Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Open to Public Inspection

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.

<u> </u>	For t	<u>he 2022 calen</u>	dar year, or tax	year begir	nning		, 20	<u> 122,</u> ar	nd endir	ig		,	20					
В	Check	if applicable:	С								D Employ	er identifi	cation number					
	Ad	ddress change	Sustainabi	le Cons	ervatio	on					94-	32324	37					
		ame change	98 Battery	E Telepho														
		itial return	San Franc			1					·							
				, -							415-977-0380							
		nal return/terminated																
	\vdash	mended return								I	G Gross r		5,368					
	Αļ	oplication pending		ess of principa	^{al officer:} As	shley Bor	ren			` ') Is this a group return for subordinates? Yes 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	l) or	527]								
J	We	bsite: ww	w.suscon.c	orq				•		H(c) Group	exemption nu	ımber						
K	Form	n of organization:	X Corporation	Trust	Association	Other		L Yea	r of format	ion: 199	5 M s	State of leg	gal domicile: CA					
	rt I	Summar						<u> </u>					<u> </u>					
	1	Briefly descri	be the organiza	tion's miss	ion or mos	t significant a	activities:	C00	Caho	du10 0								
	-	Eriony deseri						<u> 266</u>	2CHe	<u>aute o</u>								
ဥ	2 Check this box if the organization discontinued its operations or disposed of more than 25°3 Number of voting members of the governing body (Part VI, line 1a)																	
nar																		
Ver	2	Check this bo	ov Tif the	organizatio	n disconti	nued its opera	ations or c	dienne	ed of m	ore than 2	25% of its	net acc						
Ö	3		oting members of	of the gove	rnina hodv	(Part VI line	ations or t - 1a)	aispus	eu oi iii	JIE Man 2	23 /0 01 113	3	cis.	15				
∘ઇ	4		dependent votin									4		15				
es	5		of individuals e									5		30				
Activities &	6		of volunteers (6		80				
Ę	7a		ed business reve									7a		0.				
_			l business taxab			• • •						7b		0.				
						.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	.,				Prior Year		Current Y					
	8	Contributions	and grants (Pa	rt VIII line	1h)						4,690,6	388	4,685					
ne		8 Contributions and grants (Part VIII, line 1h)									332,0			,306.				
Revenue	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)										205,6			,073.				
è	11		nue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)								2,1							
_	12		e (i ait viii, coit e – add lines 8								5,230,5		5,368	,030.				
	13		imilar amounts								5,230,3	73.	3,300	,233.				
	_					-												
	14	•	to or for memb															
ø	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)									3,316,5	77.	3,535	<u>,925.</u>				
Expenses	16a	Professional	fundraising fees	(Part IX,	column (A)													
ē	b	Total fundrais	sing expenses (F	Part IX, co	lumn (D), l	line 25)		972	,975.									
й	17	Other expens	ses (Part IX, coli	ımn (A) li	nes 11a-1	Id 11f-24e)			•		1,067,5	22	1,290	111				
	18		es. Add lines 13															
	_		s expenses. Sub	-				•			4,384,C		4,826					
. 0	19	Revenue less	expenses. Sub	tract line	16 110111 11116	3 12				_	846,4			<u>,199.</u>				
s of		T-1-11-	(Dant V. Br 16)								ng of Curren		End of Ye					
sset Salai	20		(Part X, line 16)							. (5,782,C		7,985	<u>,280.</u>				
Net Assets Fund Balanc	21	rotai liabilitie	es (Part X, line 2	(0)							592,8	302.	1,560	,917.				
			fund balances.	Subtract I	ine 21 fron	n line 20				. (5,189,2	285.	6,424	,363.				
Pa	ırt II	Signatur	e Block															
Unde	er penal	Ities of perjury, I de	eclare that I have exa	mined this ret	urn, including	accompanying scl	hedules and s	statemer	nts, and to	the best of n	ny knowledge	and belief	, it is true, correc	t, and				
com	plete. D	eclaration of prepa	arer (other than office	r) is based on	all information	n of which prepare	er has any kn	owledge).									
Sic	nr	Signature of	officer							Date								
Siç He	re	Ashles	, Boren						(CEO								
	-		t name and title							<u>, </u>								
		Print/Type r	preparer's name		Preparer's	signature / // 0		Г	Date		Check	if P	TIN					
_			·		1,22,70,70	signature Live	rundo	. [/2023	_	」 "						
Pa			Gorrindo	~					30, <u>2</u> 1	, _ 0 _ 0	self-employe	ed P	01658413					
Pre	epare																	
US	e On	Firm's addre	ess <u>548 Ma</u>	irket S	t PMB 9						Firm's EIN	N/A						
			San Fr	ancisc	o, CA S	94104					Phone no.	(510)	835-272	27				
Ma	y the	IRS discuss th	nis return with th				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.

Automati	ic 6-Month Extension of Time. Only sub	omit origin	al (no copies needed).			
	tions required to file an income tax return other t			ps, RE	MICs, and	trusts must
use Form /	7004 to request an extension of time to file incom Name of exempt organization or other filer, see instructions.	ne tax returni	S.	Тахра	yer identificati	ion number (TIN)
Type or						
print	Sustainable Conservation			94-3232437		
File by the	Number, street, and room or suite number. If a P.O. box, see	instructions.				
due date for filing your	98 Battery St Ste 302					
return. See instructions.	City, town or post office, state, and ZIP code. For a foreign ac	ddress, see instru	actions.			
	San Francisco, CA 94111					
Enter the R	Return Code for the return that this application is	for (file a se	parate application for each return)			01
Application Is For	1	Return Code	Application Is For			Return Code
	or Form 990-EZ	01				
Form 4720		03	Form 1041-A Form 4720 (other than individual)			08
Form 990-F		03	Form 5227			10
	(section 401(a) or 408(a) trust)	05	Form 6069			11
	(trust other than above)	06	Form 8870			12
Form 990-T	(corporation)	07				
If the orIf this is check the	ne No. ► 415-977-0380 rganization does not have an office or place of b s for a Group Return, enter the organization's foun his box ►	ur digit Group	e United States, check this box	f this is	for the w	hole group,
	est an automatic 6-month extension of time until	11 /1 5	20.22 to file the evernt ergan	zation	roturn	
for the	e organization named above. The extension is for a calendar year 20 22 or a tax year beginning, 20,	or the organiz		Zation	returri	
	tax year entered in line 1 is for less than 12 more hange in accounting period			nal retu	ırn	
3a If this nonre	application is for Forms 990-PF, 990-T, 4720, o fundable credits. See instructions	r 6069, enter	the tentative tax, less any	3 a	\$	0.
b If this tax pa	application is for Forms 990-PF, 990-T, 4720, o ayments made. Include any prior year overpayme	r 6069, enter ent allowed a	any refundable credits and estimated as a credit	3 b	\$	0.
c Balan EFTP	nce due. Subtract line 3b from line 3a. Include yo S (Electronic Federal Tax Payment System). Se	our payment e instructions	with this form, if required, by using	3 c	\$	0.
Caution: If payment in:	you are going to make an electronic funds withd structions.	lrawal (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	3.7
-	Duint	Check if Schedule O contains a response or note to any line in this Part III	X
1			
	<u>see</u>	Schedule 0	
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?	,
		s," describe these new services on Schedule O.	
3		ne organization cease conducting, or make significant changes in how it conducts, any program services? $oxed{Y}$ Yes $oxed{X}$ No)
_		s," describe these changes on Schedule O.	
4	Descri	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.	
	and r	on 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, evenue, if any, for each program service reported.	
4a	(Code		_)
		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 groundwater plies are steadily declining. Sustainable Conservation advances promising	=_
		ctices, incentives and policies to help achieve long-term water sustainability in	
	Cal	ifornia. Our efforts mean reliable, affordable and clean water for irrigating the	
		ps that feed the nation, healthy communities, and vibrant waterways that support	_
		erse wildlife.	_
4b	(Code		_)
		elerating Restoration: California boasts iconic plants and animals, some found here else on the planet, but more than 350 of these species and their habitats are	
		eatened because we've significantly altered the state's landscapes. This includes	=_
		destruction of 90% of California's riparian forests and ongoing pollution in a	
	vas	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	
		nging climate by partnering with government, NGOs and other restoration proponents	3_
		develop regulatory and policy incentives that accelerate the pace and scale of	
		itat restoration statewide. Our efforts help revive degraded waterways to boost an water and habitat, and bring struggling species back from the brink.	
	<u>cт6</u>	an water and nabitat, and bring strugging species back from the brink.	
4c	(Code	e:) (Expenses \$ 381,385. including grants of \$) (Revenue \$ 26,620.	`
-10	•	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	
	dai	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	_
	Tod	stering the resiliency of California's farming regions.	_
4d	Other	r program services (Describe on Schedule O.) See Schedule O	
	(Ехре	enses \$ 268,148. including grants of \$) (Revenue \$)	
4e	Total	program service expenses 3,086,642.	

Form 990 (2022) Sustainable Conservation Part IV Checklist of Required Schedules

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

Form 990 (2022) 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	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If a "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a.	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part l</i>	25b		Х
	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>	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):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a	Х	
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		Х
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If "Yes," complete Schedule L, Part IV.</i>	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M.</i>	30		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? <i>If "Yes," complete Schedule N, Part II</i>	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
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? 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	
Par	t 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			
12	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable		Yes	No
	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	X	
BAA	TEEA0104L 09/01/22	Form	1 990 ($(202\overline{2})$

Form 990 (2022) Sustainable Conservation

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

			res	NO
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a 30			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Х
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
	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?	6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).			
	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?	7a		X
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		<u> </u>
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7с		Х
	If "Yes," indicate the number of Forms 8282 filed during the year			37
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х
•	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring			
	organization have excess business holdings at any time during the year?	8		
	Sponsoring organizations maintaining donor advised funds.	_		
	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter:			
	Initiation fees and capital contributions included on Part VIII, line 12			
	Section 501(c)(12) organizations. Enter:			
11	Gross income from members or shareholders			
h	Gross income from other sources. (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.			
	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			
	Enter the amount of reserves on hand			X
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Λ
	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule O.</i>	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	15		Х
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, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952, or 4953?	17		
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Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI. Section A. Governing Body and Management No Yes 1a 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 4 X Did the organization become aware during the year of a significant diversion of the organization's assets?.... 5 5 Χ Did the organization have members or stockholders?..... 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?..... 7a 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 7h 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?..... 8b 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 10a Did the organization have local chapters, branches, or affiliates?..... 10a 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 11a 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? a The organization's CEO, Executive Director, or top management official.. See . Schedule.. 0...... X 15a **b** Other officers or key employees of the organization...See .Schedule .0..... 15b X If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?..... 16a X **b** If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the 16b organization's exempt status with respect to such arrangements?... Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed 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 Another's website X Upon request Own 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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See the instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- 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.

0

40

0

40

0

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

Director of Giving

Dir Circ Economies

Dir Res Stewardshp

(6) Ryan Flaherty_

(7) Daniel Mountjoy

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee. (C) Position (do not check more than one box, unless person is both an officer and a (A) (B) (E) (F) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC) Name and title Reportable compensation from Average Estimated amount hours director/trustee) of other compensation from the organization per week (list any the organization (W-2/1099-MISC/1099-NEC) Officer employee ndividual nstitutional trustee lighest compensated ormer employee and related hours for organizations related organiza tions helow dotted 40 (1) Ashley Boren 0 0 **CEO** Χ 185,014 36,571. (2) Michael Behrens 40 0 CDO Χ 0. 157,561 24,850. (3) Gina Pacheu 40 **CFO** 0 Χ 148,061 0 23,847. (4) Erika Lovejoy_ 40 Prog Dir Accel Res 0 Χ 125,250 0 23,174. (5) Janet Merryweather 40

Χ

Χ

Χ

119,950

125,327

119,050.

0.

0.

0.

27,341.

21,029.

26,970.

(8) Sarah Massell	40							
Program Dir WFTF	0				Х	115,138.	0.	23,303.
(9) Dan Dooley	1							
Board Chair	0	Χ	X			0.	0.	0.
(10) Jennifer Hernandez	1							
Secretary	0	Χ	X			0.	0.	0.
(11) Jon Reiter	1							
Treasurer	0	Χ	X			0.	0.	0.
(12) Laura Beaudin	1							
Board member	0	Х				0.	0.	0.
(13) Kim Delfino	1							
Board member	0	Χ				0.	0.	0.
(14) Laurie Dachs	1							
Board member	0	Χ				0.	0.	0.
BAA	TEEA0	107L	09/01/2	2	<u> </u>			Form 990 (2022)

	(B)			(()						
(A) Name and title	Average hours per	box	, unle	check ess pe	erson	e than is both or/trus	h an	(D) Reportable compensation from	(E) Reportable compensation from		(F) ed amount
	week (list any hours for related organiza	or director	-		Key employee	Highest compensated employee	,	the organization (W-2/1099- MISC/1099-NEC)	related organizations (W-2/1099- MISC/1099-NEC)	of compens the org and	other sation from janization related iizations
	- tions below dotted line)	trustee	l trustee		yee	npensated					
(15) Michael Frantz Board member	1	Х						0.	0.		0.
(16) Leslie Friedman-Johnson	1										
Board member	0	X						0.	0.		0.
(17) Charlene Harvey	1										
Board member	0	X						0.	0.		0.
(18) Sally Liu	1										
Board member	0	X						0.	0.		0.
(19) Peter Kareiva	1							_	_		
Board member	0	X						0.	0.		0.
(20) Ginger Oros	1								•		•
Board member	0	Х						0.	0.		0.
(21) Steve McCormick	1	37						0	0		0
Board member	0	Х						0.	0.		0.
(22) Adan Ortega Jr.	1	v							0		0
Board member (23) Miles Reiter	1	X						0.	0.		0.
Board member	1	X						0.	0.		0.
(24) Isabel Montanez	1	Λ						0.	0.		0.
Board member		X						0.	0.		0.
(25) Jeff Loomans	1	Λ						0.	0.		0.
Board Member		Х						0.	0.		0.
1b Subtotal						l		1,095,351.	0.	20	07,085.
c Total from continuation sheets to Part VII, Secti								0.	0.		0.
d Total (add lines 1b and 1c)									0.	20	07,085.
Total number of individuals (including but not limited)											77,000.
from the organization 8				,				. ,			
•										,	Yes No
3 Did the organization list any former officer, direct	tor truste	م لام	2V A	mnla	OVE	or	hiał	hest compensated	employee		
on line 1a? If "Yes,"complete Schedule J for suc	h individu	ial								. 3	Х
4 For any individual listed on line 1a, is the sum of the organization and related organizations greater	f reportab er than \$1	le co 50,0	тре 00?	ensa If "Y	ition Yes,	and " cor	oth nple	ner compensation fete Schedule J for	from		
such individual										. 4	X
5 Did any person listed on line 1a receive or accru for services rendered to the organization? If "Ye.	e comper s," comple	isatio ete S	n fr che	om : dule	any <i>J f</i> o	unre or su	late ch p	ed organization or person	individual	. 5	X
Section B. Independent Contractors											
1 Complete this table for your five highest compen compensation from the organization. Report compen	sated indisation for	epen the c	den alen	t cor dar <u>y</u>	ntra year	ctors endi	tha ng v	nt received more the with or within the org	nan \$100,000 of ganization's tax year		
(A) Name and business add	ress							(B) Description o	of services	(C) Compen) Isation
The Earth Genome 121 Pepper Dr Los Altos, CA 94022 Technical consulting									sulting	18	35,813.
2 Total number of independent contractors (including I	out not lim	itod +	n tha	200 I	ictor	d aha	\(\c)	who received mere	than		
\$100,000 of compensation from the organization	1	neu l	U III	/ot l	1315(u auu	v <i>=)</i>	MIIO LECEIVEU IIIOIE	шан		
	т										

Form 990

Continuation Sheet for Form 990

OMB No. 1545-0047

2022

Department of the Treasury Internal Revenue Service

Name of the Organization

Employler Identification number

Sustainable Conservation 94-3232437 Part VII Continuation: Officers, Directors, Trustees, Key Employees, and **Highest Compensated Employees** Position (do not check more than one box, unless person is both an officer and a director/trustee) (D) (E) (F) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC) Estimated amount of other Name and title Average Average hours per week (list any hours for related organiza-tions below dotted line) Former Q Individual employee Highest compensated Institutional trustee Key employee compensation from the organization and related r director organizations l trustee Mohsen Mortada 1 0 Board Member Χ 0. 0. 0.

Form 990 (2022) Sustainable Conservation 94-3232437 Page 9 Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII..... (B) Related or exempt function revenue (D) Revenue excluded from tax under sections 512-514 (C) Unrelated business (A) Total revenue revenue ifts, Grants, ar Amounts 1a Federated campaigns **b** Membership dues..... 1b **c** Fundraising events..... 1c **d** Related organizations 1d

ar ∰	d	Related organization							
ir.	е	Government grants (cont			186,479.				
Contributions, Gifter and Other Similar	f	All other contributions, g similar amounts not incl	luded above	. 1f	4,499,347.				
<u> </u>	g	Noncash contributions in lines 1a-1f	ncluded in	. 1g	34,369.				
္မွာ င	h	Total. Add lines 1a				4,685,826.			
9					Business Code	-,,,			
듄	2a	<u>Client servi</u>	ices		541900	614,306.	614,306.		
æ	b								
<u>.8</u>	С								
er.	d								
Program Service Revenue	е								
gra	f	All other program s	service reve	nue					
Ę	g	Total. Add lines 2a	-2f			614,306.			
	3	Investment income ((including div	idends,	interest, and				
		other similar amoui				42,073.			42,073.
	4	Income from invest							
	5	Royalties							
	C-	Ouese wente) Real	(ii) Personal				
		Gross rents	6b						
		Less: rental expenses Rental income or (loss)							
		Net rental income of							
			<u> </u>	ecurities	(ii) Other				
	7a	Gross amount from sales of assets			(.,/				
	١.	other than inventory Less: cost or other basis	7a						
	b	and sales expenses	7b						
	С	Gain or (loss)	7c						
		Net gain or (loss).							
ø	8a	Gross income from fund	raising events						
Ž	"	(not including \$	_						
š		of contributions reported	d on line 1c).						
Other Revenue		See Part IV, line 18			la				
重		Less: direct expens			Bb				
ō	С	Net income or (loss	s) from fund	lraisin <u>g</u>	events				
	9a	Gross income from gami	ing activities.						
	١.	See Part IV, line 19			a .				
		Less: direct expens)b				
		Net income or (loss		ıırıy actı	Villes				
	10a	Gross sales of inventory, returns and allowances.	, less	10)a				
		Less: cost of goods		_	Ob				
		Net income or (loss		<u> </u>					
<u>(A</u>	Ť		o,	0 01	Business Code				
Miscellaneous Revenue	11a	Other			900099	26,030.			26,030.
E E	b								
	11a b c d		. – – – – .						
Š %	d	All other revenue.							
Σ		Total. Add lines 11	<u>a-11d</u>	<u></u> .		26,030.			
	12	Total revenue. See	instruction:	S		5,368,235.	614,306.	0.	68,103.
BAA					TEE	A0109L 09/01/22			Form 990 (2022)

Form 990 (2022) 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	μ
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	573,623.	246,328.	184,905.	142,390.
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	2,342,774.	1,641,640.	246,897.	454,237.
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
•	Other employee benefits	110,673.	80,258.	8,549.	21,866.
9	Payroll taxes	296,626.	207,856.	28,205.	60,565.
10		212,229.	140,105.	27,552.	44,572.
11	Fees for services (nonemployees):				
	Management Legal	700		700	
		700.		700.	
	AccountingLobbying	23,340.	60.000	23,340.	
	Professional fundraising services. See Part IV, line 17	60,000.	60,000.		
	Investment management fees				
	Other. (If line 11q amount exceeds 10% of line 25, column				
_	(A), amount, list line 11g expenses on Schedule O.)	388,021.	229,840.	88,248.	69,933.
	Advertising and promotion	2,972.	2,882.		90.
13	Office expenses	138,732.	58,461.	44,035.	36,236.
14	Information technology	136,385.	63,546.	30,078.	42,761.
15	Royalties				
16	Occupancy	299,778.	193,874.	40,482.	65,422.
17	Travel	42,910.	36,340.	3,610.	2,960.
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	39,843.	30,354.	9,340.	149.
20	Interest	·	·	·	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	128,179.	79,191.	18,833.	30,155.
23	Insurance	29,251.	15,967.	11,645.	1,639.
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
а					
b					
С					
d					
6	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	4,826,036.	3,086,642.	766,419.	972,975.
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	o any lin	e in this Part X	<u></u>	<u></u>	
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			1,326,029.	1	945,672.
	2	Savings and temporary cash investments			174,734.	2	258,313.
	3	Pledges and grants receivable, net			719,013.	3	704,874.
	4	Accounts receivable, net			147,028.	4	384,213.
	5	Loans and other receivables from any current or form trustee, key employee, creator or founder, substantia controlled entity or family member of any of these pe		5			
	_	Loans and other receivables from other disqualified p		h		3	
	6	section 4958(f)(1)), and persons described in section				6	
	7	Notes and loans receivable, net				7	
sts	8	Inventories for sale or use			8		
Assets	9	Prepaid expenses and deferred charges			105,627.	9	116,456.
A	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a	790,182.			
	b	Less: accumulated depreciation	10b	173,710.	679,604.	10c	616,472.
	11	Investments – publicly traded securities			3,630,052.	11	3,918,623.
	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	1,040,657.	
	16	Total assets. Add lines 1 through 15 (must equal line	33)		6,782,087.	16	7,985,280.
	17	Accounts payable and accrued expenses		577,802.	17	365,818.	
	18	Grants payable		<u> </u>	·	18	
	19	Deferred revenue		<u> </u>	15,000.	19	15,000.
	20	Tax-exempt bond liabilities		<u> </u>		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 contribution controlled entity or family member of any of these pe	ficer, direction of 3 transfer	ector, trustee, 35%		22	
コ	23	Secured mortgages and notes payable to unrelated the				23	
	24	Unsecured notes and loans payable to unrelated third		<u> </u>		24	
	25	Other liabilities (including federal income tax, payable and other liabilities not included on lines 17-24). Com	•			25	1,180,099.
	26	Total liabilities. Add lines 17 through 25			592,802.	26	1,560,917.
ces		Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33.		X	,		,
ılar	27	Net assets without donor restrictions			3,525,611.	27	3,325,558.
Ba	28	Net assets with donor restrictions			2,663,674.	28	3,098,805.
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	
sts	30	Paid-in or capital surplus, or land, building, or equipn				30	
SS	31	Retained earnings, endowment, accumulated income		<u> </u>		31	
t A	32	Total net assets or fund balances		<u> </u>	6,189,285.	32	6,424,363.
Ne	33	Total liabilities and net assets/fund balances			6,782,087.	33	7,985,280.
BA	A			L 09/01/22	, , , , , , , , , , , , , , , , , , , ,		Form 990 (2022)

Form 990 (2022) Sustainable Conservation 94-3232437 Page 12 Part XI Reconciliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI..... Total revenue (must equal Part VIII, column (A), line 12)..... 1 368,235. 2 Total expenses (must equal Part IX, column (A), line 25)..... 2 4,826,036. 3 3 542,199. 4 Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))..... 4 6,189,285. 5 Net unrealized gains (losses) on investments. 5 -307,<u>121.</u> 6 Donated services and use of facilities..... 6 7 Investment expenses 7 8 8 Prior period adjustments Other changes in net assets or fund balances (explain on Schedule O)..... 9 9 0. Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, 10 6,424,363. Part XII | Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII..... Yes No 1 Accounting method used to prepare the Form 990: X Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O. Χ 2a Were the organization's financial statements compiled or reviewed by an independent accountant? 2a If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: Consolidated basis Separate basis Both consolidated and separate basis b Were the organization's financial statements audited by an independent accountant?..... Χ 2b If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: 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?..... Χ If the organization changed either its oversight process or selection process during the tax year, explain

Χ

За

3b

As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform

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......

Guidance, 2 C.F.R Part 200, Subpart F?....

on Schedule O.

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

2022

Open to Public Inspection

		e organization					Employer iden		umber			
		inable Conservation					94-3232					
		Reason for Public Cha					<u>'</u>	ruction	S.			
	rga	inization is not a private found	•			•	•					
1		A church, convention of church				b)(1)(A)(i).					
2		A school described in section										
3		A hospital or a cooperative h	,				• • •					
4		A medical research organiza name, city, and state:	tion operated in conju	unction with a hospital o	describe	d in sec	tion 170(b)(1)(A)(iii). Enter	the hospital's			
5		An organization operated for section 170(b)(1)(A)(iv). (Co	the benefit of a collemplete Part II.)	ege or university owned	or oper	ated by	a governmental uni	t describ	ped in			
6		A federal, state, or local gove	ernment or governme	ental unit described in s	ection 1	70(b)(1)	(A)(v).					
7	X	An organization that normally r in section 170(b)(1)(A)(vi). (eceives a substantial p Complete Part II.)	part of its support from a	governm	ental uni	t or from the general	public de	escribed			
8		A community trust described	in section 170(b)(1)(A)(vi). (Complete Part I	l.)							
9	An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college											
	<u></u>	or university or a non-land-gran	nt college of agriculture		the nan	ne, city,						
10		An organization that normally from activities related to its investment income and unrel June 30, 1975. See section 5	exempt functions, sub lated business taxabl	oject to certain exception e income (less section	ns; and	(2) no r	nore than 33-1/3%	of its sup	pport from gross			
11		An organization organized ar	nd operated exclusive	ely to test for public safe	ety. See	section	1 509(a)(4).					
12		An organization organized ar or more publicly supported o lines 12a through 12d that de	rganizations describe	ed in section 509(a)(1) d	r sectio	n 509(a)(2). See section 50	9(a)(3).	e purposes of one Check the box on			
а		Type I. A supporting organization organization(s) the power to recomplete Part IV, Sections A	on operated, supervise gularly appoint or elect	d. or controlled by its sur	ported o	rganizat	ion(s), typically by gi	vina the s	supported ou must			
b		Type II. A supporting organiz management of the supporting must complete Part IV. Secti	organization vested in	controlled in connection the same persons that c	with its ontrol or	support manage	ed organization(s), the supported organ	by havir ization(s)	ng control or . You			
С		Type III functionally integrated organization(s) (see instruction		tion operated in connection	n with, a	nd functio	onally integrated with,	its suppo	orted			
d		Type III non-functionally integrated. The cinstructions). You must compared to the compared to	r ated. A supporting org	janization operated in cor v must satisfy a distribu	nection	with its s	supported organization	n(s) that	is not			
е		Check this box if the organize integrated, or Type III non-fu	ation received a writt	en determination from	the IRS	that it is	a Type I, Type II,	Гуре III f	unctionally			
f	Er	nter the number of supported of										
g		ovide the following information	-									
	(i) Na	ame of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	organizat in your g	s the tion listed overning nent?	(v) Amount of moneta support (see instruction	-\	(vi) Amount of other opport (see instructions)			
					Yes	No						
(A)												
<u>(B)</u>												
<u>(C)</u>												
(D)												
<u>(E)</u>												
.												

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								
begiı	ndar year (or fiscal year nning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total	
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	3,627,787.	6,490,827.	4,394,013.	4,690,688.	4,685,826.	23,889,141.	
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)	3,627,787.	6,490,827.	4,394,013.	4,690,688.	4,685,826.	23,889,141. 3,989,608.	
6	Public support. Subtract line 5 from line 4						19,899,533.	
Sec	tion B. Total Support							
	ndar year (or fiscal year nning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total	
7	Amounts from line 4	3,627,787.	6,490,827.	4,394,013.	4,690,688.	4,685,826.	23,889,141.	
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	41,443.	41,771.	36,872.	35,438.	42,073.	197,597.	
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.	5,838.	5,277.	1,373.	2,182.	26,030.	40,700.	
	Total support. Add lines 7 through 10						24,127,438.	
12	Gross receipts from related activ	vities, etc. (see ins	structions)			12	1,386,284.	
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					
	Public support percentage for 20 Public support percentage from 3						82.48 %	
	33-1/3% support test—2022. If t	he organization di	id not check the b	oox on line 13, an	d line 14 is 33-1/3	3% or more, check	83.93 % k this box	
b	and stop here. The organization qualifies as a publicly supported organization. X b 33-1/3% support test—2021. 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	10%-facts-and-circumstances te or more, and if the organization the organization meets the facts	meets the facts-a	nd-circumstances	s test, check this I	box and stop here	e. Explain in Part	VI how	
	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	Explain in Part do organization.	VI how the	
18	Private foundation. If the organize	zation did not che	ck a box on line	13, 16a, 16b, 17a	, or 17b, check th	is box and see in:	structions	

Schedule A (Form 990) 2022

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	Tete Heteu Beleit,	picase complete	u ,			
	dar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	(4) = 0.10	(0) 2010	· · ·	(4) ===	(4) = 3 = 1	() rotal
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						
	Public support. (Subtract line 7c from line 6.)						
Sec	tion B. Total Support		•		_	, ,	
	dar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(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		third, fourth, or f	fifth tax year as a	section 501(c)(3)	
	tion C. Computation of Pul			10	.,	1 1	
	Public support percentage for 20	•	•		•		<u> </u>
	Public support percentage from 2					16	0/0
	tion D. Computation of Inv				(0)	1 1	
	Investment income percentage for	•		-		<u> </u>	%
	Investment income percentage fi					LL	8
	33-1/3% support tests—2022. If t is not more than 33-1/3%, check	this box and sto	p here. The organ	ization qualifies	as a publicly supp	orted organization	
	33-1/3% support tests—2021. If t line 18 is not more than 33-1/3% Private foundation. If the organization	, check this box	and stop here. Th	e organization qu	ualifies as a public	cly supported organ	nization

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

			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 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		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	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		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.	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		
C	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		
c	: Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9с		
l0a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II 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		

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Part	: IV	Supporting Organizations (continued)					
11	∐ac ŧ	the organization accepted a gift or contribution from any of the following persons?		Yes	No		
		rson who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below,					
		overning body of a supported organization?	11a				
b	A fan	nily member of a person described on line 11a above?	11b				
		controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI.	11c				
Sect	ion l	B. Type I Supporting Organizations			1		
	וד ויי: ע			Yes	No		
	or mo office orgar than	the governing body, members of the governing body, officers acting in their official capacity, or membership of one ore supported organizations have the power to regularly appoint or elect at least a majority of the organization's ers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported nization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees					
		allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers og the tax year.	1				
	that o	he organization operate for the benefit of any supported organization other than the supported organization(s) operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such fit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the orting organization.	2				
Sect	ion (C. Type II Supporting Organizations					
				Yes	No		
1	Were	a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees ach of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the					
		orting organization was vested in the same persons that controlled or managed the supported organization(s).	1				
Sect	ion l	D. All Type III Supporting Organizations					
1	Did th	he organization provide to each of its supported organizations, by the last day of the fifth month of the		Yes	No		
	organ	nization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the					
		nization's governing documents in effect on the date of notification, to the extent not previously provided?	1				
2	Were	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported					
	organ	nization(s) or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI how</i> organization maintained a close and continuous working relationship with the supported organization(s).	2				
3	By rea	ason of the relationship described on line 2, above, did the organization's supported organizations have a significant					
	all tin	e in the organization's investment policies and in directing the use of the organization's income or assets at mes during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played					
		is regard.	3				
Sect	ion	E. Type III Functionally Integrated Supporting Organizations					
1	Check	k the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).					
а	T	The organization satisfied the Activities Test. Complete line 2 below.					
b	Т	The organization is the parent of each of its supported organizations. Complete line 3 below.					
С	П	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see	instru	uctions	s).		
2	Activi	ities Test. Answer lines 2a and 2b below.		Yes	No		
	suppo orgai	substantially all of the organization's activities during the tax year directly further the exempt purposes of the orted organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported **nizations and explain how these activities directly furthered their exempt purposes, how the organization was consive to those supported organizations, and how the organization determined that these activities constituted					
		tantially all of its activities.	2a				
		he activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the					
	reasc	ons for the organization's position that its supported organization(s) would have engaged in these activities or the organization's involvement.	2b				
3	Parer	nt of Supported Organizations. <i>Answer lines 3a and 3b below.</i>					
а	Did the each	he organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of of the supported organizations? If "Yes" or "No," provide details in Part VI.	3a				
		ne organization exercise a substantial degree of direction over the policies, programs, and activities of each of its orted organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b				

Sch	edule A (Form 990) 2022 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) 2022 BAA

Pai	t V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (conti	nued)	
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 2022 from Section C, line 6	9	
10	Line 8 amount divided by line 9 amount	10	

Line 6 amount divided by line 5 amount		1.0	
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2022	(iii) Distributable Amount for 2022
1 Distributable amount for 2022 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2022 (reasonable cause required — <i>explain in Part VI</i>). See instructions.			
3 Excess distributions carryover, if any, to 2022			
a From 2017			
b From 2018			
c From 2019			
d From 2020			
e From 2021			
f Total of lines 3a through 3e			
g Applied to underdistributions of prior years			
h Applied to 2022 distributable amount			
i Carryover from 2017 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2022 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2022 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2022, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
6 Remaining underdistributions for 2022. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI . See instructions.			
7 Excess distributions carryover to 2023. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2018			
b Excess from 2019			
c Excess from 2020			
d Excess from 2021			
e Excess from 2022			

BAA Schedule A (Form 990) 2022

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			2022		2021		2020		2019		2018
Other income	Total	\$ \$	26,030. 26,030.	\$ \$	2,182. 2,182.	\$ \$	1,373. 1,373.	\$ \$	5,277. 5,277.	\$ \$	5,838. 5,838.

Schedule B (Form 990)

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Schedule of Contributors

Employer identification number

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

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

Sustainable Conservation 94-3232437 Organization type (check one): Filers of: Section: X 501(c)(3) Form 990 or 990-EZ (enter number) organization 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. Special Rules For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33-1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year. Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it

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

2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

Schedule B (Form 990) (2022)

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

1

Employer identification number

Name of organization
Sustainable Conservation

94-3232437

raiti	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		\$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
2		\$365,000.	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
3		\$151,557.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$800,000.	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
5		\$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
<u>6</u>		\$250,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Employer identification number

94-3232437

Parti	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
7		\$100,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8		\$ <u>200,000.</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
9		\$225,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
10_		\$130,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
11_		\$600,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
12_		\$ <u>150,000.</u>	Person X Payroll

94-3232437

Sustainable Conservation

Name of organization Employer identification number

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

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	N/A		
(a) Na	/b>	\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		Ş	
(a) No. from	(b) Description of noncash property given	(c) FMV (or estimate)	(d) Date received
Part I		(See instructions.)	
		\$ 	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		٥	
(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
		۶	
	1		1

Name of organization Sustainable Conservation

Employer identification number 94-3232437

Part III	Exclusively religious, charitable, et or (10) that total more than \$1,000 the following line entry. For organizations of contributions of \$1,000 or less for the year. Use duplicate copies of Part III if additional	for the year from any one cor ompleting Part III, enter the total of a (Enter this information once. See in:	ntions described in section 501(c)(7), (antributor. Complete columns (a) through (e) a exclusively religious, charitable, etc., astructions.)\$	ınd	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	ı	
	N/A			. — — . . — — .	
		(e) Transfer of gift		· — — -	
	Transferee's name, addres		Relationship of transferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	I	
				· — — · · — — ·	
		(e) Transfer of gift			
	Transferee's name, addres	ss, and ZIP + 4	Relationship of transferor to transferee		
				· — — · · — — ·	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	I	
				· — — · · — — ·	
		(e) Transfer of gift			
	Transferee's name, addres	ss, and ZIP + 4	Relationship of transferor to transferee		
				· ·	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held] 	
				. — — . . — — .	
		(A) Transfer of with		· — — -	
	Transferee's name, addres	(e) Transfer of gift	Relationship of transferor to transferee		
				· — — · · — — ·	
ī				· – – ·	

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), (5),		izations: Complete Part III.			
Name	of organization	, .	·		Employer identification	ation number
Sus	stainable Cons	ervation			94-323243	
			nization is exempt under secti			zation.
1	Provide a description See instructions for o	n of the orgar definition of '	nization's direct and indirect political (political campaign activities."	campaign activities in	Part IV.	
2	Political campaign a	ctivity expend	ditures. See instructions		\$	
3	Volunteer hours for p	political camp	paign activities. See instructions			
Par	t I-B Complete it	f the orgar	nization is exempt under secti	on 501(c)(3).		
1	Enter the amount of	any excise to	ax incurred by the organization under	section 4955	\$	0.
2	Enter the amount of	any excise ta	ax incurred by organization managers	under section 4955.	\$	0.
3	If the organization in	ncurred a sec	tion 4955 tax, did it file Form 4720 fo	r this year?		Yes No
4a	Was a correction ma	ade?				Yes No
b	If "Yes," describe in	Part IV.				
Par	t I-C Complete in	f the orgar	nization is exempt under secti	on 501(c), excep	t section 501(c)(3).	
1	Enter the amount dir	rectly expend	ed by the filing organization for section	on 527 exempt function	n activities \$	
2	Enter the amount of 527 exempt function	the filing org	anization's funds contributed to other	organizations for sec	tion \$	}
3	Total exempt functio line 17b	n expenditur	es. Add lines 1 and 2. Enter here and	on Form 1120-POL,	\$	}
			m 1120-POL for this year?			
5	Enter the names, ad organization made p amount of political cor segregated fund or a	ddresses and payments. For ntributions rec a political act	employer identification number (EIN) r each organization listed, enter the a eived that were promptly and directly de ion committee (PAC). If additional sp	of all section 527 pol mount paid from the livered to a separate po ace is needed, provide	itical organizations to willing organization's fun- oblitical organization, such e information in Part IV	hich the filing ds. Also enter the as a separate
	(a) Name		(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) 2022

Schedule **C** (Form 990) 2022

Sustainable Conservation

94-3232437 Page **2**

Part II-A Complete if section 501(h)).	ii is exempt under se	ection 501(c)(5) and i	filed Form 5768 (ele	ection under
	**	igs to an affiliated group (and	d list in Part IV each affiliat	ed group member's name,	
address,	EIN, expenses, ar	nd share of excess lobbying	g expenditures).		
B Check if the filin	g organization checl	ked box A and "limited contro	ol" provisions apply.		
(The term	Limits on Lobb "expenditures" me	ying Expenditures ans amounts paid or incu	rred.)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditu	•				
		legislative body (direct lob	-	60,000.	
	•	and 1b)		60,000.	0.
	•	nes 1c and 1d)		4,766,036. 4,826,036.	0.
	,	nount from the following ta		4,020,030.	<u> </u>
				391,302.	
If the amount on line 1e, colu	umn (a) or (b) is:	The lobbying nontaxable	amount is:		
Not over \$500,000 Over \$500,000 but not over \$1,	000 000	20% of the amount on line 1e. \$100,000 plus 15% of the excess	2 OVOT \$500 000		
Over \$1,000,000 but not over \$1,		\$175,000 plus 10% of the excess			
Over \$1,500,000 but not over \$		\$225,000 plus 5% of the excess			
Over \$17,000,000		\$1,000,000.			
•	•	of line 1f)		97,826.	0.
		ss, enter -0		0.	0.
		s, enter -0	<u> </u>	0.	0.
		r line 1h or line 1i, did the or			Yes No
	,	4-Year Averaging Period			
(Som	e organizations th	at made a section 501(h) e		mplete all of the five	
	columns b	elow. See the separate ins	tructions for lines 2a thro	ough 2f.)	
		elow. See the separate ins	tructions for lines 2a thro	ough 2f.)	
Calendar year (or fiscal year beginning in)		elow. See the separate ins	tructions for lines 2a thro	ough 2f.)	(e) Total
	Lob	elow. See the separate ins bying Expenditures During	tructions for lines 2a thro g 4-Year Averaging Perio	ough 2f.) d	(e) Total
beginning in) 2a Lobbying nontaxable	Lob	elow. See the separate ins bying Expenditures During	tructions for lines 2a thro g 4-Year Averaging Perio (c) 2021	ough 2f.) d (d) 2022	
beginning in) 2a Lobbying nontaxable amount b Lobbying ceiling amount (150% of line	Lob	elow. See the separate ins bying Expenditures During	tructions for lines 2a thro g 4-Year Averaging Perio (c) 2021	ough 2f.) d (d) 2022	760,507.
beginning in) 2a Lobbying nontaxable amount b Lobbying ceiling amount (150% of line 2a, column (e)) c Total lobbying	Lob	elow. See the separate ins bying Expenditures During	tructions for lines 2a thro g 4-Year Averaging Perio (c) 2021	(d) 2022 391,302.	760,507.
beginning in) 2a Lobbying nontaxable amount b Lobbying ceiling amount (150% of line 2a, column (e)) c Total lobbying expenditures d Grassroots nontaxable	Lob	elow. See the separate ins bying Expenditures During	(c) 2021 369, 205.	391,302.	760,507. 1,140,761. 60,000.
beginning in) 2a Lobbying nontaxable amount b Lobbying ceiling amount (150% of line 2a, column (e)) c Total lobbying expenditures d Grassroots nontaxable amount e Grassroots ceiling amount (150% of line	Lob	elow. See the separate ins bying Expenditures During	(c) 2021 369, 205.	60,000.	760,507. 1,140,761. 60,000. 190,127.

	***,	0 1 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Part II-B	Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768
	(election under section 501(h)).	

	(election under section 501(n)).						
Fav and "Van" vangena on lines to they will to below provide in Dart IV a detailed		(a	(a)		(b)		
	each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed ription of the lobbying activity.	Yes	No		Amo	ount	
1 a	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: Volunteers?						
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?						
	Mailings to members, legislators, or the public?						
	Publications, or published or broadcast statements?						
	Grants to other organizations for lobbying purposes?						
,	Direct contact with legislators, their staffs, government officials, or a legislative body?						
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?						
	Other activities?						
J 2a	Total. Add lines 1c through 1i. 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						
С	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?						
Paı	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5)	, or				
	section 501(c)(6).						
				г		Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			L	1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			<u> </u>	2		
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the p				3		
	t 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."	Part	III-A,	ectic line	on 50 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).						
а	Current year		2a				
b	Carryover from last year.		2b				
С	Total		2c				
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 expenditures next year?		4				
5	Taxable amount of lobbying and political expenditures. See instructions		5				

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.

BAA Schedule C (Form 990) 2022

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.

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

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

Sustainable Conservation 94-3232437 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year..... Aggregate value of contributions to (during year). Aggregate value of grants from (during year)...... Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds No are the organization's property, subject to the organization's exclusive legal control?.. Yes Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring No impermissible private benefit?.... Yes Part II **Conservation Easements.** Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year a Total number of conservation easements..... 2 a **b** Total acreage restricted by conservation easements..... 2 b c Number of conservation easements on a certified historic structure included in (a) 2 c d Number of conservation easements included in (c) acquired after July 25, 2006 and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax vear Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, No and enforcement of the conservation easements it holds?.... Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?.....

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

1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.

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

- b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:
- (i) Revenue included on Form 990, Part VIII, line 1..... (ii) Assets included in Form 990, Part X.....
- If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:
- a Revenue included on Form 990, Part VIII, line 1..... **b** Assets included in Form 990, Part X.....

conservation easements

Part III Organizations Main	taining Collectio	ns of Art, Historic	cal Treasures, or	Other Similar As	sets (conti	nued)			
3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):									
a Public exhibition		d Loan or exc	change program						
b Scholarly research		e Other							
c Preservation for future gene	rations								
4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.									
	to be sold to raise funds rather than to be maintained as part of the organization's collection?								
Part IV Escrow and Custoc reported an amount on F	lial Arrangement orm 990, Part X, line 2	s. Complete if the organical.	anization answered "Y	'es" on Form 990, Part	: IV, line 9, or				
1 a Is the organization an agent, tru	stee, custodian or oth	ner intermediary for co	ontributions or other a	assets not included _					
on Form 990, Part X? b If "Yes," explain the arrangement i					Yes	No			
				,	Amount				
c Beginning balance				1 c					
d Additions during the year									
e Distributions during the year				1 e					
f Ending balance				1 f					
2a Did the organization include an		·			Yes	No			
b If "Yes," explain the arrangemen	it in Part XIII. Check	here if the explanation	n has been provided	on Part XIII					
D. IV. Fraderiment Francis	Oamaniata if the anna		ll an Farma 000 Dart I	V I: 10					
Part V Endowment Funds		1		+	1				
1 - Reginning of year belongs	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four year				
1 a Beginning of year balance	1,831,411.	1,642,331.	1,538,100.	1,367,114.	1,525,	069.			
b Contributions									
c Net investment earnings, gains,	-267,413.	204,367.	107 617	254,533.	-76	0.5.0			
and losses	-207,413.	204,307.	187,617.	234,333.	-70,	,959.			
•									
e Other expenditures for facilities and programs			70,000.	70,812.	67,	634.			
f Administrative expenses		15,287.	13,386.	12,735.	13,	362.			
g End of year balance	1,563,998.	1,831,411.	1,642,331.	1,538,100.	1,367,	114.			
2 Provide the estimated percentage	e of the current year	end balance (line 1g,	column (a)) held as:						
a Board designated or quasi-endo	wment	%							
b Permanent endowment	63.9 4 %	<u></u>							
	6.06 [%]								
The percentages on lines 2a, 2b, a	nd 2c should equal 10	0%.							
3 a Are there endowment funds not in	the possession of the o	organization that are he	ld and administered for	r 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 re	•	•			3b				
4 Describe in Part XIII the intende		ation's endowment ful	nds. See Part	XIII					
Part VI Land, Buildings, an Complete if the organizat		n Form 990, Part IV, Iir	ne 11a. See Form 990,	Part X, line 10.					
Description of property	(a) Cos (ir	t or other basis (b)	Cost or other basis (other)	(c) Accumulated depreciation	(d) Book va	alue			
1 a Land									
b Buildings									
c Leasehold improvements			439,694.	74,512.		<u>,182.</u>			
d Equipment			320,512.	69,222.	251	,290.			
e Other			29,976.	29,976.		0.			
Total. Add lines 1a through 1e. (Colum	nn (d) must equal Fo	rm 990, Part X, colum	n (B), line 10c.)			,472.			
BAA				Schedu	ıle D (Form 990	J) 202 <mark>2</mark>			

Part VII	Investments — Other Securities. Complete if the organization answered "Yes"	on Form 990 Part IV line	N/A e 11h See Form 990 Part Y line 12	
(a) Descri	ption of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end	-of-vear market value
	al derivatives		(c) meaned or calculation cost or cita	
	held equity interests.			
(3) Other				
-				
(A) (B) (C) (D) (E)				
(C)				
(D)				
		_		
<u>(F)</u>		_		
(G)		_		
(H)		_		
(l)		_		
Part VIII	n (b) must equal Form 990, Part X, column (B) line 12.)		N/A	
Part VIII	Complete if the organization answered "Yes"	on Form 990. Part IV. line		
	(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or en	d-of-year market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)	n (b) must equal Form 990, Part X, column (B) line 13.)			
Part IX	Other Assets.	• •		
	Complete if the organization answered "Yes"		e 11d. See Form 990, Part X, line 15.	
(1) D.ik		Description		(b) Book value
(2) R1g1	nt of use -operating lease			1,040,657.
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(10)				
-	umn (b) must equal Form 990, Part X, column	(B) line 15.)		1,040,657.
Part X	Other Liabilities.	(=)		1,010,007.
1 0.000	Complete if the organization answered "Yes"		e 11e or 11f. See Form 990, Part X, line	25.
1.	• • • • • • • • • • • • • • • • • • • •	scription of liability		(b) Book value
_ ` '	al income taxes			1 100 000
(3)	cating lease liability			1,180,099.
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
-	n (h) must aqual Form 000 Part V saluma (D) line 25			1,180,099.
	n (b) must equal Form 990, Part X, column (B) line 25.) uncertain tax positions. In Part XIII, provide the text of the			
	nder FASB ASC 740. Check here if the text of the footnote			ee Part XIII X

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per R	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	5,248,339.
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	-119,896.
3 Subtract line 2e from line 1	3	5,368,235.
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.)		
c Add lines 4a and 4b	4 c	
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	5,368,235.
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per	Retur	n.
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1 Total expenses and losses per audited financial statements	1	5,013,261.
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		
d Other (Describe in Part XIII.)		
e Add lines 2a through 2d.	2 e	187,225.
3 Subtract line 2e from line 1	3	4,826,036.
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.)		
c Add lines 4a and 4b.	4 c	
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.).	5	4,826,036.

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

Part XIII Supplemental Information.

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, 2022 and is not aware of any significant uncertain BAA

Schedule D (Form 990) 2022

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.

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.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

| Employer identification number

Sustainable Conservation 94-3232437

Part I Questions Regarding Compensation

				Yes	No
1a	Check the appropriate box(es) if the organization provided any of t VII, Section A, line 1a. Complete Part III to provide any relevant	the following to or for a person listed on Form 990, Part ant information regarding these items.			
	First-class or charter travel	Housing allowance or residence for personal use			
	Travel for companions	Payments for business use of personal residence			
	Tax indemnification and gross-up payments	Health or social club dues or initiation fees			
	Discretionary spending account	Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization fol reimbursement or provision of all of the expenses described a		1b		
	, , , , , , , , , , , , , , , , , , ,				
2	Did the organization require substantiation prior to reimbursin trustees, and officers, including the CEO/Executive Director, r		2		
3	Indicate which, if any, of the following the organization used to est Executive Director. Check all that apply. Do not check any box establish compensation of the CEO/Executive Director, but ex	tablish the compensation of the organization's CEO/ xes for methods used by a related organization to plain in Part III.			
	Compensation committee	Written employment contract			
	Independent compensation consultant	Compensation survey or study			
	Form 990 of other organizations	$\overline{\overline{X}}$ Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, organization or a related organization:	Section A, line 1a, with respect to the filing			
а	Receive a severance payment or change-of-control payment?	·	4a		Χ
	Participate in or receive payment from a supplemental nonqui	•	4b		Χ
С	Participate in or receive payment from an equity-based compe	-	4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applic	cable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations	s must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the contingent on the revenues of:	ne organization pay or accrue any compensation			
а	The organization?		5a		Х
b	Any related organization?		5b		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 th contingent on the net earnings of:	ne organization pay or accrue any compensation			
а	The organization?		6a		Х
b	Any related organization?		6b		Х
	If "Yes" on line 6a or 6b, describe in Part III.				
7	For persons listed on Form 990, Part VII, Section A, line 1a, c payments not described on lines 5 and 6? If "Yes," describe in		7		Х
8	Were any amounts reported on Form 990, Part VII, paid or ac	ccrued pursuant to a contract that was subject			
	to the initial contract exception described in Regulations section of "Yes," describe in Part III.	on 53.4958-4(a)(3)?	8		v
	וו וכא, עכאטוטכ ווו רמונ ווו		٥		X
9	If "Yes" on line 8, did the organization also follow the rebuttable pr	resumption procedure described in Regulations	۵		

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

Schedule J (Form 990) 2022

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 a	nd/or 1099-MISC and/o	r 1099-NEC compensation	(D) Nontaxable benefits	(F) Compensation		
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	(C) Retirement and other deferred compensation	benefits	(E) Total of columns(B)(i)-(D)	in column (B) reported as deferred on prior Form 990
Gina Pacheu	(i)	147,811.	0.	250.	7,400.	16,447.	171,908.	0.
1 CFO	(i) (ii)	<u>147,011.</u> 0.	$\frac{0}{0}$.	$\begin{bmatrix}\frac{250}{0} \end{bmatrix}$	$\frac{1}{0}$.	0.	1/1,900.	0.
Ashley Boren	(i)	184,764.	0.	250.	16,605.	19,966.	221,585.	0.
2 CEO	(ii)	0.	<u>0.</u>	<u></u> 0.	0.	0.	0.	0.
Michael Behrens	(i)	157,311.	0.	250.	7,875.	16,975.	182,411.	0.
3 CDO	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
4	(ii)							
	(i)							
5	(ii)							
	(i)				L			
6	(ii)							
	(i)		- – – – – – –					
7	(ii)							
	(i)						 	
8	(ii)							
	(i)							
9	(ii)							
10	(i)						 	
10	(ii) (i)							
11	(ii)							
	(i)							
12	(i)							
<u></u>	(i)							
13	(ii)						 	
	(i)							
14	(ii)						†	
	(i)							
15	(ii)							
	(i)							
16	(ii)							
DAA			TEE A / 1 0 2 1 0 7 / 2 5	/22		_	C - l d - l -	(Farm 000) 2022

BAA

TEEA4102L 07/25/22

Schedule J (Form 990) 2022

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 07/25/22

SCHEDULE L (Form 990)

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

Open To Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization Employer identification number

Susta	inable Con	servation							94	-32:	3243	1			
Part I	Excess Be organization	enefit Transa answered "Yes"	actions (sect on Form 990, I	ion 501 Part IV,	(c)(3), se line 25a	ection 5 or 25b,	01(c)(4), and or Form 990	section 501(-EZ, Part V, I	c)(29) o ine 40b.	rganiz	ations	only)	. Com	plete i	f the
	43NL 6.E	1.6	(b) Relation		veen disqua	lified pers	son and	(a) D	intian	of trans	aatian			(d) Cori	rected?
1	(a) Name of disqua	lified person		or	ganization			(6)	escription	oi trans	action			Yes	No
(1)															
(2)															
(3)															
(4)															
(5)															
(6)															
se	ter the amount o										- +				
3 En	ter the amount o	of tax, if any, or	n line 2, above	, reimb	ursed by	the org	ganization				. \$				
Part II	Complete if t organization	and/or From he organization reported an am	answered "Yes ount on Form 9	" on Fo 190, 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	of interested person	(b) Relationship with organization	(c) Purpose of loan	froi	oan to or m the iization?	(e princ	e) Original cipal amount	(f) Balance	e due	(g) In (default?	by bo	proved pard or nittee?	(i) Wi agreer	ritten ment?
				То	From					Yes	No	Yes	No	Yes	No
(1)															
(2)															
(3)															
(4)															
(5)															
(6)															
(7)															
(8)															
(9)															
(10)															
Total															
Part III		Assistance he organization	Benefiting I answered "Yes	nteres on Fo	sted Pe rm 990, F	ersons Part IV,	s. Iine 27.								
	(a) Name of interes	sted person	(b) Relations person a	ship betwe	een intereste ganization	ed	(c) Amount o	of assistance	(d) Typ	e of ass	sistance	(e)	Purpose	oose of assistance	
(1)															
(2)															
(3)															
			1												

	person and the organization		
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
(10)			

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

Schedule L (Form 990) 2022

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	aring of zation's nues?
				Yes	No
(1) Steve McCormick	Board member	185,813.	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: \$185,813.

SCHEDULE M (Form 990)

Noncash Contributions

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. Attach to Form 990.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Name of the organization Employer identification number 94-3232437 Sustainable Conservation Part I Types of Property

ı aı	C I	ן י אף	es of Froperty							
				(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	Meth- noncash	od of c contrib	determir	ing mounts
1	Δrt	_ Wo	rks of art							
2			torical treasures							
3			actional interests							
4			d publications.							
			and household goods							
5			other vehicles							
6										
7			d planes							
8			al property	Х	4	22 570	TD 67.7			
9			s — Publicly traded	Λ	4	33,579.	FMV			
10			s – Closely held stock							
11			s – Partnership, LLC, or trust interests.							
12			s — Miscellaneous							
13			conservation contribution – tructures							
14	Qua	alified	conservation contribution — Other							
15	Rea	ıl esta	te - Residential							
16	Rea	ıl esta	te - Commercial							
17	Rea	ıl esta	te - Other							
18	Coll	ectibl	es							
19	Foo	d inve	entory							
20	Drug	gs an	d medical supplies							
21	Tax	iderm	y							
22	Hist	orical	artifacts							
23	Scie	entific	specimens							
24	Arcl	heolog	gical artifacts							
25	Oth	er	(Supplies)	Х	1	790.	FMV			
26	Oth	er	()							
27	Oth	er	()							
28	Oth	er	()							
29	Num	nber o	f Forms 8283 received by the organization dion completed Form 8283, Part V, Donee	uring the tax Acknowled	year for contributions for gement	r which the	29			
	Ū		•						Yes	No
20	D:	41		la california de la composición de la c		1 - 00				
ЗUа			e year, did the organization receive by contri old for at least 3 years from the date of t							
			of purposes for the entire holding period?					30 a		Χ
h			lescribe the arrangement in Part II.							- 43
			organization have a gift acceptance police	cy that requi	ires the review of anv r	nonstandard contributio	ns?	31		Χ
			organization hire or use third parties or i							
JŁa			ons?					32 a		Х
h			describe in Part II.							
			anization didn't report an amount in colu	mn (c) for a	type of property for wh	nich column (a) is chec	ked,			
-			in Part II.							

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

Schedule M (Form 990) 2022

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 07/12/22
 Schedule M (Form 990) 2022

SCHEDULE O (Form 990)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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, government, scientists and other nonprofits 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 currently drives collaborative solutions to meet the water needs of California's environment, people, and economy for current and future generations - with particular focus on advancing sustainable groundwater management and accelerating the stewardship of natural and working lands and waterways. A sustainable water future for California that supports a thriving economy is achievable. But, a future in which nature and people have access to clean, affordable, and reliable water is possible only by working with - not against - each other.

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

Soil Health program

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 preparer as necessary to review the form 990, related schedules and supporting 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

Name of the organization

Sustainable Conservation

Employer identification number
94-3232437

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 CEO. The performance review process includes a self review by the CEO, 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 CEO. 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 CEO's personnel file. CEO's last compensation review was in 2022.

Form 990, Part VI, Line 15b - Compensation Review & Approval Process - Officers & Key Employees

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 CFO. The performance review process includes a self-review by the CFO, discussion with the CEO and then a discussion amongst the committee and the CEO. A written performance review is included in the personnel file of the CFO. The committee also reviews compensation information of comparable position at environmental organizations of similar sizes in the bay area. The committee decides on the compensation annually and a record is put in the CFO's personnel file. The last review for the CFO took place in 2022.

Schedule O (Form 990) 2022 Page 2

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

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. Financial statements and 990s are also available for download from the Organization's website.

2022 California Exempt Organization Annual Information Return

FORM

199

Calendar Y	ear 20	022 or fiscal	year beginning (mm/dd	І/уууу)		, a	ınd ending (ı	mm/dd/yyyy)				
Corporation/C)rganiza	tion name								Ca	alifornia corporation nu	ımber
SUSTAI	NAB.	LE CONS	ERVATION							1	.949946	
Additional inf	ormation	n. See instruction	ons.								EIN	
Street addres	s (suite	or room)									04-3232437 MB no.	
		Y ST ST	E 302							' '	110.	
City								State			p code	
SAN FR								CA Foreign province/sta	te/county		04111 preign postal code	
i oreigii couri	ily Hairie	7						i oreign province/sta	tercounty		oreign postar code	
B Amende C IRC Sec D Final inf Enter da E Check a 1	ed return tion 494 formatic Dissolve ate: (mm ccountin Cash return f ther 990 a group f	1	Surrendered (Withdrawn) ual 3		X No X No X No Reorganized ch H (990) X No X No	J If org Se K Is If no L Is M Did tax N Is au O Is	t reported to the exempt under liganization engale instructions the organization and the organization of t	cion have any change PTB? See instruction 23701 aged in political action exempt under R& e gross receipts from ces	tionsd, has the vities? TC Section 2 company? Form 109 to	\$ \$ contact the I	•	X No No X No X No X No X No
Part I	Con	plete Part	unless not required	to file this form	n. See Ge	neral I	nformation	B and C.				
	1	Gross sale	es or receipts from oth	her sources. Fr	om Side 2	2, Part	II, line 8		•	1	682	,409.
	2	2 Gross dues and assessments from members and affiliates							•	2		
Receipts and	3	3 Gross contributions, gifts, grants, and similar amounts received SEE . SCH B. ●							3	4,685	,826.	
Revenues	4	• • • • • • • • • • • • • • • • • • • •										
			nust be completed. If					eral Information	B ●	4	5,368	<u>,235.</u>
	5		ods sold									
		6 Cost or other basis, and sales expenses of assets sold 6								_		
	7		s. Add line 5 and line						-	7		
	8		s income. Subtract lir							9	5,368	
Expenses	9		enses and disburseme							10	4,826	
	10	Total payr	receipts over expens					n line &		11	342	<u>,199.</u>
	12	, ,	See General Information						· · · · · • 🖵	12		
	13		balance. If line 11 is						· · · · • 🖵	13		
	14	-	alance. If line 12 is m						· · · · · •	14		
Filing Fee	15		and interest. See Ger						-	15		
	16		e. Add line 12 and line 15. T							16		0.
Sign Here	corre	r penalties of pot, and complet ature	erjury, I declare that I have e. e. Declaration of preparer (of	xamined this return, ther than taxpayer)	, including ac is based on a Title CEO	company all inform	ring schedules ation of which plate	and statements, and preparer has any kno Date Check if	to the best o wledge.	Ī	knowledge and belief, Telephone 15-977-038 PTIN	
Daid	Prepa	arer's	Flin	briendo			08/21/2	16	. ▶ 🗍		01658413	
Paid Preparer's	s		CROSBY & KAN	IEDA CPAS	3 T.T.P		/ _	Chipioyet	<u>. Ш</u>		Firm's FEIN	-
Use Only	(or yo	(or yours, if					\dashv_{N}	r / 2\				
	self-e	employed) address		SAN FRANCISCO, CA 94104			N/A ● Telephone					
			DAIN EXAMCTSC	O, CA 341	L U - 3					\dashv	510) 835-2	727
	Ma	y the FTB d	iscuss this return with	n the preparer :	shown abo	ove? S	See instructi	ions			X Yes	No
		<u> </u>										

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.

2 1 2 3 42,073. 6 7 6 6 7 6 6 7 6 6			1	Gross sales or receipts from all bu	usiness activities. See	instructions	• • • • • • • • • • • • • • • • • • • •	1	
A Cross rents			2				=		
A cross regime A cr	Doce	into	3	Dividends			•	3	42,073.
Caross amount received from sale of assets (See instructions). Caross amount received from sale of assets (See instructions). Caross amount received from sale of assets (See instructions). Caross amount pack and sale of assets (See instructions). Caross amount pack and sale of assets (See instructions). Caross amount pack attack schedule. SEE, STATEMENT 1 Caross amount pack attack schedule Caross			4	Gross rents				4	
6 Gross amount received from sale of assets (See instructions)			5	Gross royalties				5	
8 Total gross sales or recepts from other sources. Add line I through line 7. Enter here and on Side 1, Part I, line 1.	Sour	ces	6					6	
8 Total gross sales or recepts from other sources. Add line I through line 7. Enter here and on Side 1, Part I, line 1.			7	Other income. Attach schedule		SEE ST	ATEMENT 1 •	7	640,336.
9 Contributions, grats, grants, and similar amounts paid. Attach schedule 0 10 11 573, 623. 12 Chiner salaries and wages 12 2,342,7714. 13 11 12 2,342,7714. 13 11 12 13 11 13 11 13 11 13 13 11 13 13 11 13 11 13 13 11 13 13 11 13 13 11 13 13 11 13 13 13 11 13 13 13 11 13 13 13 11 13			8					8	-
11 Compensation of officers, directors, and trustees. Attach schedule 11 573, 623. 12 2,342,774. 13 1 2,342,774. 13 1 2,342,774. 13 1 2,342,774. 13 1 2,342,774. 14 7 7 7 7 7 7 7 7 7			9	Contributions, gifts, grants, and similar amo	ounts paid. Attach schedule		•	9	•
12 2,342,774. 13 interest 14 Taxes 15 Rents 16 Caprociation and depletion (See instructions). 16 128,179. 17 Other expenses and disbursements. Attach schedule. SEE_STATEMENT 2 16 128,179. 17 1,269,453. 18 Total operates and disbursements. Attach schedule. SEE_STATEMENT 2 17 1,269,453. 18 4,826,036. Schedule L. Balance Sheet Beginning of taxable year End of taxable year Assets (a) (b) (c) (d) (d) (d) (d) (e) (e) (d) (e) (e) (d) (e)			10	Disbursements to or for members.				10	
12 2,342,774. 13 13 10 15 15 15 15 129,776. 15 299,778. 16 128,179. 17 17 17 17 17 17 17 1			11	Compensation of officers, director	s, and trustees. Attach	schedule		11	573,623.
Table Tabl			12	Other salaries and wages				12	
14 Taxes 14 Taxes 15 Rents 16 Depreciation and depletion (See instructions) 16 128,179 17 Other expenses and disbursements. Attach schedule SEE STATEMENT 2 18 Total expenses and disbursements. Attach schedule SEE STATEMENT 2 17 1,269,453. 18 4,826,036.	Expe	nses	13					13	2,012,771
15 Rents		urse-							212 229
16 Depreciation and depletion (See instructions)							_		-
17 Other expenses and disbursements. Attach schedule. SEE STATEMENT 2 17 1,269,453.								<u> </u>	
18									-
Schedule Balance Sheet									-
Cash	Cab	م ماريا م							
Cash			<u> </u>	Balance Sneet				ortaxar	
2 Net accounts receivable					(a)	, ,	(c)	-	
3 Net notes receivable	-			_				-	
Inventories	_					000,041.		•	1,009,007.
5 Federal and state government obligations 6 Investments in other bonds 7 Investments in stock								•	
6 Investments in other bonds 7 Investments in stock. STMT 3 3,630,052. 3,918,623. 8 Mortgage loans 9 Other investments. Attach schedule 10 a Depreciable assets. 725,135. 790,182. b Less accumulated depreciation. 45,531. 679,604. 173,710. 616,472. 11 Land. 105,627. 1,157,113. 13 Total assets. 6,782,087. 7,985,280. Liabilities and net worth 14 Accounts payable. 577,802. 365,818. 15 Contributions, gifts, or grants payable. 577,802. 365,818. 16 Bonds and notes payable. 577,802. 46,189,285. 66,189,285. 66,424,363. 20 Paid-in or capital surplus. Attach schedule. STM 5 10 Paid-in or capital surplus. Attach reconciliation. 10 Paid-in or capital surplus. Attach reconciliation. 10 Paid-in or capital surplus. Attach schedule. 10 Paid-in or capital surplus. 11 Paid-in or capital surplus. 12 Paid-in or capital surplus. 13 Paid-in or capital surplus. 14 Paid-in or capital surplus. 15 Paid-in or capital surplus. 16 Paid-in or capital surplus. 16 Paid-in or capital surplus. 17 Paid-in or capital surplus. 18 Paid-in or capital surplus. 18 Paid-in or capital surplus. 19 Paid-in or capital surplu	-							•	
7 Investments in stock								•	
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9 Other investments. Attach schedule.	_					0,000,002.		•	0,520,6201
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b Less accumulated depreciation	10 a				725,135.		790.1	82.	
11 Land						679 - 604			616-472
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Liabilities and net worth 14 Accounts payable									
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19 Capital stock or principal fund						15 000			1 105 000
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Total liabilities and net worth Schedule M-1 Reconciliation of income per books with income per return Do not complete this schedule if the amount on Schedule L, line 13, column (d), is less than \$50,000. Net income per books Federal income tax Federal incom				The state of the s				•	
Schedule M-1 Reconciliation of income per books with income per return Do not complete this schedule if the amount on Schedule L, line 13, column (d), is less than \$50,000. 1 Net income per books 235,078. Federal income tax Federal income tax Excess of capital losses over capital gains Income not recorded on books this year. Attach schedule Expenses recorded on books this year not deducted in this return. Attach schedule Federal income tax Total. Add line 7 and line 8						6,782,087.			7,985,280.
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1 Net income per books	0011	cuaic					(d), is less than \$	\$50,000.	
Federal income tax	1	Net inc	ome pe	er books	235,078.	7 Income recorded on	books this year not incl	uded	
3 Excess of capital losses over capital gains	2				•				-119,896.
4 Income not recorded on books this year. Attach schedule. 5 Expenses recorded on books this year not deducted in this return. Attach schedule. \$ \$ 187,225\$. \$ against book income this year. Attach schedule. Total. Add line 7 and line 8. -119,896.	3	Excess	of cap	ital losses over capital gains					
5 Expenses recorded on books this year not deducted in this return. Attach schedule	4	Income	not re	ecorded on books this year.					
in this return. Attach schedule SEE .ST . 6 187,225.									
	5								-119,896.
6 Total. Add line 1 through line 5					187,225.				
	6	Total. A	dd lin	e 1 through line 5	422,303.	Subtract line 9	trom line 6		542,199.

 Side 2
 Form 199
 2022
 059
 3652224
 CACA1112L
 01/10/23

<u>TAXABLE YEAR</u> **2022**

Political or Legislative Activities by Section 23701d Organizations

CALIFORNIA FORM

3509

	calendar year 2022 or fiscal year beginning (mm/dd/yyyy)	, and en	ding (mm/dd/yyyy)				
	poration/Organization name			Cal	ifornia co	rporation num	ber	
	stainable Conservation			19	49946			
	et address (suite, room, or PMB no.)			FEI		0 0 0	4 2	7
City	Battery St Ste 302	State	ZIP code	9	4 3	2 3 2	4 3	_
-	n Francisco	C A						
	rt I – Political Activities		1					
	nplete if the organization supported or opposed a candidate for public offic	ce. See instru	ctions.					_
1	Has the organization participated or intervened in any political campaign If "Yes," describe the activities. Provide a summary of any published mat	on behalf of a	any elective public	office candidate?	1	1 Yes	□ N	0
2	Has the organization contributed funds to support or oppose any individu to support or oppose a public office candidate?					2 Yes	□N	0
_	rt II – Legislative Activities nplete if the organization attempted to influence legislation.							_
3	Has the organization attempted to influence any national, state or local legis federal Form 5768, Election/Revocation of Election by an Eligible Section 50 Influence Legislation? If "Yes," See instructions.	01(c)(3) Orga	nization To Make Ex	xpenditures To	\$	3 Yes	✓ No	0
4a	Has the organization, during the 2022 taxable year, filed a federal Form 57 If "Yes," attach a copy of federal Form 5768 filed with the Internal Revenu organization's need to file an election for state purposes. If "No", go to question 4b and see instructions.				48	a Yes	✓ N	0
4b	Has the organization filed a federal Form 5768 in a prior year that has not Note: The organization cannot make this election if it is a church, an integran affiliated organization.					Yes	∏ N	0
— Fur	nish the following financial information for the taxable year:							_
5	Exempt Purpose Expenditures The total amount paid or incurred to accomplish the charitable, education	nal, religious,	etc. purpose		{	54	,826,036	00
6	Lobbying Expenditures The total amount expended for the purpose of influencing legislation thro of a legislative body or any government official or employee who may part of the purpose of influencing legislation through	-	•			6	60,000	00
7	Grass Roots Expenditures The amount expended to influence any legislation through attempts to aff segment of it		-		7	7	0 (00

2022	California Statements	Page 1
Client SUSTAINA	Sustainable Conservation	94-3232437
8/21/23 Statement 1 Form 199, Part II, Line Other Income	7	09:42AM
	\$ venue	26,030. 614,306. 640,336.
Statement 2 Form 199, Part II, Line Other Expenses	17	
Advertising and Pr Conferences, Conve Information Techno Insurance Legal Fees Lobbying fees Office Expenses Other Employee Ben Other fees Pension Plan Contr	\$ comotion contions, and Meetings cology. Defit colors Total \$	23,340. 2,972. 39,843. 136,385. 29,251. 700. 60,000. 138,732. 296,626. 388,021. 110,673. 42,910. 1,269,453.
Certificates of de	lents\$	604,310. 1,750,316. 1,563,997. 3,918,623.
Statement 4 Form 199, Schedule L, Other Assets	Line 12	
Prepaid Expenses a Right of use -oper	and Deferred Chargesating leaseTotal \$	116,456. 1,040,657. 1,157,113.
Statement 5 Form 199, Schedule L, Other Liabilities	Line 18	
	ability Total \$	15,000. 1,180,099. 1,195,099.

2022	California Statements		Page 2
Client SUSTAINA	Sustainable Conservation		94-3232437
8/21/23			09:42AM
Statement 6 Form 199, Schedule M-1, Line 5 Expenses Recorded on Books	Not Deducted on Return		
In-kind services			187,225. 187,225.
Statement 7 Form 199, Schedule M-1, Line 7 Income Recorded on Books No	t on Return		
In-kind services		\$	187,225.
Unrealized gains/losses		Total \$	-307,121. -119,896.

2022

8/21/23

California Supplemental Information

Page 1

94-3232437

Client SUSTAINA Sustainable Conservation

09:42AM

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



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 CONSERVAT	ION			Change of address						
Name of Organization				Amended report						
List all DBAs and names the organization uses	or has used			<u> </u>						
98 BATTERY ST STE 302				State Charity	Registration Number 100176					
Address (Number and Street) SAN FRANCISCO, CA 9411 City or Town, State, and ZIP Code	L1		Corporation of	r Organization No. <u>1949946</u>						
415-977-0380	GPACE	EU@SUSCON.OR	G							
Telephone Number	E-mail Ad	dress		Federal Emplo	oyer ID No. <u>94-3232437</u>					
ANNUAL REC	ANNUAL REGISTRATION RENEWAL FEE SCHEDULE (11 Cal. Code Regs. sections 301-307, 311, and 312) Make Check Payable to Department of Justice									
Total Revenue	Fee	Total Revenue		Fee	Total Revenue	<u>F</u>	ee			
Less than \$50,000 Between \$50,000 and \$100,000 Between \$100,001 and \$250,000	\$25 \$50 \$75	Between \$250,001 Between \$1,000,00 Between \$5,000,00	1 and \$5 mill	ion \$200	Between \$20,000,001 and \$100 million Between \$100,000,001 and \$500 million	ion \$1				
PART A – ACTIVITIES										
For your most recent full acc	ounting peri	od (beginning	1/01/22	ending	12/31/22) list:					
Total Revenue \$	5 260 02	5 Namasah Osat		2.4	260 T abal Assaults (* 7.00	- 00	20			
(including noncash contributions)	5,368,23	5. Noncash Cont	ributions \$	34,	369. Total Assets \$ 7,98	5,28	30.			
Program Expe	nses \$	3,086,642.		Total Expense	s \$ 4,826,036.					
PART B - STATEMENTS R	EGARDING	G ORGANIZATIO	ON DURING	G THE PERI	OD OF THIS REPORT					
Note: All questions must be answ providing an explanation at					u must attach a separate page tructions for information required.	Yes	No			
During this reporting period, were officer, director or trustee thereof, either the control of the control	re there any oner directly of	contracts, loans, leases o with an entity in w	r other financial hich any such	transactions betw n officer, director o	veen the organization and any or trustee had agy:finagei和中的图象记	Χ				
2 During this reporting period, was	s there any th	neft, embezzlement,	diversion or	misuse of the	organization's charitable property or funds?		X			
3 During this reporting period, wer	e any organi	zation funds used to	pay any per	nalty, fine or ju	dgment?		X			
During this reporting period, were coventurer used?	e the service	s of a commercial fund	raiser, fundrai	sing counsel fo	or charitable purposes, or commercial		X			
5 During this reporting period, did	the organiza	tion receive any gov	vernmental fu	inding?	SEE STATEMENT 2	Χ				
6 During this reporting period, did	the organiza	tion hold a raffle for	charitable p	urposes?			X			
7 Does the organization conduct a	vehicle dona	ation program?					X			
Did the organization conduct an generally accepted accounting parts.	independent rinciples for	audit and prepare a this reporting period	audited finand 1?	cial statements	in accordance with	Χ				
9 At the end of this reporting period	od, did the or	ganization hold restr	icted net assets,	while reporting	g negative unrestricted net assets?		X			
I declare under penalty of perjury and belief, the content is true, cor					documents, and to the best of my kno	wled	ge			
		LEY BOREN		CEO						
Signature of Authorized Agent	Printed	Name		Title	Date					

Page 1

Client SUSTAINA Sustainable Conservation 94-3232437

8/21/23

09:43AM

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: \$185,813.

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

County of Madera, Department of Water and Natural Resources 200 West 4th St, Madera, CA 93637 County contact: Stephanie Anagnoson

State Coastal Conservancy 1515 Clay Street, Floor 10 Oakland CA, 94612 Amy Hutzel 510.286.1015