Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

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

Open to Public Inspection

Α	For t	he 2021 calen	dar year, or tax	year begii	nning		, 20	021, an	nd endir	ıg		, , 2	20		
В	Check	if applicable:	С								D Employ	er identifi	cation number		
	A	ddress change	Sustainab	le Cons	servation	n					94-	32324	37		
Name change 98 Battery St Ste 302 E Telephone num															
		itial return										-977-			
				-,	_						415	-911 -	0300		
		nal return/terminated											F 005		
	\vdash	mended return								T	G Gross receipts \$ 5,230,579.				
	Α	pplication pending		ess of princip	^{al officer:} Ash	nley Bor	en			` '	a group retur			X _{No}	
			Same As C	Above		-				H(b) Are all If "No.	l subordinates " attach a list.	included? See instr	uctions. Yes	No	
I	Tax-	exempt status:	X 501(c)(3)	501(c) () 	insert no.)	4947(a)(1	1) or	527]					
J	We	bsite: ► ww	w.suscon.c	org		•				H(c) Group	exemption nu	ımber ►			
K	Forn	n of organization:	X Corporation	Trust	Association	Other ►		L Year	r of format	ion: 199	5 M s	state of led	gal domicile: CA		
	rt I	Summar											<u> </u>		
1 6	1	Briefly descri	be the organizat	tion's miss	sion or most	significant :	activities:	Coo	Caha	d1 o O					
		Briefly desert	be the organization	10113 111130	51011 01 111031	<u> </u>	activities.	<u>see</u>	2cue	<u>aure o</u>					
Governance															
멸															
le.	2	Chock this be	k this box ► if the organization discontinued its operations or disposed of more than 25% of its net assets.												
õ	3	Number of vo	oting members of	organization of the gove	ernina hody (Part VI line	2 1a)	uisposi	cu oi iii	JIE Man 2	23 /0 01 113	3	ets.	15	
∘ŏ	4		dependent votin									4		15	
es	5		of individuals e									5		29	
Activities &	6		of volunteers (6		80	
Ę	_		ed business reve									7a		0.	
_			l business taxab									7b		0.	
						.,	.,				Prior Year	7.5	Current Yo		
	8	Contributions	and grants (Pa	rt VIII line	- 1h)						4,394,0	113	4,690		
ne	9		rice revenue (Pa								164,8			,032.	
le1	10										205,9			,677.	
Revenue	11								1,3						
_	12		e (Fart Viii, coit e – add lines 8 f											<u>,182.</u>	
			imilar amounts p								4,766,1	.05.	5,230	, 519.	
	13						-								
	14														
S	15												3,316	<u>,577.</u>	
Expenses	16 a	Professional	ssional fundraising fees (Part IX, column (A), line 11e)												
ē	b	Total fundrais	sing expenses (F	Part IX, co	olumn (D), lir	ne 25) ►		911	,405.						
Щ	17		ses (Part IX, colu			· · · · · · · · · · · · · · · · · · ·		•			1,739,2	01	1,067	522	
	18		es. Add lines 13								<u> </u>				
	_	•		•	•			•			4,901,6		4,384		
	19	Revenue less	expenses. Sub	tract line	18 from line	12				_	-135,4			<u>,480.</u>	
s or		-	(D L) (16)								ng of Curren		End of Ye		
Net Assets	20		(Part X, line 16)							;	5,785,1		6,782	<u>,087.</u>	
ž Až	21	rotal liabilitie	es (Part X, line 2	20)							442,3	28.	592	,802.	
			fund balances.	Subtract	line 21 from	line 20					5,342,8	05.	6,189	,285.	
Pa	ırt II	Signatur	e Block												
Unde	er pena	Ities of perjury, I de	eclare that I have exa	mined this ret	turn, including ac	ccompanying sc	hedules and s	statemen	nts, and to	the best of n	ny knowledge	and belief	f, it is true, correct	, and	
com	plete. D	eclaration of prepa	arer (other than officer	r) is based or	all information of	of which prepare	er has any kn	nowledge							
Sig	nr	Signatu	re of officer							Da	ate				
He	re	Ash	ley Boren							CEO					
			print name and title							СПО					
		Print/Type r	oreparer's name		Preparer's sig	arcting. 44		D	ate		Check	if P	TIN		
_		, ,				Lelixber	undo			2/2022	_	」 "			
Pa			Gorrindo	c	1 000				3 31 E E	.,	self-employe	ea F	01658413		
Pro	epar	.1			eda CPAs										
US	e Or	ily Firm's addre	ress ▶ 1970 Broadway STE 930						Firm's EIN ► N/A						
			0aklan	nd, CA	94612						Phone no.	(510)) 835-272	27	
Ma	y the	IRS discuss th	nis return with th			ve? See ins	tructions.						X Yes	No	

Form **8868**

Department of the Treasury Internal Revenue Service Application for Automatic Extension of Time To File an Exempt Organization Return

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

OMB No. 1545-0047

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

Automat	ic 6-Month Extension of Time. Only	submit origin	al (no copies needed).							
All corpora	tions required to file an income tax return other	er than Form 99	0-T (including 1120-C filers), partnershi	ps, RE	MICs, and	trusts must				
use Form /	7004 to request an extension of time to file inc Name of exempt organization or other filer, see instruction		5.	Тахра	yer identificati	on number (TIN)				
Type or										
print	Sustainable Conservation			94-	3232437	7				
File by the	Number, street, and room or suite number. If a P.O. box,	see instructions.		15 1	0202101	<u> </u>				
due date for filing your	98 Battery St Ste 302									
return. See instructions.	98 Battery St Ste 302 City, town or post office, state, and ZIP code. For a foreign	ın address, see instru	actions.							
IIIStructions.	San Francisco, CA 94111									
Enter the F	Return Code for the return that this application	is for (file a se	parate application for each return)			01				
Application	1	Return Code	Application Is For			Return Code				
	or Form 990-EZ	01	Form 1041-A			08				
	(individual)	03	Form 4720 (other than individual)			09				
Form 990-F	· /	04	Form 5227			10				
	Γ (section 401(a) or 408(a) trust)	05	Form 6069		11					
	Γ (trust other than above)	06	Form 8870			12				
Form 990-1	Γ (corporation)	07								
If the oIf this is check t	rganization does not have an office or place of some for a Group Return, enter the organization's his box ▶ . If it is for part of the groension is for.	four digit Group	e United States, check this box Exemption Number (GEN)	f this is	for the w					
1 request for the	est an automatic 6-month extension of time until e organization named above. The extension is X calendar year 20 21 or tax year beginning, 20 tax year entered in line 1 is for less than 12 is	s for the organiz	ng, 20							
3a If this	hange in accounting period application is for Forms 990-PF, 990-T, 4720			20	ć	0				
	efundable credits. See instructions			3 a	φ	0.				
b If this tax pa	s application is for Forms 990-PF, 990-T, 4720 ayments made. Include any prior year overpay	, or 6069, enter yment allowed a	any retundable credits and estimated as a credit	3 b	\$	0.				
c Balar EFTP	nce due. Subtract line 3b from line 3a. Include S (Electronic Federal Tax Payment System).	your payment see instructions	with this form, if required, by using	3 c	\$	0.				
Caution: If payment in	you are going to make an electronic funds wi	thdrawal (direct	debit) with this Form 8868, see Form 8	453-TE	and Form	8879-TE for				

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

Form **8868** (Rev. 1-2022)

Par	t III	Statement of Program Service Accomplishments	_
		· · · · · · · · · · · · · · · · · · ·	Χ
1		ly describe the organization's mission:	
	<u>See</u>	Schedule O	
2	Did th	ne organization undertake any significant program services during the year which were not listed on the prior	
	Form	990 or 990-EZ?	О
		es," describe these new services on Schedule O.	
3		he organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No	О
		es," describe these changes on Schedule O.	
4	Secti	ribe the organization's program service accomplishments for each of its three largest program services, as measured by expenses on 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, revenue, if any, for each program service reported.	•
4 a	(Cod	e:) (Expenses \$ 1,481,890. including grants of \$) (Revenue \$ 331,980.	.)
		ER MANAGEMENT: California faces big challenges when it comes to our water	
		plies. Our limited and less reliable fresh water is being stretched to meet the	
		ds of the environment and growing urban and farming demands, while our groundwate	<u>r</u> _
		plies are steadily declining. Sustainable Conservation advances promising	
		ifornia. Our efforts mean reliable, affordable and clean water for irrigating the	
		ops that feed the nation, healthy communities, and vibrant waterways that support	
		verse wildlife.	
)	_
4 b	(Cod	e:) (Expenses \$795,226. including grants of \$) (Revenue \$) ELERATING RESTORATION: California boasts iconic plants and animals, some found	_)
		where else on the planet, but more than 350 of these species and their habitats ar	
		reatened because we've significantly altered the state's landscapes. This includes	
		destruction of 90% of California's riparian forests and ongoing pollution in a	
		t majority of waterways. The good news is that all Californians, from private	
		downers to conservation groups to public agencies, can do a lot to restore these	
		aged places. We make it easier to restore our vital natural resources in a	
		inging climate by partnering with government, NGOs and other restoration proponent	<u>s</u> _
		develop regulatory and policy incentives that accelerate the pace and scale of pitat restoration statewide. Our efforts help revive degraded waterways to boost	
		ean water and habitat, and bring struggling species back from the brink.	
	-= ·		
4 c	(Cod	e:) (Expenses \$ 593,057. including grants of \$) (Revenue \$)
	DAI	RIES: California is an agriculture powerhouse, but feeding the nation means we	
		o face challenges when it comes to keeping our vital drinking water supplies	
		an, our communities healthy and our groundwater supplies sustainable. The state's	
		ry industry is key to our vibrant economy, and dairy producers need help finding	
		nomical ways to manage their resources that also protect the environment.	
		tainable Conservation advances new approaches to producing food that boost clean er and support healthy communities - all while building healthier soils and	
		stering the resiliency of California's farming regions.	
4 .	O#1-	w myseyyens services (Describe on Cabadula O.)	
4 d		r program services (Describe on Schedule O.) See Schedule O enses \$ 6,143. including grants of \$) (Revenue \$ 52.)	
4 6		program service expenses > 2,876,316.	
		2/0/0/J±0.	

Form 990 (2021) Sustainable Conservation Part IV Checklist of Required Schedules

Schedule 2 Is the org 3 Did the org for public 4 Section 5 in effect of 5 Is the org assessme 6 Did the org to provide	anization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete A. anization required to complete Schedule B, Schedule of Contributors? See instructions. ganization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates office? If 'Yes,' complete Schedule C, Part I. O1(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election luring the tax year? If 'Yes,' complete Schedule C, Part II. anization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III. ganization maintain any donor advised funds or any similar funds or accounts for which donors have the right advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D,	1 2 3 4 5	X X X	Х
 3 Did the order for public 4 Section 5 in effect c 5 Is the organsessme 6 Did the order to provide 	panization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates office? If 'Yes,' complete Schedule C, Part I. 101(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election luring the tax year? If 'Yes,' complete Schedule C, Part II. 21 anization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, anits, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III. 23 anization maintain any donor advised funds or any similar funds or accounts for which donors have the right advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D,	3		X
for public 4 Section 5 in effect of 5 Is the org assessment of 5 Did the org to provide	office? If 'Yes,' complete Schedule C, Part I	4	Х	X
5 Is the orgassessme6 Did the org to provide	anization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, ints, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	-	Х	
assessme 6 Did the or to provide	ents, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	5		
to provide	advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D,			Χ
Part I		6		Х
7 Did the orgenvironm	panization receive or hold a conservation easement, including easements to preserve open space, the ent, historic land areas, or historic structures? <i>If 'Yes,' complete Schedule D, Part II</i>	7		Х
	ganization maintain collections of works of art, historical treasures, or other similar assets? <i>If 'Yes,'</i> Schedule D, Part III.	8		Х
for amoun	ganization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian is not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation If 'Yes,' complete Schedule D, Part IV.	9		Х
10 Did the or or in quas	ganization, directly or through a related organization, hold assets in donor-restricted endowments is endowments? If 'Yes,' complete Schedule D, Part V	10	Х	
11 If the orga	nization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VII, VIII, IX,			
a Did the or	panization report an amount for land, buildings, and equipment in Part X, line 10? If 'Yes,' complete Schedule	11 a	Х	
b Did the or assets re	panization report an amount for investments – other securities in Part X, line 12, that is 5% or more of its total ported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII.	11 b		Х
c Did the organized assets re	panization report an amount for investments – program related in Part X, line 13, that is 5% or more of its total ported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII.	11 c		Х
d Did the ordin Part X,	ganization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported line 16? If 'Yes,' complete Schedule D, Part IX.	11 d		Х
e Did the or	ganization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e		Х
f Did the or	panization's separate or consolidated financial statements for the tax year include a footnote that addresses ization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X	11 f	Χ	
12a Did the or Schedule	ganization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete D, Parts XI and XII	12a	Х	
b Was the o	ganization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and anization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13 Is the org	anization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		Χ
14a Did the or	ganization maintain an office, employees, or agents outside of the United States?	14a		Х
business,	panization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, investment, and program service activities outside the United States, or aggregate foreign investments valued 00 or more? If 'Yes,' complete Schedule F, Parts I and IV	14b		Х
	ganization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any ganization? If 'Yes,' complete Schedule F, Parts II and IV	15		X
16 Did the or	panization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to ign individuals? If 'Yes,' complete Schedule F, Parts III and IV.	16		Х
17 Did the or	panization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	17		X
18 Did the or	panization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, and 8a? If 'Yes,' complete Schedule G, Part II.	18		X
19 Did the or	ganization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,'	19		X
,	ganization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20a		Х
b If 'Yes' to	line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21 Did the or domestic	ganization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21		Х

Form 990 (2021) Sustainable Conservation Part IV Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	22		Х
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J.</i>	23	Х	
24	a 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		Х
ı	b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
•	c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
	d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 8	a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		Х
I	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		Х
26	former officer, director, trusteé, key employee, créator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If 'Yes,' complete Schedule L, Part III.	27		Х
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):			
i	a 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		Х
ı	b A family member of any individual described in line 28a? If 'Yes,' complete Schedule L, Part IV	28b		Х
(c 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	Х	
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If 'Yes,' complete Schedule M</i>	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		Х
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		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Schedule R, Part I	33		Х
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
35 a	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
I	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? <i>If 'Yes,' complete Schedule R, Part V, line 2</i>	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		Х
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	
Pa	rt 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			
1 -	a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable		Yes	No
	a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable			
	c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1 c		
BAA	TEEA0104L 09/22/21	Form	1 990 ((2021

Form 990 (2021) Sustainable Conservation

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

			res	NO
2 a	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 29			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions.			
3 a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3 a		X
b	olf 'Yes,' has it filed a Form 990-T for this year? <i>If 'No' to line 3b, provide an explanation on Schedule 0</i>	3 b		
4 a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4 a		Х
b	olf 'Yes,' enter the name of the foreign country►			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a		Х
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		Х
	: If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5 c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6 a		Х
	olf 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6 b		
	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 services provided to the payor?	7 a		Х
b	of the specific the payor	7 b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7 c		Х
d	I If 'Yes,' indicate the number of Forms 8282 filed during the year			
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 e		Χ
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		Χ
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 g		
h	n If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7 h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring	7 11		
	organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9 a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9 b		
	Section 501(c)(7) organizations. Enter:			
	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders			
	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)			
	a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	olf 'Yes,' enter the amount of tax-exempt interest received or accrued during the year			
	Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state?	13a		
а	Note: See the instructions for additional information the organization must report on Schedule O.	ısa		
J.	·			
	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			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
	of If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation on Schedule O	14 b		
	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	יייי		
ıJ	excess parachute payment(s) during the year?	15		X
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		Х
	If 'Yes,' complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any activities that would result in the imposition of an excise tax under section 4951, 4952, or 4953?	17		
	If 'Yes,' complete Form 6069.			l

Part VI Governance, Management, and Disclosure. For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI. Section A. Governing Body and Management No Yes 1 a Enter the number of voting members of the governing body at the end of the tax year..... 15 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..... 15 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other Χ 2 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 Χ Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?.... Χ X Did the organization become aware during the year of a significant diversion of the organization's assets?.... 5 Χ Did the organization have members or stockholders?..... 6 7 a 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?..... 7 a Χ **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?..... Χ 7 b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body?..... X 8a X **b** Each committee with authority to act on behalf of the governing body?..... 8 b 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 **Section B. Policies** (This Section B requests information about policies not required by the Internal Revenue Code. Yes No 10 a Did the organization have local chapters, branches, or affiliates?..... 10 a Χ 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 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?..... Χ **b** Describe on Schedule O the process, if any, used by the organization to review this Form 990. Χ 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13...... 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise 12b Χ to conflicts?..... c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe on Schedule O how this was done ... See .Schedule .0 Χ 12c 13 Did the organization have a written whistleblower policy?..... 13 Χ 14 Did the organization have a written document retention and destruction policy?..... Χ 14 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? X a The organization's CEO, Executive Director, or top management official.. See . Schedule.. 0....... 15 a **b** Other officers or key employees of the organization..... 15 b 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 X taxable entity during the year? 16 a **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 16b organization's exempt status with respect to such arrangements?.. Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed > Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply X Upon request Own website Another's website Other (explain on Schedule O) Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to 19 the public during the tax year. See Schedule O State the name, address, and telephone number of the person who possesses the organization's books and records Gina Pacheu 98 Battery St Ste 302 San Francisco CA 94111 415-977-0380

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

- 1 a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's 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, Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

				(C))					
(A) Name and title	(B) Average hours per	thar	one both dire	box, an c ector	unles officer /truste	,	son	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other
	week (list any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099- MISC/1099-NEC)	related organizations (W-2/1099- MISC/1099-NEC)	compensation from the organization and related organizations
(1) Ashley Boren CEO	$-\frac{40}{0}$			Х				193,864.	0.	27,777.
(2) Michael Behrens	40			Λ				193,004.	0.	21,111.
CDO	0			Χ				154,535.	0.	23,234.
(3) Daniel Mountjoy	40									
Dir Res Stewardshp	0					Χ		146,000.	0.	27,241.
(4) Gina Pacheu	40									
Finance Dir	0			Χ				140,431.	0.	22,338.
(5) Pamela Sergio	40									
Dir HR & Admin	0					Χ		125,630.	0.	27,824.
	$-\frac{40}{0}$					Х		117,700.	0.	25,351.
(7) Ryan Flaherty	40					21		117,700.	•	23,331.
Dir Bus Partnrshps	0					Х		122,354.	0.	20,403.
(8) Erika Lovejoy	40									
Prog Dir Accel Res	0					Х		120,000.	0.	21,444.
(9) Dan Dooley	1							,		
Board Chair	0	Х		Χ				0.	0.	0.
(10) Jennifer Hernandez	1									
Secretary	0	Χ		Χ				0.	0.	0.
(11) Jon Reiter	_ 1									
Treasurer	0	Χ		Χ				0.	0.	0.
(12) Laura Beaudin	1									
Board member	0	Χ						0.	0.	0.
(13) Kim Delfino	1									
Board member	0	X						0.	0.	0.
(14) Laurie Dachs	1							_	_	_
Board member	0	Χ						0.	0.	0.

	(B)			(0							
(A)	Average			check		e than		(D)	(E)	((F)
Name and title	hours per week					is botl or/trus	tee)	Reportable compensation from	Reportable compensation from		ed amount other
	(list any hours	or o	sul	Off	Кe	emp	Former	the organization (W-2/1099- MISC/1099-NEC)	related organizations (W-2/1099- MISC/1099-NEC)	compens	sation from anization
	for related	Individual or director	ituti	Officer	Key employee	Highest co	mer	MISC/1099-INEC)	WII3C/1039-NEC)	and	related izations
	organiza - tions	হু হ	mal		ploy	ë com				_	
	below dotted	individual trustee or director	nstitutional trustee		8	Highest compensated employee					
	line)		88			ated					
(15) Michael Frantz	1										
Board member	0	Χ						0.	0.		0.
(16) Leslie Friedman-Johnson	1										
Board member	0	Х						0.	0.		0.
(17) Charlene Harvey	1										
Board member	0	Х						0.	0.		0.
(18) Sally Liu	1										
Board member 0 X 0.								0.		0.	
(19) Peter Kareiva 1											
Board member	0	Χ						0.	0.		0.
(20) Ginger Oros	1										
Board member	0	Х						0.	0.		0.
(21) Steve McCormick	1							_	_		
Board member	0	X						0.	0.		0.
(22) Adan Ortega Jr.	1										•
Board member	0	Х						0.	0.		0.
(23) Miles Reiter	1	v							0		0
Board member (24)	0	Х						0.	0.		0.
(24)		-									
(25)											
		•									
1 b Subtotal							>	1,120,514.	0.	19	5,612.
c Total from continuation sheets to Part VII, Section	on A						•	0.	0.		0.
d Total (add lines 1b and 1c)								1,120,514.	0.		5,612.
2 Total number of individuals (including but not limited	to those I	isted	abo	ve) v	who	recei	ved	more than \$100,00	0 of reportable comp	ensation	
from the organization 10											
											Yes No
3 Did the organization list any former officer, direct on line 1a? <i>If 'Yes,' complete Schedule J for suc</i>	tor, truste	e, ke	ey ei	mplo	oyee	e, or	high	nest compensated	employee	. 3	v
, ,										. 3	X
4 For any individual listed on line 1a, is the sum of the organization and related organizations greate	reportab	le co	mpe	ensa	ition	and	oth	er compensation f	rom		
such individual										. 4	Х
5 Did any person listed on line 1a receive or accru	e compen	satio	n fr	om :	any	unre	late	ed organization or	individual		37
for services rendered to the organization? If 'Yes Section B. Independent Contractors	s, comple	te So	cnea	iuie	J TO	r suc	сп р	erson		. 5	X
1 Complete this table for your five highest compen	sated inde	epen	dent	t cor	ntra	ctors	tha	it received more th	nan \$100,000 of		
compensation from the organization. Report compen		the c	alen	dar <u>y</u>	year	endi	ng v	1			
(A) Name and business add	ress							(B) Description o	f services	(C) Compen) sation
The Earth Genome 121 Pepper Dr Los Altos, CA 94022 Technical consulting									sulting	16	1,926.
The Earth denome 121 repper by hos Artos, en 54022											_,
2 Total number of independent contractors (including b		ited to	o the	se Ī	iste	d abo	ve)	who received more	than		
\$100,000 of compensation from the organization	1										

		Check if Schedule O contains a respon	nse or note to any	/ line in this Part V	III		
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
fts, Grants, r Amounts	1 a b c	Federated campaigns1 aMembership dues1 bFundraising events1 cRelated organizations1 d					
Contributions, Gifts, Grants, and Other Similar Amounts	e f	Government grants (contributions) 1 e All other contributions, gifts, grants, and similar amounts not included above 1 f Noncash contributions included in	752,467. 3,938,221.				
Contro and (h	lines 1a-1f. 1 g Total. Add lines 1a-1f.		4,690,688.			
<u>e</u>			Business Code				
Program Service Revenue	2a b		341900	332,032.	332,032.		
Service	c d						
ogram		All other program service revenue					
Ĕ	g	Total. Add lines 2a-2f		332,032.			
	3	Investment income (including dividends, into other similar amounts)	▶	205,677.			205,677.
	5	Royalties					
	6a	Gross rents	(ii) Personal				
		Less: rental expenses 6b					
		Rental income or (loss) 6c					
		Net rental income or (loss)	► (ii) Other				
	7 a	sales of assets	(ii) Other				
	b	other than inventory Less: cost or other basis and sales expenses 7b					
	С	Gain or (loss) 7c					
	d	Net gain or (loss)					
Other Revenue	8 a	Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18					
er	h	Less: direct expenses 8b					
돰		Net income or (loss) from fundraising ev					
		Gross income from gaming activities. See Part IV, line 19					
		Less: direct expenses 9b Net income or (loss) from gaming activit	ties				
		Gross sales of inventory, less returns and allowances					
		Less: cost of goods sold 10b	L				
	С	Net income or (loss) from sales of inven	Business Code				
SES	11 ~	Othon		2 102			2 102
anec inue	b	Other 9 All other revenue	900099	2,182.			2,182.
Miscellaneous Revenue	С	All other revenue					
ΣĽ		All other revenue	>	2 102			
		Total revenue. See instructions		2,182. 5,230,579.	332,032.	0.	207,859.
				3,200,010.	002,002.	0.	201,000.

Form 990 (2021) Sustainable Conservation 94
Part IX Statement of Functional Expenses

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

	Check if Schedule O contains a re	sponse or note to any			
Do i 6b,	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21		. ,	3	. ,
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	550,953.	172,765.	217,537.	160,651.
6	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7	Other salaries and wages	2,124,056.	1,506,537.	182,323.	435,196.
-	Pension plan accruals and contributions	2,124,030.	1,300,337.	102,323.	433,190.
8	(include section 401(k) and 403(b) employer contributions)	111,252.	83,007.	5,521.	22,724.
9	Other employee benefits	332,019.	229,136.	29,586.	73,297.
10	Payroll taxes	198,297.	127,257.	25,062.	45,978.
11	Fees for services (nonemployees):	150/2571	107,007.	20,002.	10/5/01
á	Management				
	Legal				
	: Accounting	22,750.		22,750.	
	Lobbying	55,000.	55,000.	2277001	
	Professional fundraising services. See Part IV, line 17	0070001	3373331		
f	Investment management fees	15,287.		15,287.	
g	Other. (If line 11g amount exceeds 10% of line 25, column	378,361.	347,305.	10,566.	20,490.
12	(A), amount, list line 11g expenses on Schedule 0.)	3,614.	347,303.	10,300.	20,490.
13	Office expenses	125,210.	78,267.	9,863.	37,080.
14	Information technology	86,143.	34,004.	21,089.	31,050.
15	Royalties.	00,143.	34,004.	21,009.	31,030.
16	Occupancy	325,841.	201,991.	43,798.	80,052.
17	Travel	6,184.	4,192.	1,351.	641.
18	Payments of travel or entertainment expenses for any federal, state, or local public officials.	0,104.	7,132.	1,331.	041.
	Conferences, conventions, and meetings	11,952.	8,157.	1,318.	2,477.
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	13,594.	13,594.	10.007	1 760
23 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.).	23,586.	11,490.	10,327.	1,769.
á	·				
ŀ) 				
(
(·				
	All other expenses.	4 204 222	0.056.016	F06 0F0	011 10-
25	Total functional expenses. Add lines 1 through 24e	4,384,099.	2,876,316.	596,378.	911,405.
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)				

		Check if Schedule O contains a response or note to	any line	in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash — non-interest-bearing			866,778.	1	1,326,029.
	2	Savings and temporary cash investments			156,503.	2	174,734.
	3	Pledges and grants receivable, net			863,636.	3	719,013.
	4	Accounts receivable, net			148,229.	4	147,028.
	5	Loans and other receivables from any current or form trustee, key employee, creator or founder, substantial controlled entity or family member of any of these pe	er officer, I contributers	director, or, or 35%		5	
	6	Loans and other receivables from other disqualified p		<u> </u>			
	0	section 4958(f)(1)), and persons described in section				6	
	7	Notes and loans receivable, net		7			
S	8	Inventories for sale or use	L		8		
set	9	Prepaid expenses and deferred charges		<u> </u>	00 452	9	105 627
Assets	_		1 1		98,452.	9	105,627.
r.		Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D		725,135.			
	b	Less: accumulated depreciation		45,531.	28,486.	10 c	679,604.
	11	Investments — publicly traded securities		-	3,623,049.	11	3,630,052.
	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		-		15	
	16	Total assets. Add lines 1 through 15 (must equal line	33)		5,785,133.	16	6,782,087.
	17	Accounts payable and accrued expenses	422,328.	17	577,802.		
	18	Grants payable		<u> </u>		18	
	19	Deferred revenue		_	20,000.	19	15,000.
	20	Tax-exempt bond liabilities		_		20	
ies	21	Escrow or custodial account liability. Complete Part		<u> </u>		21	
Liabilities	22	Loans and other payables to any current or former of key employee, creator or founder, substantial contribu- controlled entity or family member of any of these pe	utor. or 35	%		22	
	23	Secured mortgages and notes payable to unrelated the		<u> </u>		23	
	24	Unsecured notes and loans payable to unrelated third	l parties			24	
	25	Other liabilities (including federal income tax, payable and other liabilities not included on lines 17-24). Com	es to relate plete Part	ed third parties, X of Schedule D.		25	
	26	Total liabilities. Add lines 17 through 25			442,328.	26	592,802.
ıces		Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33.	e ► X				
alaı	27	Net assets without donor restrictions			2,632,984.	27	3,525,611.
ä	28	Net assets with donor restrictions			2,709,821.	28	2,663,674.
Net Assets or Fund Balance		Organizations that do not follow FASB ASC 958, che and complete lines 29 through 33.	ck here >				
ō	29	Capital stock or trust principal, or current funds				29	
ets	30	Paid-in or capital surplus, or land, building, or equipm	nent fund.			30	
SS	31	Retained earnings, endowment, accumulated income	, or other	funds		31	
t A	32	Total net assets or fund balances		<u> </u>	5,342,805.	32	6,189,285.
Se	33	Total liabilities and net assets/fund balances			5,785,133.	33	6,782,087.
RΔ	Δ		TEEA0111L		-,,,		Form 990 (2021)

Form **990** (2021)

	, , , , , , , , , , , , , , , , , , , ,				_ `	
Pai	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					\perp
1	Total revenue (must equal Part VIII, column (A), line 12)	-	5	,230	0,5	79.
2	Total expenses (must equal Part IX, column (A), line 25)	\perp	4	, 384	1,0	99.
3	Revenue less expenses. Subtract line 2 from line 1	_		846	6,4	80.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	5	, 342	2,8	05.
5	Net unrealized gains (losses) on investments	5				
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				0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,		_			
	column (B))	10	6	,189	9,2	85.
Pai	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					
				Υ	es	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 O.					
2 8	a Were the organization's financial statements compiled or reviewed by an independent accountant?			2 a		Χ
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis	ed on a				
ı	b Were the organization's financial statements audited by an independent accountant?		;	2 b	Χ	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separ basis, consolidated basis, or both:	ate				
	X Separate basis Consolidated basis Both consolidated and separate basis					
•	c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit review, or compilation of its financial statements and selection of an independent accountant?	, 		2 c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.					
3 8	a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		[]	3 a		Χ
	b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits		<u></u> [3 b		
BAA	TEEA0112L 09/22/21		F	orm 9	90 (2	2021)

SCHEDULE A (Form 990)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2021

Open to Public Inspection

iame or t	trie orga	anization					Employer ident	ilication nun	iber	
Sust	aina	able Conservation	1				94-3232	437		
Part I	Re	eason for Public Cha	rity Status. (All o	rganizations must	comple	ete this	s part.) See insti	ructions		
The org	ganiza	ation is not a private found	lation because it is: (I	For lines 1 through 12,	check o	nly one	box.)			
1	Ас	A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).								
2	A s	school described in sectio n	n 170(b)(1)(A)(ii). (Att	ach Schedule E (Form	990).)					
3	Αh	nospital or a cooperative h	ospital service organi	ization described in sec	tion 170)(b)(1)(A	A)(iii).			
4	Αn	nedical research organiza	tion operated in conju	unction with a hospital of	describe	d in sec	tion 170(b)(1)(A)(iii)	. Enter th	e hospital's	
_	name, city, and state:									
5	An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)									
6		ederal, state, or local gove	ernment or governme	ntal unit described in s	ection 1	70(b)(1)	(A)(v).			
7	X An in s	An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi) . (Complete Part II.)								
8	A c	community trust described	in section 170(b)(1)(a	A)(vi). (Complete Part I	l.)					
9	An	agricultural research organi	zation described in sec	tion 170(b)(1)(A)(ix) oper	ated in c	onjunctio	on with a land-grant c	ollege		
· L		university or a non-land-gran								
	uni	versity:								
10	fror inv	organization that normally mactivities related to its estment income and unrene 30, 1975. See section!	exempt functions, sub lated business taxable	ject to certain exception in the community in the communi	ns; and	(2) no r	nore than 33-1/3% o	of its supp	ort from gross	
11	An	organization organized ar	nd operated exclusive	ly to test for public safe	ety. See	section	1 509(a)(4).			
12	An	organization organized ar	nd operated exclusive	ly for the benefit of, to	perform	the fun	ctions of, or to carry	out the p	ourposes of one	
_	or I	more publicly supported o es 12a through 12d that de	rganizations describe	d in section 509(a)(1) o	or section	n 509(a)(2). See section 50 5	9(a)(3). Cl	neck the box on	
а		be I. A supporting organization							nnorted	
~ L	ora	anization(s) the power to remplete Part IV, Sections A	gularly appoint or elect	a majority of the director	rs or trus	tees of t	the supporting organiz	ation. You	must	
b	ma	pe II. A supporting organiz nagement of the supporting ust complete Part IV, Secti	organization vested in	ontrolled in connection the same persons that co	with its ontrol or	support manage	ed organization(s), the supported organi	oy having zation(s).	control or You	
С	Typ	be III functionally integrated panization(s) (see instruction	. A supporting organizat	ion operated in connection	n with, ar A. D. an	nd functio	onally integrated with,	its support	ed	
d	Typ fun	oe III non-functionally integrated. The o	r ated. A supporting org	anization operated in cor must satisfy a distribu	nection	with its s	supported organization	n(s) that is	not	
е [Che	tructions). You must com eck this box if the organiz	ation received a writte	en determination from t	the IRS	that it is	a Type I, Type II, T	ype III fui	nctionally	
f F		egrated, or Type III non-fu the number of supported								
		le the following information	3							
		of supported organization	(ii) EIN	(iii) Type of organization	Gra I	s the	(v) Amount of monetar	v (vi) Amount of other	
(7)			(·// = ·· ·	(described on lines 1-10 above (see instructions))		ion listed overning	support (see instruction	` '	ort (see instructions)	
					Yes	No				
A)										
В)										
C)										
D)										
E)										
- Late										

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

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

Section A. Public Support								
	ndar year (or fiscal year nning in) ►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total	
1	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.')	3,509,182.	3,627,787.	6,490,827.	4,394,013.	4,690,688.	22,712,497.	
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.	
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0.	
	Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)	3,509,182.	3,627,787.	6,490,827.	4,394,013.	4,690,688.	22,712,497.	
6	Public support. Subtract line 5 from line 4						19,278,178.	
Sec	tion B. Total Support							
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total	
7	Amounts from line 4	3,509,182.	3,627,787.	6,490,827.	4,394,013.	4,690,688.	22,712,497.	
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	83,405.	41,443.	41,771.	36,872.	35,438.	238,929.	
9	Net income from unrelated business activities, whether or not the business is regularly carried on	,	,	,	,	,	0.	
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) See Part VI.	3,069.	5,838.	5,277.	1,373.	2,182.	17,739.	
	Total support. Add lines 7 through 10						22,969,165.	
12	Gross receipts from related activ	rities, etc. (see ins	structions)				1,517,346.	
13	First 5 years. If the Form 990 is organization, check this box and	for the organization stop here	on's first, second,	third, fourth, or f	ifth tax year as a	section 501(c)(3)	▶ □	
Sec	tion C. Computation of Pul Public support percentage for 20	blic Support P	ercentage				_	
							83.93 %	
	5 Public support percentage from 2020 Schedule A, Part II, line 14							
b	and stop here. The organization qualifies as a publicly supported organization. b 33-1/3% support test—2020. If the organization did not check a box on line 13 or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization							
17a	7a 10%-facts-and-circumstances test—2021. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization							
	10%-facts-and-circumstances te or more, and if the organization organization meets the facts-and	meets the facts-a d-circumstances to	nd-circumstances est. The organiza	s test, check this l tion qualifies as a	box and stop here publicly supporte	e. Explain in Part d organization	VI how the ►	
18	Private foundation. If the organiz	zation did not che	ck a box on line	13, 16a, 16b, 17a	, or 17b, check th	is box and see in	structions ►	

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	- sto notog polon,	picase complete i	<u> </u>			
	lar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.')	(4) 2017	(8) 2010	(4) = 1.10	(4) 2525	(0) 2021	(7) o.c.
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose.						
3	Gross receipts from activities that are not an unrelated trade or business under section 513.						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf.						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
	Total. Add lines 1 through 5 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.						
С	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6.)						
	tion B. Total Support				1	T	
	dar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
	Amounts from line 6						
	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
	Add lines 10a and 10b. Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
	Total support. (Add lines 9, 10c, 11, and 12.)						
	First 5 years. If the Form 990 is organization, check this box and	stop here					▶
	tion C. Computation of Pul						
	Public support percentage for 20	•			•		<u> </u>
	Public support percentage from 2					16	%
	tion D. Computation of Inv						
17		•	• • •	-			<u> </u>
	Investment income percentage for					<u> </u>	%
	33-1/3% support tests—2021. If t is not more than 33-1/3%, check	this box and sto	p here. The organ	ization qualifies a	as a publicly supp	orted organization	▶ ∐
	33-1/3% support tests—2020. If the line 18 is not more than 33-1/3% Private foundation. If the organization of the organiz	, check this box	and stop here. Th	e organization qu	ialifies as a public	cly supported organ	ization ▶

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on 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

			Yes	No
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	1		
	the designation. If historic and continuing relationship, explain.	1		
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).	2		
За	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If 'Yes,' answer lines 3b and 3c below.	3a		
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.	3b		
С	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.	3c		
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.	4a		
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.	4b		
С	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.	4c		
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).	5a		
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?	5b		
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If 'Yes,' provide detail in Part VI.</i>	6		
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).	7		
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).	8		
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 .	9a		
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.	9b		
С	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 .	9с		
0a	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.	10a		
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.)	10b		

BAA TEEA0404L 08/31/21 Schedule A (Form 990) 2021

11. Has the organization accepted a gift or contribution from any of the following persons? a A person who directly in ridinately controls, either alone or together with persons described on lines 11h and 11c below, the governing body of a supported organization. b A family member of a person described on line 11a above? c A 35% carnotic entire third in gream sensitive or in line 1.0 above? c A 35% carnotic entire of a person described on line 1.0 above? c A 35% carnotic entire of a person described on line 1.0 above? c A 35% carnotic entire of a person described on line 1.0 above? c A 35% carnotic entire of a person described on line 1.0 above? c A 35% carnotic entire of a person described on line 1.0 above? c A 35% carnotic entire of a person described on line 1.0 above? c A 35% carnotic entire of a person described on line 1.0 above? c A 35% carnotic entire of a person described on line 1.0 above? c A 35% carnotic entire of a person described on line 1.0 above? c A 35% carnotic entire of a person described on line 1.0 above? c A 35% carnotic entire of a person described on line 1.0 above? c A 35% carnotic entire of a person described on line 1.0 above? c A 35% carnotic entire of a person described on line 1.0 above? c A 35% carnotic entire of a person described on line 1.0 above? c A 35% carnotic entire of a person described on line 1.0 above? c A 35% carnotic entire of a person described on line 1.0 above? c A 35% carnotic entire of a person described on line 1.0 above? c A 35% carnotic entire of a person described on line 1.0 above? c A 35% carnotic entire of a person described on line 1.0 above? c A 35% carnotic entire of a person described on line 1.0 above? c A 35% carnotic entire of a person described on line 1.0 above? c A 35% carnotic entire of a person described on line 1.0 above. c A 35% carnotic entire of a person described in 1.0 above. c A 35% carnotic entire of a person described in 1.0 above. c A 35% carnotic entire of a person described on line 1.0 above. c A 35%	Part	t IV	Supporting Organizations (continued)			
a A person and othersty or indirectly controls, either alone or together with persons discribed on lines 11th and 11c below, the governing body of a supported organizations. b A family member of a person described on line 11a above? c A 30% controlled with of a person described on line 11a above? 1 Did the governing body, members of the governing body, efficient 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 efficient, controlled and price that it is a supported organization. Above the power to regularly appoint or elect at least a majority of the organization's efficient, directors, or furtalises at all times during that say year? We have been controlled the supported organization, describe how the powers to appoint and/or remove officers, directors, or furtalises were allocated among the supported organizations and what controlled or remove officers, directors, or furtalises were allocated among the supported organizations and what controlled or supported organizations, and the powers of the supported organizations or supported organizations. 2 Did the organization operate for the benefit of any supported organization of their than the supported organizations. Supported organizations and what controlled the supporting organizations of the supported organizations of the supported organizations. Supported organizations of the supported organizations of the supported organizations of the supported organizations of the supported organizations. 1 Were a majority of the organization directors or fusices during the tax year and the organizations or supported organizations. The price of the supported organizations of the supported organizations of the supported organizations of the price organizations or supported organizations or supported organizations. 1 Were a majority of the	11	Lloc t	the expenientian accepted a gift or contribution from any of the following persons?		Yes	No
the governing body of a supported organization? A Site and the properties of a person described on line 11a above? A Site and the properties of the governing body officers acting in their official capacity, or membership of one or more supported organizations bave the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the law year? If 'No, describe in Part VI now the supported organization's officers, directors, or trustees at all times during the law year? If 'No, describe in Part VI now the supported organization's officers, directors, or trustees at all times during the law year? If 'No, describe in Part VI now the supported organization's officers, directors, or trustees are allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the fax year. 2 bid the organization operate for the benefit of any supported organization of the the purposes of the supported organizations? If 'No, describe in Part VI now providing such benefit carried out the purposes of the supported organizations? If 'No, describe in Part VI now providing such benefit carried out the purposes of the supported organizations? If 'No, described in Part VI now providing such benefit carried out the purposes of the supported organizations? If 'No, described in Part VI now the supported organization was vested in the same persons that controlled or managed the supported organization or supported organizations or trustees and the supported organization was vested in the same persons that controlled or managed the supported organization of the supported organizations was vested in the same persons that controlled or managed the supported organization of the supported organizations and the part VI now the organization was vested in the same persons that controlled or managed the supported organization of the supported organizations in the part VI now you was ported organizations or the organization in the p						
C A 35% controlled entity of a person described on line 11a or 11b above? If Yer's to line 11a, 11b, or 11b, provide debut in Part VI. Section B. Type I Supporting Organizations 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 organizations of effects, threateds, or instense at all a times during the tax year? If Yes's describes in Part VI have the supported organizations of effects, threated, supervised, or controlled the supported organization of the threated and 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. 2 Did the organization operate for the benefit of any supported organization of If Yes's, explain in Part VI have providing such benefit carried out the purposes of the supported organization? If Yes's, explain of Part VI have control or management of the supported organization was vested in the same persons that controlled or managed the supported organization(s). 1 Were a majority of the organization or trustees during the tax year also a majority of the directors or trustees of each of the organization was vested in the same persons that controlled or managed the supported organization(s). 1 Did the organization was vested in the same persons that controlled or managed the supported organization(s). 1 Did the organization was vested in the same persons that controlled or managed the supported organization(s). 2 Were any of the organization officers, directors, or trustees either (i) appointed or elected by the supported? 2 Were any of the organization officers, directors, or trustees either (i) appointed organizations and organizations and explain how the organization was reconsisted in the supported organization				11a		
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 organization's perfectively operated. Supervised or controlled the organization activities. If the organization and 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. 2 Did the organization operate for the benefit of any supported organization other than the supported organizations that operated, supervised, or controlled the supporting organizations. Section C. Type II Supporting Organizations 1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s). If No. describe in Part VI how control or management of the organization's supporting Organizations. Section D. All Type III Supporting Organizations 1 Did the organization provide to each of its supported organizations, by the last day of the firm supported organization(s). If No. describe in Part VI how control or management of the organization's governing documents in effect on the date of notification, to the extent not provided during the prior tax year. (i) a written notice describing the type and amount of support provided during the prior tax year. (i) and the organization organization manificated a close and controlled organizations in the supported organization manificated a close and controlled organizations. In this expendition manificated a close and controlled organizations and provided during the prior tax year. (i) a virillary of the organization manificated a close and controlled with the organization organization manificated a close and controlled with supported organization in	b	A fan	nily member of a person described on line 11a above?	11b		
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 an anjority of the organization's officers, directors, or trustees at all times during the tax year? "No, describe in Part VI how the supported organization's defectively operated, supervised, or controlled the organization activities. If the organization had more twen velocities, describe how the powers of support and/or remove officers, directors or trustees during the tax year." Did the organization are the first the benefit of any supported organizations or restrictions, if any, applied to such powers that operated, supervised, or controlled the supporting organization. Section C. Type II Supporting Organizations 1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? if 'No, describe in Part VI how control or management of the supporting Organization was vested in the same persons that controlled or managed the supported organization(s). 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, (i) a organization's officers, discitory, or trustees learn of the organization's governing documents in effect on the date of notification, to the extent in otherwise the organization's governing documents in effect on the date of notification, to the expent of the organization's supported organization's supported organization's supported organization's income or asserts? 2 Were any of the propriation of a close and notification, to the extent in otherwise the supported organization's supported organization's supported organization's supported organization's supported organization's supported organization				11c		
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or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officiers, directors, or trustees at all times during the tax year? If No.' oserotic in Part VI have the supported organization's decivities, approved organization's activities. If the organization had more organization's period organization and what conditions or restrictions, if any, applied to such powers during the tax year, and the organizations and what conditions or restrictions, if any, applied to such powers during the tax year, or entrolled the supported organization of the organization operate for the benefit of any supported organization of the than the supported organization. Section C. Type II Supporting Organization 1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s) that operated, supervised, or controlled the supported organization and supporting organizations? If No.' describe in Part VI how control or management of the supported organization was vested in the same persons that controlled or managed the supported organization(s). Section D. All Type III Supporting Organizations 1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's activities of the supported organization's provided during the prior tax policy of the organization's officers, directors, or trustees either () appointed or generation or supported organization's officers, directors, or trustees either () appointed or generation when the restriction or the selection of the supported organization was a significant organization is investment policies and in directing the use of the organizations have a significant value organization is investment policies and in directing the use of the organizations have a significant value organization is investment organization was to supported organization used to satisfy the	1	Did #	as asympton body, members of the asympton body, officers acting in their official capacity, or membership of one		Yes	No
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more of the organization's supported organization(s) would have been engaged in? If 'Yes,' explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement. 2b 3 Parent of Supported Organizations. Answer lines 3a and 3b below. a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If 'Yes' or 'No,' provide details in Part VI. b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its		subst	tantially all of its activities.	2a		
but for the organization's involvement. 2b 3 Parent of Supported Organizations. Answer lines 3a and 3b below. a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If 'Yes' or 'No,' provide details in Part VI. b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its	b					
 a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If 'Yes' or 'No,' provide details in Part VI. b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its 		reasc	ons for the organization's position that its supported organization(s) would have engaged in these activities	2b		
 a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If 'Yes' or 'No,' provide details in Part VI. b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its 	3	Parer	nt of Supported Organizations. <i>Answer lines 3a and 3b below.</i>			
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its		Did th	ne organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of	32		
THE TANK THE STATE OF THE STATE	b	Did th	ne organization exercise a substantial degree of direction over the policies, programs, and activities of each of its			

Sch	edule A (Form 990) 2021 Sustainable Conservation		94-32	32437	Page 6
Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting Orga	aniza [.]	tions		
1	Check here if the organization satisfied the Integral Part Test as a qualifying trus instructions. All other Type III non-functionally integrated supporting organizatio	st on N	ov. 20, 1970 (explain ir st complete Sections A	Part VI). See through E.	
Sec	tion A – Adjusted Net Income		(A) Prior Year	(B) Currer (option	
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			
Sec	tion B — Minimum Asset Amount		(A) Prior Year	(B) Currer (option	
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):				
- 6	Average monthly value of securities	1a			
	Average monthly cash balances	1b			
(Fair market value of other non-exempt-use assets	1c			
	d Total (add lines 1a, 1b, and 1c)	1d			
•	e Discount claimed for blockage or other factors (explain in detail in Part VI):				
2	Acquisition indebtedness applicable to non-exempt-use assets	2			
3	Subtract line 2 from line 1d.	3			
4	Cash deemed held for exempt use. Enter 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			
Sec	tion 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			

Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions). Schedule A (Form 990) 2021 BAA

Pai	t V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (conti	inued)	
Sec	tion D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1	
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2	
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3	
4	Amounts paid to acquire exempt-use assets	4	
5	Qualified set-aside amounts (prior IRS approval required — provide details in Part VI)	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 the organization is responsive (provide details in Part VI). See instructions.	8	
9	Distributable amount for 2021 from Section C, line 6	9	
10	Line 8 amount divided by line 9 amount	10	

Section E — Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2021	(iii) Distributable Amount for 2021
1 Distributable amount for 2021 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2021 (reasonable cause required — explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2021			
a From 2016			
b From 2017			
c From 2018			
d From 2019			
e From 2020			
f Total of lines 3a through 3e			
g Applied to underdistributions of prior years			
h Applied to 2021 distributable amount			
i Carryover from 2016 not applied (see instructions)			
i Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2021 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2021 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2021, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
6 Remaining underdistributions for 2021. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
7 Excess distributions carryover to 2022. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2017			
b Excess from 2018			
c Excess from 2019			
d Excess from 2020			
e Excess from 2021			

BAA Schedule A (Form 990) 2021

Part VI

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

Part II, Line 10 - Other Income

Nature and Source		2021	2020	2019	2018	2017
Other income To	\$	2,182.	\$ 1,373.	\$ 5,277.	\$ 5,838.	\$ 3,069.
	otal <u>\$</u>	2,182.	\$ 1,373.	\$ 5,277.	\$ 5,838.	\$ 3,069.

Schedule B (Form 990)

PUBLIC DISCLOSURE COPY
Schedule of Contributors

OMB No. 1545-0047

2021

Department of the Treasury Internal Revenue Service ► Attach to Form 990 or Form 990-PF. ► Go to www.irs.gov/Form990 for the latest information.

Name of the organization

Employer identification number

Sustainable Conservation

94-3232437

organization type (check one):							
Filers of:	Section:						
Form 990 or 990-EZ	X 501(c)(3) (enter number) organization						
	4947(a)(1) nonexempt charitable trust not treated as a private foundation						
	527 political organization						
Form 990-PF	501(c)(3) exempt private foundation						
	4947(a)(1) nonexempt charitable trust treated as a private foundation						
	501(c)(3) taxable private foundation						
Check if your organization is covere	ed by the General Rule or a Special Rule .						
	(8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.						
General Rule							
For an organization fil	ing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 property) from any one contributor. Complete Parts I and II. See instructions for determining portributions.						
Special Rules							
regulations under section 16b, and that received	escribed in section 501(c)(3) filing Form 990 or 990-EZ that met the 33-1/3% support test of the ons 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or if from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.						
contributor, during the literary, or educationa	cribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one year, total contributions of more than \$1,000 <i>exclusively</i> for religious, charitable, scientific, I purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering stead of the contributor name and address), II, and III.						
contributor, during the contributions totaled r during the year for an General Rule applies	escribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one year, contributions exclusively for religious, charitable, etc., purposes, but no such nore than \$1,000. If this box is checked, enter here the total contributions that were received exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the to this organization because it received nonexclusively religious, charitable, etc., contributions the during the year.						

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

Employer identification number Sustainable Conservation 94-3232437

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional s	pace is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$ <u>100,000</u> .	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$ <u>840,000.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$110,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>4</u>		\$180,804.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>5_</u> _		\$ <u>569,500.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>6</u>		\$600,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)

2 Employer identification number

94-3232437

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional sp	pace is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$ <u>100,000</u> .	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8		\$ <u>100,000</u> .	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9		\$100,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
10_		\$100,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
11_		\$100,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$ 	Person Payroll Noncash (Complete Part II for noncash contributions.)
		Î.	Î.

Employer identification number

94-3232437 Sustainable Conservation

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if additional sp	pace is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	N/A		
	<u> </u>		
	<u> </u>	\$ 	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	<u> </u>		
		\$ 	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		ŝ	
		'	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) Na	(L)	(5)	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	

Employer identification number

Sustainable Conservation 94-3232437 Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.)........... Use duplicate copies of Part III if additional space is needed. (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I N/A (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

SCHEDULE C (Form 990)

Political Campaign and Lobbying Activities

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service ► 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.

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	•	rganizations: Complete Part III.			
Name	of organization	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,		Employer identific	ation number
Sus	stainable	Conservat	ion		94-323243	
			rganization is exempt under section	<u> </u>		zation.
1	Provide a deso See instruction	cription of the ans for definition	organization's direct and indirect political on of 'political campaign activities.'	campaign activities in	Part IV.	
2	Political camp	aign activity ex	xpenditures. See instructions		▶\$	
3	Volunteer hou	rs for political	campaign activities. See instructions			
Par	t I-B Comp	lete if the o	rganization is exempt under section	on 501(c)(3).		
1	Enter the amo	unt of any exc	ise tax incurred by the organization under	section 4955	⊳ \$	0.
2			ise tax incurred by organization managers			
3	If the organiza	ntion incurred a	a section 4955 tax, did it file Form 4720 for	this year?		Yes No
4 a	Was a correcti	ion made?				Yes No
	If 'Yes,' descri					
Par	t I-C Comp	lete if the o	rganization is exempt under section	on 501(c), excep	t section 501(c)(3).	
1	Enter the amo	unt directly ex	pended by the filing organization for section	on 527 exempt function	on activities ►\$	
2			g organization's funds contributed to other			}
3			ditures. Add lines 1 and 2. Enter here and		▶\$	
4	Did the filing of	organization file	e Form 1120-POL for this year?			Yes No
5	Enter the nam organization mamount of politi segregated fur	ies, addresses nade payments ical contribution nd or a politica	and employer identification number (EIN) s. For each organization listed, enter the all is received that were promptly and directly deleted action committee (PAC). If additional spaces	of all section 527 pol mount paid from the livered to a separate po ace is needed, provide	itical organizations to w filing organization's fun olitical organization, such e information in Part IV	/hich the filing ds. Also enter the as a separate
	(a) Name	ę	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter-0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0
(1)						
(2)						
(3)						
(4)						
(5)						
(6)						

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

Schedule C (Form 990) 2021

Schedule C (Form 990) 2021	Sustainabl	e Conservation		94-32324	137 Page 2
Part II-A Complete if the section 501(h	ne organization)).	on is exempt under se	ection 501(c)(3) an	d filed Form 5768 (ele	ction under
A Check ► if the filing	organization belor	ngs to an affiliated group (an	d list in Part IV each affil	iated group member's name,	_
	-	nd share of excess lobbyin			
B Check ► if the filing	g organization ch	ecked box A and 'limited c	ontrol' provisions apply		
(The term 'c	Limits on Lobb expenditures' me	ying Expenditures ans amounts paid or incu	rred.)	(a) Filing organization's totals	(b) Affiliated group totals
1 a Total lobbying expenditur	es to influence p	ublic opinion (grassroots lo	obbying)		
b Total lobbying expenditur	es to influence a	legislative body (direct lob	obying)	55,000.	
c Total lobbying expenditur	es (add lines 1a	and 1b)		55,000.	0.
d Other exempt purpose ex	•			1,023,033.	
e Total exempt purpose ex	penditures (add I	ines 1c and 1d)		4,384,099.	0.
f Lobbying nontaxable amo columns		mount from the following to		369,205.	
If the amount on line 1e, colur	nn (a) or (b) is:	The lobbying nontaxable	e amount is:		
Not over \$500,000		20% of the amount on line 1e.			
Over \$500,000 but not over \$1,00		\$100,000 plus 15% of the exces	·		
Over \$1,000,000 but not over \$1,	•	\$175,000 plus 10% of the exces			
Over \$1,500,000 but not over \$1	7,000,000	\$225,000 plus 5% of the excess	s over \$1,500,000.		
Over \$17,000,000 g Grassroots nontaxable ar	mount (anter 25%	\$1,000,000.		00.001	
h Subtract line 1g from line					0.
i Subtract line 1f from line		·		· · ·	0.
					0.
j If there is an amount other section 4911 tax for this				U reporting	Yes No
(Some	organizations th	4-Year Averaging Period at made a section 501(h) o elow. See the separate ins	election do not have to	complete all of the five hrough 2f.)	
	Lob	bying Expenditures Durin	g 4-Year Averaging Per	riod	
Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) Total
2 a Lobbying nontaxable amount				369,205.	369,205.
b Lobbying ceiling amount (150% of line 2a, column (e))					553,808.
c Total lobbying expenditures				55,000.	55,000.
d Grassroots nontaxable amount				92,301.	92,301.
e Grassroots ceiling amount (150% of line 2d, column (e))					138,452.
f Grassroots lobbying expenditures					0.
BAA				Schedule	C (Form 990) 2021

5

(,	0 - 0 - 0 - 0 - 0 - 0 - 0 - 0 - 0 - 0 -
Part II-B	Complete if the organization is exempt under section 50	11(c)(3) and has NOT filed Form 5768
	(election under section 501(h)).	

(election under section 501(n)).					
	(a	1)	(1	(b)	
or each 'Yes' response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.	Yes	No	Am	ount	
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)?					
c Media advertisements?					
d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements?					
f Grants to other organizations for lobbying purposes?					
g Direct contact with legislators, their staffs, government officials, or a legislative body?					
i Other activities?					
j Total. Add lines 1c through 1i.					
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? 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	(a)(E)				
section 501(c)(6).	(0)(3)	, Oi		, ,	
4 W 1 1 1 1 1 1 1 1 1 1 2 1 1 1 1 1 1 1 1				Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?					
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 the					
Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No,' OR (b) answered 'Yes.'	c)(5) Part I	, or se II-A, I	ection 50 ine 3, is)1(c)	
1 Dues, assessments and similar amounts from members.		1			
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).					
a Current year		2 a			
b Carryover from last year		2 b			
c Total		2 c			
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3			
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?		4			

Part IV | Supplemental Information

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

5 Taxable amount of lobbying and political expenditures. See instructions.....

BAA Schedule C (Form 990) 2021

SCHEDULE D (Form 990)

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

Open to Public Inspection
Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

Sustainable Conservation

				94-3232437
Pai	rt I Organizations Maintaining Donor A	Advised Funds or Other	Similar Fun	ds or Accounts.
	Complete if the organization answe	red 'Yes' on Form 990, F	Part IV, line	6.
		(a) Donor advised fun	ds	(b) Funds and other accounts
1	Total number at end of year	,,		
2	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year			
_	Aggregate value at that of year			
5	Did the organization inform all donors and donor are the organization's property, subject to the organization's	advisors in writing that the as panization's exclusive legal con	sets held in dorntrol?	nor advised funds Yes No
6	Did the organization inform all grantees, donors, for charitable purposes and not for the benefit of impermissible private benefit?	and donor advisors in writing the donor or donor advisor, or	that grant funds r for any other p	s can be used only purpose conferring Yes No
_	<u> </u>			iles into
Pai			5 . D. / Li	_
	Complete if the organization answe			<i>/</i> .
1	Purpose(s) of conservation easements held by the	e organization (check all that	apply).	
	Preservation of land for public use (for example,	recreation or education)	Preservatio	on of a historically important land area
	Protection of natural habitat		Preservation	on of a certified historic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held last day of the tax year.	a qualified conservation contrib	ution in the form	of a conservation easement on the
				Held at the End of the Tax Yea
,	a Total number of conservation easements			
	b Total acreage restricted by conservation easemer			
	-			
	c Number of conservation easements on a certified		• •	
•	d Number of conservation easements included in (or structure listed in the National Register			2d
3	Number of conservation easements modified, transfe tax year ►	rred, released, extinguished, or	terminated by the	e organization during the
4	Number of states where property subject to conserva	tion easement is located ►		
5	Does the organization have a written policy regar	ding the periodic monitoring, i	inspection, han	dling of violations.
	and enforcement of the conservation easements			
6	Staff and volunteer hours devoted to monitoring, insp	pecting, handling of violations, ar	nd enforcing con	servation easements during the year
7	Amount of expenses incurred in monitoring, inspectin ►\$	ng, handling of violations, and er	nforcing conserva	ation easements during the year
8	Does each conservation easement reported on lin and section 170(h)(4)(B)(ii)?	ne 2(d) above satisfy the requi	rements of sec	tion 170(h)(4)(B)(i) Yes No
9	In Part XIII, describe how the organization report include, if applicable, the text of the footnote to t conservation easements.			in a contract of the contract
Pai	Complete if the organization answe			
1 :	If the organization elected, as permitted under FA historical treasures, or other similar assets held for Part XIII the text of the footnote to its financial state.	or public exhibition, education	, or research in	atement and balance sheet works of art, a furtherance of public service, provide in
1	b If the organization elected, as permitted under FA historical treasures, or other similar assets held for p following amounts relating to these items:	ASB ASC 958, to report in its ublic exhibition, education, or re	revenue statem search in further	ent and balance sheet works of art, ance of public service, provide the
	(i) Revenue included on Form 990, Part VIII, line	e 1		
	(ii) Assets included in Form 990, Part X			·
2				
:	a Revenue included on Form 990, Part VIII, line 1.			▶\$
	b Assets included in Form 990, Part X			
	, 10000 morado mi omi 550, i alt 7			······································

Part III Organizations Main	taining Colle	ections	of Art, Histo	rical	Treasures, or	Other	Similar Asse	ets (c	ontinu	ed)
3 Using the organization's acquisitiems (check all that apply):	tion, accession, a	and other	records, check a	ny of t	he following that ma	ake signi	ficant use of its	collectio	n	
a Public exhibition				or exc	hange program					
b Scholarly research			e Other							
c Preservation for future generations										
4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.										
5 During the year, did the organ to be sold to raise funds rathe								Yes		No
Part IV Escrow and Custod line 9, or reported a						werea	res on For	m 99	J, Par	ιιν,
1 a Is the organization an agent,	trustee, custodia	an or oth	er intermediary	for co	ntributions or othe	r assets	not included	٦,,	F	٦.,
on Form 990, Part X?								Yes		No
b ii Tes, explain the arrangem	ent in Fait Ain i	and comp	diete the following	ng tau	ne.			Amoun	t	
c Beginning balance						10		Amoun		
d Additions during the year										
e Distributions during the year.										
f Ending balance										
2 a Did the organization include a	n amount on Fo	rm 990,	Part X, line 21,	for es	crow or custodial	account	liability?	Yes		No
b If 'Yes,' explain the arrangem	ent in Part XIII.	Check he	ere if the explar	nation	has been provided	d on Pai	rt XIII	-		7
Part V Endowment Funds	. Complete if	the org	janization an	swer	ed 'Yes' on For	rm 990), Part IV, lin	e 10.		
	(a) Curren	•	(b) Prior year	r	(c) Two years back	(d)	Three years back	(e)	Four years	s back
1 a Beginning of year balance	. 1,642	,331.	1,538,1	00.	1,367,114		1,525,069.	1	,381,	431.
b Contributions										
c Net investment earnings, gain	s,									
and losses		,367.	187,6	17.	254,533		-76,959.		208,	078.
d Grants or scholarships										
e Other expenditures for facilities and programs			70,0	00.	70,812		67,634.		64.	440.
f Administrative expenses		,287.	13,3		12,735		13,362.			
q End of year balance			1,642,3		1,538,100	_	1,367,114.	1	,525,	069.
2 Provide the estimated percent		•					, ,		, ,	
a Board designated or quasi-endo	wment ►		%							
b Permanent endowment ►	54.60 ⁸	5								
c Term endowment ►	45.40 %									
The percentages on lines 2a, 2b	, and 2c should	equal 100	%.							
3 a Are there endowment funds not	in the possession	of the or	ganization that a	are hel	d and administered	for the				
organization by:									Yes	No
(i) Unrelated organizations								3a(i)		X
(ii) Related organizations								3a(ii)		X
b If 'Yes' on line 3a(ii), are the	-							3b		<u> </u>
4 Describe in Part XIII the inten			ition's endowme	ent fur	^{ids.} See Part	XII.	I			
Part VI Land, Buildings, an			N/	00/	0 Deal IV Essa	11 - 0) F 00/		J. V. 11.	10
Complete if the orga		1								
Description of proper	ty	(a) Cost (inv	or other basis vestment)	(b)	Cost or other pasis (other)	(c) Adep	ccumulated preciation	(d) l	Book va	ılue
1 a Land										
b Buildings										
c Leasehold improvements					670,462.					,462.
d Equipment		-			24,697.		15,555.		9,	,142.
e Other					29,976.		29,976.			0.
Total. Add lines 1a through 1e. (Co.	lumn (d) must e	qual Fori	m 990, Part X, o	columi	n (B), line 10c.)			.l. D /=	679, orm 99 0	, 604.
B // //							Schedi	110 I) (F	orm 990	ハフロント

Schedule D (Form 990) 2021

	Complete if the organization answered tion of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-o	
(1) Financia	I derivatives			
	neld equity interests			
(3) Other				
(A)				
(A) (B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
<u>(l)</u>				
	(b) must equal Form 990, Part X, column (B) line 12.) •			
Part VIII	Investments – Program Related. Complete if the organization answered	'Yes' on Form 99	N/A N Part IV line 11c See Form 9	90 Part X line 13
<u> </u>	(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-	of-vear market value
(1)	(L) Decomplian or invocancing	(L) Doon raido	(c) meaned or variables in cost of one	or your marrier raids
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
Total. (Column	(b) must equal Form 990, Part X, column (B) line 13.) •			
Part IX	Other Assets.	N/A		00 Dort V line 1E
'	Complete if the organization answered	scription	o, Fart IV, line 11d. See 1 oilii 9	(b) Book value
(1)	(4) 50	5011011		(S) Book value
(2)				
(2)				
(3) (4)				
(3) (4) (5)				
(3) (4) (5) (6)				
(3) (4) (5) (6) (7)				
(3) (4) (5) (6) (7) (8)				
(3) (4) (5) (6) (7) (8) (9)				
(3) (4) (5) (6) (7) (8) (9) (10)	mn (b) must equal Form 990. Part X. column (i	3) line 15.)		
(3) (4) (5) (6) (7) (8) (9) (10) Total. (Colu	mn (b) must equal Form 990, Part X, column (l Other Liabilities.	3) line 15.)		
(3) (4) (5) (6) (7) (8) (9) (10) Total. (Colu	Other Liabilities. Complete if the organization answered 'Yes' on F	form 990, Part IV, line 1		
(3) (4) (5) (6) (7) (8) (9) (10) Total. (Colu Part X	Other Liabilities. Complete if the organization answered 'Yes' on F (a) Descr	· · · · · · · · · · · · · · · · · · ·		(b) Book value
(3) (4) (5) (6) (7) (8) (9) (10) Total. (Columination (Columin	Other Liabilities. Complete if the organization answered 'Yes' on F	form 990, Part IV, line 1		
(3) (4) (5) (6) (7) (8) (9) (10) Total. (Columna X) Part X) 1. (1) Federal (2)	Other Liabilities. Complete if the organization answered 'Yes' on F (a) Descr	form 990, Part IV, line 1		
(3) (4) (5) (6) (7) (8) (9) (10) Total. (Columna	Other Liabilities. Complete if the organization answered 'Yes' on F (a) Descr	form 990, Part IV, line 1		
(3) (4) (5) (6) (7) (8) (9) (10) Total. (Colu Part X 1. (1) Federa (2) (3) (4)	Other Liabilities. Complete if the organization answered 'Yes' on F (a) Descr	form 990, Part IV, line 1		
(3) (4) (5) (6) (7) (8) (9) (10) Total. (Colu Part X 1. (1) Federa (2) (3) (4) (5)	Other Liabilities. Complete if the organization answered 'Yes' on F (a) Descr	form 990, Part IV, line 1		
(3) (4) (5) (6) (7) (8) (9) (10) Total. (Colu Part X 1. (1) Federa (2) (3) (4) (5) (6)	Other Liabilities. Complete if the organization answered 'Yes' on F (a) Descr	form 990, Part IV, line 1		
(3) (4) (5) (6) (7) (8) (9) (10) Total. (Colu Part X (1) Federa (2) (3) (4) (5) (6) (7)	Other Liabilities. Complete if the organization answered 'Yes' on F (a) Descr	form 990, Part IV, line 1		
(3) (4) (5) (6) (7) (8) (9) (10) Total. (Colu Part X 1. (1) Federa (2) (3) (4) (5) (6)	Other Liabilities. Complete if the organization answered 'Yes' on F (a) Descr	form 990, Part IV, line 1		
(3) (4) (5) (6) (7) (8) (9) (10) Total. (Columna	Other Liabilities. Complete if the organization answered 'Yes' on F (a) Descr	form 990, Part IV, line 1		
(3) (4) (5) (6) (7) (8) (9) (10) Total. (Colu Part X 1. (1) Federa (2) (3) (4) (5) (6) (7) (8) (9)	Other Liabilities. Complete if the organization answered 'Yes' on F (a) Descr	form 990, Part IV, line 1		
(3) (4) (5) (6) (7) (8) (9) (10) Total. (Column 1. (1) Federa (2) (3) (4) (5) (6) (7) (8) (9) (10) (11) Total. (Column	Other Liabilities. Complete if the organization answered 'Yes' on F (a) Descr	form 990, Part IV, line 1	1e or 11f. See Form 990, Part X, line 25.	(b) Book value

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Re	eturn.	
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	5,216,407.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a Net unrealized gains (losses) on investments		
b Donated services and use of facilities		
c Recoveries of prior year grants		
d Other (Describe in Part XIII.)		
e Add lines 2a through 2d.	2 e	1,115.
3 Subtract line 2e from line 1.	3	5,215,292.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a Investment expenses not included on Form 990, Part VIII, line 7b		
b Other (Describe in Part XIII.) 4b		
c Add lines 4a and 4b	4 c	15,287.
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.).	5	5,230,579.
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per	Retu	r n.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.		
1 Total expenses and losses per audited financial statements	1	4,369,927.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a Donated services and use of facilities		
b Prior year adjustments		
c Other losses. 2c		
d Other (Describe in Part XIII.)		
e Add lines 2a through 2d.	2 e	1,115.
3 Subtract line 2e from line 1.	3	4,368,812.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a Investment expenses not included on Form 990, Part VIII, line 7b		
b Other (Describe in Part XIII.) 4b		
	4 -	1 - 007
c Add lines 4a and 4b	4 c	15,287. 4 384 099

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 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Part V, Line 4 - Intended Uses Of Endowment Fund

The purpose of the organization's endowment funds is to provide support for the organization's operations.

Part X - FASB ASC 740 Footnote

BAA

The Internal Revenue Service and the California Franchise Tax Board have determined that the Organization is exempt from federal and state income taxes under IRC 501(c)(3) and California RTC 23701(d). The Organization has evaluated its current

tax positions as of December 31, 2021 and is not aware of any significant uncertain

Schedule D (Form 990) 2021

Part XIII Supplemental Information (continued)

Part X - FASB ASC 740 Footnote (continued)

tax positions for which a reserve would be necessary. The Organization's tax returns are generally subject to examination by federal and state taxing authorities for three and four years, respectively, after they are filed.

BAA TEEA3305L 08/30/21 **Schedule D (Form 990) 2021**

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.

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Sustainable Conservation

Employer identification

Employer identification number 94-3232437

Pai	rt I Questions Regarding Compensation			
	<u>'</u>		Yes	No
1 a	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)			
ŀ	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	1 L		
	reinibursement of provision of all of the expenses described above? If No, complete Part III to explain	1 b		
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.			
	Compensation committee Written employment contract			
	☐ Independent compensation consultant ☐ 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:			
	a Receive a severance payment or change-of-control payment?	4 a		X
	b Participate in or receive payment from a supplemental nonqualified retirement plan?	4 b		X
(c Participate in or receive payment from an equity-based compensation arrangement?	4 c		Х
	The storary of lines 4a-c, list the persons and provide the applicable amounts for each item in Fart III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:			
	a The organization?	5 a		Χ
ŀ	b Any related organization?	5 b		Х
	If 'Yes' on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:			
	a The organization?	6 a		Х
ŀ	b Any related organization?	6 b		X
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed			
,	payments not described on lines 5 and 6? If 'Yes,' describe in Part III.	7		Х
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If 'Yes,' describe in Part III	8		Х
9	If 'Yes' on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	9		

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

Schedule J (Form 990) 2021

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-2 and/or 1099-MISC and/or 1099-NEC compensation				(D) Nontaxable	(E) Total of columns(B)(i)-(D)	(F) Compensation	
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	(C) Retirement and other deferred compensation	benefits	columns(B)(i)-(D)	in column (B) reported as deferred on prior Form 990	
	(i)	140,431.	0.	0.	7,000.	15,338.	162,769.	0.	
1 Finance Dir	(ii)	0.	<u>0.</u>	0 .	0.	0.	0.	0.	
Ashley Boren	(i)	193,864.	0.	0.	9,105.	18,672.	221,641.	0.	
2 CEO	(ii)	0.	0.	0.	$\frac{1}{0}$.	0.	0.	0.	
Michael Behrens	(i)	154,535.	0.	0.	7,700.	15,534.	177,769.	0.	
3 CDO	(ii)	0.	0.	0.	0.	0.	0.	0.	
Daniel Mountjoy	(i)	146,000.	0.	0.	7,275.	19,966.	173,241.	0.	
4 Dir Res Stewardshp	(ii)	0.	0.	0.	0.	0.	0.	0.	
Pamela Sergio	(i)	125,630.	0.	0.	<u>6,400.</u>	21,424.	<u>153,454.</u>	0.	
5 Dir HR & Admin	(ii)	0.	0.	0.	0.	0.	0.	0.	
	(i)								
6	(ii)								
	(i)								
7	(ii)								
_	(i)								
8	(ii)								
	(i)				 		 		
9	(ii)								
10	(i)								
10	(ii)								
11	(i)						 		
11	(ii)								
12	(i) (ii)						 		
12	(i)								
13	(i) (ii)						 		
13	(i)								
14	(i) (ii)						 		
17	(i)								
15	(i) (ii)				 		 		
	(i)								
16	(i) (ii)				 		 	1	
	(")								

BAA

TEEA4102L 10/27/21

Schedule J (Form 990) 2021

Page 3

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.

TEEA4103L 10/27/21

SCHEDULE L (Form 990)

(5) (6) (7) (8) (9) (10)

Transactions With Interested Persons

Complete if the organization answered 'Yes' on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.
 ► Attach to Form 990 or Form 990-EZ.
 ► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047 2021

Open To Public Inspection

Department of the Treasury Internal Revenue Service Employer identification number Name of the organization

Susta	Complete if the organization answered 'Yes' on Form 990-EZ, Part organization reported an amount on Form 990, Part X, line 5, 6, or e of interested person (b) Relationship with organization (c) Purpose of loan (d) Loan to or from the organization? To From								94	1-32	3243	7				
Part I	Excess Be only). Com	enefit Transa plete if the orga	actions (sec	tion 5 ered 'Y	01(c)(3 es' on Fo	3), sec orm 990	ction 501(c), Part IV, lir	c)(4), and s ne 25a or 25b	section o, or For	1 501 m 990	(c)(2)-EZ, I	9) or Part V	gani: /, line	zatior 40b.	าร	
1	(a) Name of disqua	dified person	(b) Relation			alified per	son and	(c) D	escription	of trans	action			(d) Corrected		
'	(a) Name of disqua	iiiied person		or	ganization			(6)	escription	OI ti ai is	action			Yes	No	
(1)																
(2)																
(3)																
(4)																
(5)																
(6)																
se	ction 4958										•					
Part II	Complete if t	he organization	answered 'Yes	' on Foi 990, Par	rm 990-E t X, line	Z, Part 5, 6, or	V, line 38a o 22.	r Form 990, F	Part IV, I	ine 26	; or if	the				
(a) Name	e of interested person	(b) Relationship with organization		fro	m the		e) Original cipal amount	(f) Balance	e due	(g) In	default?	by bo	proved pard or nittee?		ritten ment?	
				То	From					Yes	No	Yes	No	Yes	No	
(1)																
(2)																
(3)																
(4)																
(5)																
(6)																
(7)																
(8)																
(9)																
(10)																
Total							▶\$									
Part II																
(a) Name of interested person			(b) Relations person a	ship betweend the or	een interest ganization	ed	(c) Amount	of assistance	(d) Typ	oe of ass	sistance	(e)	Purpos	e of ass	istance	
(1)																
(2)					·											
(3)																
(4)																

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

Schedule L (Form 990) 2021

94-3232437

Part IV Business Transactions Involving Interested Persons.

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

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sha organiz rever	haring of nization's enues?	
				Yes	No	
(1) Steve McCormick	Board member	161,926.	Technical consulting		Х	
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
(10)						

Part V Supplemental Information.

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

Supplemental Information

The organization received technical consulting services from the Earth Genome, a not-for-profit organization. Steve McCormick, Sustainable Conservation's board member, is also the co-founder of the Earth Genome. Amount of transaction: \$161,926.

SCHEDULE M (Form 990)

Department of the Treasury

Internal Revenue Service

Noncash Contributions

► Complete if the organizations answered 'Yes' on Form 990, Part IV, lines 29 or 30.

► Attach to Form 990.

Name of the organization Sustainable Conservation

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

94-3232437

Types of Property (a) (b) (c) (d) Method of determining noncash contribution amounts Chèck if Number of Noncash contribution applicable contributions or amounts reported on Form 990, items contributed Part VIII, line 1g Art — Works of art..... Art – Historical treasures..... Art - Fractional interests..... Books and publications..... 4 5 Clothing and household goods..... 6 7 Boats and planes..... 8 Intellectual property..... 9 X 8 38,446. FMV Securities - Closely held stock..... Securities - Partnership, LLC, or trust interests. 11 Securities - Miscellaneous..... Qualified conservation contribution -13 Qualified conservation contribution — Other. 14 15 Real estate - Commercial..... 16 17 Real estate – Other..... 18 19 Food inventory..... 20 Taxidermy..... 21 Historical artifacts..... 23 Scientific specimens..... 24 Archeological artifacts.... 25 26 Other ► 27 Other ► 28 Other ► Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement 29 No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?..... 30 a **b** If 'Yes,' describe the arrangement in Part II. 31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?.... 31 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? 32 a **b** If 'Yes.' describe in Part II.

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describe in Part II.

Schedule M (Form 990) 2021

33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked,

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

BAA TEEA4602L 11/4/21 Schedule M (Form 990) 2021

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.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Name of the organization
Sustainable Conservation
Employer identification number
94-3232437

Form 990, Part I, Line 1 - Organization Mission or Significant Activities

Sustainable Conservation helps California thrive by uniting people to solve the toughest challenges facing our land, air and water. Every day, we bring together businesses, landowners and government to steward the resources that we all depend on in ways that are just and make economic sense.

Form 990, Part III, Line 1 - Organization Mission

Sustainable Conservation (the organization) partners with business, agriculture and government to find practical ways to protect California's land, air, and water through collaboration. The organization's work has spanned rural and urban environmental issues, ranging from improving water quality in dairy farming, to promoting the growing and selling of non-invasive plants in California's horticultural industry, to partnering with farmers in California's San Joaquin Valley on regional solutions for ensuring adequate groundwater supplies. The organization works with farmers to identify ways that producers can protect the environment, improve their bottom lines, and keep their land in production. The organization also works to overcome the time, complexity, and cost associated with habitat restoration projects on public and private land. Lastly, the organization works with business and regulatory agencies to ensure a more sustainable water supply for farming and communities.

Form 990, Part III, Line 4d - Other Program Services Description

OTHER

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

A draft of form 990 is reviewed by management and the Audit committee of the Board of Directors prior to filing. The committee meets with management and the tax

Form 990, Part VI, Line 11b - Form 990 Review Process (continued)

Sustainable Conservation

documentation. If changes to the form are requested, a revised copy is reviewed by management and sent to the committee. The committee approves the filing and makes a recommendation to the full board to ratify the filing at the next board meeting.

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

The organization requests all board members to sign a conflict of interest statement once a year.

Form 990, Part VI, Line 15a - Compensation Review & Approval Process - CEO & Top Management

The governance committee is composed entirely of people that have no undisclosed conflict of interest with sustainable conservation, its officers/key employees or its compensation arrangements. It is responsible for conducting the performance and compensation review of the executive director. The performance review process includes a self review by the Executive Director, discussion with the committee and a discussion amongst the committee then by the board. A written performance review is included in the personnel file of the executive director. The committee also reviews compensation information of comparable position at environmental organizations of similar sizes in the bay area and makes a compensation recommendation to the full board. The full board then discusses the recommendation and decides on the compensation annually and a record is put in the Executive Director's personnel file. CEO's last compensation review was in 2021.

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

The organization's governing documents, conflict of interest policy and financial statements are available to the public upon request.

TEEA4902L 08/10/21

2021 California Exempt Organization Annual Information Return

FORM

199

Calendar Ye	ear 2021 or	fiscal year beginning (mm/dd/yyy	y)	, and ending (mm/dd/yyyy)			
Corporation/Or	ganization nar	ne	<u> </u>			Cali	fornia corporation nu	mber
SUSTAIN	NABLE C	ONSERVATION				19	949946	
Additional infor	rmation. See ir	structions.				FEI		
Street address	(cuite or room	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \					1-3232437 3 no.	
		STE 302				I IVIL	5 110.	
City					State		code	
SAN FRA	ANCISCO				CA Foreign province/state/county		l111 eign postal code	
r oreigir country	y mame				oreign province/state/county	1 016	eigii postai code	
B Amended C IRC Section D Final info Enter date C Check acc 1 □ C F Federal re 4 □ Oth G Is this a co H Is this orc	return	Surrendered (Withdrawn) yy) d: Accrual 3 Other 990T 2 990-PF ee instructions	Yes X No Yes X No Yes X No Merged/Reorganized 3 • Sch H (990) Yes X No	not reported to ti J If exempt under organization engranization engranization engranization. K Is the organization of the information of the organization of the org	tion have any changes to its gine FTB? See instructions R&TC Section 23701d, has the aged in political activities? on exempt under R&TC Section ergross receipts from roces on a limited liability company? tion file Form 100 or Form 105 on under audit by the IRS or her year?	n 23701g?\$ I to report	• X Yes Yes Yes Yes Yes Yes Yes Yes	X No No X No X No X No X No X No
				Date filed with IF	RS			
Part I	Complete	Part I unless not required to f	ile this form. See G	 eneral Information	B and C.			
		s sales or receipts from other				1	539	,891.
Receipts and Revenues	 3 Gros 4 Tota This 5 Cost 6 Cost 7 Tota 	s dues and assessments from s contributions, gifts, grants, a gross receipts for filing requir line must be completed. If the of goods sold	rement test. Add line e result is less than enses of assets sold	received	eral Information B •	2 3 4 7 8	5,230 5,230	, 579.
		expenses and disbursements				9	4,384	
Expenses		ss of receipts over expenses a			ŀ	10		,480.
				11	0 2 0 1	, 1001		
		ax. See General Information k	ζ			12		
	13 Payr							
Filing	14 Use	ax balance. If line 12 is more	than line 11, subtra	ct line 11 from line	9 12 ●	14		
Fee	15 Pena	Ities and interest. See Genera	ıl Information J			15		•
	16 Balan	ce due. Add line 12 and line 15. Then	subtract line 11 from the	result		16		0.
Sign Here	Under penalti correct, and of Signature of officer	es of perjury, I declare that I have exami omplete. Declaration of preparer (other t	ned this return, including a han taxpayer) is based on Title CEO	all information of which	preparer has any knowledge. Date	●	Telephone 5-977-038	
Daid	Preparer's	Felixborindo	-	Date 08/22/2	2022 Check if self-		PTIN	
Paid Preparer's	signature	CROSBY & KANED		100,22,7	2022 employed	<u> </u>	01658413 Firm's FEIN	
Use Only	(or yours, if	1070 DDONDWAY				— _{NI} /	′ a	
	self-employed and address	OAKLAND, CA 94				N/A ● Telephone		
	V6461W6461W / V64 V 4 V W W					(5	310) 835-2	<u>727</u>
	May the F	TB discuss this return with the	e preparer shown at	oove? See instruct	ions	•	X Yes	No
								

SUSTAINABLE CONSERVATION

Part II Organizations with gross receipts of more than \$50,000 and private foundations regardless of amount of gross receipts – complete Part II or furnish substitute information.

		1	Gross sales or receipts from all I	business activities. See i	nstructions		1	_			
		2	Interest		2						
		3	Dividends				3	205,677.			
Rece		4	Gross rents				4	•			
Othe	r	5	Gross royalties		5						
Sour	ces	6	Gross amount received from sale				6				
		7	Other income. Attach schedule.		7	334,214.					
		8	Total gross sales or receipts from other s				8	539,891.			
		9	Contributions, gifts, grants, and similar an		9						
		10		isbursements to or for members							
		11	Compensation of officers, director				10 11	550,953.			
		12	Other salaries and wages				12	2,124,056.			
Expe	nses	13	Interest				13	2,124,050.			
and Disb	Irse-	14	Taxes				14	198,297.			
ment		15	Rents			=	15				
		16	Depreciation and depletion (See				16	325,841.			
		17	Other expenses and disburseme		17	13,594.					
			Total expenses and disbursements. Add I		18	1,171,358.					
Cala	ماريام	18	Balance Sheet				18 4,384,09 End of taxable year				
	edule	; L	Balance Sneet	Beginning of			ortaxa				
Asse				(a)	(b) 1,023,281.	(c)	_	(d)			
1 2			receivable		1,023,261.		•	1,500,763. 866,041.			
3			eivable		1,011,003.		•	000,041.			
4			sivable				•				
-			tate government obligations				•				
6			n other bonds				•				
7			n stock STMT 3		3,623,049.		•	3,630,052.			
8			18		0,020,0101		•	0,000,0021			
9	•	•	ents. Attach schedule				•				
•			ssets	128,125.		725,1	35				
			ated depreciation	99,639.	28,486.	45,5		679,604.			
				337033.	20/100.	10/0	•	0737001.			
12			Attach schedule. STM 4		98,452.		•	105,627.			
13					5,785,133.			6,782,087.			
			et worth		3,703,133.			0,702,007.			
			able		422,328.		•	577,802.			
			gifts, or grants payable		122/320:		•	3777002.			
			tes payable				•				
			yable				•				
18			es. Attach schedule		20,000.			15,000.			
19			or principal fund		5,342,805.		•	6,189,285.			
20			oital surplus. Attach reconciliation		3/312/003.		•	0/103/2031			
21			ings or income fund				•				
22			es and net worth		5,785,133.			6,782,087.			
Sch	edule	M-1	Reconciliation of income per Do not complete this schedule			n (d), is less than \$	50.000				
1	Net inco	nme ne	er books	846,480.		books this year not incl					
			ne tax	010,100.	in this return. Atta	ch schedule . SEE . S!	Ţ7	1,115.			
			ital losses over capital gains	1	8 Deductions in this						
			corded on books this year.		against book incom						
	Attach	schedu	ıle		Attach schedule						
5	Expense	es reco	orded on books this year not deducted			nd line 8		1,115.			
			Attach schedule SEE S.T 6								
6	Total. A	dd line	e 1 through line 5	847,595.	Subtract line 9	from line 6		846,480.			

3652214 **Side 2** Form 199 2021 059 CACA1112L 01/04/22 <u>TAXABLE YEAR</u> **2021**

Political or Legislative Activities by Section 23701d Organizations

___CALIFORNIA FORM

3509

	calendar year 2021 or fiscal year beginning (mm/dd/yyyy)	, and er	ding (mm/dd/yyyy)							
	ach to Form 199. FTB 199N filers see instructions.				California corp	oration numb	er				
	Istainable Conservation				1949946	oranor riame	,01				
Str	eet address (suite, room, or PMB no.)				FEIN						
98	Battery St Ste 302				943232437						
Cit		State	ZIP code								
_	n Francisco	CA	94111								
_		0 : 1									
	mplete if the organization supported or opposed a candidate for public office.										
1	Has the organization participated or intervened in any political campaign on If "Yes," describe the activities. Provide a summary of any published materi			office candidate	9 1	Yes		NO			
2	Has the organization contributed funds to support or oppose any individual to support or oppose a public office candidate?					Yes		No			
_	art II – Legislative Activities mplete if the organization attempted to influence legislation.										
3	Has the organization attempted to influence any national, state or local legislat federal Form 5768, Election/Revocation of Election by an Eligible Section 501(Influence Legislation?	c)(3) Orga	nization To Make E	xpenditures To	3	Yes	V	No			
 4a	Has the organization, during the 2021 taxable year, filed a federal Form 5768 If "Yes," attach a copy of federal Form 5768 filed with the Internal Revenue organization's need to file an election for state purposes. If "No", go to question 4b and see instructions.					Yes	V	No			
4b	Has the organization filed a federal Form 5768 in a prior year that has not be Note: The organization cannot make this election if it is a church, an integra an affiliated organization.					Yes		No			
— Fu	rnish the following financial information for the taxable year:										
5	Exempt Purpose Expenditures The total amount paid or incurred to accomplish the charitable, educational,	, religious,	etc. purpose		5	4,3	384,099	00			
6	Lobbying Expenditures The total amount expended for the purpose of influencing legislation throug of a legislative body or any government official or employee who may partic		•		•		55,000	00			
7	Grass Roots Expenditures The amount expended to influence any legislation through attempts to affect segment of it		-		7			00			

2021	California Statements	Page 1
Client SUSTAINA	Sustainable Conservation	94-3232437
	្នុំ nue	2,182. 332,032. 334,214.
Statement 2 Form 199, Part II, Line 17 Other Expenses		
Advertising and Promo Conferences, Conventinformation Technolog Insurance	tion ons, and Meetings y fees t	\$ 22,750. 3,614. 11,952. 86,143. 23,586. 15,287. 55,000. 125,210. 332,019. 378,361. 111,252. 6,184. \$ 1,171,358.
Statement 3 Form 199, Schedule L, Line Investments in Stocks	e 7	
Certificates of depos	ts	1,093,660. 704,981. 1,831,411. 3,630,052.
Statement 4 Form 199, Schedule L, Line Other Assets	e 12	
Prepaid Expenses and	Deferred Charges Total §	105,627. 105,627.
Statement 5 Form 199, Schedule L, Line Other Liabilities	e 18	
Deferred Revenue	Total <u>₹</u>	15,000. 15,000.

Г

2021	California Statements	Page 2
Client SUSTAINA	Sustainable Conservation	94-3232437
8/22/22		04:50PM
Statement 6 Form 199, Schedule M-1, Line 5 Expenses Recorded on Books Not D	Deducted on Return	
In-kind services	Тс	\$ 1,115. otal \$ 1,115.
Statement 7 Form 199, Schedule M-1, Line 7 Income Recorded on Books Not on	Return	
In-kind services	To	tal \$ 1,115.

2021

California Supplemental Information

Page 1

Client SUSTAINA Sustainable Conservation 94-3232437

8/22/22

04:50PM

California Deductions (Form 199) Compensation of officers, directors and trustees

See Form 990 and related schedules

California Deductions (Form 199) Depreciation and depletion

See Form 990 and related schedules

STATE OF CALIFORNIA

RRF-1 (Rev. 02/2021) IN

MAIL TO: Registry of Charitable Trusts P.O. Box 903447 Sacramento, CA 94203-4470

STREET ADDRESS: 1300 | Street Sacramento, CA 95814 (916) 210-6400

WEBSITE ADDRESS: www.oag.ca.gov/charities



ANNUAL REGISTRATION RENEWAL FEE REPORT TO ATTORNEY GENERAL OF CALIFORNIA

Sections 12586 and 12587, California Government Code 11 Cal. Code Regs. sections 301-306, 309, 311, and 312

Failure to submit this report annually no later than four months and fifteen days after the end of the organization's accounting period may result in the loss of tax exemption and the assessment of a minimum tax of \$800, plus interest, and/or fines or filing penalties. Revenue & Taxation Code section 23703; Government Code section 12586.1. IRS extensions will be honored.

			Check if:							
SUSTAINABLE CONSERVATION			Change of address							
Name of Organization			Amended report							
List all DBAs and names the organization uses or has u	sed		Ш							
98 BATTERY ST STE 302			State C	Charity F	Registration Number 100176					
Address (Number and Street)										
SAN FRANCISCO, CA 94111 City or Town, State, and ZIP Code	Corpora	ation or	Organization No. 1949946							
	PACH mail Add	HEU@SUSCON.ORG dress	Federa	l Emplo	oyer ID No. <u>94-3232437</u>					
ANNUAL REGISTRATION RENEWAL FEE SCHEDULE (11 Cal. Code Regs. sections 301-307, 311, and 312) Make Check Payable to Department of Justice										
Total Revenue F	ee	Total Revenue		<u>Fee</u>	Total Revenue	F	ee			
Between \$50,000 and \$100,000	\$25 \$50 \$75	Between \$250,001 and \$1 millio Between \$1,000,001 and \$5 mill Between \$5,000,001 and \$20 mi	ion	\$200	Between \$20,000,001 and \$100 million Between \$100,000,001 and \$500 million Greater than \$500 million	on \$1				
PART A – ACTIVITIES										
For your most recent full accounting	g perio	od (beginning 1/01/21	en	ding _	12/31/21) list:					
Total Revenue \$				0.0	446 T .I.A. I		_			
(including noncash contributions) 5,230),5/9	9. Noncash Contributions \$		38,4	446. Total Assets \$ 6,78	2,08	37.			
Program Expenses	\$	2,876,316.	Total Ex	penses	\$ \$ 4,384,099.					
PART B — STATEMENTS REGAR	DINC	G ORGANIZATION DURING	3 THE	PERIO	OD OF THIS REPORT					
Note: All questions must be answered. I providing an explanation and deta						Yes	No			
1 During this reporting period, were there officer, director or trustee thereof, either dire	any c	contracts, loans, leases or other financial r with an entity in which any such	transactio n officer, o	ns betw director o	een the organization and any r trustee had agy finagoia Tiphest 1	Χ				
2 During this reporting period, was there	any th	neft, embezzlement, diversion or	misuse	of the o	organization's charitable property or funds?		Χ			
3 During this reporting period, were any o	organiz	zation funds used to pay any per	nalty, fin	ne or jud	dgment?		X			
4 During this reporting period, were the s coventurer used?	ervice	es of a commercial fundraiser, fundrais	sing cou	ınsel fo	r charitable purposes, or commercial		X			
5 During this reporting period, did the org	janizat	tion receive any governmental fu	nding?		SEE STATEMENT 2	Χ				
6 During this reporting period, did the org	janizat	tion hold a raffle for charitable pu	urposes	?			X			
7 Does the organization conduct a vehicle	e dona	ation program?					X			
8 Did the organization conduct an indepe generally accepted accounting principle	ndent es for t	audit and prepare audited finance this reporting period?	cial state	ements	in accordance with	Χ				
9 At the end of this reporting period, did	the or	ganization hold restricted net assets,	while re	eporting	negative unrestricted net assets?		X			
declare under penalty of perjury that I have examined this report, including accompanying documents, and to the best of my knowledge and belief, the content is true, correct and complete, and I am authorized to sign.										
	ASH1 Printed	LEY BOREN Name	CEO Title		Date					

California Statements

Page 1

Client SUSTAINA Sustainable Conservation 94-3232437

8/22/22

04:50PM

Statement 1 Form RRF-1, Part B, Line 1 Financial Transactions

The organization received technical consulting services from the Earth Genome, a not-for-profit organization. Steve McCormick, an organization board member, is a co-founder of the Earth Genome. Transaction amount: \$161,926.

Statement 2 Form RRF-1, Part B, Line 5 Government Agency That Provided Funding

USDA-NRCS 430 G Street, Suite 4164 Davis, CA 95616 Daniel Curtis (503)414-3286 daniel.curtis@usda.gov

Wildlife Conservation Board P.O. Box 944209 Sacramento, CA 94244 Ms. Alexa Dunn Alexa.Dunn@Wildlife.ca.gov 916.323.3417

US Small Business Administration 409 3rd St SW Washington, DC 20416 (800) 659-2955