 0.                               |  |  | FOR A CLEAN ENERGY FUTURE             |  |
| HIMMENIOHID, PH JJ407  | 1 -1 1921120   | 301(0/(3/                     | 3/3,300.                 | <u> </u>                         |  | 1                                      | TON A CHEAN ENERGI FOTORE             |  |

|  |  | rt II.)                                   | edule I (Form 990), Par  | overnments (Sche                 | and Domestic Go          | nestic Organizations          | Assistance to Dor | Part II Continuation of Grants and Other  |
|--|--|---|--|----------------------------------|--------------------------|-------------------------------|-------------------|---|
|  | (h) Purpose of gra<br>or assistance                                      | (g) Description of<br>non-cash assistance | (f) Method of<br>valuation<br>(book, FMV,<br>appraisal, other) | (e) Amount of noncash assistance | (d) Amount of cash grant | (c) IRC section if applicable | <b>(b)</b> EIN    | (a) Name and address of organization or government  |
|  | CLIMATE AND OCEAN SOLUTIONS FOR COAST                                    |   |  | 0.                               | 9,000.                   | 501(C)(3)                     | 94-3335236        | THE REGENERATION PROJECT DBA INTERFAITH POWER & LIGHT - 672 13TH STREET SUITE 100 - OAKLAND, CA 94612 |
|  | TRANSMISSION SOLUTI  |   |  | 0.                               | 247,500.                 | 501(C)(3)                     | 74-6173027        | THE UNIVERSITY OF TEXAS AT AUSTIN 3925 WEST BRAKER LANE, BUILDING 156 AUSTIN, TX 78759                |
|  | TRANSITION TO A CLE  |   |  | 0.                               | 20,000.                  | 501(c)(3)                     | 94-3213100        | TIDES CENTER<br>1012 TORNEY AVENUE<br>SAN FRANCISCO, CA 94139   |
|  | TRANSMISSION SOLUTI  |   |  | 0.                               | 2,700,000.               | 501(C)(3)                     | 83-1740146        | UNITED STATES ENERGY FOUNDATION<br>55 SECOND STREET, SUITE 2400<br>SAN FRANCISCO, CA 94105            |
| ICE AND<br>ABILITY OUTCOMES            | EQUITABLE CLIMATE RESILIENCE AND SUSTAINABILITY OUTC FOR COMMUNITIES     |   |  | 0.                               | 10,000.                  | 501(C)(3)                     | 41-6042488        | UNIVERSITY OF MINNESOTA FOUNDATION 439 BORLAUG HALL 1991 UPPER BUFORD ST. PAUL, MN 55108              |
| POLICY,<br>CATION AND<br>EDUCATION FOR | SCIENCE POLICY, COMMUNICATION AND ADVOCACY EDUCATION EARLY-CAREER SCIENT |   |  | 0.                               | 6,300.                   |                               |                   | WAYNE STATE UNIVERSITY 3901 CHRYSLER SERVICE DRIVE SUITE 2 DETROIT, MI 48201                          |
|  | TRANSITION TO A CLE  |   |  | 0.                               | 46,600.                  | 501(C)(3)                     | 13-3800068        | WEST HARLEM ENVIRONMENTAL ACTION 1854 AMSTERDAM AVENUE 2ND FLOOR NEW YORK, NY 10031                   |
|  |  |   |  |                                  |                          |                               |                   |   |
|  |  |   |  |                                  |                          |                               |                   |   |
|  | 1  |   |  | 0.                               | 46,600.                  | 501(C)(3)                     | 13-3800068        |   |

Schedule I (Form 990) 2023 MULTIPLIER 91 – 2166435 Page 2

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

| GRANTS ARE SUPPORTED BY GRANT AGREEMENTS SIGNED BY MULTIPLIER AND THE  GRANTEE, WHICH INCLUDE A DETAILED DESCRIPTION OF EXPECTED DELIVERABLES  AND/OR OUTCOMES. GRANTEE IS REQUIRED TO PROVIDE MULTIPLIER WITH PERIODIC  REPORTING, AS SPECIFIED IN THE GRANT AGREEMENT, REGARDING OUTCOMES ACHIEVED  WITH GRANT FUNDS DISBURSED; THIS REPORTING IS VERIFIED BY APPLICABLE                  | Part III can be duplicated if additional space is needed.     | •                    | _                     |                       |   |                                       |
|---|---|----------------------|-----------------------|-----------------------|---|---------------------------------------|
| PART I, LINE 2:  GRANTS ARE SUPPORTED BY GRANT AGREEMENTS SIGNED BY MULTIPLIER AND THE  GRANTEE, WHICH INCLUDE A DETAILED DESCRIPTION OF EXPECTED DELIVERABLES  AND/OR OUTCOMES. GRANTEE IS REQUIRED TO PROVIDE MULTIPLIER WITH PERIODIC  REPORTING, AS SPECIFIED IN THE GRANT AGREEMENT, REGARDING OUTCOMES ACHIEVED  WITH GRANT FUNDS DISBURSED; THIS REPORTING IS VERIFIED BY APPLICABLE | (a) Type of grant or assistance                               |                      |                       |                       | (e) Method of valuation (book, FMV, appraisal, other) | (f) Description of noncash assistance |
| PART I, LINE 2:  GRANTS ARE SUPPORTED BY GRANT AGREEMENTS SIGNED BY MULTIPLIER AND THE  GRANTEE, WHICH INCLUDE A DETAILED DESCRIPTION OF EXPECTED DELIVERABLES  AND/OR OUTCOMES. GRANTEE IS REQUIRED TO PROVIDE MULTIPLIER WITH PERIODIC  REPORTING, AS SPECIFIED IN THE GRANT AGREEMENT, REGARDING OUTCOMES ACHIEVED  WITH GRANT FUNDS DISBURSED; THIS REPORTING IS VERIFIED BY APPLICABLE |   |                      |                       |                       |   |                                       |
| PART I, LINE 2:  GRANTS ARE SUPPORTED BY GRANT AGREEMENTS SIGNED BY MULTIPLIER AND THE  GRANTEE, WHICH INCLUDE A DETAILED DESCRIPTION OF EXPECTED DELIVERABLES  AND/OR OUTCOMES. GRANTEE IS REQUIRED TO PROVIDE MULTIPLIER WITH PERIODIC  REPORTING, AS SPECIFIED IN THE GRANT AGREEMENT, REGARDING OUTCOMES ACHIEVED  WITH GRANT FUNDS DISBURSED; THIS REPORTING IS VERIFIED BY APPLICABLE |   |                      |                       |                       |   |                                       |
| PART I, LINE 2:  GRANTS ARE SUPPORTED BY GRANT AGREEMENTS SIGNED BY MULTIPLIER AND THE  GRANTEE, WHICH INCLUDE A DETAILED DESCRIPTION OF EXPECTED DELIVERABLES  AND/OR OUTCOMES. GRANTEE IS REQUIRED TO PROVIDE MULTIPLIER WITH PERIODIC  REPORTING, AS SPECIFIED IN THE GRANT AGREEMENT, REGARDING OUTCOMES ACHIEVED  WITH GRANT FUNDS DISBURSED; THIS REPORTING IS VERIFIED BY APPLICABLE |   |                      |                       |                       |   |                                       |
| PART I, LINE 2:  GRANTS ARE SUPPORTED BY GRANT AGREEMENTS SIGNED BY MULTIPLIER AND THE  GRANTEE, WHICH INCLUDE A DETAILED DESCRIPTION OF EXPECTED DELIVERABLES  AND/OR OUTCOMES. GRANTEE IS REQUIRED TO PROVIDE MULTIPLIER WITH PERIODIC  REPORTING, AS SPECIFIED IN THE GRANT AGREEMENT, REGARDING OUTCOMES ACHIEVED  WITH GRANT FUNDS DISBURSED; THIS REPORTING IS VERIFIED BY APPLICABLE |   |                      |                       |                       |   |                                       |
| PART I, LINE 2:  GRANTS ARE SUPPORTED BY GRANT AGREEMENTS SIGNED BY MULTIPLIER AND THE  GRANTEE, WHICH INCLUDE A DETAILED DESCRIPTION OF EXPECTED DELIVERABLES  AND/OR OUTCOMES. GRANTEE IS REQUIRED TO PROVIDE MULTIPLIER WITH PERIODIC  REPORTING, AS SPECIFIED IN THE GRANT AGREEMENT, REGARDING OUTCOMES ACHIEVED  WITH GRANT FUNDS DISBURSED; THIS REPORTING IS VERIFIED BY APPLICABLE |   |                      |                       |                       |   |                                       |
| PART I, LINE 2:  GRANTS ARE SUPPORTED BY GRANT AGREEMENTS SIGNED BY MULTIPLIER AND THE  GRANTEE, WHICH INCLUDE A DETAILED DESCRIPTION OF EXPECTED DELIVERABLES  AND/OR OUTCOMES. GRANTEE IS REQUIRED TO PROVIDE MULTIPLIER WITH PERIODIC  REPORTING, AS SPECIFIED IN THE GRANT AGREEMENT, REGARDING OUTCOMES ACHIEVED  WITH GRANT FUNDS DISBURSED; THIS REPORTING IS VERIFIED BY APPLICABLE |   |                      |                       |                       |   |                                       |
| PART I, LINE 2:  GRANTS ARE SUPPORTED BY GRANT AGREEMENTS SIGNED BY MULTIPLIER AND THE  GRANTEE, WHICH INCLUDE A DETAILED DESCRIPTION OF EXPECTED DELIVERABLES  AND/OR OUTCOMES. GRANTEE IS REQUIRED TO PROVIDE MULTIPLIER WITH PERIODIC  REPORTING, AS SPECIFIED IN THE GRANT AGREEMENT, REGARDING OUTCOMES ACHIEVED  WITH GRANT FUNDS DISBURSED; THIS REPORTING IS VERIFIED BY APPLICABLE |   |                      |                       |                       |   |                                       |
| GRANTS ARE SUPPORTED BY GRANT AGREEMENTS SIGNED BY MULTIPLIER AND THE  GRANTEE, WHICH INCLUDE A DETAILED DESCRIPTION OF EXPECTED DELIVERABLES  AND/OR OUTCOMES. GRANTEE IS REQUIRED TO PROVIDE MULTIPLIER WITH PERIODIC  REPORTING, AS SPECIFIED IN THE GRANT AGREEMENT, REGARDING OUTCOMES ACHIEVED  WITH GRANT FUNDS DISBURSED; THIS REPORTING IS VERIFIED BY APPLICABLE                  | Part IV Supplemental Information. Provide the information req | uired in Part I, lin | e 2; Part III, column | (b); and any other ac | lditional information.                                |                                       |
| GRANTEE, WHICH INCLUDE A DETAILED DESCRIPTION OF EXPECTED DELIVERABLES  AND/OR OUTCOMES. GRANTEE IS REQUIRED TO PROVIDE MULTIPLIER WITH PERIODIC  REPORTING, AS SPECIFIED IN THE GRANT AGREEMENT, REGARDING OUTCOMES ACHIEVED  WITH GRANT FUNDS DISBURSED; THIS REPORTING IS VERIFIED BY APPLICABLE   | PART I, LINE 2:   |                      |                       |                       |   |                                       |
| AND/OR OUTCOMES. GRANTEE IS REQUIRED TO PROVIDE MULTIPLIER WITH PERIODIC REPORTING, AS SPECIFIED IN THE GRANT AGREEMENT, REGARDING OUTCOMES ACHIEVED WITH GRANT FUNDS DISBURSED; THIS REPORTING IS VERIFIED BY APPLICABLE   | GRANTS ARE SUPPORTED BY GRANT AGRE                            | EMENTS SI            | GNED BY MU            | JLTIPLIER A           | ND THE  |                                       |
| REPORTING, AS SPECIFIED IN THE GRANT AGREEMENT, REGARDING OUTCOMES ACHIEVED WITH GRANT FUNDS DISBURSED; THIS REPORTING IS VERIFIED BY APPLICABLE  | GRANTEE, WHICH INCLUDE A DETAILED I                           | DESCRIPTI            | ON OF EXPE            | CTED DELIV            | ERABLES   |                                       |
| WITH GRANT FUNDS DISBURSED; THIS REPORTING IS VERIFIED BY APPLICABLE  | AND/OR OUTCOMES. GRANTEE IS REQUIRE                           | ED TO PRO            | VIDE MULTI            | PLIER WITH            | PERIODIC  |                                       |
| ·   | REPORTING, AS SPECIFIED IN THE GRAN                           | T AGREEM             | ENT, REGAR            | DING OUTCO            | MES ACHIEVED  |                                       |
|   | WITH GRANT FUNDS DISBURSED; THIS RE                           | EPORTING             | IS VERIFIE            | D BY APPLI            | CABLE   |                                       |
| PROJECT STAFF.  | PROJECT STAFF.  |                      |                       |                       |   |                                       |

### SCHEDULE J (Form 990)

**Compensation Information** 

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.

2023

OMB No. 1545-0047

Open to Public Inspection

Internal Revenue Service Name of the organization

Department of the Treasury

Part I

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

e organization Employer identification number MULTIPLIER 91-2166435

Questions Regarding Compensation

|            |  |    | Yes | No       |  |  |
|------------|--|----|-----|----------|--|--|
| <b>1</b> a | Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, |    |     |          |  |  |
|            | Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.             |    |     |          |  |  |
|            | First-class or charter travel Housing allowance or residence for personal use  |    |     |          |  |  |
|            | Travel for companions Payments for business use of personal residence  |    |     |          |  |  |
|            | Tax indemnification and gross-up payments  Health or social club dues or initiation fees                               |    |     |          |  |  |
|            | Discretionary spending account 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               | 1b |     |          |  |  |
| 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?                  | 2  |     |          |  |  |
|            |  |    |     |          |  |  |
| 3          | Indicate which, if any, of the following the organization used to establish the compensation of the organization's     |    |     |          |  |  |
|            | CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to     |    |     |          |  |  |
|            | establish compensation of the CEO/Executive Director, but explain in Part III.   |    |     |          |  |  |
|            | X Compensation committee X Written employment contract   |    |     |          |  |  |
|            | Independent compensation consultant  X Compensation survey or study  |    |     |          |  |  |
|            | Form 990 of other organizations  X 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:  |    |     |          |  |  |
| а          | Receive a severance payment or change-of-control payment?  | 4a |     | <u>X</u> |  |  |
| b          | Participate in or receive payment from a supplemental nonqualified retirement plan?                                    | 4b |     | X        |  |  |
| С          | 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:   | _  |     | 37       |  |  |
|            | The organization?  | 5a |     | <u>X</u> |  |  |
| b          | Any related organization?  | 5b |     | Λ        |  |  |
| _          | 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:   |    |     | v        |  |  |
|            | The organization?  | 6a |     | X        |  |  |
| b          | Any related organization?  | 6b |     |          |  |  |
| -          | If "Yes" on line 6a or 6b, describe in Part III.   |    |     |          |  |  |
| 7          |  | _  |     | v        |  |  |
|            | not described on lines 5 and 6? If "Yes," describe in Part III   | 7  |     | _X_      |  |  |
| 8          | Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the        |    |     | х        |  |  |
| 0          | initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III            | 8  |     |          |  |  |
| 9          | If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in                 | ٩  |     |          |  |  |
|            |  |    |     |          |  |  |

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

Schedule J (Form 990) 2023

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.

|                         | (B) Breakdown of W       | I-2 and/or 1099-MIS0 compensation         | C and/or 1099-NEC                         | (C) Retirement and other deferred | (D) Nontaxable benefits | (E) Total of columns<br>(B)(i)-(D) | (F) Compensation<br>in column (B)<br>reported as deferred<br>on prior Form 990 |    |
|-------------------------|--------------------------|---|---|-----------------------------------|-------------------------|------------------------------------|--|----|
| (A) Name and Title      | (i) Base<br>compensation | (ii) Bonus &<br>incentive<br>compensation | (iii) Other<br>reportable<br>compensation | compensation                      |                         |                                    |  |    |
| (1) LAURA DEATON        | (i)                      | 214,155.                                  | 43,598.                                   | 0.                                | 8,656.                  | 9,176.                             | 275,585.   | 0. |
| EXECUTIVE DIRECTOR      | (ii)                     | 0.  | 0.  | 0.                                | 0.                      | 0.                                 | 0.   | 0. |
| (2) STEPHANIE MCCLELLAN | (i)                      | 242,899.                                  | 0.  | 0.                                | 6,922.                  | 7,967.                             | 257,788.   | 0. |
| PROJECT DIRECTOR        | (ii)                     | 0.  | 0.  | 0.                                | 0.                      | 0.                                 | 0.   | 0. |
| (3) GREGORY BROWN       | (i)                      | 191,584.                                  | 20,000.                                   | 0                                 | 6,641.                  | 13,158.                            | 231,383.   | 0. |
| PROJECT DIRECTOR        | (ii)                     | 0.  | 0.  | 0.                                | 0.                      | 0.                                 | 0.   | 0. |
| (4) EVAN EDWARDS        | (i)                      | 209,381.                                  | 0.  | 0.                                | 7,425.                  | 9,176.                             | 225,982.   | 0. |
| PROJECT DIRECTOR        | (ii)                     | 0.  | 0.  | 0.                                | 0.                      | 0.                                 | 0.   | 0. |
| (5) LARA CROUSHORE      | (i)                      | 189,986.                                  | 5,000.                                    | 0.                                | 6,641.                  | 6,853.                             | 208,480.   | 0. |
| MANAGING DIRECTOR       | (ii)                     | 0.  | 0.  | 0.                                | 0.                      | 0.                                 | 0.   | 0. |
| (6) ALISON KOBBAN       | (i)                      | 176,200.                                  | 10,000.                                   | 0.                                | 6,401.                  | 15,404.                            | 208,005.   | 0. |
| PROGRAM DIRECTOR        | (ii)                     | 0.  | 0.  | 0.                                | 0.                      | 0.                                 | 0.   | 0. |
| (7) CONSTANCE DE BRUN   | (i)                      | 175,770.                                  | 0.  | 0.                                | 6,005.                  | 8,401.                             | 190,176.   | 0. |
| HEAD OF FINANCE         | (ii)                     | 0.  | 0.  | 0.                                | 0.                      | 0.                                 | 0.   | 0. |
|                         | (i)                      |   |   |                                   |                         |                                    |  |    |
|                         | (ii)                     |   |   |                                   |                         |                                    |  |    |
|                         | (i)                      |   |   |                                   |                         |                                    |  |    |
|                         | (ii)                     |   |   |                                   |                         |                                    |  |    |
|                         | (i)                      |   |   |                                   |                         |                                    |  |    |
|                         | (ii)                     |   |   |                                   |                         |                                    |  |    |
|                         | (i)                      |   |   |                                   |                         |                                    |  |    |
|                         | (ii)                     |   |   |                                   |                         |                                    |  |    |
|                         | (i)                      |   |   |                                   |                         |                                    |  |    |
|                         | (ii)                     |   |   |                                   |                         |                                    |  |    |
|                         | (i)                      |   |   |                                   |                         |                                    |  |    |
|                         | (ii)                     |   |   |                                   |                         |                                    |  |    |
|                         | (i)                      |   |   |                                   |                         |                                    |  |    |
|                         | (ii)                     |   |   |                                   |                         |                                    |  |    |
|                         | (i)                      |   |   |                                   |                         |                                    |  |    |
|                         | (ii)                     |   |   |                                   |                         |                                    |  |    |
|                         | (i)                      |   |   |                                   |                         |                                    |  |    |
|                         | (ii)                     |   |   |                                   |                         |                                    |  |    |

Page 2

| 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. |  |  |  |  |
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Page 3

Schedule J (Form 990) 2023

#### **SCHEDULE M** (Form 990)

## **Noncash Contributions**

OMB No. 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service

Name of the organization

MULTIPLIER

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.

Inspection Employer identification number 91-2166435

| Pai      | rt I Types of Property                             |                     |                      |                                 |                                    |                 |    |
|----------|--|---------------------|----------------------|---------------------------------|------------------------------------|-----------------|----|
|          |  | (a)                 | (b)<br>Number of     | (c) Noncash contribution        | (d)                                |                 |    |
|          |  | Check if applicable | contributions or     | amounts reported on             | Method of det<br>noncash contribut |                 | 9  |
|          |  | арріюцью            |                      | Form 990, Part VIII, line 1g    | Horiodori contribut                | .ioir airiodiit |    |
| 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                   | 3                    | 1,994,192.                      | BOOK VALUE                         |                 |    |
| 10       | Securities - Closely held stock                    |                     |                      |                                 |                                    |                 |    |
| 11       | Securities - Partnership, LLC, or                  |                     |                      |                                 |                                    |                 |    |
|          | trust interests                                    |                     |                      |                                 |                                    |                 |    |
| 12       | Securities - Miscellaneous                         |                     |                      |                                 |                                    |                 |    |
| 13       | Qualified conservation contribution -              |                     |                      |                                 |                                    |                 |    |
|          | Historic structures                                |                     |                      | Y                               |                                    |                 |    |
| 14       | Qualified conservation contribution - Other        |                     |                      |                                 |                                    |                 |    |
| 15       | Real estate - Residential                          |                     |                      |                                 |                                    |                 |    |
| 16       | Real estate - Commercial                           |                     |                      |                                 |                                    |                 |    |
| 17       | Real estate - Other                                |                     |                      |                                 |                                    |                 |    |
| 18       | Collectibles                                       |                     |                      | 6 000                           | T32.57.7                           |                 |    |
| 19       | Food inventory                                     | Х                   | 9                    | 6,880.                          | ₽.W∧                               |                 |    |
| 20       | Drugs and medical supplies                         |                     |                      |                                 |                                    |                 |    |
| 21       | Taxidermy  |                     |                      |                                 |                                    |                 |    |
| 22       | Historical artifacts                               |                     |                      |                                 |                                    |                 |    |
| 23       | Scientific specimens                               |                     |                      |                                 |                                    |                 |    |
| 24       | Archeological artifacts Other ( SPONSORED CONTE )  | X                   | 1                    | 150,000.                        | TMVOTCE                            |                 |    |
| 25       |  | Λ                   |                      | 130,000.                        | INVOICE                            |                 |    |
| 26<br>27 | Other () Other (                                   |                     |                      |                                 |                                    |                 |    |
| 28       | Other ()   |                     |                      |                                 |                                    |                 |    |
| 29       | Number of Forms 8283 received by the organiz       | ation during        | the tay year for co  | ontributions                    |                                    |                 |    |
|          | for which the organization completed Form 828      | -                   | •                    |                                 |                                    |                 |    |
|          | To Whom the organization completed Form 525        | ,o, r art 1, b      | once hermong         | 20                              |                                    | Yes             | No |
| 30a      | During the year, did the organization receive by   | contributio         | n anv property rep   | orted in Part I. lines 1 throug | h 28. that it                      | 1.55            |    |
|          | must hold for at least 3 years from the date of t  |                     |                      |                                 | I                                  |                 |    |
|          | exempt purposes for the entire holding period?     |                     |                      |                                 |                                    | 30a             | х  |
| b        | If "Yes," describe the arrangement in Part II.     |                     |                      |                                 |                                    |                 |    |
| 31       | Does the organization have a gift acceptance p     | olicy that re       | equires the review o | of any nonstandard contribut    | ions?                              | 31              | Х  |
|          | Does the organization hire or use third parties of |                     |                      |                                 |                                    |                 |    |
|          | contributions?                                     |                     |                      | · ·                             |                                    | 32a             | Х  |
| b        | If "Yes," describe in Part II.                     |                     |                      |                                 |                                    |                 |    |
| 33       | If the organization didn't report an amount in co  | olumn (c) foi       | a type of property   | for which column (a) is chec    | ked,                               |                 |    |
|          | describe in Part II.                               |                     |                      |                                 |                                    |                 |    |
|          |  |                     |                      |                                 |                                    |                 |    |

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Schedule M (Form 990) 2023

332142 09-11-23

### **SCHEDULE O** (Form 990)

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 Form 990-EZ.

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

OMB No. 1545-0047 Inspection

Department of the Treasury Internal Revenue Service Name of the organization

MULTIPLIER

**Employer identification number** 91-2166435

| MULTIPLIER                                 | 91-2166435  |  |  |  |  |  |
|--|---|--|--|--|--|--|
| FORM 990, PART III, LINE 4D, OTHER PROGRAM | I SERVICES:   |  |  |  |  |  |
| HEALTHY PLANET AND PEOPLE: BIODIVERSE PLAN | TS AND ANIMALS, INCLUDING   |  |  |  |  |  |
| HUMANS, LIVE IN BALANCED ECOSYSTEMS THAT P | PROVIDE THE NUTRIENTS THEY  |  |  |  |  |  |
| NEED AND A PLACE TO LIVE, GROW AND THRIVE. |   |  |  |  |  |  |
| EXPENSES \$ 5,295,815. INCLUDING GRANTS C  | EXPENSES \$ 5,295,815. INCLUDING GRANTS OF \$ 160,236. REVENUE \$ 80,428. |  |  |  |  |  |
| FORM 990, PART VI, SECTION A, LINE 3:      |   |  |  |  |  |  |
| PROJECT MANAGEMENT:                        |   |  |  |  |  |  |
| PROJECT NAME                               |   |  |  |  |  |  |
|  |   |  |  |  |  |  |
| MARVIVA                                    | ALEJANDRA PACHECO   |  |  |  |  |  |
| CERTIFICATION AND RATINGS COLLABORATION    | AQUACULTURE STEWARDSHIP COUNCIL   |  |  |  |  |  |
| SEAFOOD AND FISHERIES EMERGING TECHNOLOGY  | BUBBA COOK & CHRISTOPHER CUSACK   |  |  |  |  |  |
| CCHANGE                                    | CCHANGE INTERNATIONAL   |  |  |  |  |  |
| MAVEN'S NOTEBOOK                           | CHRIS AUSTIN  |  |  |  |  |  |
| UPPER AMAZON CONSERVANCY                   | CHRIS FAGAN   |  |  |  |  |  |
| REPARATION GENERATION                      | DAVID MAYER   |  |  |  |  |  |
| NET GAINS ALLIANCE                         | GEORGE A. CHMAEL II   |  |  |  |  |  |
| FED BY BLUE                                | JENNIFER BUSHMAN  |  |  |  |  |  |
| MARHAVER LAB                               | KRISTEN MARHAVER  |  |  |  |  |  |
| TRANSFORMATIVE TECH ORG                    | NICHOL BRADFORD   |  |  |  |  |  |
| ROOT SOLUTIONS                             | NYA VAN LEUVAN  |  |  |  |  |  |
| JUNGLEKEEPERS                              | REBECCA FOON  |  |  |  |  |  |
| CONSERVATION & COMMUNITY INVESTMENT FORUM  | STARLING RESOURCES  |  |  |  |  |  |

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Schedule O (Form 990) 2023

<u>Schedule O (Form 990) 2023</u> Page **2** 

Name of the organization MULTIPLIER Employer identification number 91-2166435

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

A DRAFT OF FORM 990 IS REVIEWED BY MANAGEMENT AND THE AUDIT COMMITTEE OF THE BOARD OF DIRECTORS, AND PROVIDED TO ALL BOARD MEMBERS PRIOR TO FILING.

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

A WRITTEN COPY OF THE ORGANIZATION'S CONFLICT OF INTEREST POLICY IS

PROVIDED ANNUALLY TO THE BOARD OF DIRECTORS AND EXECUTIVE DIRECTOR, ALL OF

WHOM SIGN AN ANNUAL CONFLICT OF INTEREST DISCLOSURE STATEMENT.

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

THE BOARD OF DIRECTORS REVIEWS AND APPROVES COMPENSATION FOR THE EXECUTIVE DIRECTOR. AS PART OF THIS PROCESS, THE BOARD OF DIRECTORS REVIEWS

COMPARABILITY DATA, DETERMINES COMPENSATION IS JUST AND REASONABLE, AND APPROVES COMPENSATION ANNUALLY OR MORE FREQUENTLY AS NEEDED AND DOCUMENTED BY THE BOARD. LAST REVIEW WAS IN DEC 2023.

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

GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS

ARE AVAILABLE TO THE PUBLIC UPON REQUEST.

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

OTHER PROFESSIONAL FEES:

PROGRAM SERVICE EXPENSES

MANAGEMENT AND GENERAL EXPENSES

69,070.

FUNDRAISING EXPENSES

221,073.

TOTAL EXPENSES

10,624,252.

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

10,624,252.

Schedule O (Form 990) 2023

| Schedule O (Form 990) 2023                                 | Page <b>2</b>                             |
|--|---|
| Name of the organization  MULTIPLIER                       | Employer identification number 91-2166435 |
| FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:          |   |
| PROVISION FOR CREDIT LOSSES                                | -1,225,000.                               |
| CUMULATIVE EFFECT ADJUSTMENT FOR ADOPTION OF ASC TOPIC 326 | -1,280,000.                               |
| TOTAL TO FORM 990, PART XI, LINE 9                         | -2,505,000.                               |
| FORM 990, PART XII, LINE 2C:                               |   |
| THE PROCESS OF OVERSEEING THE AUDIT AND SELECTING AN INDEP | ENDENT                                    |
| ACCOUNTANT HAS NOT CHANGED FROM PRIOR YEAR.                |   |
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